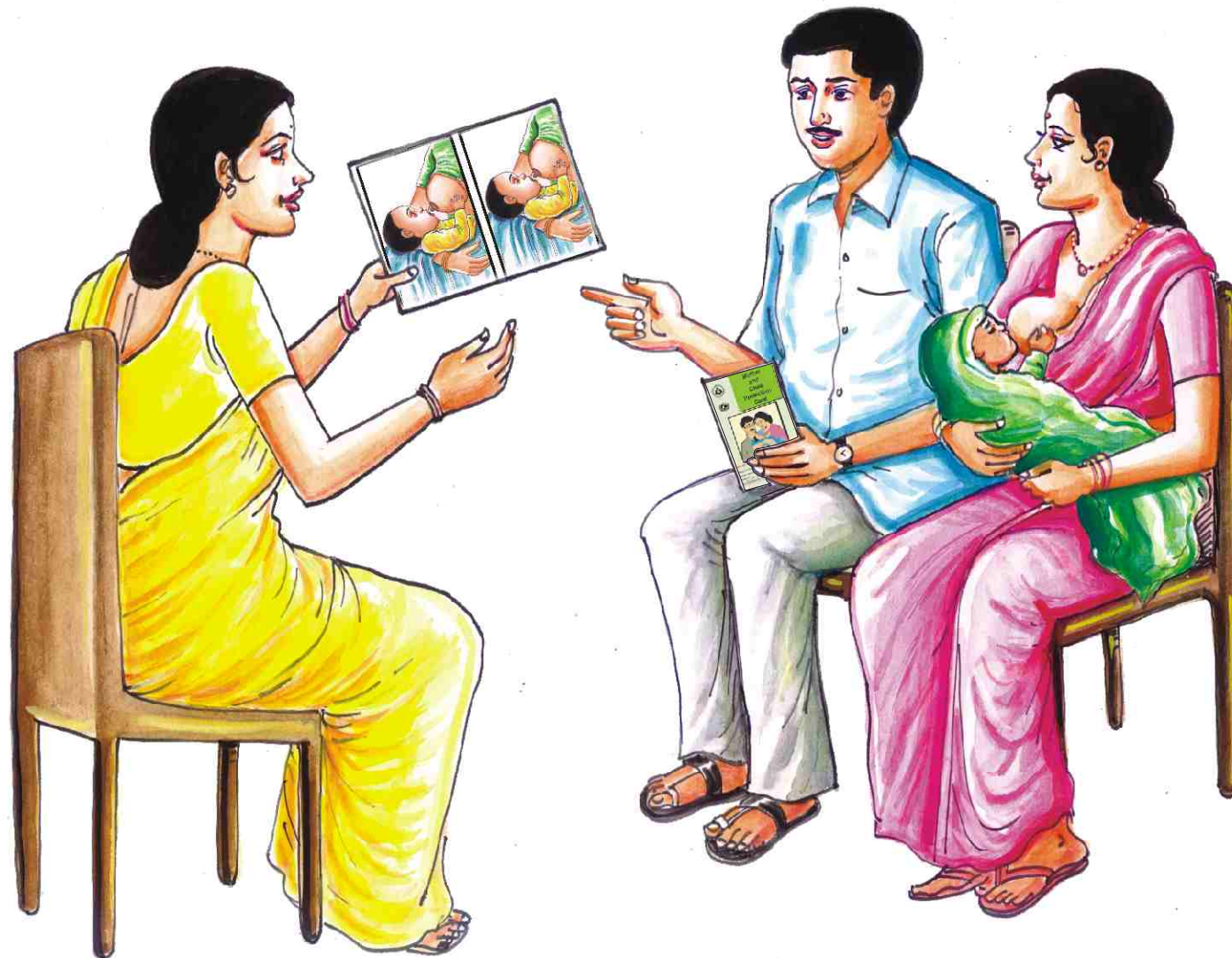


# Maternal, Infant and Young Child Nutrition



ELIZABETH GLASER  
PEDIATRIC AIDS  
FOUNDATION



Counselling Cards for Health Care Workers

# Acknowledgement

This set of Counseling Cards is part of The Health Infant and Young Child Feeding (IYCF) Counseling Package, developed under a strategic collaboration between the United Nations Children's Fund (UNICEF) New York and the combined technical and graphic team of Nutrition Policy Practice (NPP) and the Center for Human Services, the not-for-profit affiliate of University Research Co., LLC (URC/CHS). The counseling cards were adapted from the Rwandan IYCF Counseling Cards. We would like to acknowledge the EGPAF Rwanda Program, The Rwanda Ministry of Health, and Path for their strategic vision in developing the initial cards.

The Health IYCF Counseling Package includes the Facilitator Guide, Appendices, and Training Aids, for use in training health workers; the Participant Materials, training "handouts" and monitoring tools; a set of 28 IYCF Counseling Cards and companion key Messages Booklet; 3 Take-home Brochures; and an Adaptation Guide including a "Clip Art" compendium for use by national or local stakeholders in adapting this package for use in their own settings. All of the materials found in the health IYCF Counseling Package are available in their electronic formats to facilitate their dissemination and adaptation.

The various elements of The Health IYCF Counseling Package are based on several WHO/UNICEF guidance documents, training and other materials, including the WHO/UNICEF Breastfeeding, Complementary Feeding and Infant and Young Child Feeding Counseling training courses. The package also builds on materials developed by the Academy for Educational Development's LINKAGES Project; the CARE USA and URC/CHS collaboration in Dadaab, Kenya; and the Integration of IYCF Support into Health Management of Acute Malnutrition (CMAM), produced by the ENN/IFE Core Group and IASC. The technical content of the package aims to reflect the Guidelines on HIV and Infant Feeding 2010: Principles and Recommendations for Infant Feeding in the Context of HIV and a Summary of Evidence related to IYCF in the context of HIV. The graphic package draws heavily from IYCF behavior change materials and other job aids developed with the technical support of URC/CHS, financed by the United States Agency for International Development (USAID) in Tanzania, Uganda, Niger and Benin; CARE USA in Dadaab, Kenya; and the UNICEF offices in Kenya and Malawi.

The Health IYCF Counseling Package has been developed by the UNICEF New York team of Nune Mangasaryan, Senior Advisor, Infant and Young Child Nutrition; Christiane Rudert, Nutrition Specialist (infant feeding); Mandana Arabi, Nutrition Specialist (Complementary Feeding); in close collaboration with the NPP and URC/CHS team of Maryanne Stone-Jimenez, IYCF Training Expert; Mary Lung'aho, IYCF Health/Emergencies Expert; Peggy Koniz Booher, IYCF Behaviour Change and Job Aids Expert. The package illustrations were developed Kurt Mulholland, Senior Graphic Artist; and Victor Nolasco, Senior Graphic Illustrator. Many country teams (national authorities, program staff and communities) involved in developing and pretesting previous materials also warrant acknowledgement for their contributions. The package was reviewed by WHO headquarters colleagues: Carmen Casanovas (Technical Officer), Constanza Vallenias (Medical Officer) and the HIV component by Nigel Rollins (Scientist). External reviewers also included Facility Savage and Rukhsana Haider, and comments were received from Holly Blanchard (Maternal Child Health Integrated Program) The contributions of the Ministry of Health, UNICEF-Zambia, staff from various partners agencies and the health workers who participated in the field tested of the package in August 2010 in Lusaka, Zambia, is also acknowledged.

Although each of these materials have been copy righted and co-branded by UNICEF and URC/CHS. Any part of this package may be printed, copied and/or adapted to meet local needs without express written permission. Requests to reproduce the materials may be directed to [iycn@unicef.org](mailto:iycn@unicef.org). In addition, 1) the source of the original materials should be fully acknowledged; 2) the parts of the package that are printed, copied and/or adapted should be distributed free or at cost (not for profit); and 3) credit must be given to both UNICEF and URC/CHS.

# Positive counselling skills

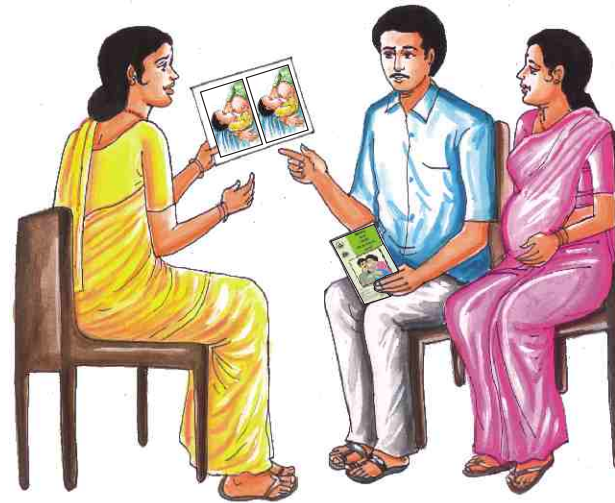
This set of cards was developed for you to help counsel mothers and other caregivers about maternal, infant and young child nutrition (MIYCN). Positive counselling skills are important for your success. Some basic counseling skills presented below include Listening and Learning, as well as Building Confidence and Giving Support.

## Listening and Learning skills

- Use helpful non-verbal communication
- Keep your head level with the mother (or caregiver)
- Pay attention
- Reduce physical barriers
- Take time
- Touch appropriately
- Ask open questions
- Use responses and gestures that show interest
- Reflect back what the mother (or caregiver) says
- Avoid using “judging” words

## Building Confidence and Giving Support skills

1. Accept what a mother (or caregiver) thinks and feels. Let the mother (or caregiver) talk through her or his concerns before correcting any wrong ideas or misinformation. This helps to establish confidence.
2. Listen carefully to the mother’s (or caregiver’s) concerns.
3. Recognize and praise what a mother (or caregiver) and child are doing correctly.
4. Give practical help.
5. Give a little, relevant information at a time.
6. Use simple language that the mother or caregiver will understand.
7. Use appropriate Counselling Card(s) or Take-Home Brochure(s).
8. Make one or two suggestions, not commands



## IYCF 3-Counseling:

The following 3-Step Counseling will help you to counsel, problem solve and reach an agreement with mothers (or caregiver) about infant and young child feeding. The 3-Steps are Assess, Analyze and Act.

### Step 1: Assess: ask, listen and observe

- Greet the mother (or caregiver), using friendly language and gestures.
- Ask some initial questions that encourage her (or him) to talk.
- Listen to what is being said and observe what is going on using your Listening and Learning, and Building Confidence and Giving Support skills.
- Assess the age appropriate feeding practice(s) and the condition or health of the child and mother (or caregiver).

### Step 2: Analyze: identify difficulty and if there is more than one – prioritize the difficulties

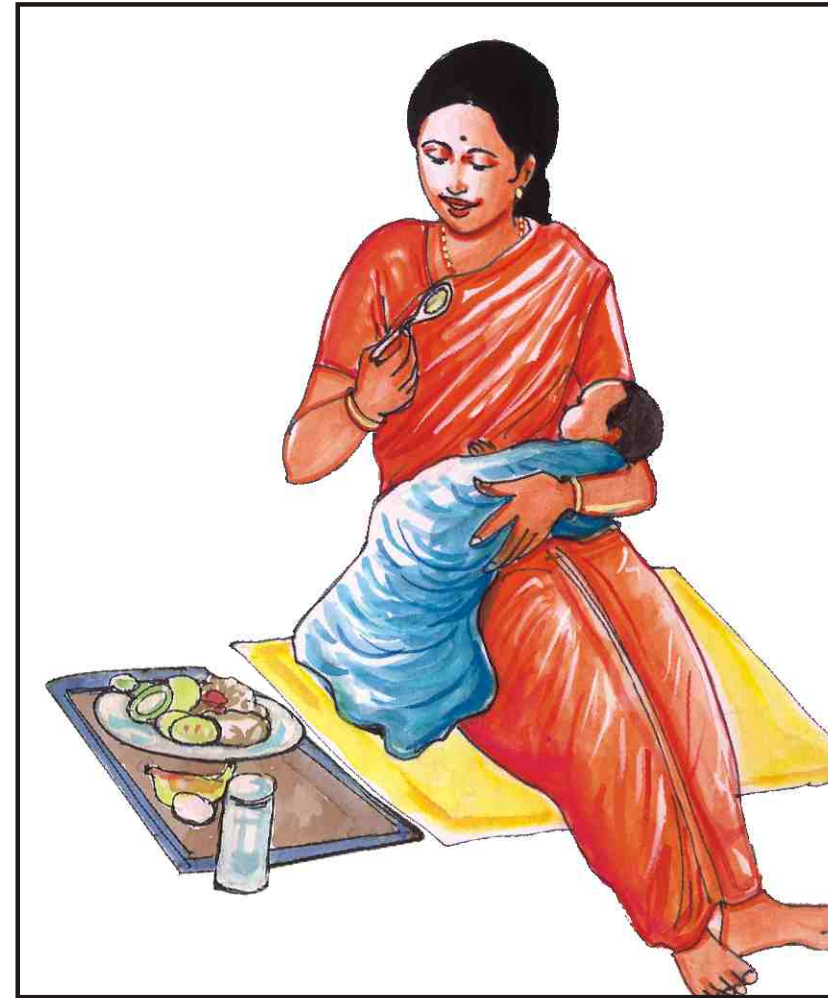
- Decide if the feeding you observe is age appropriate and if the condition or health of the child and mother (or caregiver) is good.
- If there are no apparent difficulties, praise the mother (or caregiver) and focus on providing information needed for the next stage of the child’s development.

- If one or more feeding difficulty is present, or the condition or health of the child or mother (or caregiver) is poor, prioritize the difficulties.
- Answer the mother’s (or caregiver’s) questions if any.

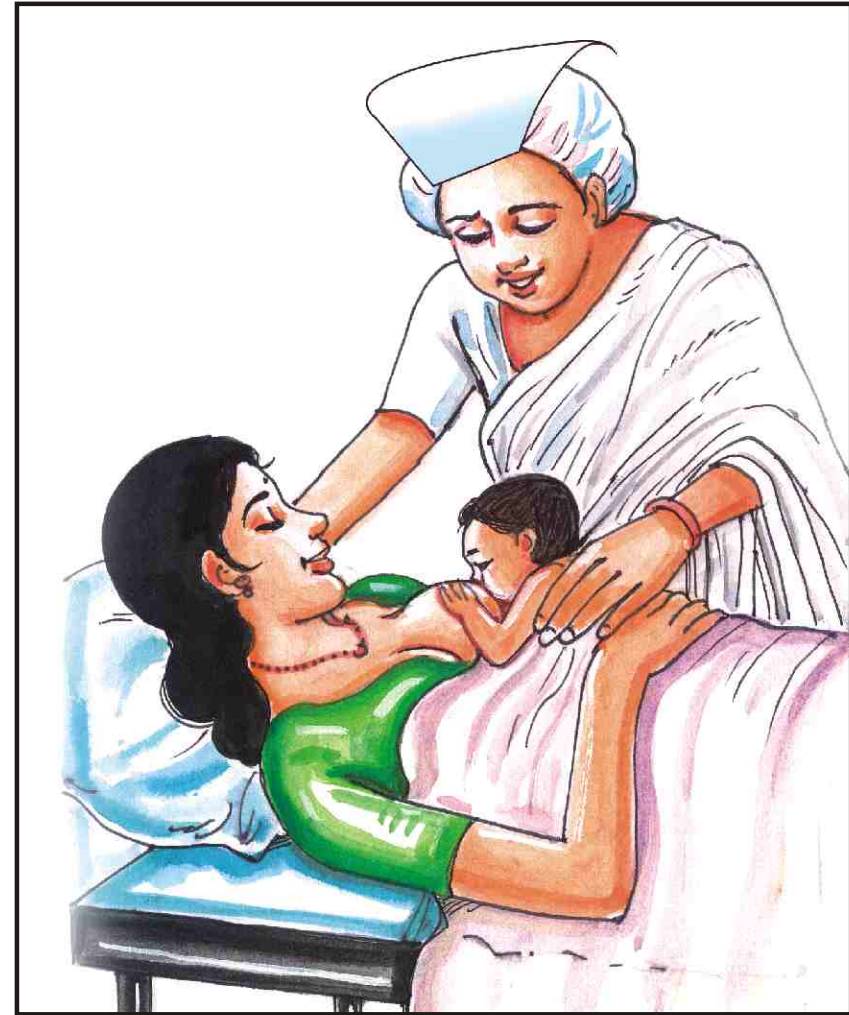
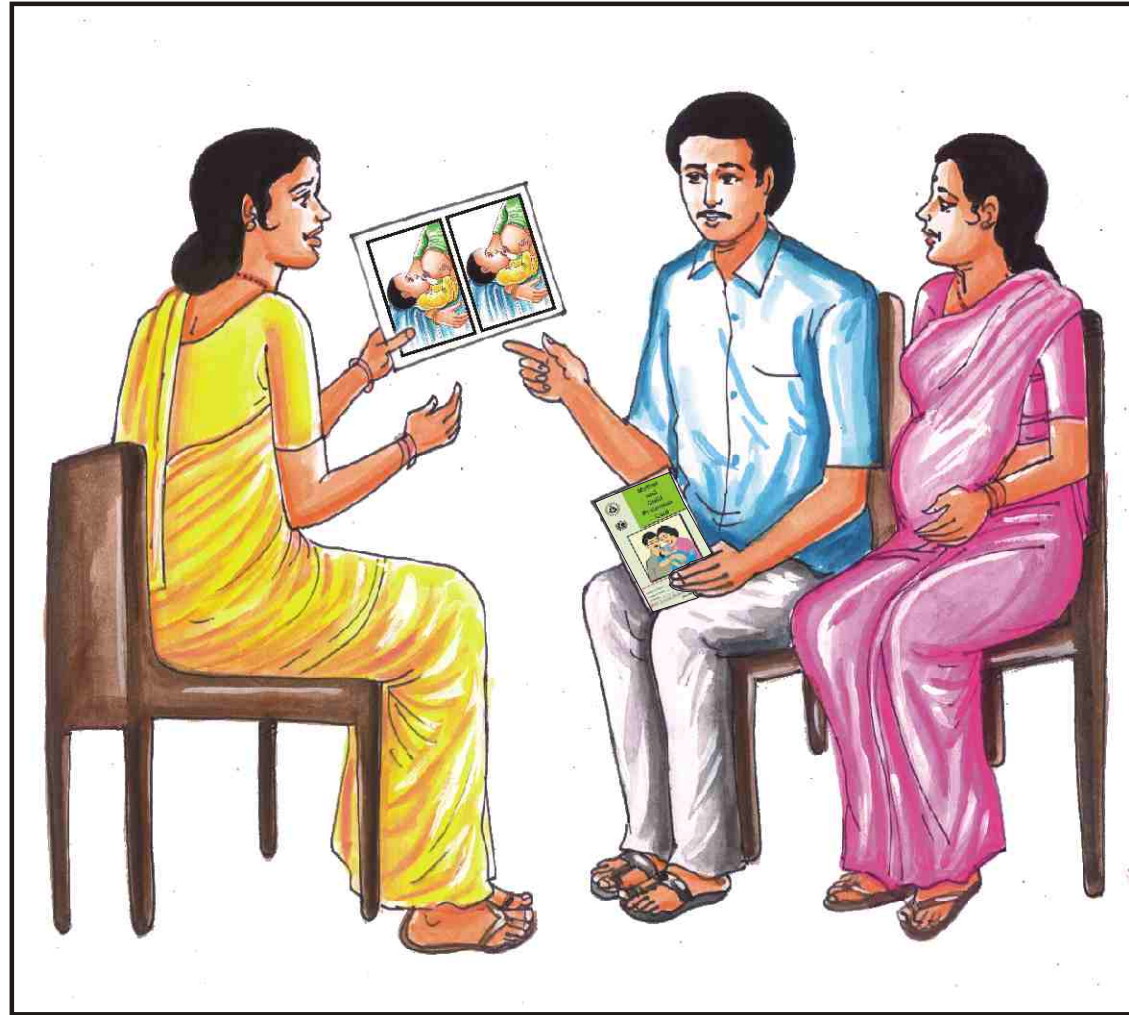
### Step 3: Act: discuss, suggest a small amount of relevant information, agree on doable action

- Depending on the factors analyzed above, select a small amount of information to share with the mother or caregiver that is most relevant to her or his situation.
- Be sure to praise the mother or caregiver for what she or he is doing well.
- Present options for addressing the feeding difficulty or condition of health of the child or caregiver in terms of small do-able actions. These actions should be time-bound (within the next few days or weeks).
- Share key information with the mother or caregiver, using the appropriate Counselling Cards or Takehome Brochures and answering questions as needed.
- Help the mother or caregiver select one option that she or he agrees to try, in order to address or overcome the difficulty or condition that has been identified. This is called reaching-an-agreement.
- Suggest where the mother or caregiver can find additional support. Refer to the nearest health facility if appropriate and/or encourage participation in educational talks or IYCF Support Groups in the community.
- Confirm that the mother or caregiver knows where to find a community volunteer and/or other health worker.
- Thank the mother or caregiver for her or his time.
- Agree on when you will meet again, if appropriate.

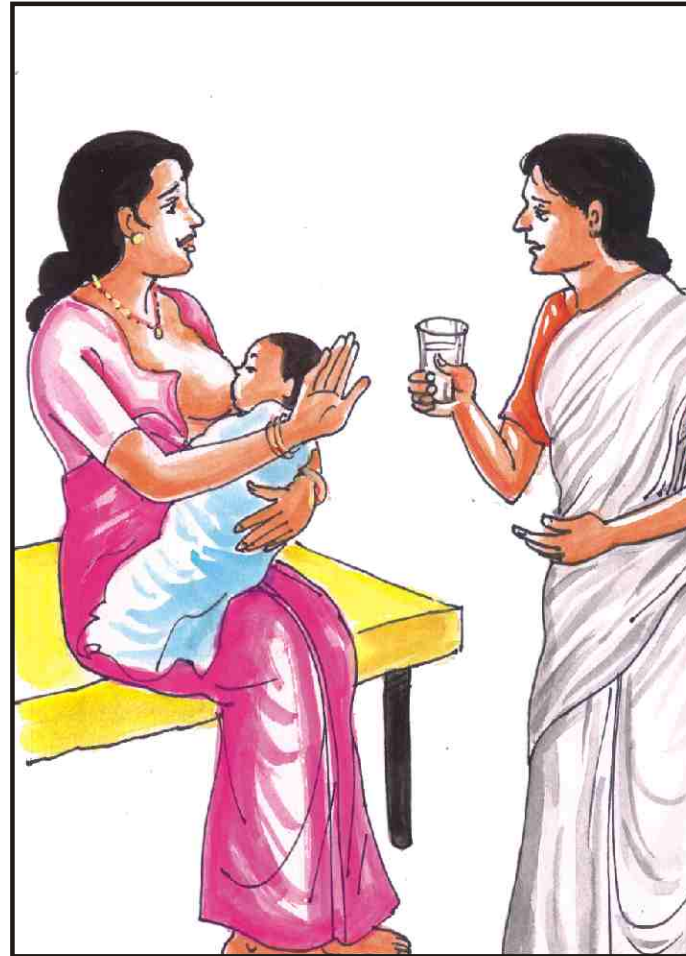
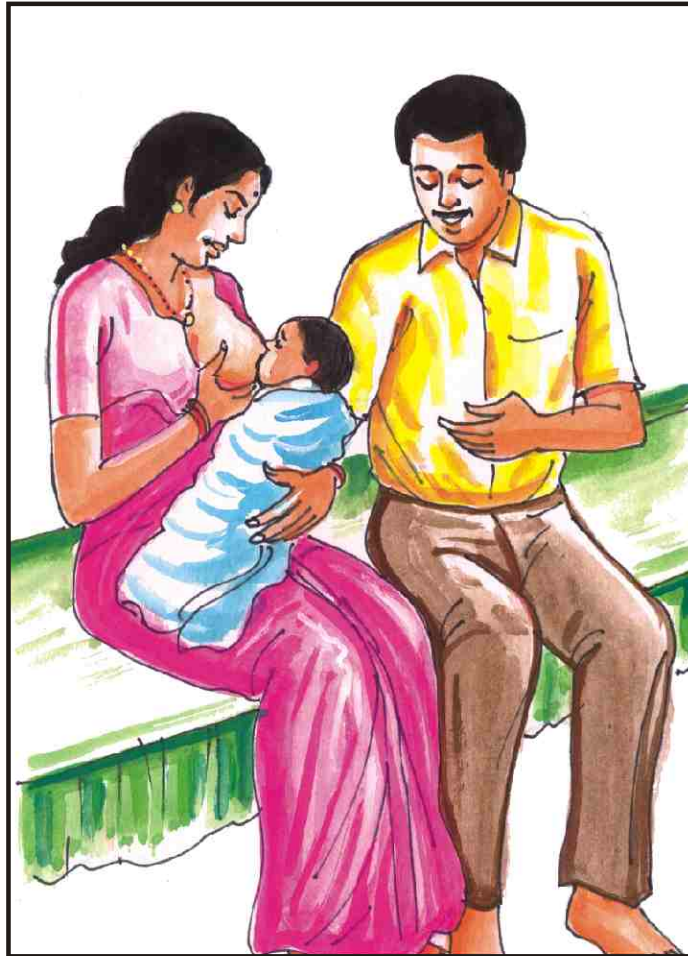
# Nutrition for pregnant and breastfeeding woman



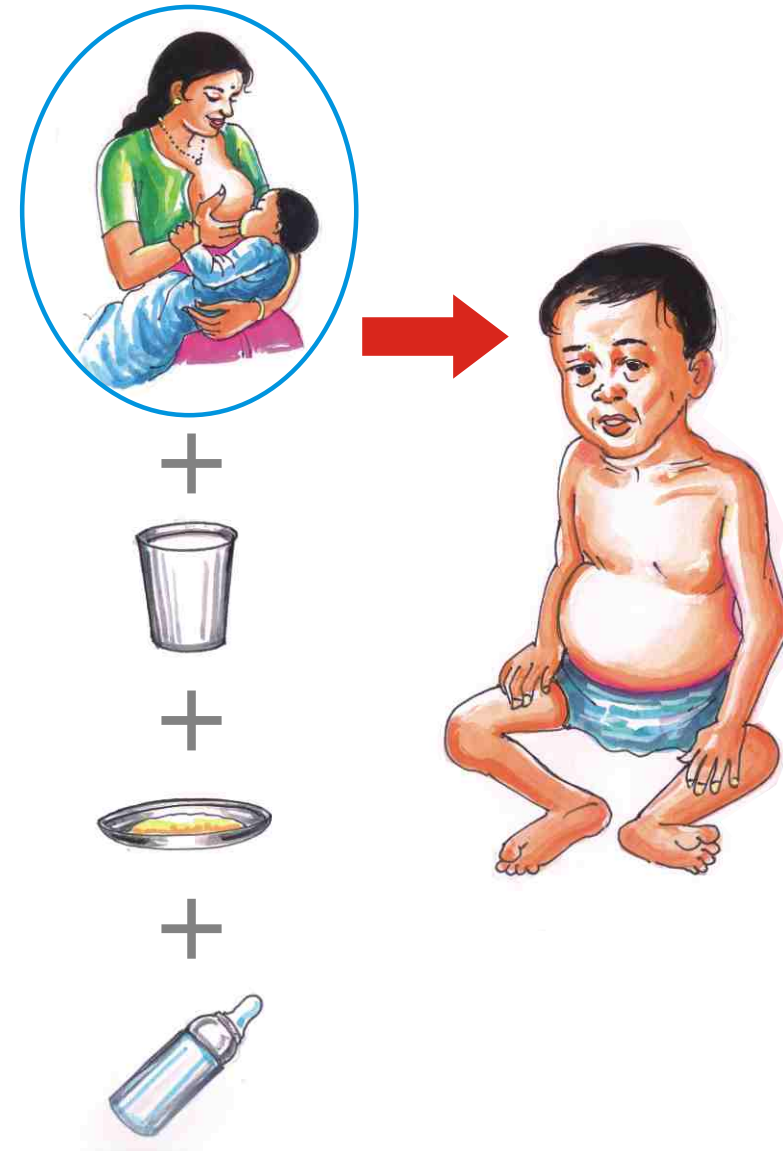
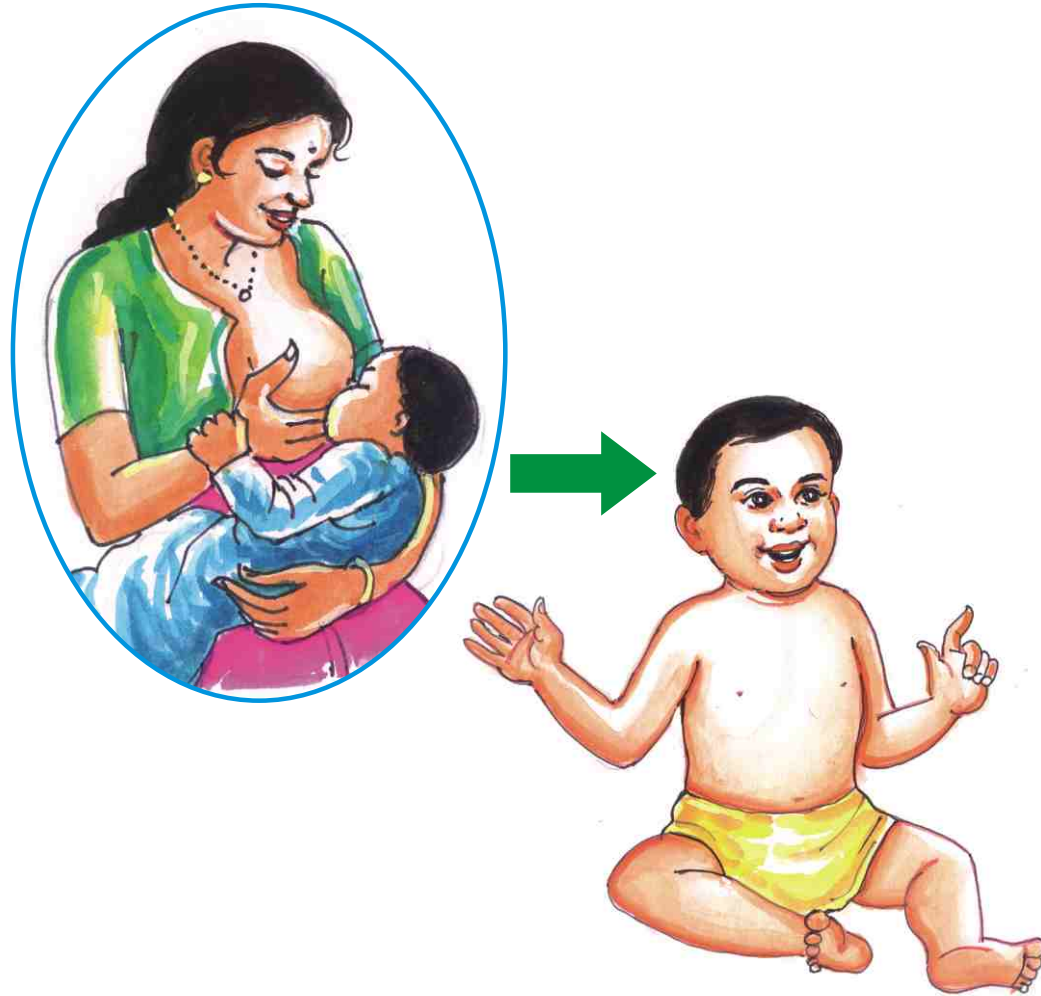
# Immediate breastfeeding after birth



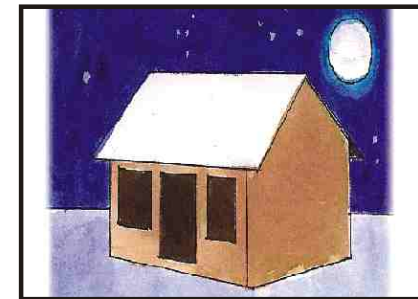
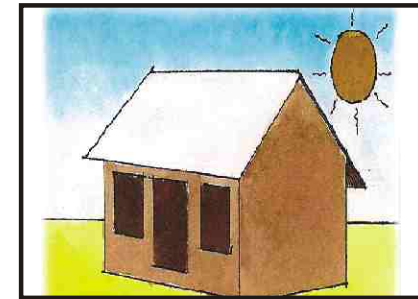
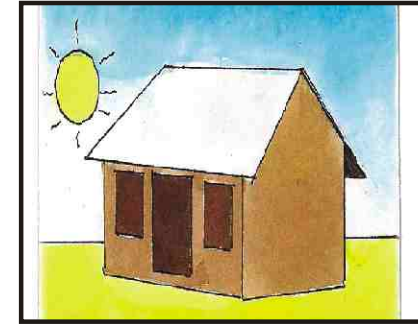
**During the first 6 months, give ONLY breast milk**



# Exclusive breastfeeding during the first 6 months



# Breastfeed on demand, both day and night

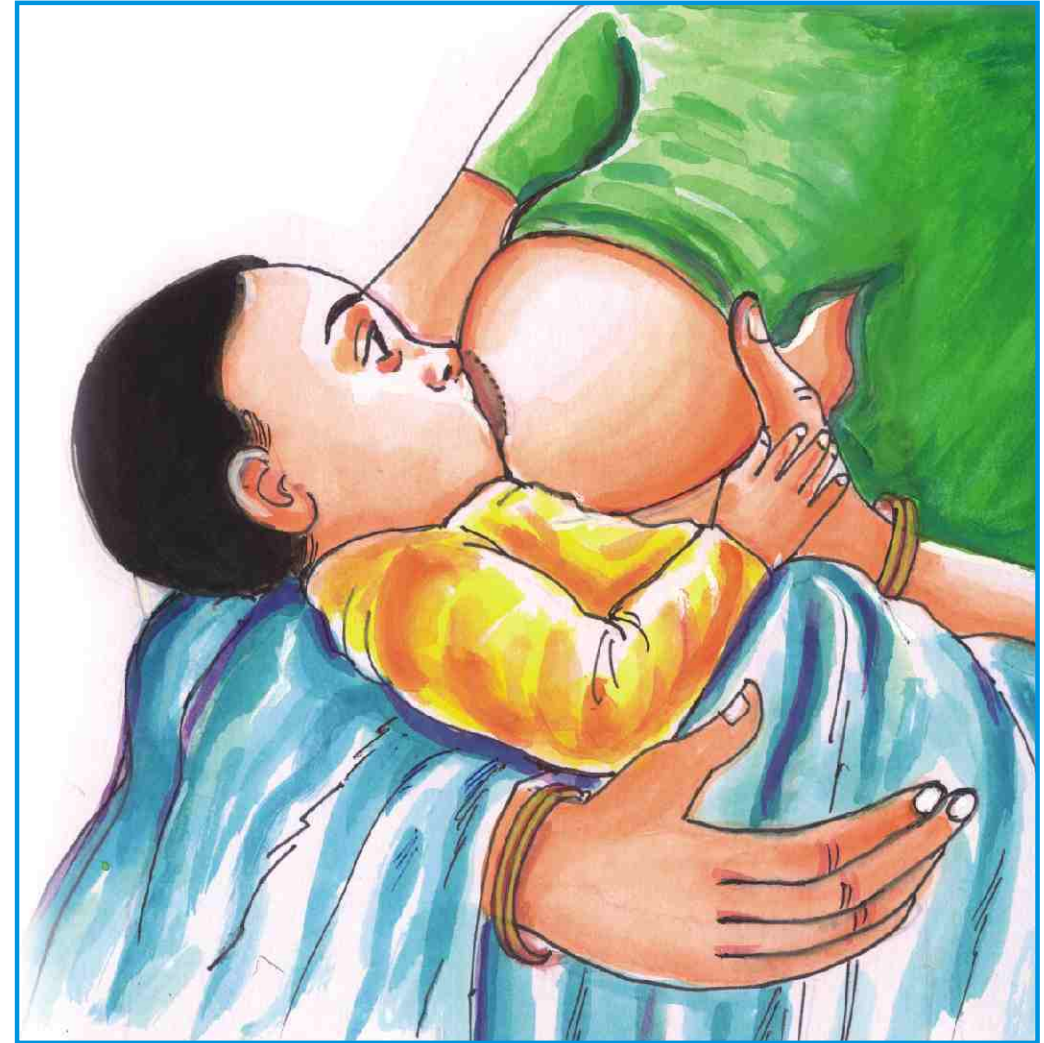
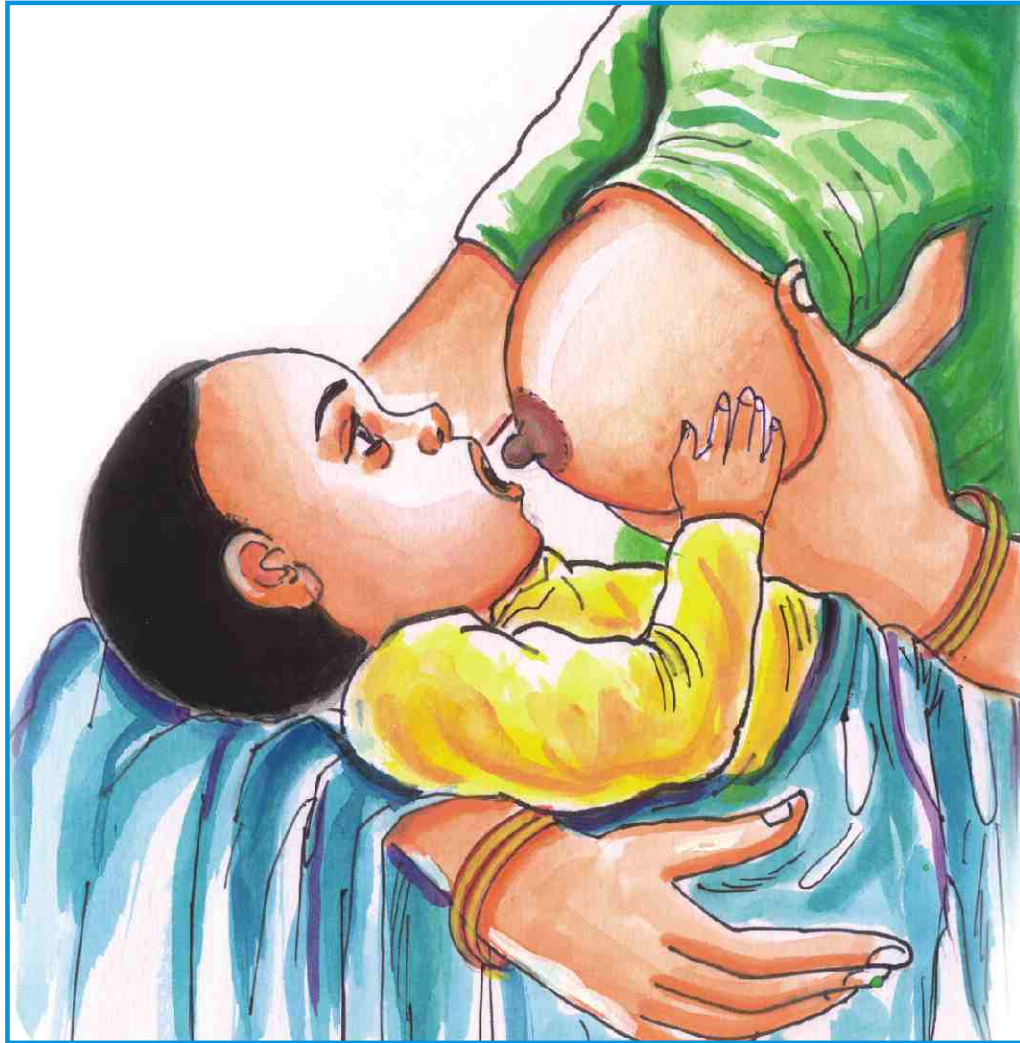




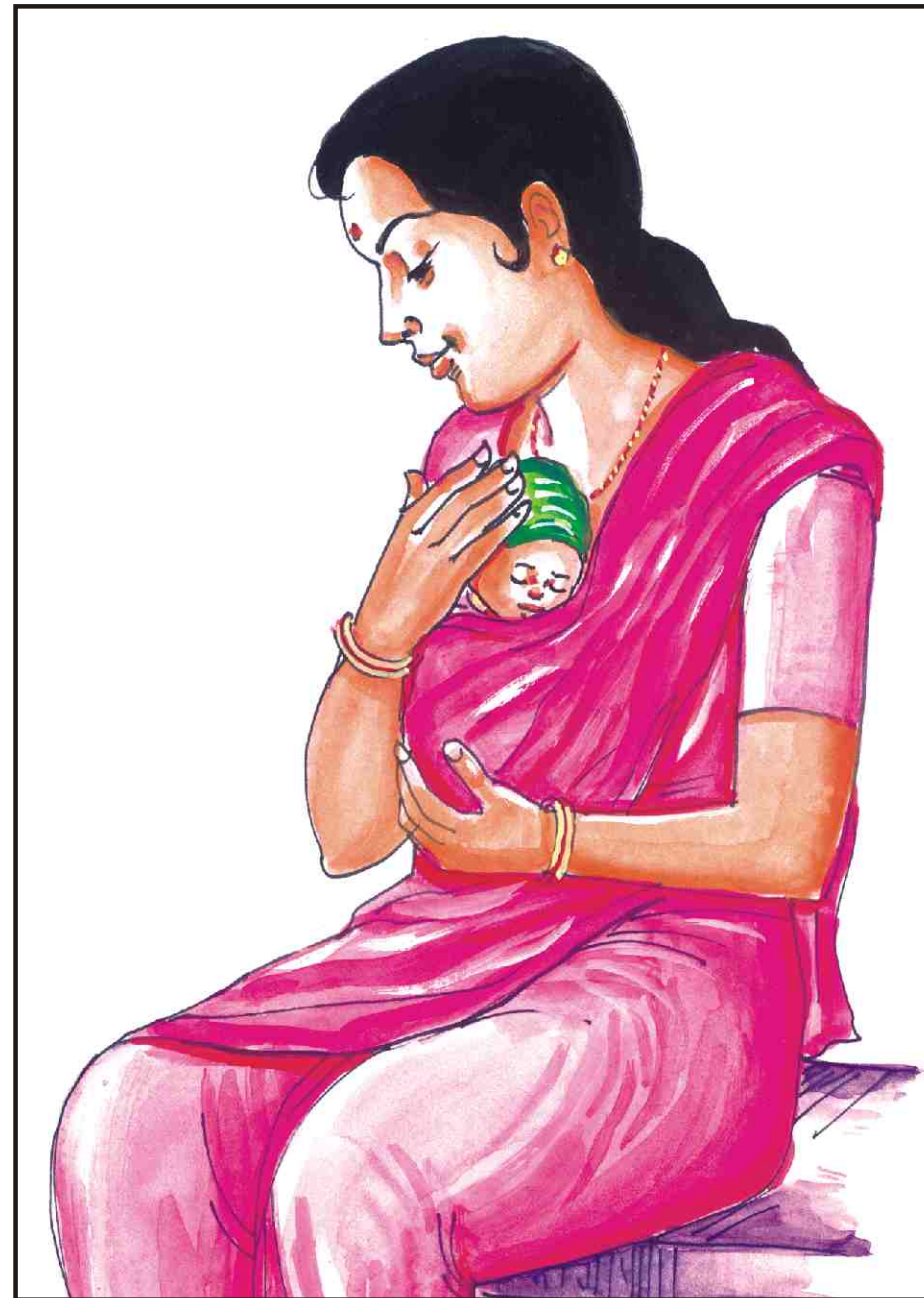
# There are many breastfeeding positions



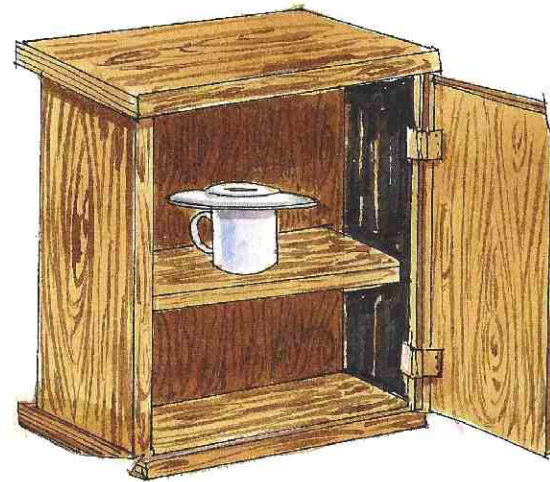
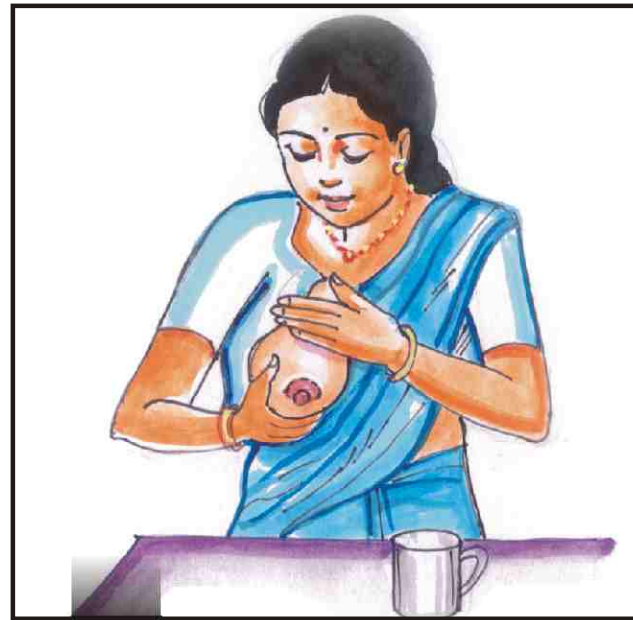
# Good attachment is important



# Care and feeding of a low birth weight baby



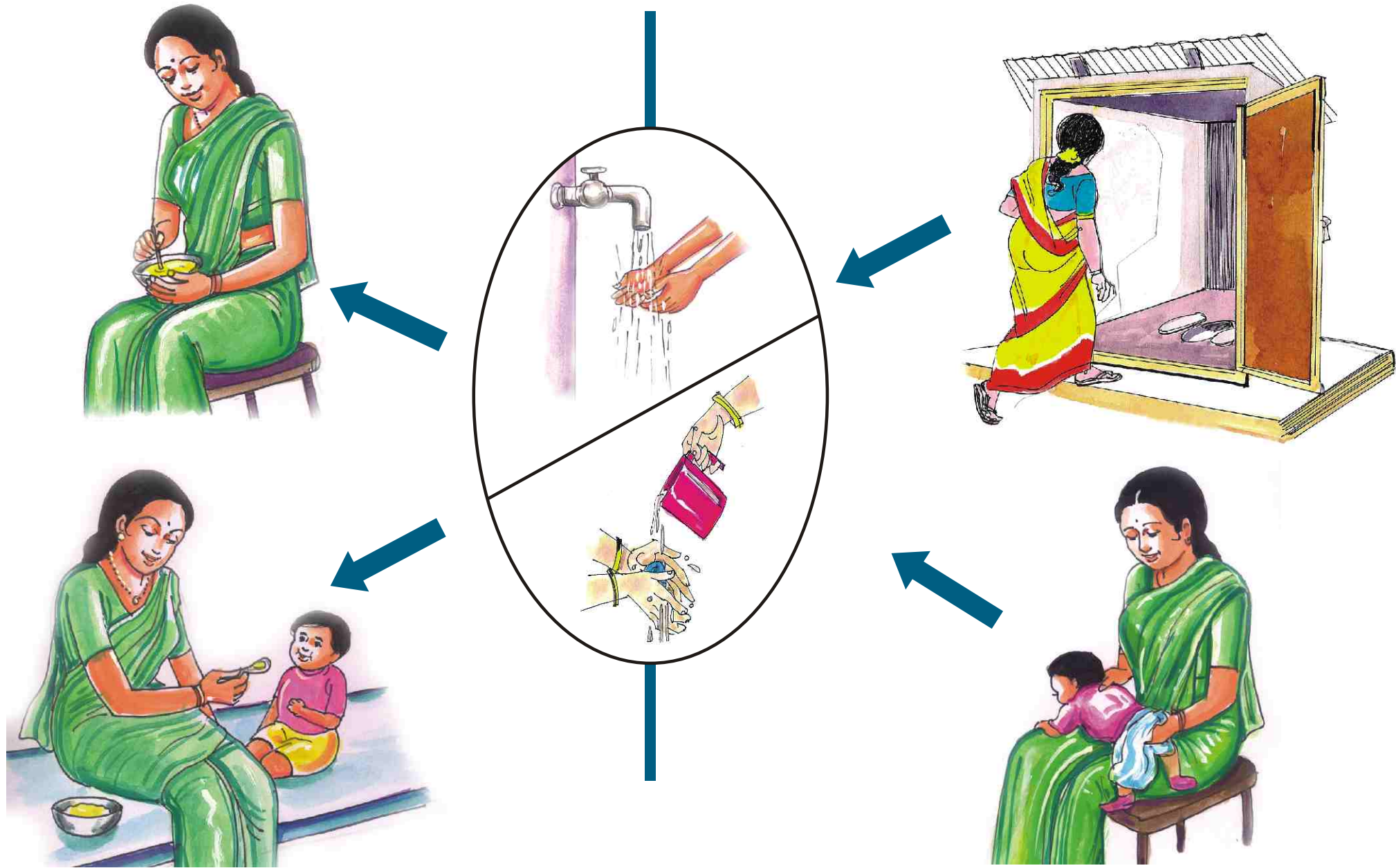
# How to hand express and cup feed



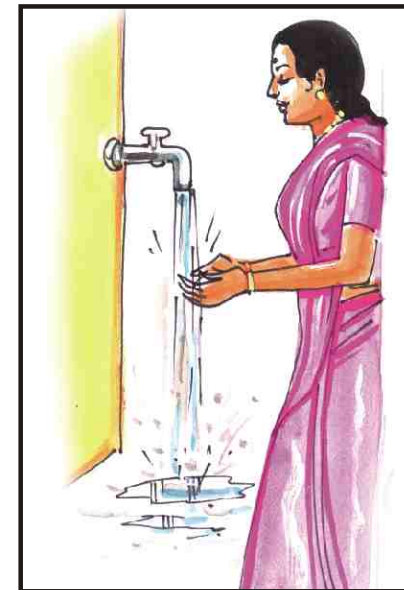
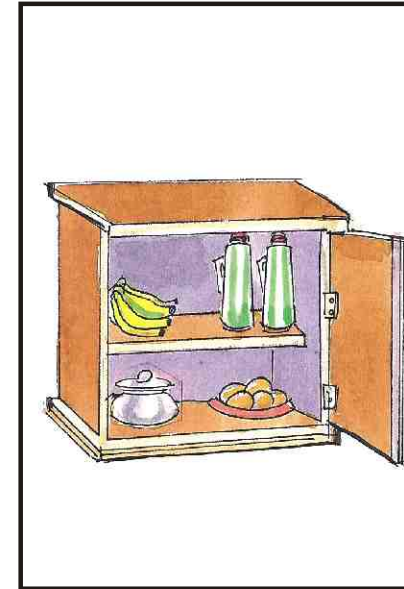
# Give breast milk, even when away from home



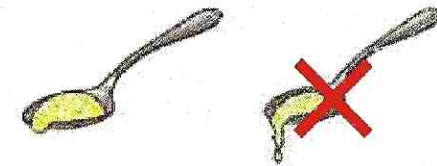
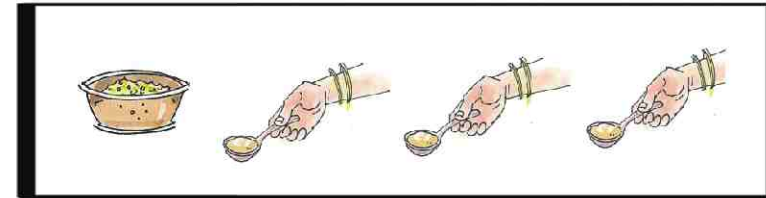
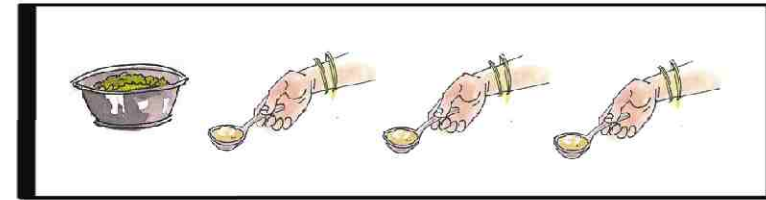
# Good hygiene practices prevent disease



# Use safe water and ensure good compound hygiene

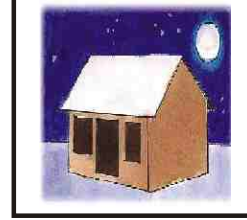
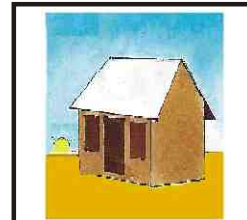
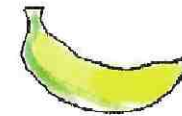
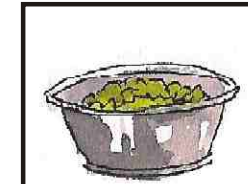


# Start complementary feeding at 6 months

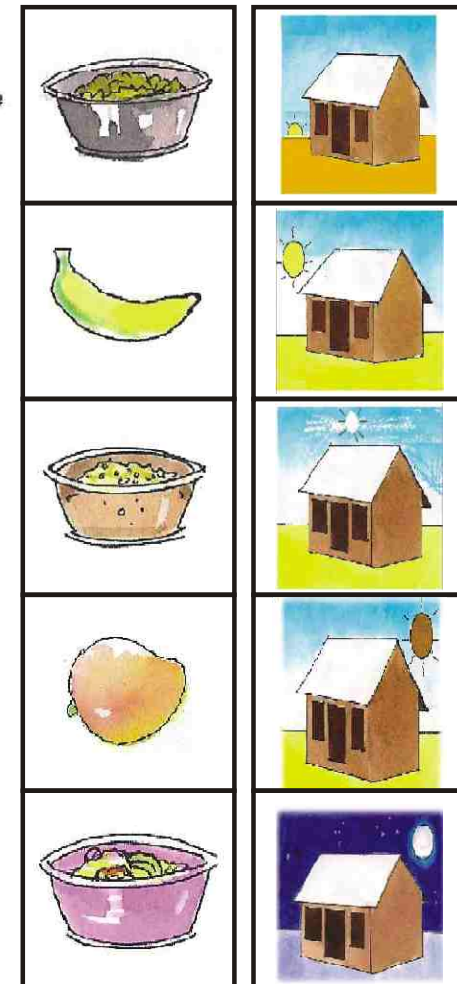




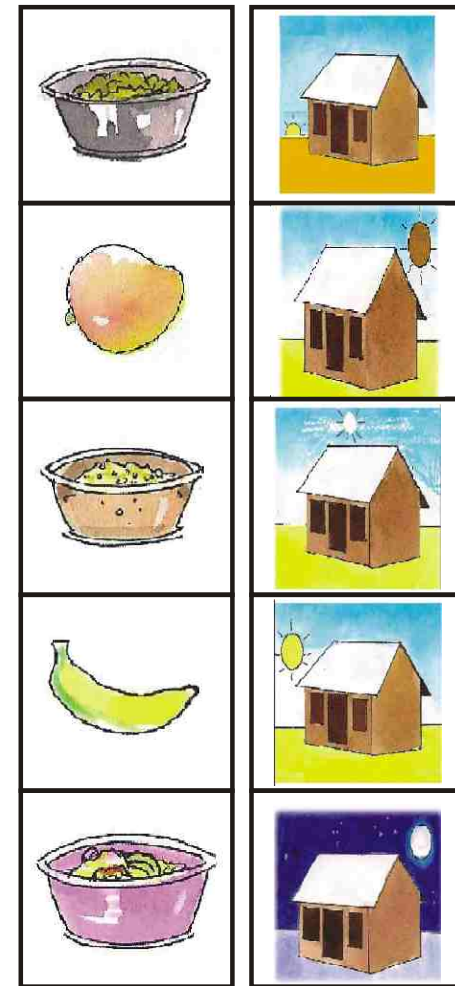
# Give complementary feeding from 6 up to 9 months



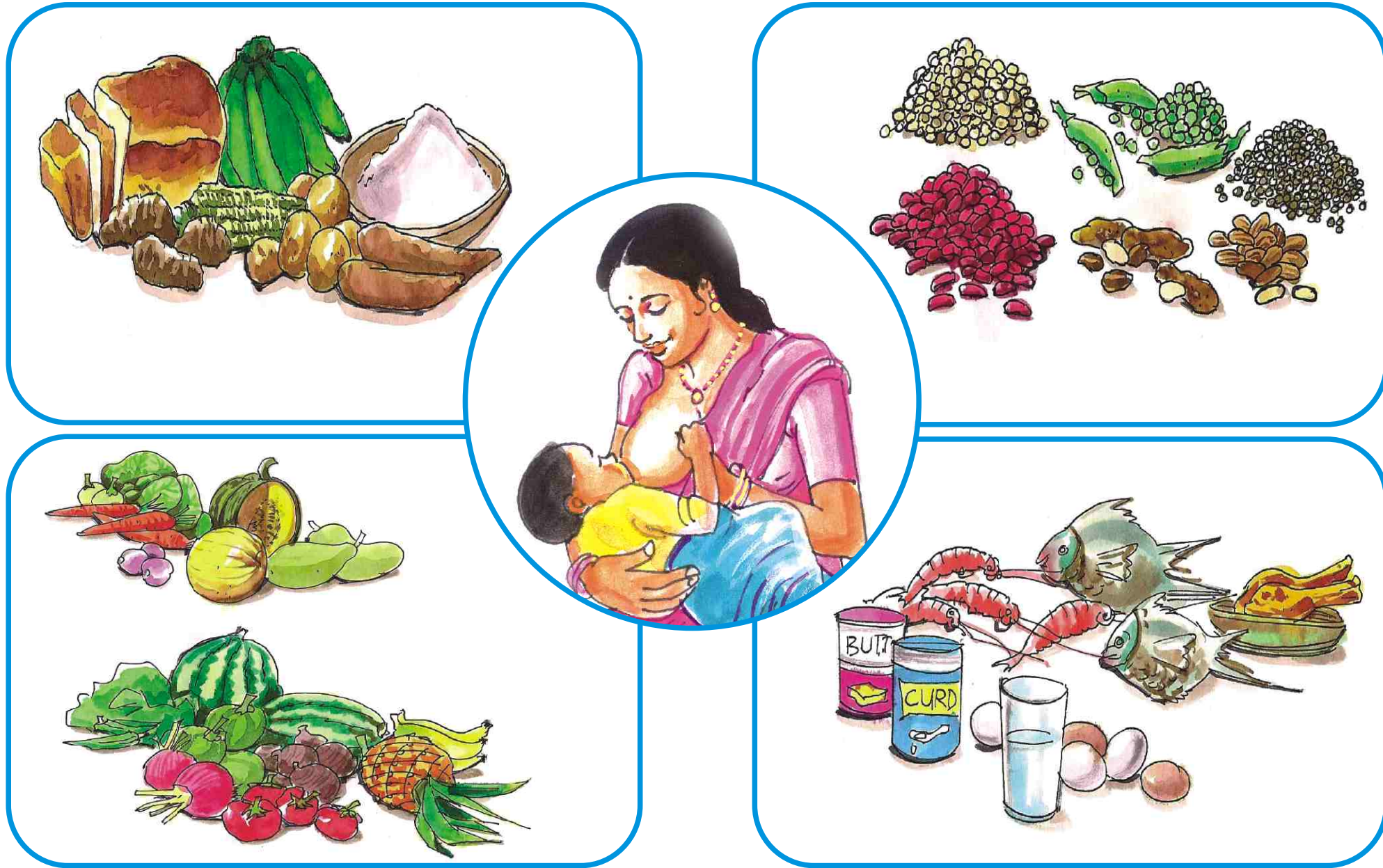
# Give complementary feeding from 9 up to 12 months



# Give complementary feeding from 12 up to 24 months

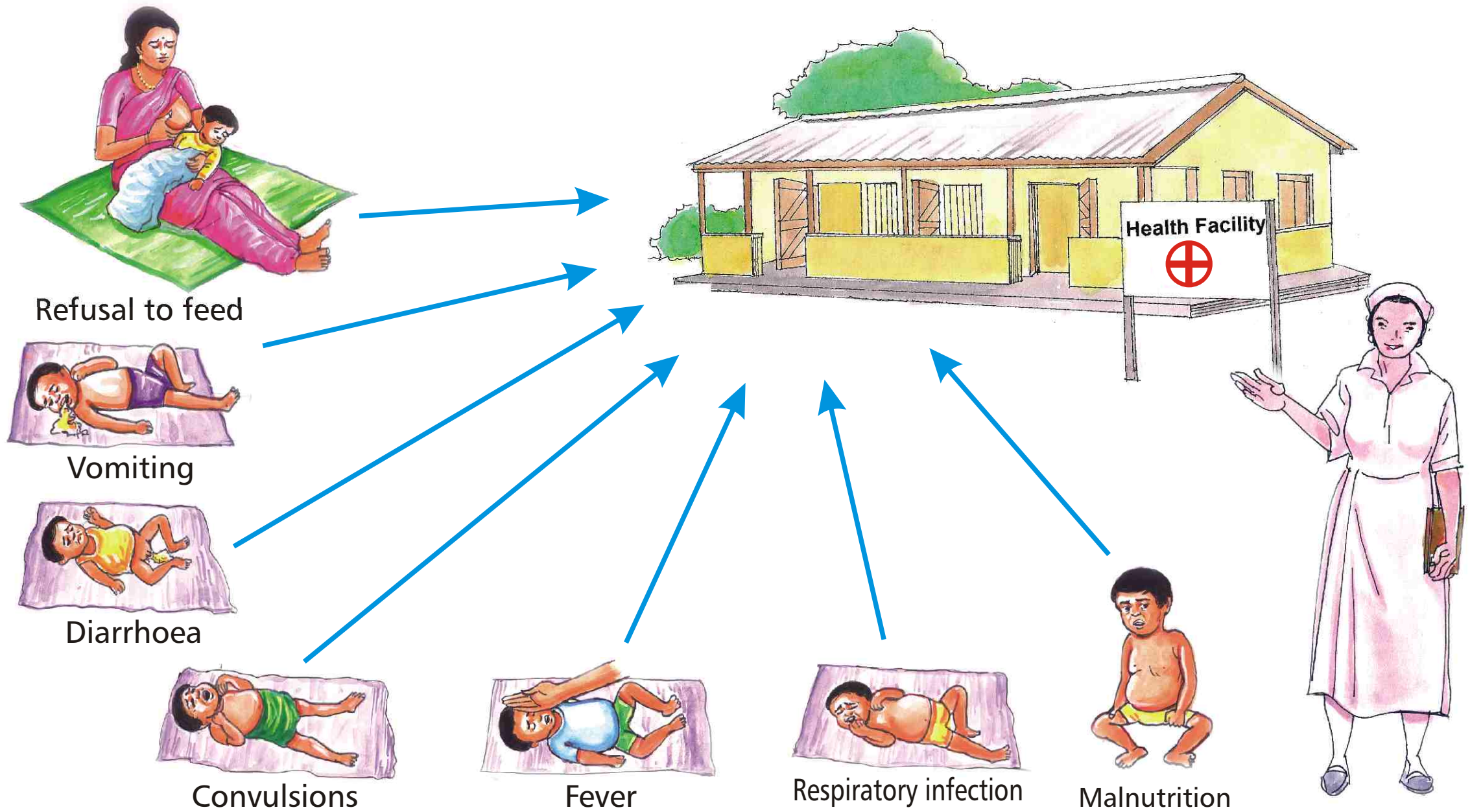


# Feed your baby a variety of foods





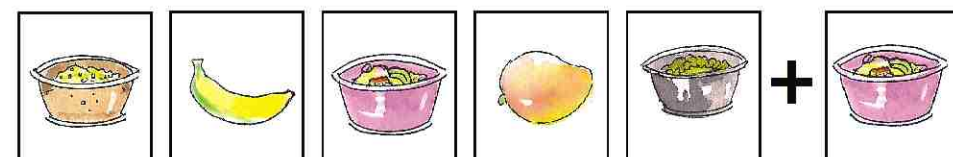
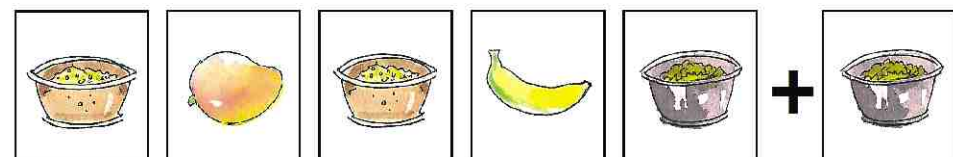
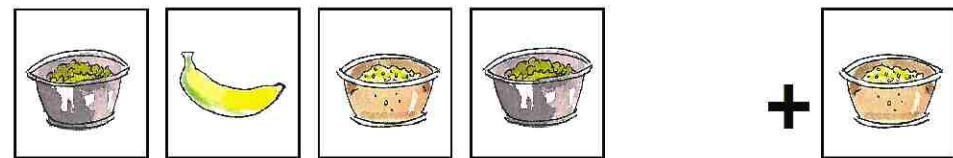
# When to bring your child to the health facility



# Feeding your sick baby less than 6 months of age

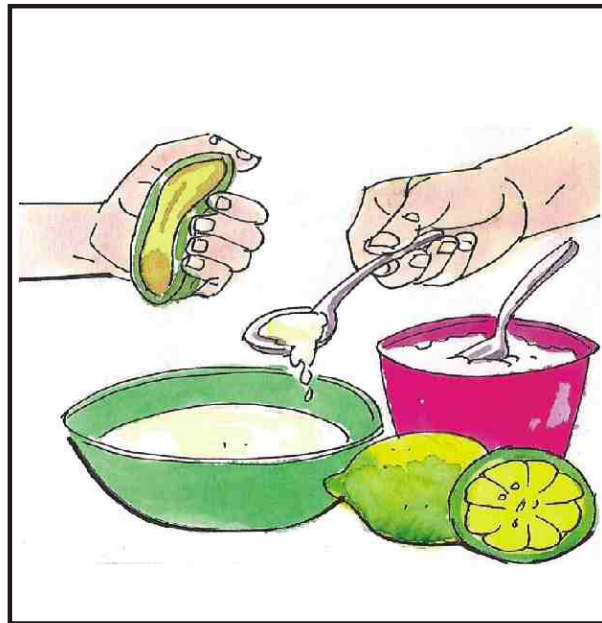
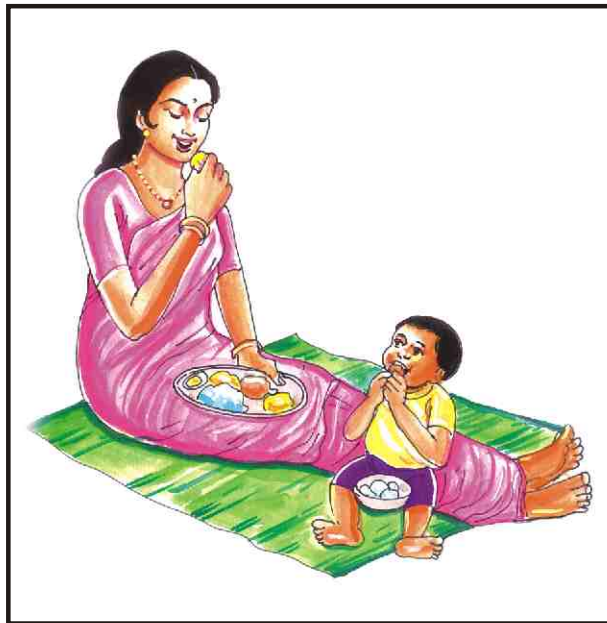


# Feeding your sick baby more than 6 months of age

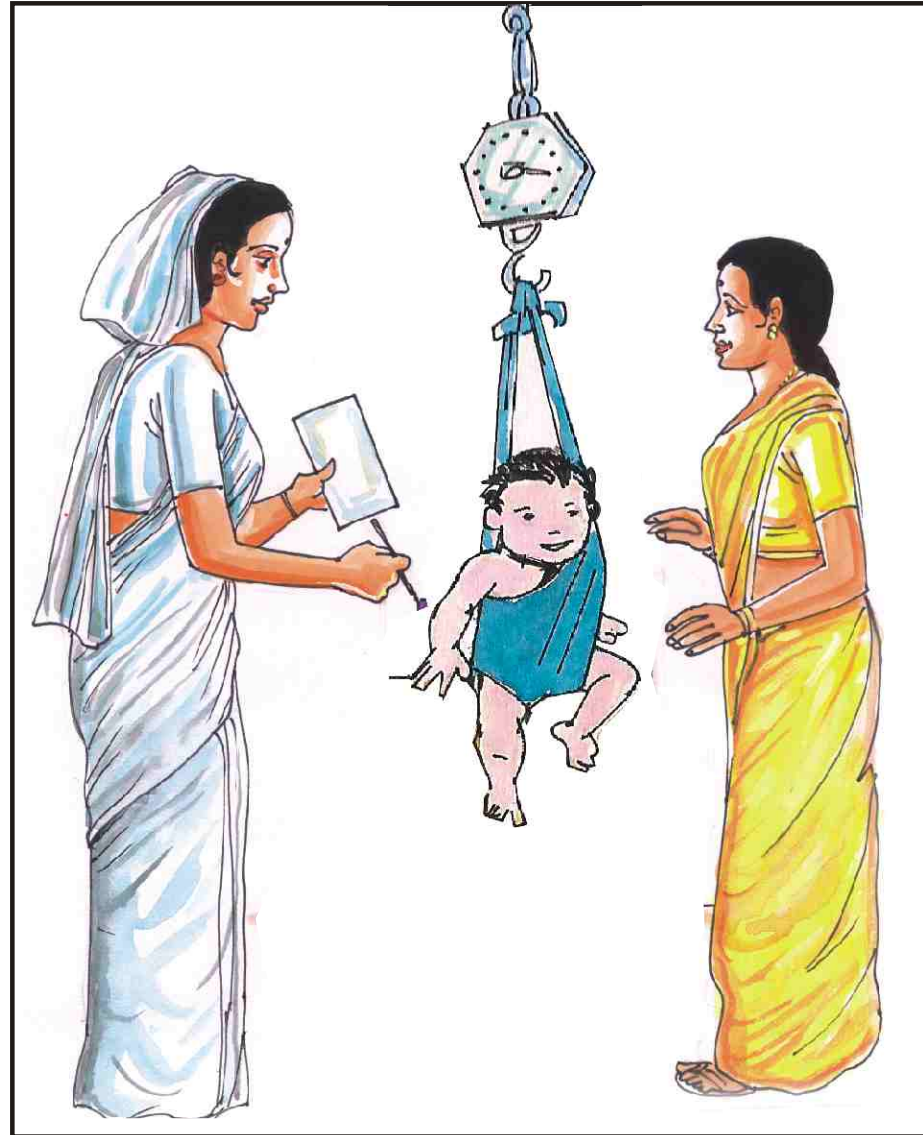
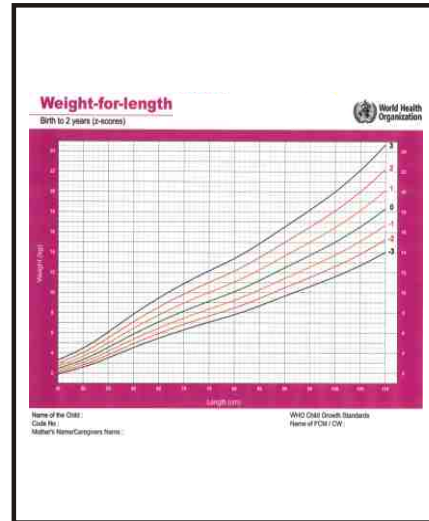
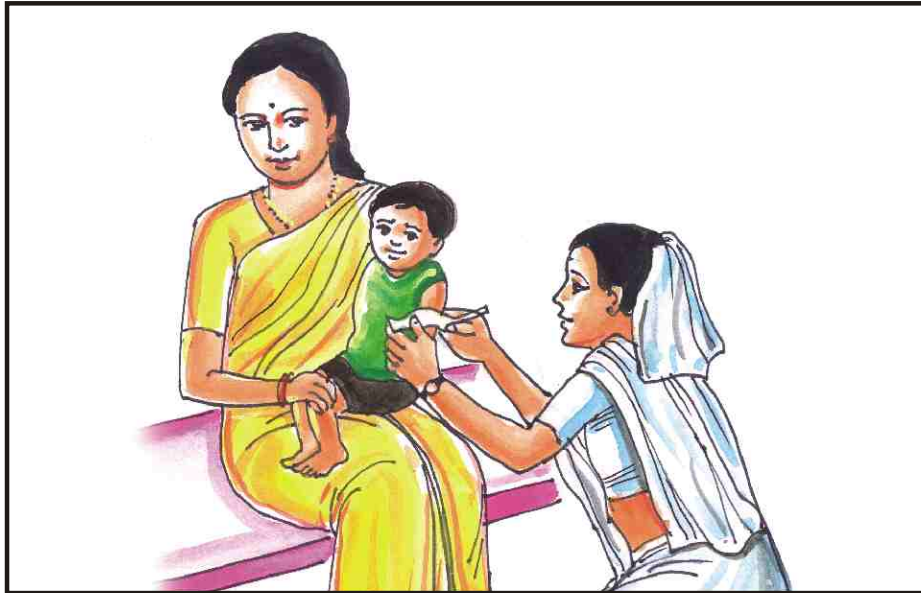




# How to feed a baby above 6 months with poor appetite



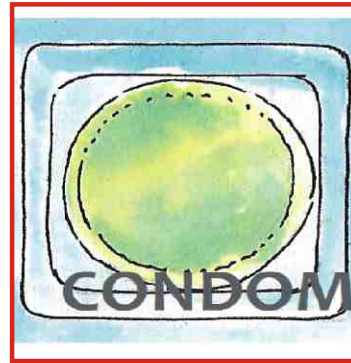
# Regular growth monitoring and promotion



# Family planning improves health and survival



LAM  
(Exclusive breastfeeding)



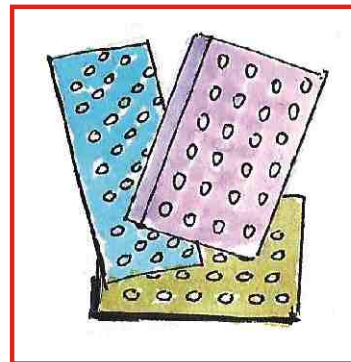
Male & Female Condom



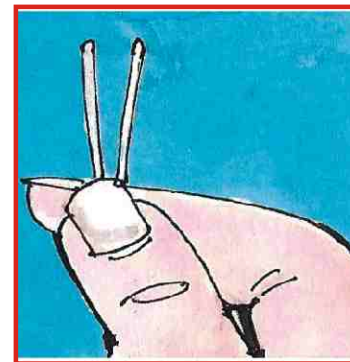
Abstinence  
(Avoiding intercourse)



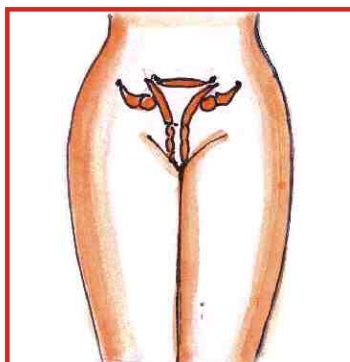
Injectables  
(Depro - Provera)



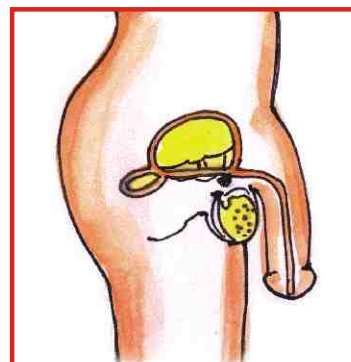
Oral Contraceptives



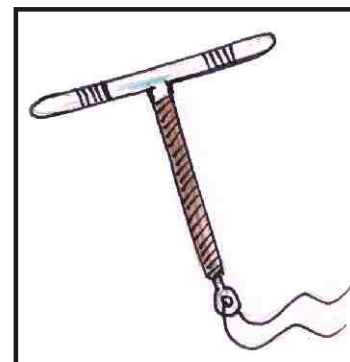
Norplant



Tubal Ligation



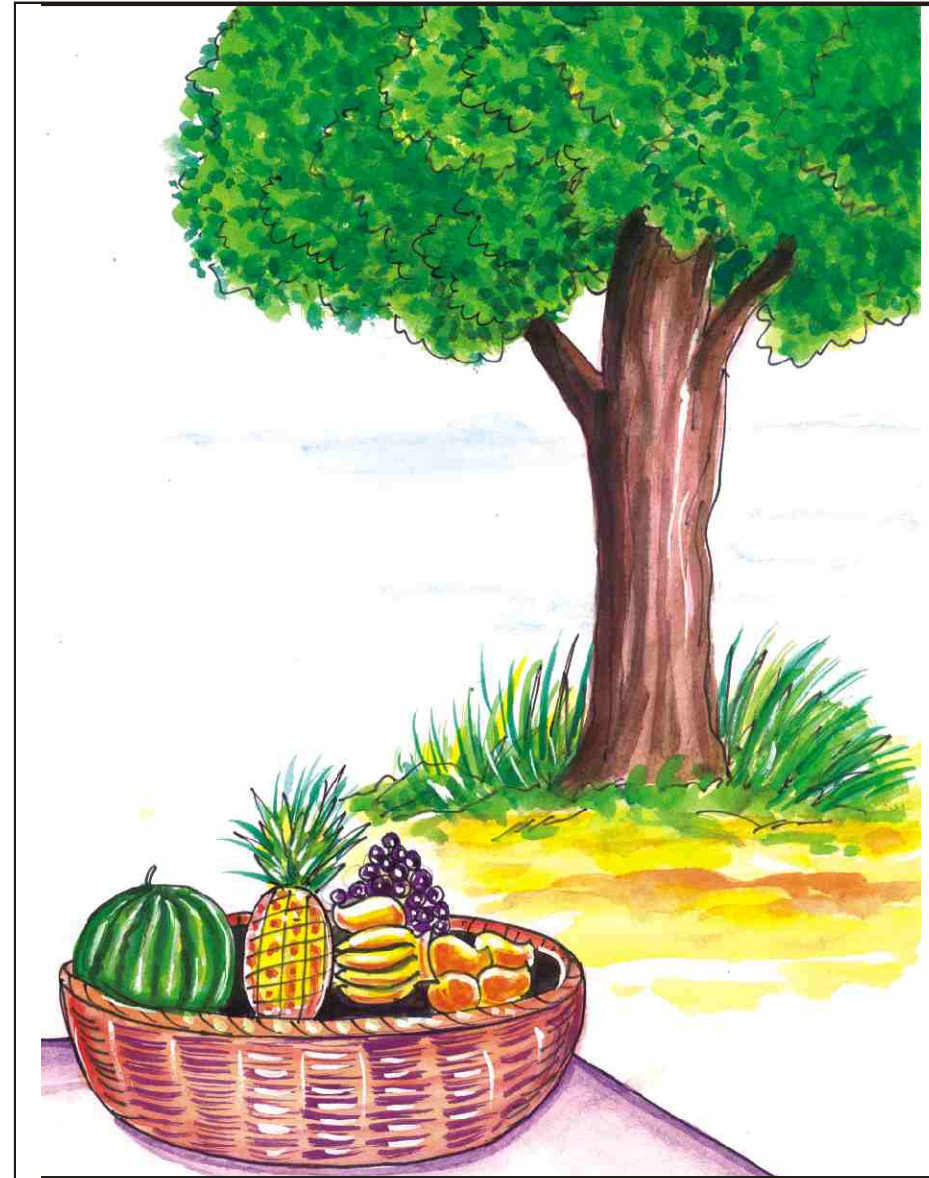
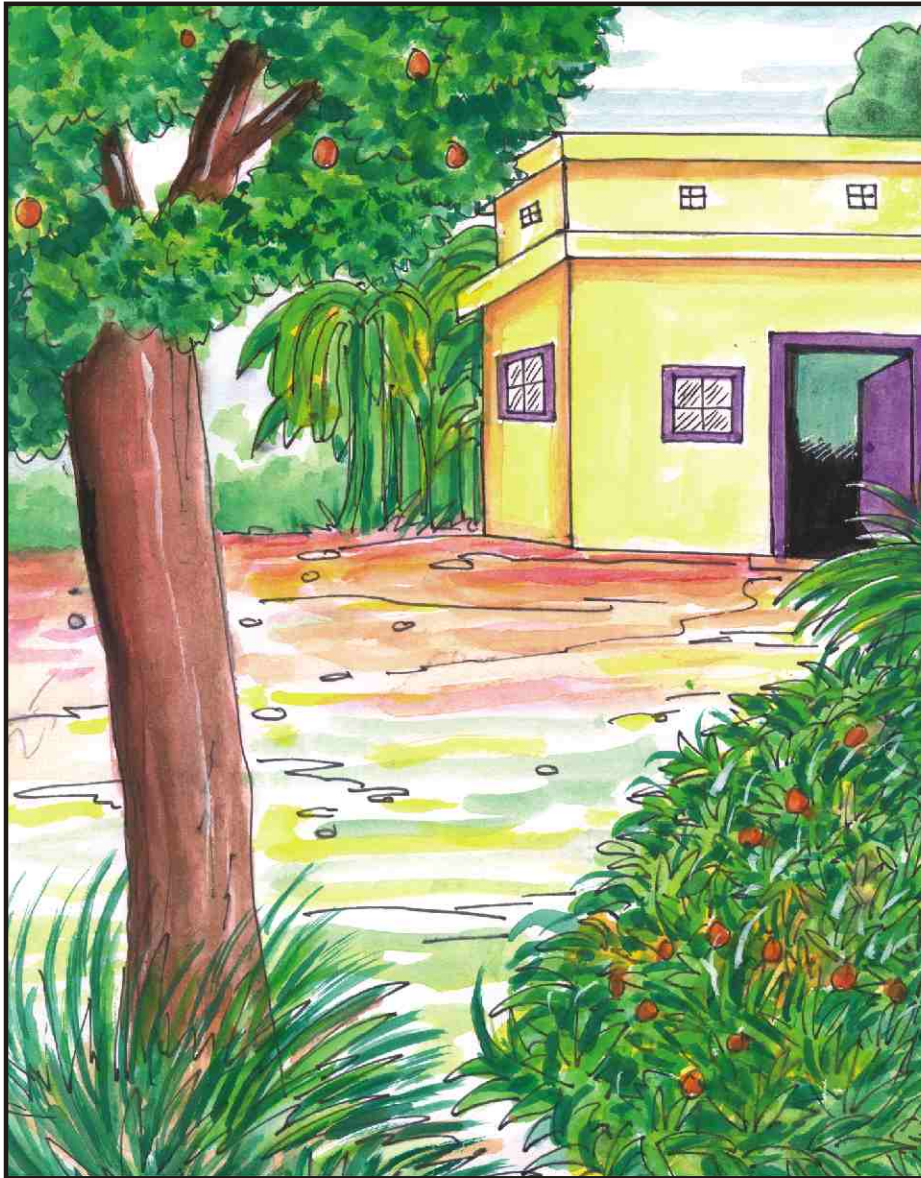
Vasectomy



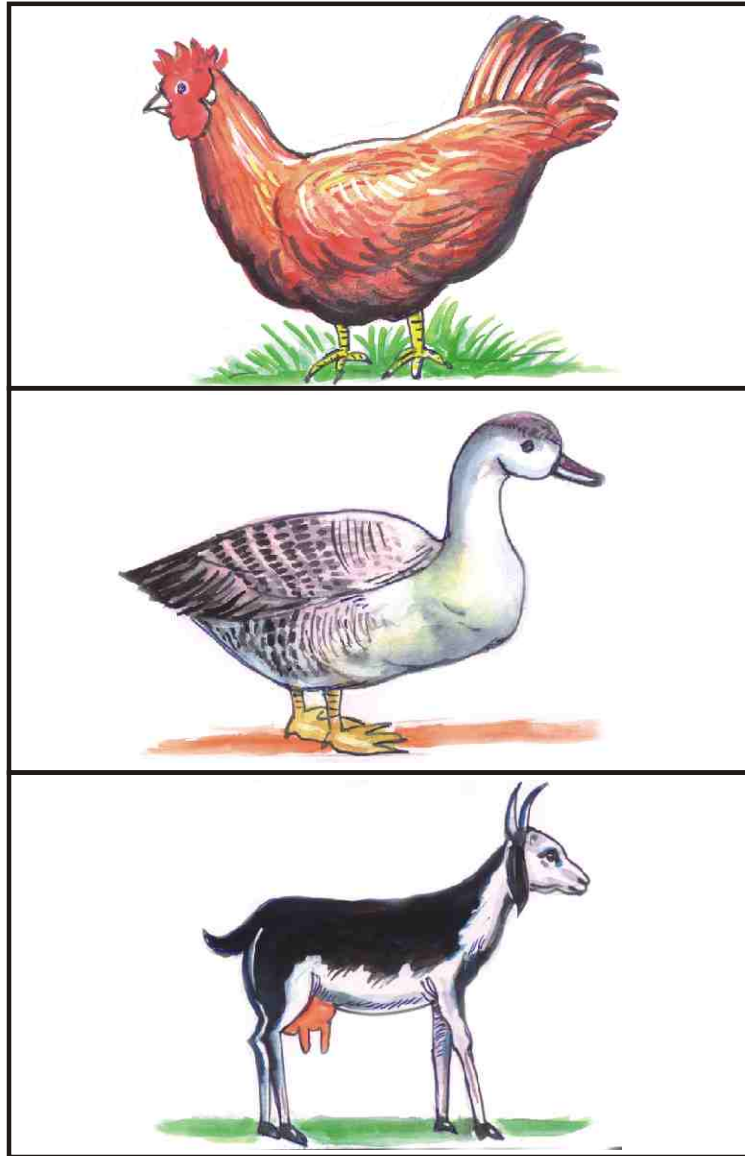
IUD



# Create a kitchen garden and plant fruit trees

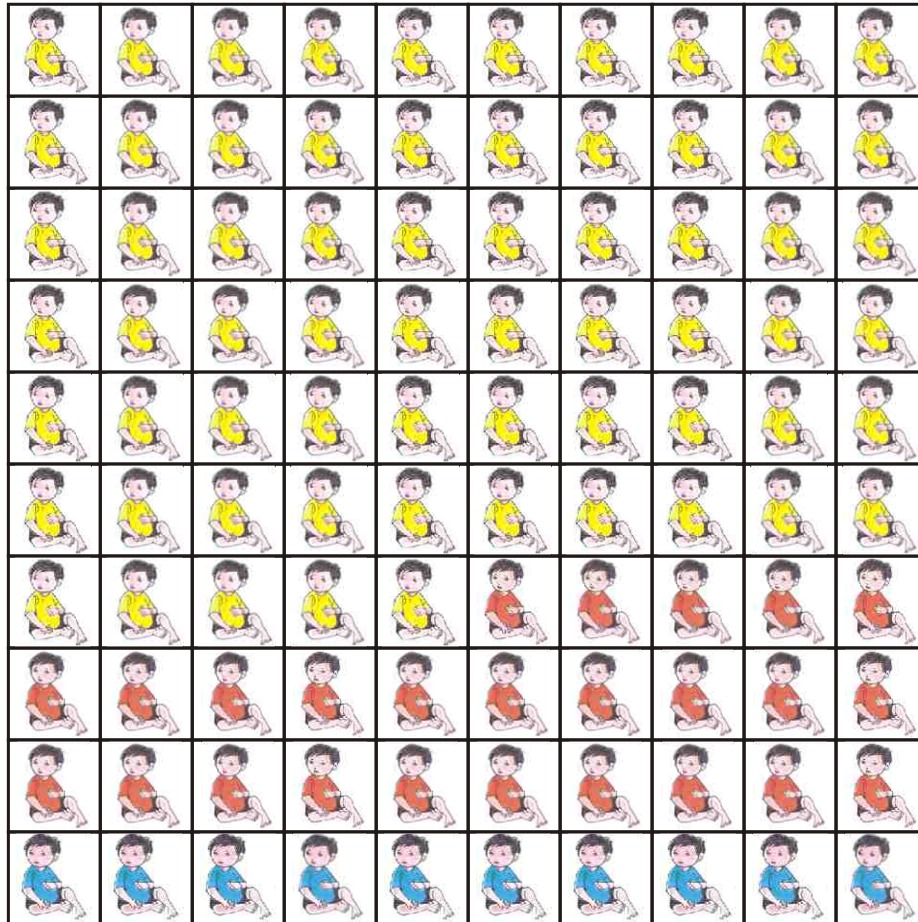


# Small animal breeding



# Risks for babies born to HIV-infected mothers...

When NO Preventive actions are taken?



Out of 100 babies born to HIV infected women:



The majority of babies (about 65) are not infected with HIV, but should be protected

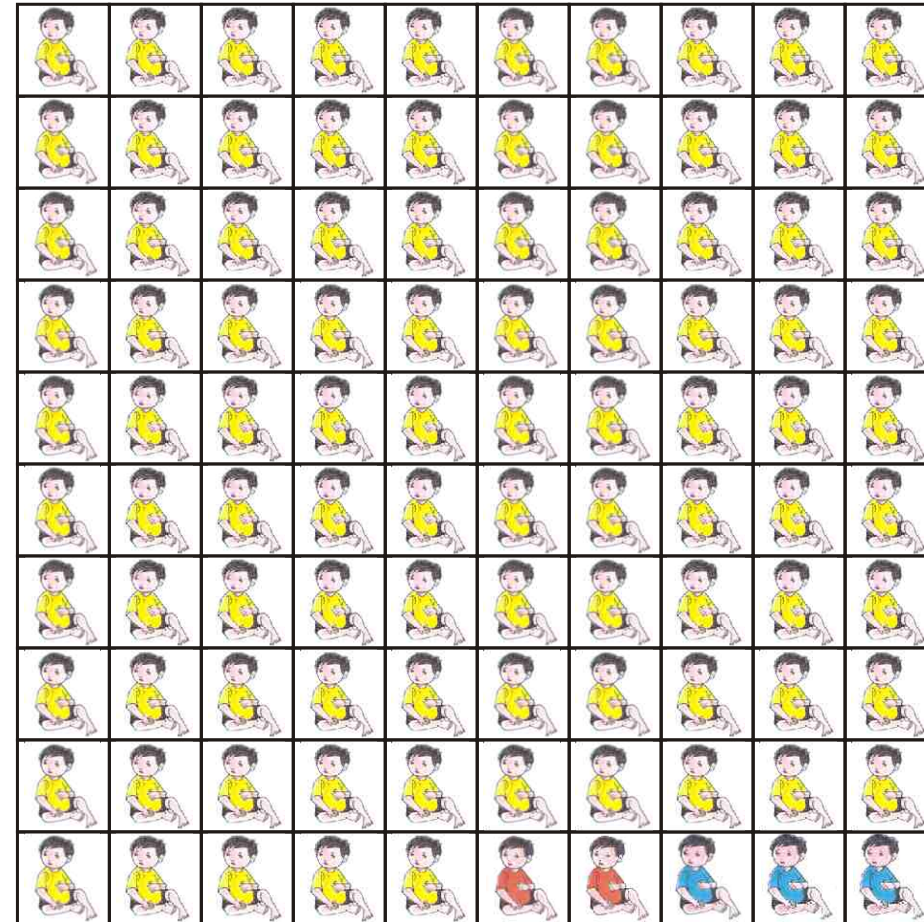


Most babies (about 25) become infected with HIV during pregnancy, labour and birth.



Other babies (about 10) are infected with HIV through breastfeeding

If both mother and baby take ARVs and practise exclusive breastfeeding during the first 6 months?



Out of 100 babies born to HIV infected women who take ARVs:



The majority of babies (95 or more) are not infected with HIV



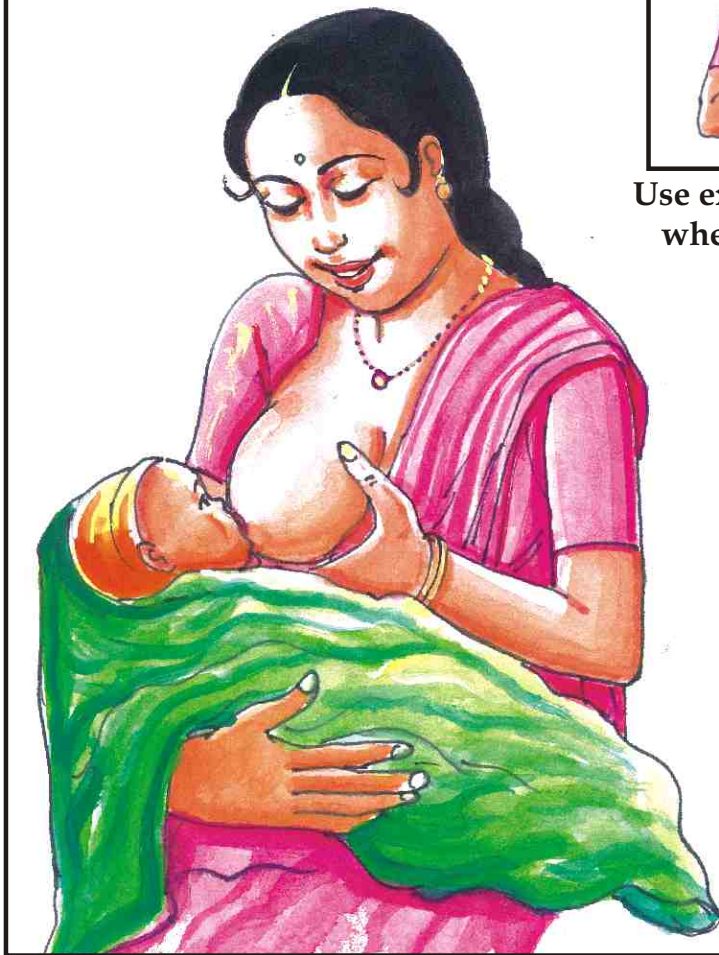
Most of these babies (less than 2) become infected with HIV during pregnancy, labour and birth.



Breastfeeding babies (less than 3) can become infected. Exclusive and safer breastfeeding reduces the risk.

# Exclusively breastfeed and take ARVs

Only Breast Milk



Use expressed breast milk when away from baby

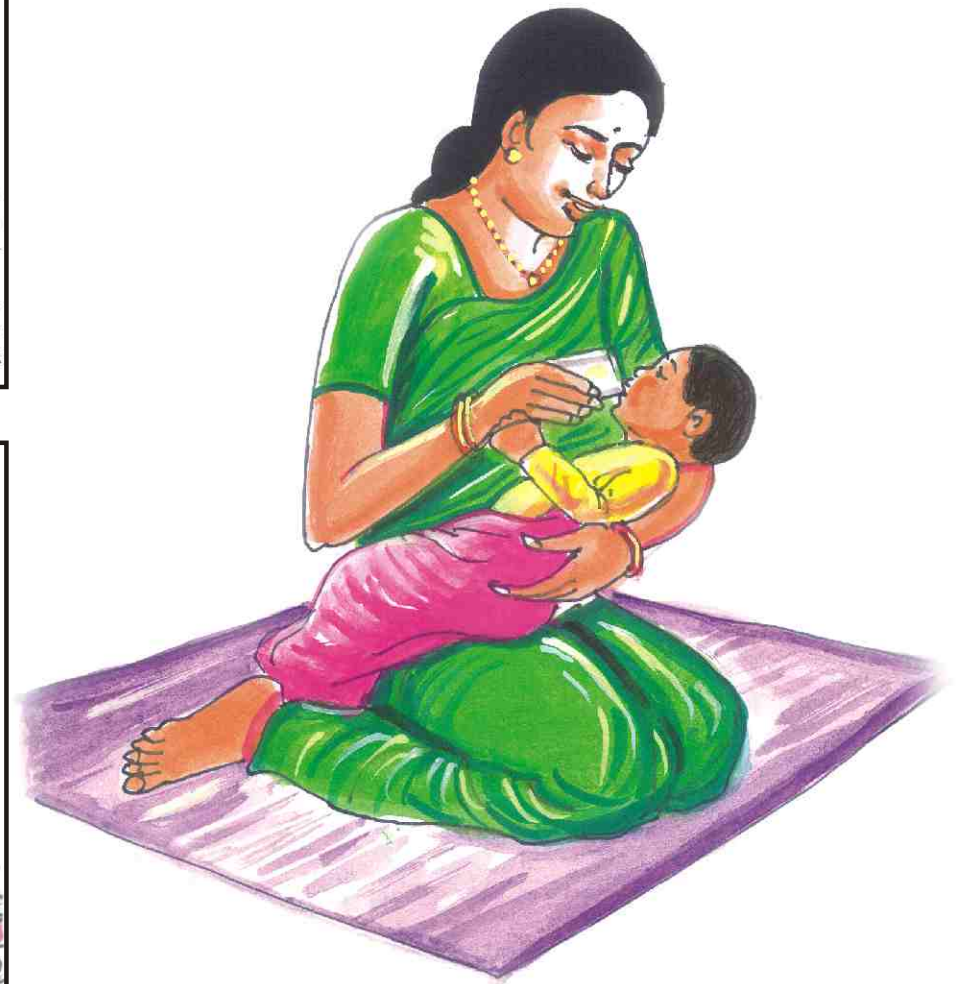


ARVs for the mother



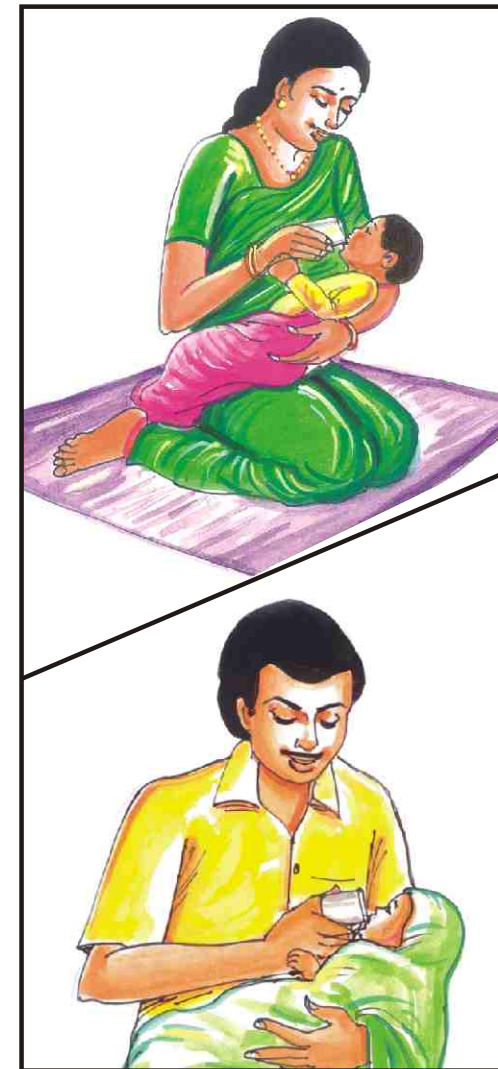
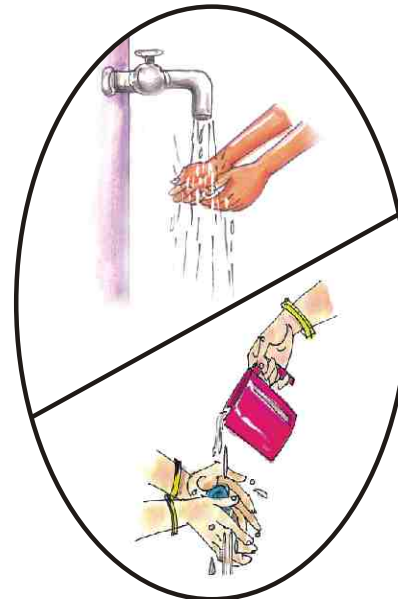
ARVs for the baby

# If using infant formula, avoid all breastfeeding

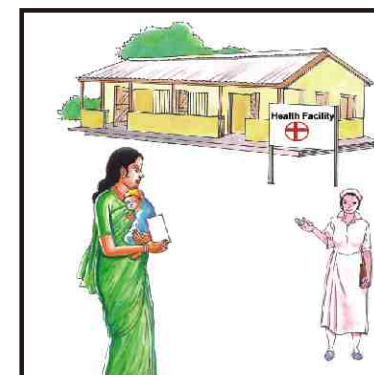
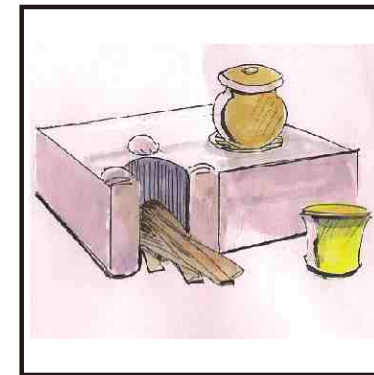
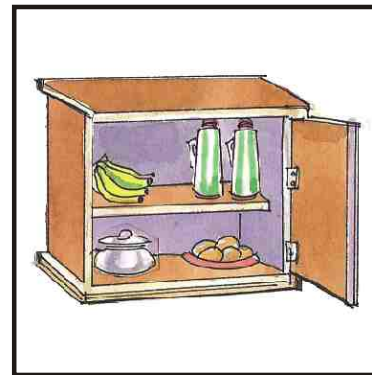
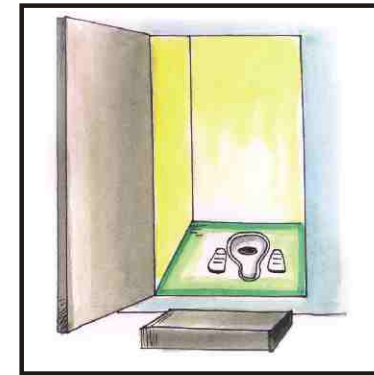
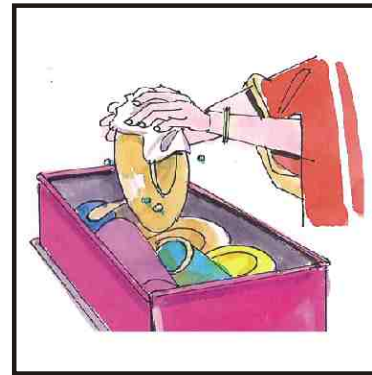
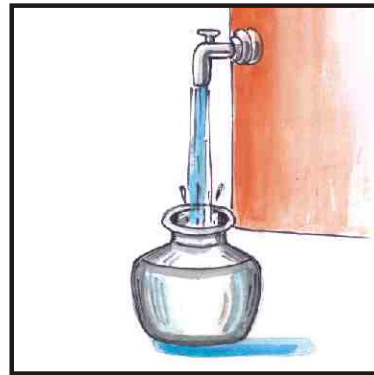




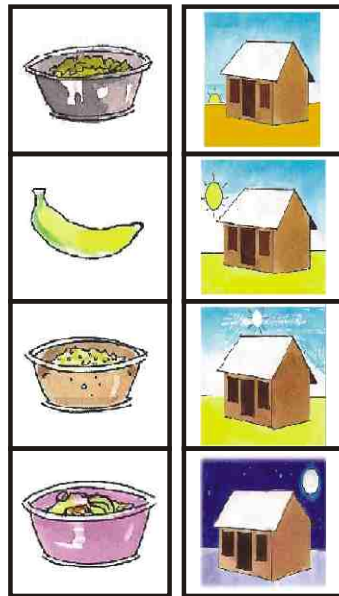
# conditions needed to avoid all breastfeeding if animal milk is chosen



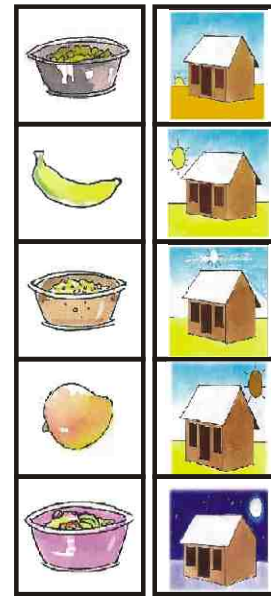
# Conditions needed to avoid all breastfeeding if the mother chooses infant formula or animal milk



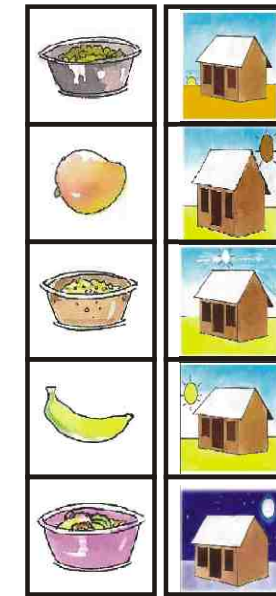
# Non-breastfed child from six (6) up to 24 months



Each day add



Each day add



Each day add

