

Home-Based Care

Reference Guide for COVID-19



 coregroup

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This reference guide will be updated periodically, for the most current version go to: bit.ly/COVID19HomeCare

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Acknowledgements

CORE Group convenes global community health professionals to share knowledge, evidence, and best practices, and then translates these into the real world with a direct impact.

This home-based care guide has been put together by a group of partners working collectively, globally, as the Home-based Care CORE Group working group. Partners include: World Vision, Curamericas Global, Food for the Hungry, Hesperian Health Guides, Relief International, PATH, International Federation of Red Cross and Red Crescent Societies, Save the Children, Nutrition International, IMA World Health, RTI, International Rescue Committee, FHI 360 and Clinton Health Access Initiative.

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Background

This guide provides recommendations to nonprofits, Red Cross Red Crescent network and community organizations who are designing programs and materials in response to COVID-19 in low- and middle-income countries. The working group designed it as a supplemental tool for organizations working specifically with community health workers (CHWs) (including trained community health volunteers) as they are reaching households, however the content can be adapted for other purposes.

This guide focuses on three main areas: how to support a person whose condition warrants home care because of non-severe symptoms and home care is recommended by local jurisdictions; how to prevent the spread of COVID-19 in the home; and how to provide emotional support to family members. While this manual provides information on danger signs of COVID-19, it should not be used as a guide for when and how a person who has COVID-19 (or its symptoms) should seek medical care. All content adapted to different countries should reflect local policy guidelines and recommendations.

Information from this document was sourced from reliable organizations such as the World Health Organization, Centers for Disease Control and Prevention, Hesperian Health Guides and others. Key recommendations are highlighted at the top of each section for easy integration into field materials, guides and training resources. Adaptations of recommendations for low-resource settings are provided throughout and in the annex.

Much remains to be learned about the repercussions, prevention and transmission of COVID-19. *Therefore, this manual will be reviewed and updated every month.* Each time information is updated, changes will be highlighted and listed at the beginning of the document.

The collaborators of this document recognize that COVID-19 has created additional economic, emotional and physical stressors for people around the world. Many have lost loved ones to the virus and even more have lost their livelihoods and stability. We hope that this manual provides clear, concise messaging and technical advice to help implementers and managers navigate these difficult times.

Introduction

What is COVID-19

COVID-19 is a disease caused by a coronavirus, which is a small virus (too small to see without a microscope), that can spread between people. COVID-19 causes flu-like symptoms such as a dry cough, shortness of breath, fever, weakness and body aches. COVID-19 mostly affects the respiratory system. While most infections are not dangerous, it can cause pneumonia (a serious infection of the lungs), other health problems, and can be deadly in severe cases.

How does COVID-19 spread?

Coronavirus enters your body through the mouth, nose, and eyes when an infected person breathes, coughs, or sneezes near you. Or if the virus is on surfaces you touch, and you then touch your eyes, nose or mouth. Most people get sick about 5 days after getting infected, but coronavirus can live in the body for 2 to 14 days before signs of illness appear. And some people, especially children, can be infected and never get sick. So, people can have coronavirus and not know it, and transmit the virus to others. Coronavirus can live on some surfaces and objects for at least 3 days, and possibly longer.

Local resources

It is recommended that CHWs (including trained community volunteers) carry a list of local services for easy connection and referral. Examples of services to include on this list are provided below.

Type of resource	Location	Contact information
Ministry of Health Hotline number		
(Other) Hotline number		
COVID-19 testing site		
Food vouchers and nutritional support		
Domestic Abuse support		
Sanitation supplies		
Childcare		
Police Station		
Health Center		
Referral Health Center		

Role of the CHW - monitoring and communication during Isolation

Community health workers have a vital role to play during this time. Being community-based they have a unique lens to the needs of their community members.

- **Educate**
 - Educate people with COVID-19 or its symptoms and household members on:
 - When to seek medical attention
 - Home and personal hygiene
 - How to care for the person suspected of having COVID-19 while minimizing risk of further infection in the household
 - The importance of routine health services within the community
 - Address questions raised by community members
 - Address myths and misinformation circulating in communities
- **Communicate**
 - Communicate with households on a daily basis and be available for communication (e.g. provide family with phone number to reach you) in order to provide support and monitor the health of the person with COVID-19 or its symptoms
 - Help the person with COVID-19 or its symptoms establish communication with a local health provider for the duration of the home care period
- **Connect**
 - Inform community leaders about COVID-19 transmission, care and prevention
 - Link homes to referral and other resources being offered by MoH and agencies in the area (food distribution and voucher programs, distribution of sanitation supplies such as hand washing stands, soap, and disinfectant, etc.)
 - Help coordinate with community resources to ensure basic needs of family and support family in maintaining isolation (for example food, medicine, drinking water, etc.)

Section 1: Understanding symptoms

Symptoms and patient stability

Key messages:

- Most people with COVID-19 will have fever, dry cough, tiredness or shortness of breath.
- Most people will get better - symptoms usually last a few days and subside after a week.
 - If the person at home develops any of these serious symptoms, call a healthcare provider for next steps.
 - Difficulty breathing or shortness of breath (this is the most common)
 - Chest pain or pressure
 - New confusion, or loss of speech or movement

- **Common symptoms of COVID-19 include:**
 - Fever
 - Dry cough
 - Tiredness
- **Some people have one or more of the following:**
 - Muscle a Shortness of breath
 - chest and pains
 - Sore throat
 - Loss of appetite
 - Diarrhea
 - Nasal congestion
 - Nausea and vomiting
 - Conjunctivitis
 - Headache
 - Loss of taste or smell
 - Rash on skin, or discoloration of fingers or toes
- **If any of the serious symptoms listed below develop, the person likely needs to be treated at a health facility. Contact the health facility, the hotline or Ministry of Health to determine next steps.**
 - Difficulty breathing or shortness of breath
 - Chest pain or pressure
 - New confusion, or loss of speech or movement
- A person with COVID-19 or with mild symptoms such as fever, cough, headache, and tiredness will likely not require hospitalization and may be safely managed at home as long as they can be followed up and cared for by family members
 - Most of these cases will recover without complications
 - Home care may also be considered when inpatient care is unavailable or unsafe (e.g. capacity is limited, and resources are unable to meet the demand for health care services).
- The most serious danger from COVID-19 is inability to breathe, treatment for severe cases will include oxygen and a mechanical ventilator, available only in health care facilities
- To determine if someone has trouble breathing:

- With proper training CHWs and family members can monitor the respiratory status of people with COVID-19 or its symptoms. Those with more than 20 breaths per minute should be referred.
- CHWs can ask the following questions to help determine if referral is necessary:
 - “Do you have shortness of breath doing a task that you would otherwise normally not have symptoms doing?”
 - “Is walking a short distance more difficult today than it would have been a month ago?”
 - “Do you have shortness of breath at rest when you are sitting?”
- **Special advice for adults over 60 and those with underlying health conditions**
Underlying conditions include HIV, Diabetes, heart conditions, TB, malnutrition, chronic lung conditions, kidney disease undergoing dialysis, liver disease, severe obesity
 - Adults over 60 and those with underlying health conditions are more likely to develop serious symptoms if infected with COVID-19. These individuals should be referred to clinic if they show fever and one additional symptom of COVID-19, even if that symptom is mild.
 - Monitor household members who are over 60 more carefully, symptoms can quickly move from mild to severe.
- Case definition of suspect cases (based on WHO criteria March 2020)
 Countries may need to adapt case definitions depending on their local epidemiological situation and other factors.
 - Fever + cough OR shortness of breath; AND having been in direct physical or face-to-face contact with a confirmed or probable COVID-19 case in the last 14 days prior to symptom onset
 - Fever + cough OR shortness of breath; AND history of travel to or residence in location reporting transmission of COVID-19 disease during 14 days of symptom onset
 - Fever + cough OR shortness of breath; AND requiring hospitalization; AND not being able to fully explain an alternative diagnosis based on symptom

Section 2: Home-based care

Key Messages:

- Ensure that the person with COVID-19 or its symptoms rests, receives nutritious meals and stays hydrated.
- Make sure the family has food and arrange for a food delivery while in temporary home isolation.
- Choose a caregiver who is in good health and has no underlying chronic conditions (including age) and can follow proper protective behavior.

- **How to choose a caregiver**
 - The caregiver should be someone who is in good health and has no underlying chronic or immunocompromising conditions such as high blood pressure, HIV, TB, diabetes, lung or heart problems.
 - Limit the number of caregivers. Ideally, only one person is providing care to the person with COVID-19 or its symptoms
 - Ideally the caregiver is someone who lives in the home and can provide frequent care
- **Management of non-severe cases**
 - The person with COVID-19 or its symptoms should:
 - Rest as often as possible
 - Drink plenty of water from a container that is separate from other family members'
 - Eat plenty of nutritious food such as fruits, vegetables and meat.
 - These steps do not cure COVID-19, however they can help alleviate some of the symptoms of COVID-19
 - Fever: Use cool cloths for feeling too hot, or a blanket for chills. Use paracetamol (acetaminophen) for discomfort or to lower fever. For an adult, give 1000 mg every 6 -8 hours. **Do not** give more than 4000 mg per day.
 - Cough: Cough medicines do not cure a cough and are best avoided. Gargling with warm saltwater several times a day may help. Breathing steam in a hot bath, with a humidifier, or by covering your head with a towel over a pan of hot water may help.
 - Chest pain: A heating pad or a hot compress (cloth dipped in hot water and then wrung out) on your chest may lessen pain.
 - Aches and pains: Take paracetamol (acetaminophen) for pain (same dose as for fever), especially if pain keeps you from resting or sleeping.
 - For difficulty breathing: Breathing steam (see cough, above) and drinking warm fluids may help lessen mucus in the lungs and help open airways. The caffeine in a cup of coffee or black tea may also help. Don't smoke or be around smoke.
- Contact the nearest health facility if symptoms get considerably worse or if the person develops any of the serious symptoms.
- See links to Hesperian Health Guides here: <https://en.hesperian.org/hhg/Coronavirus>

Home isolation and room set up

Key messages:

- Person with COVID-19 or its symptoms should stay 2 meters away from others (1 meter minimum - 2 meters is around two arm lengths).
- Person with COVID-19 or its symptoms should wear a mask.
- Have hand washing equipment and soap (or sanitizer) readily available.
- If house space is limited, prioritize keeping those who are ages 60 and older and those who have medical conditions isolated from the person with COVID-19 or its symptoms.

Persons in the household belonging to high-risk groups (e.g. the elderly, immunocompromised people, or people with underlying conditions) should be especially careful to avoid contact with the person with COVID-19 or its symptoms and with objects that they come in contact with.

- **Home and sick room setup:**
 - All people in a household with COVID-19 or its symptoms can be isolated in the same room.
 - The person with COVID-19 or its symptoms should stay in a well-ventilated single room (i.e. with open windows).
 - The person with COVID-19 or its symptoms should have a waste bag in their room for used tissues, face masks, and other waste; the waste bag should go into the unsorted garbage.
 - Ensure that shared spaces (e.g. kitchen, bathroom) are well ventilated (keep windows open).
 - Use dedicated linen and eating utensils for the person with COVID-19 or its symptoms; these items may be reused after they are cleaned with soap and water.
- **Physical distancing**
 - Person with COVID-19 or its symptoms should stay at least 2 meters away from others (two arm lengths). Mark 2 meters with chalk or place an object as a reminder to family
 - Household members without symptoms should stay in a different room or, if that is not possible, maintain a distance of at least 2 meters from the person with COVID-19 or its symptoms (e.g. sleep in a separate bed)
 - The person with COVID-19 or its symptoms should put on a mask and maintain a distance of 2 meters from others when leaving the “sick room”
 - Limit the movement of the person with COVID-19 or its symptoms in the house and minimize their presence in shared spaces
- Visitors should not be allowed until the person with COVID-19 or its symptoms has completely recovered and has no signs or symptoms of COVID-19 (see more information in section below on when to come out of isolation)

When space in the home is limited

- If house space is limited, prioritize keeping those who are ages 60 and older and those who have medical conditions isolated from the person with COVID-19 or its symptoms
- If the person who is COVID-19 or its symptoms does not have an extra room to isolate alone in, instruct them to:
 - Minimize time with other family members as much as possible
 - Aim to keep 2 meters distance from others in the home

- If only one bed is available and no other sleeping space is an option, sleep head to toe to avoid breathing in the same air as the sick person
- Wash hands frequently with soap for at least 20 seconds
- Wear a face mask
- Avoid touching surfaces (disinfect surfaces regularly – see home sanitation section)
- Dispose of your own personal waste (e.g. tissues) and wash hands immediately.
- Keep windows and doors open to increase ventilation

Contacts and ending home isolation

Key messages:

- Those who have come into contact with someone with suspected COVID-19 should be quarantined for 14 days from the last day of possible contact to monitor their health.
- Those with symptoms who will not be tested should stay in their “sick room” until 10 days have passed since their symptoms first appeared, they have had no fever for the last 3 days, and their symptoms have improved.
- Those with symptoms who will be tested should stay in their “sick room” until their fever is gone, their other symptoms have improved, and they receive 2 negative tests at 24 hours apart.
- Those who tested positive but did not show any symptoms should stay in their “sick room” until 10 days have passed since they first tested positive, they do not have any symptoms. They should stay in their homes for an additional 3 days.

Contacts of a person who has COVID-19

A **contact** includes anyone who has been in contact with a person documented or suspected/probable to have COVID-19 disease during the time the person with COVID-19 disease was symptomatic or two days before symptoms began.

- Contacts should be quarantined for 14 days from last exposure
- Contacts should follow protocols for seeking medical attention based on symptoms

Ending Isolation in the “Sick Room”

People with COVID-19 or its symptoms who are recovering at home (or other non-hospital setting), and **will not be tested** to determine if they are no longer contagious can leave their “sick room” and home when:

- At least 10 days have passed since their symptoms first appeared
AND
- They have not had a fever for the last three full days (without the use of medicine that reduces fevers)
AND
- Other symptoms have improved (for example, when their cough or shortness of breath have improved)

People with COVID-19 or its symptoms who are recovering at home (or other non-hospital setting), and **will be tested** to determine if they are no longer contagious can leave their “sick room” and home when:

- They no longer have a fever (without the use of medicine that reduces fevers)
AND
- Other symptoms have improved (for example, when their cough or shortness of breath have improved)
AND
- They received two negative tests in a row, 24 hours apart

People who **DID NOT have COVID-19 symptoms, but tested positive** who are self-isolating at home (or other non-hospital setting) can leave their “sick room” and home when:

- At least 10 days have passed since the date of the first positive test
AND
- They continue to have no symptoms (no cough or shortness of breath) since the test
AND
- For 3 more days, this group of people should continue to limit contact (stay 2 meters or more away from others) and wear a face covering for their nose and mouth when other people are present (including at home).

Section 3: Preventing the spread of COVID-19 in your home

Home sanitation

Key messages:

- Sanitize home surfaces often/daily.
- Person with COVID-19 or its symptoms should avoid sharing items and physical contact.

- **Sanitation in the “sick room”, the room of person with COVID-19 or its symptoms**
 - Clean frequently touched surfaces in the room where the person with COVID-19 or its symptoms is being cared for with soap and water daily and then disinfect them (for example: bedside tables, bed frames, and bedroom furniture) – any cleaning of possibly contaminated surfaces within their room should be done by the person with symptoms.
 - Gloves, masks, and other waste generated during home care should be placed into a waste bin with a lid in the room of the person with COVID-19 or its symptoms.
- **Clean and disinfect bathroom and toilet surfaces at least once daily.**
 - If the person with symptoms is sharing a bathroom with others, they should disinfect the surfaces after using the bathroom, so that others to follow are not exposed to infection.
 - Regular household soap or detergent should be used first for cleaning, and then, after rinsing, apply disinfectant solution.
 - Gloves and protective clothing (e.g. plastic aprons) should be used when cleaning surfaces. Either utility or single-use gloves can be used. After use, utility gloves should be cleaned with soap and water and decontaminated with 0.1% sodium hypochlorite (bleach) solution. Single-use gloves (e.g. nitrile or latex) should be discarded after each use. Perform hand hygiene before putting on and after removing gloves.
- **Washing Laundry**
 - Clean the clothes, bed linen, and bath and hand towels of the person with COVID-19 or its symptoms using regular laundry soap/detergent and hot water and dry thoroughly.
 - Gloves and protective clothing (e.g. plastic aprons) should be used handling clothing or linen soiled with body fluids. Either utility or single-use gloves can be used. After use, utility gloves should be cleaned with soap and water and decontaminated with 0.1% sodium hypochlorite (bleach) solution. Single-use gloves (e.g. nitrile or latex) should be discarded after each use. Perform hand hygiene before putting on and after removing gloves.
 - Place contaminated linen into a bag or discard. Do not shake soiled clothing or linen and avoid contaminated materials coming into contact with skin and clothes.
- **Food safety**
 - The person with COVID-19 or its symptoms should not cook food.
 - If possible, the person with COVID-19 or its symptoms should eat in the separate area, preferably their “sick room”. If they cannot, they should stay at least 2 meters away from other members of the household during meals or eat at a different time than other people in the household.
 - Handwashing is especially critical to reducing the spread of COVID-19 and should be done before and often while preparing and serving food.
 - Wash fruits and vegetables to rid them of possible outside contamination.
 - Wipe food bottles and cans with a disinfectant before being opened or stored.

- Clean all pots, dishes, bowls, and utensils with soap and water, and store them in a clean, safe place.
- **Sharing of items and physical contact**
 - Avoid other types of exposure to contaminated items from the person with COVID-19 or its symptoms (e.g. do not share toothbrushes, cigarettes, eating utensils, dishes drinks, towels, washcloths, or bed linen).
 - Avoid physical contact (e.g. hugs, hands shaking, etc.) with adult family members

Facemasks

Key messages:

- Mask use alone is insufficient to prevent transmission of COVID-19. Hand hygiene, distancing and cleaning are also needed along with mask use are needed to reduce the risk of transmission.
- Non-medical masks such as cloth masks are most effective at preventing transmission when worn by the person with suspected COVID-19. Non-medical masks help most with prevention of spreading the disease to others rather than protection of the wearer.
- Anyone who is having symptoms, those in-home isolation within 2 meters/6 feet to the sick person, and those caretaking of someone who is ill should wear facemasks in the home.
- Children under age 2 and anyone not able to remove the face mask themselves should not wear a facemask.
- Face masks or face coverings should cover both nose and mouth.
- When the face mask is taken off, it should be removed by touching only the elastic bands or strings; the front and inside parts should never be touched.
- Wash cloth masks with soap and water after use. Dispose of paper masks after each use.

Masks must be worn and handled correctly, and other prevention measures emphasized in order to reduce the risk of transmission. See Annex 3 “How NOT to wear a mask” and “How to put on/remove a Facemask”

- **Mask Use**
 - The person with COVID-19 or symptoms should wear a medical mask as much as possible to contain respiratory droplets and secretions. This mask should be changed at least once daily.
 - Caregivers should wear a medical mask that covers their mouth and nose when in the same room as the person with COVID-19 or symptoms.
 - Masks should stay in place and not be touched or handled during use as it is possible for virus particles on the outside of the mask to enter your nose/mouth/eyes when it is moved.
 - When the face mask is taken off, it should be removed by touching only the elastic bands or strings and pulled directly away from the face; the front and inside parts should never be touched.
 - Replace mask as soon as it becomes damp or ripped.
 - Do not share a mask between members of a household.
 - Hands should be washed thoroughly with soap immediately after removing the face mask.

- **Mask Care**

- Do not reuse non-cotton/cloth, single-use, disposable masks.
- Early on, some documents reference the use of N95 masks by caregivers, most guidance documents now reference N95 masks to be reserved for health care workers. If someone has one and they must reuse, bake it at 160°F (72°C) for 30 minutes to disinfect it.
- For facemasks (e.g. surgical masks), if you must reuse, put it in a separate paper bag after each use. Rotate their use so you only use each mask once every 5 days allowing the virus to die before next use.

- **Cloth Masks**

Medical masks are more effective at reducing transmission than cloth masks. Given limited accessibility of these masks, a cloth mask can be used if medical masks are not available. See how to make a no-sew cloth face mask in Annex 2.

- The best cloth face masks:
 - a. Have at least 3 layers of cloth. Ideally, the inner layer of the mask is made from a cotton or cotton-blend material, and the outermost layers from a hydrophobic material (such as polypropylene, polyester). It is not recommended to coat the mask (with compounds such as wax).
 - b. Are made of non-elastic cloth (choose a cloth that does not stretch easily)
 - c. Are made of cloth that is durable and can withstand high temperatures (60°C or more)
 - d. Are snug against your face,
 - e. Are made from a thick fabric (aim for a fabric that, when held up to the sun, the light does not outline the individual fibers).
- Wash cloth masks with soap and hot water after use. If hot water is not available, wash mask with soap/detergent with room temperature water, followed by either: boiling mask for 1 minute, or soaking mask in .1% chlorine for one minute and then thoroughly rinsing.
- If possible, have multiple masks to allow time for washing/drying.

Handwashing and home-based hand washing stations

Key Messages:

- Wash hands with soap when entering home and before touching face. If you have the virus on your hands and touch your eyes, nose or mouth you could infect yourself with the virus.
- Wash hands after touching frequently touched surfaces such as doorknobs, phones, dishes, etc. as they could be contaminated with virus.
- Regular soap and water are the best means to clean the disease from your hands.

- **When to wash hands**

- After any type of contact with people with COVID-19 or symptoms or their immediate environment
- Before and after preparing food, before eating, after using the toilet
- After coughing or sneezing/touching used tissues
- After touching shared common surfaces or objects (doorknobs, phones, etc.)

- Before touching face after caring for someone who has COVID-19 or its symptoms
- Before seeing older people or those more at risk to illness
- Before and after breastfeeding or touching a baby
- When you return home from being out (arrive from store/work, etc.)
- After handling animals or any waste
- **How to wash hands (see pictures in Annex 4)**
 - Wet hands with clean, moving water
 - Apply soap and lather hands by rubbing them together with the soap. Be sure to lather the backs of hands, between fingers and under nails.
 - Scrub hands for at least 20 seconds (can hum happy birthday song twice)
 - Rinse hands under clean, moving water
 - Dry hands with clean towel or air dry
 - It is preferable to use disposable paper towels to dry hands. If these are not available, use clean cloth towels and replace them frequently
 - See Annex 4 for how to wash your hands if in water-constrained environments
- If hands are not visibly dirty, an alcohol-based hand rub can be used. For visibly dirty hands, use soap and water.

Other key behaviors in and for members of the household

Key Messages:

- Stay home as much as possible. All household members should avoid leaving the home. If you must leave the home, practice maintaining distance and handwashing.
- Don't touch your eyes, nose, and mouth with unwashed hands.
- Avoid crowds, including social gatherings of any size.

Hygiene: hand and respiratory

- Don't touch your eyes, nose, and mouth with unwashed hands.
- Cover your coughs and sneezes. If you cough or sneeze, cover your mouth and nose with a tissue or use the inside of your elbow.
- Don't touch frequently touched surfaces in public areas, such as counters and handrails.
- Wear a cloth face covering to help slow the spread of COVID-19.

Physical distance

Stay home as much as possible. All household members should avoid leaving the home. If you must leave the home, practice maintaining distance and handwashing.

- **When outside the home:**

- Keep at least 2 meters (2 arm lengths) away from people when outside your household.
- Avoid crowds, including social gatherings of any size.
- Don't use public transportation, such as the van or bus, if possible. If you must use public transportation.
 - Maintain 2 meters of distance from other passengers as much as possible
 - Sit near an open window
 - Wash your hands or use hand sanitizer as soon as possible after leaving public transportation

- Don't ride in a car with members of different households
- Avoid touching frequently touched surfaces such as handrails

Section 4: Caring for children and routine health services

Key Messages

- If a mother has COVID-19 or its symptoms do not separate her and her infant, unless she is unable to care for the infant.
- Breastfeeding mothers should continue to breastfeed and should wear a face mask and wash hands before breastfeeding.
- During the outbreak ANC, delivery, PNC, and newborn services at the health facility will be adapted to ensure safety by accommodating social distancing, provision of protective equipment, and ensuring safe handwashing practices.
- Continued care-seeking for sick children should be encouraged for the management of major causes of childhood illness as an essential community-based service including for malaria, pneumonia, diarrhea and wasting.
- It is important that children continue to receive their routine immunizations during COVID-19.

Mothers and families can be advised that among the few cases of confirmed COVID-19 infection in children, most have experienced only mild or asymptomatic illness.

Child feeding during illness

- If a child becomes sick with symptoms of fever, cough, difficulty breathing that are typical of COVID-19 or another type of illness such as diarrhea, it is very important to seek medical care early, and follow instructions from a health care provider.
- In addition, it is important to protect babies and young children from losing weight when they become sick, whatever the cause. To do this:
 - Breastfeed more frequently
 - Follow recommended infant and young child feeding guidelines
 - Continue to provide food and drink
 - Add another meal during recovery
 - See here for more information and counseling cards
<https://www.advancingnutrition.org/news-events/2020/04/24/infant-and-young-child-feeding-recommendations-when-covid-19-suspected-or>

Breastfeeding and COVID-19

- If a mother is confirmed/suspected to have COVID-19, she should continue breastfeeding.
 - There is no evidence to suggest the virus is transmitted to infants via the breast milk
 - The benefits of breastfeeding far outweigh any risk of transmission.
 - There is high quality evidence showing that breastfeeding reduces neonatal, infant and child mortality including in high resource settings and improves lifelong health and development in all geographies and economic settings.

- Breastfeeding mothers should wear a face mask and wash hands before breastfeeding to reduce the possibility of droplets with COVID-19 being spread to her infant.
- In situations when severe illness in a mother with COVID-19 or other complications prevents her from caring for her infant or prevents her from continuing direct breastfeeding, mothers should be encouraged and supported to express milk, and safely provide breastmilk to the infant, while applying appropriate IPC [infection prevention and control] measures. If a mother is confirmed/suspected to have COVID-19 she should:
 - Wash hands frequently with soap and water or use alcohol-based hand rub, especially before touching the baby
 - Regularly clean and disinfect surfaces
 - Wear a cloth or disposable mask while feeding (see instructions on mask use above)

On-going essential services for routine medical visits

- **Pregnant women:** During the outbreak ANC, delivery, PNC, and newborn services at the health facility will be adapted to ensure safety by accommodating social distancing, provision of protective equipment, and ensuring safe handwashing practices.
- **Children:** Children should continue to attend regular doctor's appointments and keep his/her vaccinations up to date. This will reduce the possibility of infection with other viruses.
- **Adults and Children with Chronic Conditions:** If possible, those with chronic conditions (such as TB and HIV) who are at higher risk for severe symptoms if infected with COVID-19 should reduce contact with the health facility. Those with chronic conditions should continue to be monitored remotely by CHWs to ensure adherence to treatment, monitoring of complications and encouragement to continue taking prescribed medication. If possible, they should be provided with greater supply of medication in order to reduce the need to visit the health facility.
- Health facilities have been instructed to sanitize waiting areas and consultation rooms and have hand-washing stations for all clients. Those without chronic conditions or who are above age 60 should continue to seek routine health services.
- If CHWs come for routine household visits, they should conduct the visit outside if possible. If entering the household, CHWs should remain at least 2 meters away during the visit.
- CHWs are encouraged to adopt low/no touch techniques, however if they must touch a person (e.g. to measure a child), they should wear a mask and wash their hands thoroughly before they do so.

Antenatal, Delivery, Postnatal and Newborn Care

- Pregnant women should be cautioned that home births carry serious risks to mother and child.
- Pregnant women and mothers with newborns should continue to attend regular care appointments.
- Antenatal care, delivery, postnatal care, and newborn care are considered essential.
- Maintaining a healthy diet and good nutrition during pregnancy, taking iron/folic acid and any other prenatal supplements is important, especially at this time.
- Unless it's absolutely impossible, women should attend appointments alone and that children should not be brought to the health facility for ANC and FP consultations.

Family Planning

- It is important women still have access to family planning methods during COVID-19.
- The CHW should counsel the women on their family planning options during this time and provide oral contraceptive pills to the women if that is part of their responsibilities.
- The CHW can also refer the woman to the nearest health facility if she wants to use injectable family planning methods, like Depo or Sayana Press. The IUD may not be a priority of the health system during this time.

- The CHW should also counsel clients that COVID-19 can be spread through kissing or through direct contact.

Childcare/Immunizations

- It is important that children continue to receive their routine immunizations during COVID-19, as well as go to the health facility for well-baby services such as growth monitoring, vitamin A supplementation where recommended and deworming.
- Continued care-seeking for sick children should be encouraged for the management of major causes of childhood illness as an essential community-based service including for malaria, pneumonia, diarrhea and wasting.
- Childhood diarrhea needs to continue to be treated, even during COVID-19. It is ideal if zinc/ORS is available in the home in case of an episode of childhood diarrhea. If not, caregivers should seek care at the health facility, and not delay.

Section 5: Household emotional support

Key Messages:

- Recognize that different people within your household will have different stressors.
- As much as possible, reduce sources of stress by seeking information from reliable sources and reducing the time spent consuming news (1-2 times per day, rather than every hour).
- While providing responsive care to children may be difficult during this time, spending time with children and talking and playing with them will help children feel loved and secure.

Helping Adults

Be aware that in addition to stress from loss of certain sources of income and the absence of childcare support, the mere acts of social isolation, quarantine, and distancing can affect you and your family's psychological well-being.

- Recognize that different people within your household will have different stressors.
 - Older adults, especially in isolation and those with cognitive decline/dementia, may become more anxious, angry, stressed, agitated, withdrawn, overly suspicious during the outbreak/while in quarantine.
 - Share simple facts about what is going on and give clear information about how to reduce risk of infection in words older people with/without cognitive impairment can understand. Repeat the information whenever necessary.
- If you feel that you are becoming angry
 - Explore what's really behind your anger
 - Be aware of your anger warning signs
 - Identify your triggers
 - Learn ways to cool down quickly
 - Find healthier ways to express your anger
 - Stay calm by taking care of yourself
 - Recognize if you need professional help
- As much as possible, reduce sources of stress by:

- Seeking information from reliable sources and reducing the time spent consuming news (1-2 times per day, rather than every hour).
- Seeking support from family and friends via phone, email, text, etc.
- Setting aside some time each day to do something enjoyable—e.g., talking to a friend over the phone.
- Trying to maintain daily routines (including not skipping meals) and make time for physical activity and sleep.
- Using meditation or prayer to relieve stressful thoughts and feelings.
- Engaging in activities that in the past have helped with managing adversity.

Helping children

Teach your child about COVID-19:

- Have a conversation with the children about COVID-19 to understand what they really know about it.
- Validate their feelings and emotions and let them know all feelings are okay and provide assurance that this will come to an end.
- Correct any inaccurate information and educate them about the disease.

Activities for children can explain the virus but also keep children active when they are not at school, for example:

- Hand washing games with rhymes
- Make cleaning and disinfecting the house into a fun game
- Draw pictures of virus/microbes' that can be colored by children
- Explain personal protective equipment (PPE)/masks to children so that they are not scared

During times of stress and crisis, it is common for children to seek more attachment and be more demanding on parents. Discuss COVID-19 with your children in an honest and age-appropriate way. If your children have concerns, addressing them together may ease their anxiety.

- While providing responsive care to children may be difficult during this time, spending time with children and talking and playing with them will help children feel loved and secure.
- Children will observe adults' behaviors and emotions for cues on how to manage their own emotions during difficult times.
- Many children will be affected by school closures. It is important to keep children active and learning while still practicing physical distancing.
- Since children are likely to spend more time indoors, within the courtyard or outdoors (if indoor space or courtyard doesn't have enough space) and not in the company of their friends, provide them with playthings made from locally available child-friendly, safe materials.
- Observe what seems to catch a child's attention or interest and provide her/him with more playthings of that type.
- Reading books or magazines together. Here is a suggested short story compilation that can be printed to explain COVID-19 to children <http://www.elsiestayshome.com/> or "My Hero is You, Storybook for Children on COVID-19" – IASC Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings (IASC MHPSS RG) and is available in many languages.

Playing family games

The pandemic will also require some changes/additions to a child’s daily routine—especially physical distancing and around more frequent hand-washing and wearing a mask (if required by the government health authorities) when going outside.

- Teach children to wash their hands. Explain that hand washing can keep them healthy and stop the virus from spreading to others.
- Have a special song or a rhythm that you do every time you and the child wash hands. This will make hand-washing fun for the child and also allow her/him to remember how long she/he must wash their hands.
- Help the child make a routine around hand-washing—e.g., “we always wash hands after we come home.”
- Role-play with the child, or with the use of dolls or puppets describe how to maintain social distancing from others.
- Masks might feel scary to children. Inform children, that masks are just as important as getting dressed, washing hands - make it part of daily routine.
- To make a child feel comfortable with the notion of wearing a mask, first put a mask on a puppet or doll and then invite the child to try a mask.
- Help the child to make a routine using the mask—e.g., “when going outside we put on shoes and a mask.”
- Make sure the mask is comfortable for the child. Adjust as needed, if the child expresses any discomfort.

Section 6: Supporting those impacted by domestic violence and sexual assault

Key Messages

- If a victim of domestic abuse: keep information on domestic violence hotlines, social workers, child protection or nearest police station, and accessible shelters and support services. Be discreet so that your partner or family members do not find this information.
- Reach out to supportive family members or friends who can help practically (e.g. food, childcare) as well as in coping with stress.
- Develop a safety plan for their and their children’s safety in case the violence gets worse.

Helping Adults

Community members should be made aware of the increased risk of domestic violence during this pandemic and the need to keep in touch with and support those subjected to violence, and to have information about where help for survivors is available.

- It is important to ensure that it is safe to connect with domestic violence victims when the abuser is present in the home and that intervention will not lead to more harm for the victim or the person intervening.
- Understand that new abusive behavior may be related to stress caused by the COVID-19 and so the abuser may also need support.
- Individuals experiencing domestic violence may find it helpful to:

- Reach out to supportive family members or friends who can help practically (e.g. food, childcare) as well as in coping with stress.
- Develop a safety plan for their and their children's safety in case the violence gets worse.
 - This includes keeping numbers of neighbors, friends, and family whom you can call or go to for help;
 - Have accessible important documents, money, a few personal things to take with you if you need to leave immediately;
 - And plan how you might leave the house and get help (e.g. transport, destination).
- Keep information on domestic violence hotlines, social workers, child protection or nearest police station, and accessible shelters and support services. Be discreet so that your partner or family members do not find this information.

Supporting children who experience trauma and abuse

- Discuss the social and economic impact of COVID-19 and what that means to families, including yours (feelings of anxiety, isolation, fear, etc.).
- Explain that different people respond differently to stressful situations and some can become violent and abusive.
- Encourage them to report any abuse whether actual or perceived and assure them that all information will be kept confidential.
- If you suspect or a child expresses abuse, do not ignore it. Address it by either discussing with family members and report to appropriate authority. Be sure to think it through or discuss with someone you trust before acting as the action you choose to take can lead to more harm for the child.
- If abuse persists, the victim(s) should be removed from the abusive environment.

Annex 1: Bleach to water ratio to make a household disinfectant

Bleach Brand; Country Manufactured or Used	% Active Chlorine (base strength)	Volume of Water Added to 1 Part Bleach to Prepare a 1,000 ppm Concentration	Examples (1 teaspoon = 5mL; 1 tablespoon = 14.78mL)
JIK (Kenya, Liberia), Ajax (Jamaica),	3.5%	1:34	3 teaspoons bleach to 500mL water 1 tablespoon bleach to 500 mL water
Bref Javel (Senegal)	4%	1:39	5 teaspoons to 1L water
Household Bleach (USA, Indonesia, Canada); ACE (Turkey)	5.25%	1:52	2 teaspoons bleach to 500mL water
Blanquedor, Cloro (Mexico)	6%	1:59	1 teaspoons bleach 250 mL water
Household bleach (USA) (Clorox® and other brands)	8.25%	1:82	2.5 teaspoons bleach to 1L water
Blanquedor (Mexico), Lavindina (Bolivia)	10%	1:99	1 teaspoon bleach to 500mL water
La Croix Eau (Guinea)	14%	1:139	1.5 teaspoons to 1L water

Annex 2: How to make a facemask for home use

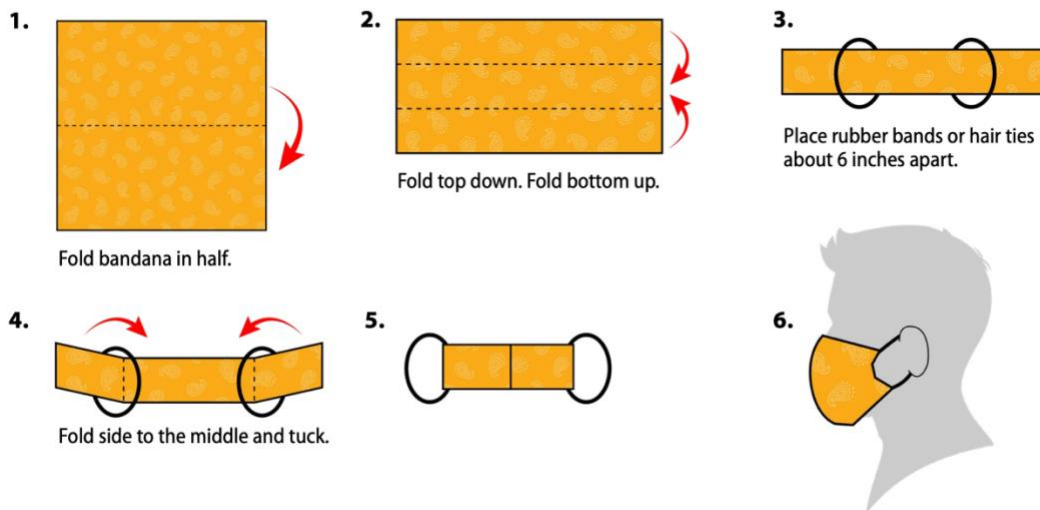
- Materials needed: Square piece of cotton cloth 50cm x 50cm (or 20 inches x 20 inches, around 2 hand lengths). You can use a cotton cloth: shirt, bandana, hand towel or other cotton cloth, 2 rubber bands or elastic hair ties. Use a fabric that, when held up to the sun, light does not outline the individual fibers.
 - Fold cloth in half
 - Fold into thirds by folding the top and bottom toward the center
 - Place folded cloth through the rubber bands and space them so there are 15cm between the rubber bands (15cm is around two palm widths); Fold the cloth to the middle
 - Place rubber bands around ears with folded portion of fabric covering the nose and mouth
 - Adjust so that it fits comfortably on your face

Bandana Cloth Face Covering (no sew method)

Materials

- Bandana (or square cotton cloth approximately 20"x20")
- Rubber bands (or hair ties)
- Scissors (if you are cutting your own cloth)

Tutorial



Annex 3: How to wash and wear



Annex 3.5: How NOT to wear a face mask

How **NOT** to wear a facemask



Do not wear the mask below nose



Do not push mask under your chin to rest on your neck



Do not leave chin exposed



Do not wear mask loosely with gaps on the sides



Do not wear mask so it covers just the tip of your nose



Do not wear a mask off of your face. Such as on the top of your head or on your chest

4

Annex 4: Hand washing Instructions and handwashing in water-constrained environments

Hand washing Instructions

 <p>0</p>	 <p>1</p>	 <p>2</p>
<p>Wet hands with water;</p>	<p>Apply enough soap to cover all hand surfaces;</p>	<p>Rub hands palm to palm;</p>
 <p>3</p>	 <p>4</p>	 <p>5</p>
<p>Right palm over left dorsum with interlaced fingers and vice versa;</p>	<p>Palm to palm with fingers interlaced;</p>	<p>Backs of fingers to opposing palms with fingers interlocked;</p>
 <p>6</p>	 <p>7</p>	 <p>8</p>
<p>Rotational rubbing of left thumb clasped in right palm and vice versa;</p>	<p>Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;</p>	<p>Rinse hands with water;</p>
 <p>9</p>	 <p>10</p>	 <p>11</p>
<p>Dry hands thoroughly with a single use towel;</p>	<p>Use towel to turn off faucet;</p>	<p>Your hands are now safe.</p>

Hand washing instructions where water is limited

Instructions

Step 1: Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.

Step 2: Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.

Step 3: Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.

Step 4: Rinse your hands well under clean, running water.

Step 5: Dry your hands using a clean towel or air dry them.

Explanation

Step 1: Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.

- **Why?** Because hands could become contaminated if placed in a basin of standing water that has been contaminated through previous use, clean running water should be used. However, washing with non-potable water when necessary may still improve health. The temperature of the water does not appear to affect microbe removal; however, warmer water may cause more skin irritation and is more environmentally costly.
- Turning off the faucet after wetting hands saves water, and there are few data to prove whether significant numbers of germs are transferred between hands and the faucet.
- Using soap to wash hands is more effective than using water alone because the surfactants in soap lift soil and microbes from skin, and people tend to scrub hands more thoroughly when using soap, which further removes germs.

Step 2: Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.

- **Why?** Lathering and scrubbing hands creates friction, which helps lift dirt, grease, and microbes from skin. Microbes are present on all surfaces of the hand, often in particularly high concentration under the nails, so the entire hand should be scrubbed.

Step 3: Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.

- **Why?** Determining the optimal length of time for handwashing is difficult because few studies about the health impacts of altering handwashing times have been done. Of those that exist, nearly all have measured reductions in overall numbers of microbes, only a small proportion of which can cause illness, and have not measured impacts on health. Solely reducing numbers of microbes on hands is not necessarily linked to better health 16. The optimal length of time for handwashing is also likely to depend on many factors, including the type and amount of soil on the hands and the setting of the person washing hands.

Step 4: Rinse your hands well under clean, running water.

- **Why?** Soap and friction help lift dirt, grease, and microbes—including disease-causing germs—from skin so they can then be rinsed off of hands. Rinsing the soap away also minimizes skin irritation 15. Because hands could become contaminated if rinsed in a basin of standing water that has been contaminated through previous use, clean running water should be used.

Step 5: Dry your hands using a clean towel or air dry them.

- **Why?** Germs can be transferred more easily to and from wet hands; therefore, hands should be dried after washing.

Tippy Tap

BUILD YOUR OWN TIPPY TAP

tippytap.org



2m forked sticks x2
1m straight sticks x2

Tools to dig

Water container

Gravel

Soap

Nail & candle

String



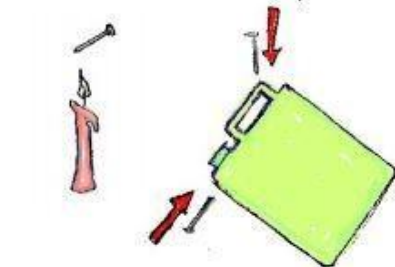
1. Dig two holes 18in deep and about 2ft apart



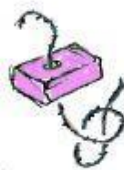
2. Place the forked sticks, ensure they are level



3. Fill holes with soil & rocks, and pack tightly



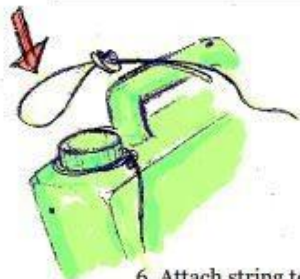
3. Heat the nail and make holes in the water container



4. Make a hole in the soap and thread string



5. Hang container & soap and fill with water



6. Attach string to water container

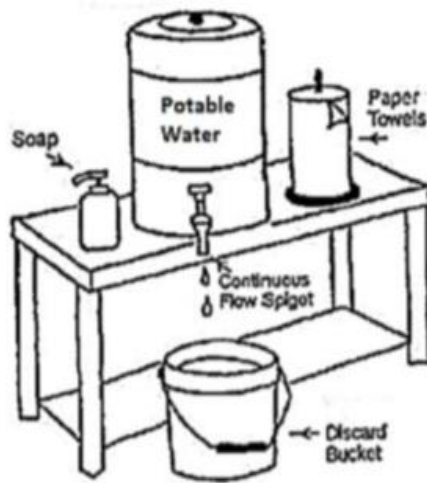
7. And to foot lever stick



8. Use gravel as basin to capture water

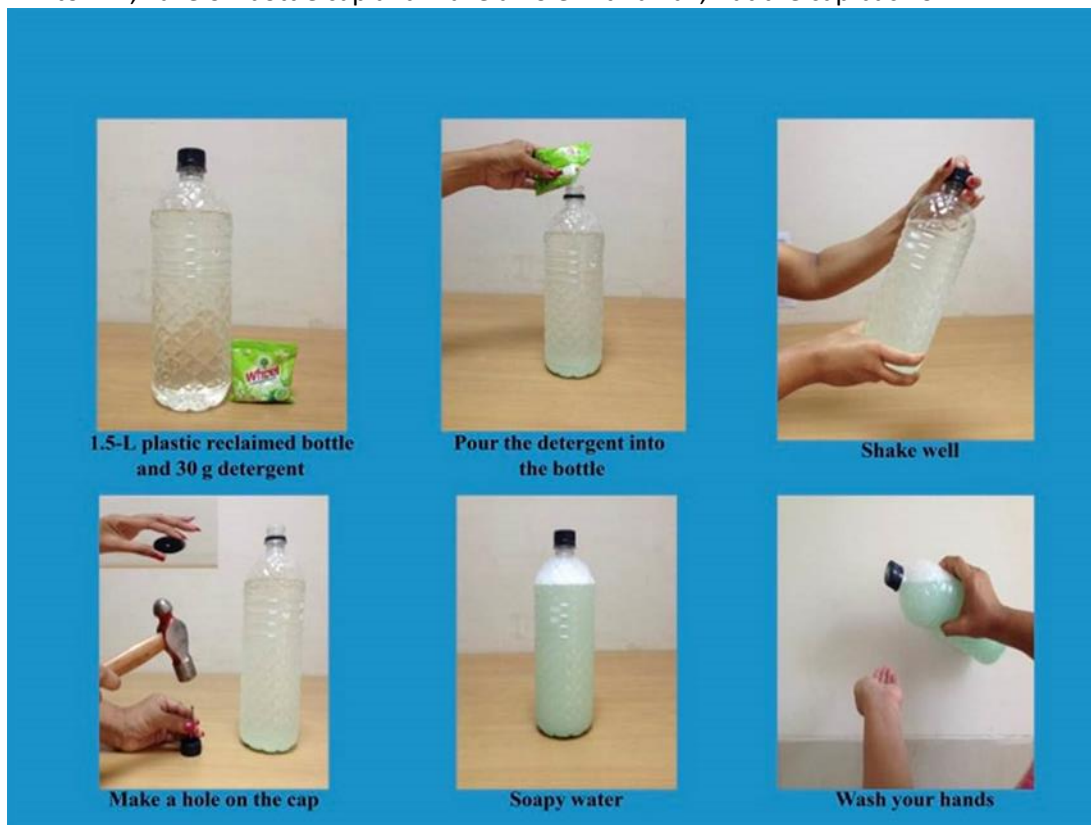


Example of handwashing stand from local materials



Soapy water

Take an empty 1500ml bottle and fill with water; Add 30 grams of laundry detergent; Shake bottle to mix; Take off bottle cap and make a hole with a nail; Put the cap back on.



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