Community Health Worker Program
COUNSELING CARDS
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1 - WHAT TO EXPECT DURING PREGNANCY
COMMON SYMPTOMS OF PREGNANCY

- **First trimester (1-3 months):** nausea, tiredness, tender breasts, mood swings, headaches, constipation, frequent urination, heartburn, changes in weight.
- **Second trimester (4-6 months):** body aches, stretch marks, darker areolas, blotchy skin, swelling of ankles/fingers/face, numbness in hands.
- **Third trimester (7-9 months):** heartburn, shortness of breath, tender breasts, hemorrhoids, trouble sleeping, swelling of ankles/fingers/face.

⚠️ Heavy leakage of blood or fluids is not a normal sign of pregnancy. If this occurs, go to the health facility IMMEDIATELY.

WHAT TO EXPECT DURING LABOR

- Signs you are about to go into labor include:
  - Clear or pink-colored mucus comes out of the vagina.
  - Clear water comes out of the vagina.
  - Pain (contraction) begins.

⚠️ When labor pains are 10 minutes apart, call for transport to the health facility immediately. If your planned transportation is unable to take you, call an ambulance or your CHW immediately.

- What you can do to ease the process of labor:
  - Take deep, slow breaths during contractions and breathe normally between them.
  - Urinate often.
  - Eat light foods and avoid heavy or oily foods.
  - Drink sweet liquids and warm tea.
  - Only push when there is a strong need to push.
2 - HAVING A HEALTHY PREGNANCY

- Free HIV Testing
### Visit the Health Facility for Antenatal Care Services
- Attend a minimum of 4 antenatal care (ANC) sessions during pregnancy:
  1. At least once during the first trimester.
  2. At least once during the second trimester.
  3. At least once during the seventh and eighth months.
  4. At least once during the ninth month.
- Encourage your partner to attend antenatal care sessions with you.

### Eat More Nutritious Foods
- During pregnancy, your body needs more food and nutrients to feed your baby.
- Take iron and folate supplements daily to prevent anemia, which increases risks for your baby and makes you feel weak.
- Eat plenty of nutritious foods, especially meat, fish, fruits, and vegetables.
- Cook with iodized salt to prevent developmental delays, learning disabilities, and poor physical growth in your baby.

### General Healthy Practices
- Use condoms to prevent transmission of HIV and other sexually transmitted infections, including during pregnancy.
- Avoid drinking alcohol, smoking cigarettes, or ingesting chemicals, which are harmful for your baby.
- Wash your hands with soap frequently, especially before eating, to prevent illness.
- Always sleep under a bednet to prevent malaria.
- Do not take extra medications unless given to you by a health worker.
3 - EATING WELL DURING PREGNANCY

**IMPORTANCE OF MATERNAL NUTRITION**
- It is important to eat more and consume high quality foods while pregnant and breastfeeding so you have enough nutrients for yourself and your child.
- Poor maternal nutrition can increase the likelihood that your baby is born preterm, too small, or with cognitive defects.
- Whenever possible, eat at least 5 times every day, including 3 meals and 2 snacks.
- Gaining weight during pregnancy is normal and means that your baby is growing well.
- Ask your health care worker to screen your Mid-Upper Arm Circumference (MUAC); if your MUAC measurement is less than 210mm, go to a health facility and enroll in a supplementary feeding program for treatment of acute malnutrition.

**CHOOSE HIGH QUALITY FOODS**
- Consume as many high-energy, iron-rich foods as possible (see NUTRITIOUS FOODS AND DIET DIVERSITY).
- Meat, fish, eggs, and green leafy vegetables are especially good for you and your baby during pregnancy.
- Take iron and folic acid supplements daily to prevent anemia; you can get these from the health facility during antenatal care visits.
- Make sure the salt you consume is iodized. Iodine helps your baby’s brain and body grow well.
- Drink plenty of water and eat lots of vitamin-rich fruits.

[CHW TIP:](#) Remind the pregnant woman to go to the health facility to get iron and folate supplements for free.
4 - VISITING THE HEALTH FACILITY FOR A HEALTHY PREGNANCY
WHY ANTENATAL CARE (ANC) IS IMPORTANT

- During antenatal care visits, you will receive important medications and preventive health services to ensure a safer pregnancy and healthy baby. This includes:
  - Iron and folate supplements.
  - HIV and syphilis testing.
  - Intermittent preventive treatment of malaria.
  - Tetanus immunization.
  - Deworming medication.

⚠️ It is important to get tested for HIV at your first ANC visit to protect your child from any chance of being born with HIV.
  - Many sexually transmitted infections do not present with symptoms, especially in the early stages. Discuss using condoms with your partner in a correct and consistent manner to be safe.
  - An HIV+ mother can prevent transmission of HIV to her baby during pregnancy, delivery, and breastfeeding with proper precautions, such as treatment with anti-retroviral (ARV) medications. If the mother tests positive for HIV, the ARV medication will be provided for free.

WHEN TO VISIT

- You should visit the health facility for ANC at least four times during pregnancy:
  - First visit: no later than third month of pregnancy.
  - Second visit: no later than sixth month of pregnancy.
  - Third visit: seventh or eighth month of pregnancy.
  - Fourth visit: ninth month of pregnancy.

⚠️ If you exhibit any danger signs (e.g., heavy bleeding, fever, seizures, dizziness, stomach pain, swelling of the legs or face, abnormal vaginal discharge or fluid loss, lack of fetal movements, persistent headaches), go to the health facility immediately.

 SqlDbType:

It is important to establish trust with the mother. It may help to explain that you are not there to find out her HIV status. Offer counseling on HIV testing for the male partner too.
LIFE-SAVING REASONS TO DELIVER AT A HEALTH FACILITY

- Delivering your baby at the health facility is the best way to ensure the health and safety of you and your child.
- In the case of illness or infection, the health facility will be able to provide life-saving treatment that may not be available at home.
- If your baby is born not breathing, the health facility has equipment and skilled birth attendants to resuscitate the baby.
- Delivering at the health facility ensures that your baby will receive life-saving essential care and immunizations immediately after birth.
- For HIV positive mothers, delivering at the health facility can help prevent transmission of HIV to the baby.

PREPARING TO DELIVER AT A HEALTH FACILITY

- To prepare for birth:
  - Discuss and identify the place of delivery with your male partner and health worker.
  - Identify how you will get to the health facility and make transportation arrangements in advance.
  - Arrange understanding with the father in case he is not around at the time of labor and delivery.
  - Have a backup transportation option.
  - Make sure you have the phone number of an ambulance or your CHW.
  - Make sure that you will have access to a phone in case of emergencies or to call transport.
  - Set aside items you will need for delivery (e.g., sanitary pads, clean cloths, blankets, soap, money for medical expenses).

CHW TIP:

If the woman consents, invite the male partner to join the discussion. It is important for the partner to be familiar with the birth plan and assist the pregnant woman when the time comes.
6 - BENEFITS OF FAMILY PLANNING
WHY IS FAMILY PLANNING IMPORTANT

- Family planning saves lives. Spacing births at least 2 years apart can prevent 30% of maternal deaths and 10% of child deaths.
- Closely spaced pregnancies put the health of mother and child at risk.
- Access to family planning is a human right. Women have the right to control over their bodies and decide how many children they want.
- Couples should decide together how many children they want and can afford to support.
- Preventing unwanted pregnancies reduces the likelihood of life-threatening abortions, infanticide, and children that are neglected or abused.
- Smaller families allow parents to invest more in each child and support their health, growth, education, and development.
- Family planning reduces the risk of adolescent pregnancy, allowing girls to stay in school and receive a full education.
- Condoms can protect against sexually transmitted infections, including HIV.
- Countries with higher rates of family planning experience greater economic growth.
- There are many different methods of family planning (see FAMILY PLANNING METHODS). Visit a health facility to determine which one is best for you and your family.
- To reduce risks to your health and your child’s health, you should wait at least 2 years before having another baby.
7 - FAMILY PLANNING METHODS

- IUD
- INJECTABLES (DEPO-PROVERA)
- IMPLANT
- MALE CONDOM
- FEMALE CONDOM
- ORAL CONTRACEPTIVES
- TUBAL LIGATION
- VASECTOMY
- LAM EXCLUSIVE BREASTFEEDING
7 - FAMILY PLANNING METHODS

GENERAL
- Abstinence from sex is the only 100% effective way to prevent unwanted pregnancies.
- Condoms are the only method that offer dual protection against sexually transmitted infections, including HIV, and unwanted pregnancies.
- Pregnant women should think about healthy timing and spacing between births. Most family planning methods can be used soon after birth.

SHORT TERM METHODS
- When used correctly, male and female condoms are 95-98% effective. A new male or female condom must be used each and every time.
- Contraceptive pills are highly effective but need to be taken daily without fail.
- Injections (such as Depo-Provera) are effective but need to be repeated every 3 months without fail.

CHW TIP:
Inform the household member if you are able to offer certain contraceptive methods (e.g., condoms, pills) and/or provide a referral to the health facility for consultation with a health care provider.

LONGER TERM REVERSIBLE METHODS
- An intrauterine device (IUD) can be inserted into the uterus to decrease the likelihood of pregnancy for up to 5 years. IUDs may also be inserted immediately after delivery of a child, either in the first 48 hours after birth or after 4 weeks postpartum.
- Contraceptive implants (such as Jadelle) can be inserted under the skin to prevent pregnancy for up to 3 years.

PERMANENT METHODS
- A vasectomy is a safe and permanent procedure for men and couples who do not want any more children. However, a vasectomy is not immediately effective so another form of birth control should be used for 3-4 months after the vasectomy.
- Tubal ligation is a safe and permanent procedure for women and couples who do not want any more children.

ALTERNATE METHODS
- For the first 6 months after giving birth, a new mother is unlikely to become pregnant if she is frequently, consistently, and exclusively breastfeeding her infant. However, this method is uncertain so another method of birth control is still highly recommended during that period.
8 - CARING FOR YOUR NEWBORN
ESSENTIAL CARE

- Keep your baby warm with direct skin-to-skin contact, especially for preterm and low birth weight babies.
  - Place your baby between breasts with legs along your ribs and head turned to the side.
  - Secure the baby to your body with a cloth.
- Initiate breastfeeding within the first hour of life. Children should be breastfed exclusively for the first 6 months as frequently as the child wants, day and night, at least every 2 to 3 hours.
- Keep the umbilical cord dry and clean until it drops off to prevent possible infections. If the cord gets soiled, wash it with soap and dry it thoroughly. Never apply ash, clay, mud, or cow dung to the cord.
- Delay bathing for at least 24 hours after birth; instead, clean the baby with a wet cloth and dry with a towel. Babies only need to be bathed 2-3 times a week for the first year of their life.

KEEPING YOUR NEWBORN HEALTHY

- Wash your hands with soap regularly. Ask anyone who touches your baby to wash his or her hands with soap first.
- You should bring your baby to the health facility at least 3 times in the first month:
  - Once as soon as possible after birth (if not delivered at a facility).
  - Once in the second week of life (day 7 to day 14).
  - Once in the fourth week of life (day 28 to 35).
- During this time, a CHW will also visit regularly (days 0, 3, 7, once during days 14-21, and 28) to make sure you and your baby are well.
- Bring your baby to the health facility for postnatal care to:
  - Make sure he/she is healthy and gaining weight steadily.
  - Receive life-saving immunizations.
  - Get treatment for infections. Bring your baby to the health facility immediately if you observe any danger signs (see RECOGNIZING DANGER SIGNS).
9 - EXCLUSIVE BREASTFEEDING FOR FIRST 6 MONTHS
BENEFITS OF EXCLUSIVE BREASTFEEDING

- All babies under 6 months should be breastfed exclusively (except when advised by a health care provider at the health facility or if you have a history of breastfeeding problems).
- Do not give your baby any water, foods, or other fluids during this time. Breast milk contains all of the nutrients your baby needs.
- Exclusive breastfeeding during the first 6 months reduces the risk of HIV transmission from mother to child.
- Breast milk contains antibodies that protect your baby from infections.
- Breastfeeding also helps you bond and feel close with your baby.

HOW TO FEED YOUR NEWBORN UP TO 1 WEEK

- Wash your hands with soap before breastfeeding and keep your nails trimmed.
- Initiate breastfeeding within 1 hour of birth.
- During the first few days after giving birth, you will produce a thick milk that is yellowish in color, called colostrum. This is very good for your baby and protects him/her from infection.
- Feed newborns on demand. During the first few weeks of life, it is best to feed the newborn every 2 to 3 hours. Wake the baby for feeding if needed.
- Each feeding session should take between 20 and 45 minutes.

HOW TO FEED YOUR CHILD UP TO 6 MONTHS

- Wash your hands with soap before breastfeeding and keep your nails trimmed.
- Breastfeed as often as your child wants. Your child might be hungry if he/she is fussing, sucking fingers, or moving lips.
- During the first 6 months, continue to feed your baby on demand 6-12 times a day.
10 - BREASTFEEDING TIPS
POSITIONING

- Breastfeeding is easiest when:
  - Your baby’s head and body are straight and turned towards you so that your stomachs are touching.
  - Your baby’s head is tilted slightly back so his/her chin is pressed against your breast, not his/her chest.
  - Your baby’s head and bottom are supported and facing you; baby does not have to turn his/her neck to suckle.
  - Most or all of the areola is in the baby’s mouth.
- Offer your baby your second breast if he/she empties the first. Alternate breasts when breastfeeding to prevent one breast from getting engorged.

PRODUCING MILK

- Drink more fluids and eat more so that you produce enough milk.
- Eat nutritious food and continue to take iron supplements.
- Frequent breastfeeding will help your body produce more milk. If your baby misses a feeding, you may express breast milk into a cup by gently squeezing behind and around your nipple.

WHEN AND HOW OFTEN TO BREASTFEED

- Breastfeed your baby immediately after delivery within the first hour of life.
- Breastfeed exclusively (no water or other fluids) for the first 6 months. At 6 months, introduce complementary foods and continue breastfeeding until the child turns 2.
- Breastfeed your baby as often as he/she wants, around 8-12 times a day.
- Expressed breast milk can be safely stored in a clean container, if kept in a cool place for up to 6 hours.

OTHER TIPS

- Always wash your hands with soap before breastfeeding.
- If your nipples become dry or cracked, you may apply breast milk as a moisturizer. If your breasts or nipples are severely cracked, painful, or swollen, and/or if there is a rash or ulcer, visit the health facility for medical attention.
11 - COMMON BREASTFEEDING PROBLEMS

[Images of breastfeeding positions, correct and incorrect, with arrows indicating the correct steps.]
11 - COMMON BREASTFEEDING PROBLEMS

- **Sore nipples** can be caused by poor attachment or positioning at your breast. To lessen the pain:
  - Ensure that the baby is attached and positioned correctly (see BREASTFEEDING TIPS).
  - Wash your breasts no more than once a day (without soap) and let them air dry before dressing.
  - Wear loose clothing to prevent dryness and irritation.
  - Put some breast milk on your nipples after feeding to lubricate the nipple.
  - If nipples are very red, shiny, flaky, and itchy, visit the health facility for treatment.

- **Not enough milk** can be caused by delayed breastfeeding, infrequent feeding, anxiety, stress, or exhaustion. To produce more milk:
  - Breastfeed your baby immediately after delivery.
  - Feed your baby more often, on a schedule.
  - Ensure that your baby is positioned correctly (see BREASTFEEDING TIPS).
  - Get plenty of rest, food, and water.

- **Engorged (very full) breasts** can be caused by beginning breastfeeding late, not feeding frequently enough or long enough, poor attachment, and/or incomplete emptying of breast milk. To alleviate the problem:
  - Breastfeed immediately after delivery (within an hour) and often.
  - Ensure baby is attached and positioned correctly (see BREASTFEEDING TIPS).
  - If baby cannot attach, try applying a warm compress to breast and massage until the areola is soft.
  - If your baby does not feed often, you can express milk yourself by massaging breasts.
  - If you have engorged breasts and fever, go to health facility.

- **Flat or inverted nipples** are a common problem that affect many women. You can still breastfeed your baby since babies feed from the entire areola and breast, not the nipple. If it is very painful, you may try the following strategies:
  - Rub or massage the nipple to get it to stand then encourage the baby to suckle from the breast.
  - If it continues to be a challenge to breastfeed, you may express the milk directly into baby’s mouth or feed with a clean spoon.
  - Consult a health worker at the health facility if problems persist.
12 - PROTECTING YOUR CHILD WITH VACCINATIONS
**IMPORTANCE OF VACCINATIONS**

- Vaccines protect your children from dangerous, life-threatening infections.
- Some of the most deadly childhood diseases can be prevented with vaccinations, including measles, diphtheria, whooping cough, hepatitis, tetanus, and haemophilus influenzae type B.
- Vaccines can also protect your child from a lifelong disability caused by polio, measles, or other illness.

**WHEN AND WHERE TO GET VACCINATIONS**

- Carry the child’s health card with you each time you visit the health facility to log when a child has received each dose.
- You can get your child vaccinated at the health facility or at outreach campaigns.
- It is important to get your child vaccinated at the following times:
  - **At birth:** BCG, OPV-0
  - **6 weeks:** OPV-1, Penta-1 (DTP, HepB, Hib), Pneumococcal-1*, Rotavirus-1*
  - **10 weeks:** OPV-2, Penta-2 (DTP, HepB, Hib), Pneumococcal-2, Rotavirus-2
  - **14 weeks:** OPV-3, Penta-3 (DTP, HepB, Hib), Pneumococcal-3
  - **9 months:** Measles-1
  - **18 months:** Measles-2*

**CHW TIP:**
* Pneumococcal vaccine, rotavirus vaccine, and the second dose of measles are highly encouraged but may not be included in the national policy yet. Learn your country’s national policy on vaccinations. Your country may also recommend vaccines not included on this list.
13 - CARING FOR YOUR YOUNG CHILD BETWEEN 0 AND 2 YEARS
**REGULAR CHECK-UPS AT THE HEALTH FACILITY**

- The first 2 years of life are critical to a baby’s health and development.
- You should bring your baby to the health facility regularly for:
  - Vaccinations (see **PROTECTING YOUR CHILD WITH VACCINATIONS**).
  - Early infant diagnosis for HIV. If you are HIV positive you should take your child to get tested at 6 weeks so that if your child is already infected, he/she can be started on treatment. Repeat HIV testing and prophylactic treatment should also be done at 9 months and 18 or 24 months due to continued HIV exposure through breastfeeding.
  - Nutrition and growth assessment.
  - Vitamin A supplements and deworming medication (every 6 months).
- Regular visits and routine monitoring are critical for early detection and prevention of serious illnesses.

**MEASURING YOUR CHILD’S GROWTH**

- Your child’s growth (length and weight) should be measured at the health facility or at monthly outreach campaigns at least once every 3 months.
- It is especially important to monitor your child’s growth during the first 2 years of life, a critical time for brain development, which will affect the child for the rest of his/her life.
- If your child is not growing taller or gaining weight, he/she may be malnourished and needs to consume more nutritious foods (see **NUTRITIOUS FOODS AND DIET DIVERSITY**).
14 - FEEDING YOUR CHILD BETWEEN 6 MONTHS AND 2 YEARS

**GENERAL TIPS**

- Continue breastfeeding your child until he/she is at least 2 years old.
- When a baby turns 6 months, begin feeding your child thick porridge or well-mashed nutrient rich foods in addition to breast milk (see NUTRITIOUS FOODS AND DIET DIVERSITY), including animal-source foods, fruits, and vegetables.
- Wash your hands and your child’s hands with soap before preparing food and feeding your child.
- Children of different ages require different types, amounts, and frequency of feedings.

**AGE APPROPRIATE FEEDING PRACTICES**

<table>
<thead>
<tr>
<th>Age</th>
<th>Texture</th>
<th>Frequency</th>
<th>Amount (per meal)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>At 6 months</strong></td>
<td>Soft porridge and well-mashed foods</td>
<td>2-3 times per day</td>
<td>2-3 tablespoons</td>
</tr>
<tr>
<td><strong>From 6 up to 9 months</strong></td>
<td>Mashed foods</td>
<td>2-3 times per day + 1-2 snacks</td>
<td>1/2 cup (125 ml)</td>
</tr>
<tr>
<td><strong>From 9 up to 12 months</strong></td>
<td>Finely chopped foods</td>
<td>3-4 times per day + 1-2 snacks</td>
<td>2/3 cup (167 ml)</td>
</tr>
<tr>
<td><strong>From 1 up to 2 years</strong></td>
<td>Family foods (small pieces)</td>
<td>3-4 times per day + 1-2 snacks</td>
<td>1 cup (250 ml)</td>
</tr>
</tbody>
</table>

- Make sure your child receives a vitamin A supplement once every 6 months (twice a year) with solid foods. This will ensure that he/she consumes enough nutrients to grow healthy and strong. This can be obtained at the health facility or during health outreach campaigns.
15 - FEEDING YOUR CHILD BETWEEN 2 AND 5 YEARS
WHAT TO FEED YOUR CHILD

- Give your child a variety of foods, especially animal-source foods, fruits, and vegetables (see NUTRITIOUS FOODS AND DIET DIVERSITY).
- Give at least 1 full cup of food at each meal.
- Feed your child at least 5 times each day, including 3 meals and 2 snacks.

TIPS FOR FEEDING YOUR CHILD

- Wash your hands and your child’s hands with soap before preparing food and feeding your child.
- If your child refuses a new food, show them that you like the food and continue trying. Be patient.
- Talk with your child during the meal and maintain eye contact.
- Make sure your child receives a vitamin A supplement once every 6 months (twice a year), which can be received at the health facility or during health outreach campaigns.
16 - RECOGNIZING DANGER SIGNS
DANGER SIGNS FOR CHILDREN UNDER 5

⚠️ If your child exhibits any of the following symptoms, take him/her to a health facility immediately:

- Refusal to feed / inability to eat or drink anything.
- Weakness, inactivity, or unconsciousness.
- Vomiting (difficulty keeping food or liquids down).
- Diarrhea (more than 3 loose stools a day) for more than 2 days (in newborns) or for more than 7 days (in children under 5) and/or blood in stool.
- Convulsions (rapid and repeated contractions of the body, shaking).
- Rapid breathing or chest indrawing, which can be a sign of respiratory infection.
- Fever for 3 days or more.
- Rapid loss of weight or swelling of the feet, which are signs of malnutrition.
- Prolonged irritability and/or excessive crying.

CHW TIP:

Make sure that the household has your phone number and can contact you in case of emergency.
HOME-BASED CARE FOR DIARRHEA

1. Oral rehydration salts
2. ZINC
3. Add 30 minutes
4. Mix in water
5. Administer to child
6. Breastfeeding

Instructions:
- Add oral rehydration salts to water.
- Mix ZINC powder with water.
- Administer to child.
- Continue breastfeeding.

Note:
- Rehydration is crucial for preventing dehydration.
- Zinc supplementation helps to prevent diarrhea.
- Breastfeeding maintains vital nutrients during recovery.
WHY IS DIARRHEA DANGEROUS

- Oral rehydration salts (ORS) replace the water and salts that the child loses from diarrhea. It prevents the child from getting sicker.
- Zinc replenishes lost nutrients and helps to make the diarrhea less severe. It may shorten the number of days of diarrhea.
- Sips of ORS should be given continually for 1-3 days, especially after each loose stool.
- A new solution of ORS should be made fresh each day with clean water.
- If the child is less than 6 months, also continue breastfeeding regularly. If the child is over 6 months, give plenty of water and other non-sugary liquids.
- Zinc should be given once a day for 10-14 days. Children under 6 months should receive 1/2 a 20mg tablet daily; children 6 months to 5 years should receive one 20mg tablet daily.

OTHER TIPS

- Continue to breastfeed your child often when he/she has diarrhea.
- For children over 6 months of age, feed plenty of liquids and nutrient dense foods (fruits, vegetables, and animal foods).
- Prevent diarrhea by:
  - Washing hands with soap regularly (see PREVENTING ILLNESS BY WASHING HANDS WITH SOAP).
  - Always treating water before use (see MAKING WATER SAFE TO DRINK).
  - Using an improved sanitation facility (see PROPER SANITATION).
  - Handling food safely (see FOOD SAFETY).
- Making sure your child is fully vaccinated (see PROTECTING YOUR CHILD WITH VACCINATIONS).

⚠️ If diarrhea persists for more than 7 days; if child is weak, unconscious, or has sunken eyes; or if there is blood in the stool, bring him/her to the health facility immediately.

CHW TIP:
If a child under 5 has diarrhea at the time of visit, provide ORS and zinc for free and show the caregiver how to prepare and administer the treatment regimen. Provide instructions on the duration and frequency of treatment.

CHW TIP:
If ORS is not available, show the caregiver how to make a homemade solution:
Dissolve 1/2 a small spoon (a pinch) of salt and 6 small spoons of sugar into 1 liter of clean drinking water.
Healthy and Well-Nourished

Acute Malnutrition (Wasting)

Acute Malnutrition (Oedema)

Chronic Malnutrition (Stunting)
TYPES OF MALNUTRITION

- Acute malnutrition is a sudden deterioration in nutritional status. Symptoms include wasting (thinness) or nutritional oedema.
- Chronic malnutrition is a failure of growth over time and is characterized by short height and poor brain development.

WHAT TO DO IF YOUR CHILD IS MALNOURISHED

- The CHW will measure your child’s arm every month using the MUAC tape.
- This MUAC tape tells us if your child is malnourished. If the MUAC measurement is in the:
  - Yellow zone (<125 mm): your child is moderately malnourished and needs supplementary foods.
  - Red zone (<115 mm): your child is severely malnourished and needs immediate medical attention.
- If your child is malnourished and has any other medical complications, take your child to the health facility immediately.
- If your child does not have any other complications, take your child to the health facility for treatment as soon as possible.

WHAT TO EXPECT AT THE HEALTH FACILITY

- Treatment of Moderate Acute Malnutrition (MAM)
  - A health worker will conduct a medical assessment of your child and provide treatment as necessary.
  - You will receive a 2-week ration of nutrient-dense food supplements for your child and routine medication as per treatment protocols.
  - Please make sure your child eats the appropriate amount at home each day; the health facility will provide you with instructions.
  - Bring your child back to the health facility every 2 weeks until he/she has recovered.

- Treatment of Severe Acute Malnutrition (SAM)
  - A health worker will conduct a medical assessment of your child and provide medical treatment as necessary.
  - You will receive Amoxicillin, an antibiotic, which should be administered 3 times a day for 7 days.
  - You will receive high-energy, nutrient-dense “ready to use therapeutic food” (RUTF) for your child.
  - Please do not give your child anything other than breast milk, clean drinking water, and RUTF until your child has recovered.
  - You may receive other medications for your child; administer as instructed by the health worker.
19 - HOME-BASED CARE FOR CHILDREN IN FEEDING PROGRAMS
# 19 - Home-Based Care for Children in Feeding Programs

## If Your Child Has Moderate Acute Malnutrition (MAM), He/She Should Be Enrolled in a Supplementary Feeding Program (SFP)
- Supplementary foods are high-energy, nutrient dense foods designed to treat your child.
- Feed your child the daily ration as instructed by your health care provider.
- Always wash your hands with soap before feeding your child.
- Return to the health facility every 2 weeks for a follow up assessment and additional rations until the child is discharged.

## If Your Child Has Severe Acute Malnutrition (SAM) Without Medical Complications, He/She Should Be Enrolled in an Outpatient Therapeutic Feeding Program (OTP)
- Ready to use therapeutic foods (RUTF) are high-energy, nutrient-dense foods designed to treat your child.
- Feed your child the daily ration of RUTF as instructed by your health care provider.
- Always wash your hands with soap before feeding your child.
- Do not share RUTF with any other family members.
- Continue breastfeeding if your child is under 2 years of age. Breastfeed first before giving RUTF.
- Administer medications as prescribed.
- Return to the health facility every week for a follow up assessment and additional rations until the child is discharged.
- If your child has SAM with medical complications, he/she should be admitted into an inpatient therapeutic feeding program.

## To Prevent Malnutrition
- Feed your child nutritious foods regularly (see Nutritious Foods and Diet Diversity; Feeding Your Child).
- Make sure your child is fully immunized (see Protect Your Child with Vaccinations).
- Every 6 months, your child should receive a vitamin A supplement and deworming medication.
- If your child has diarrhea, make sure he/she receives treatment with ORS and zinc.
- Always wash your hands with soap before preparing food and feeding child.
20 - PREVENTING MALARIA WITH BEDNETS
**HOW MALARIA IS TRANSMITTED**
- Malaria is a dangerous disease transmitted through mosquito bites.
- Infected mosquitos carry diseases from person to person.
- Mosquitos bite at all times of day, but they especially like to bite in the evenings and at night.
- Malaria can be deadly especially for children under 5 years and pregnant women.
- Malaria is one of the major causes of spontaneous abortion in pregnant women. It can also cause preterm delivery, low birth weight, stillbirth, congenital infection, and maternal death.

**HOW TO PREVENT MALARIA**
- Bednets protect you and your family from being bitten by mosquitos while you sleep.
- Insecticide-treated bednets contain a poison that kills mosquitos, but they are safe for you and your family.
- You and your family should sleep under an insecticide-treated bednet every night. Each bed and sleeping location requires its own separate bednet.
- Bednets should be replaced if they develop large holes that cannot be repaired. If kept in good condition, they should last for 3-4 years and then may need to be replaced.

**SIGNS AND SYMPTOMS**
- Common signs and symptoms of malaria include: fever, chills, sweating, headache, fatigue, nausea, and pain.
- If you or your household members display any of these symptoms, call the CHW or go to the health facility for assessment and treatment.
21 - HOW TO USE AND MAINTAIN A BEDNET
**BEDNET USE**
- If you are using a new insecticide-treated bednet, hang it outside for one day to air out before use.
- Ask a family member, neighbor, or friend to help you hang the bednet.
- Hang the bednet from the roof or walls using the strings provided on the corners of the net. The bednet should be hung directly over each bed or sleeping area.
- Tuck the net under the mat or mattress so mosquitos cannot enter.
- During the day, flip up or loosely tie the bednet back so it does not get damaged.
- Do not place any fire sources such as candles, coal pots, or cigarettes near the bednet.

**BEDNET MAINTENANCE**
- Check the bednet regularly for damage.
- When the bednet becomes dirty, wash it with soap and water, and then dry it outside.
- Repair any hole that appears in the net by mending or stitching, as you would with any piece of cloth. This will prevent holes from getting bigger.
- If the bednet is too damaged to repair, inform the CHW immediately to receive a replacement bednet.
22 - PROTECTING WATER FROM CONTAMINATION
DANGERS OF WATER CONTAMINATION

- Water can contain invisible amounts of feces, bacteria, viruses, and parasites.
- Even water retrieved from a safe water source can become contaminated during collection, transport, handling, and storage.
- Ingestion of contaminated drinking water is a leading cause of illness and diarrheal disease.

STORING WATER IN A SAFE CONTAINER

- A safe water storage container:
  1. Is made of plastic or ceramic.
  2. Has a tight-fitting lid or cover.
  3. Has a spigot or small opening that allows water to be poured. If there is no spigot, use a long-handled ladle to scoop water from the container to avoid touching the water with hands.

PREVENT CONTAMINATION DURING COLLECTION, TRANSPORT, HANDLING, AND STORAGE

- Use a safe storage container when collecting water; do not use leaves or other materials to cover the container as they may contaminate the water.
- Do not allow hands or other objects to come into direct contact with water.
- If water comes into contact with hands, it must be treated before use (see MAKING WATER SAFE TO DRINK).
- If scooping water, use a long-handled ladle so hands do not come into contact with water.
- Containers should be cleaned with soap or a chlorine solution regularly.
23 - MAKING WATER SAFE TO DRINK
WHY DISINFECT WATER BEFORE DRINKING

- Drinking unsafe water can cause diarrhea and other illnesses. These illnesses can be deadly, especially for children under 5 and pregnant women.
- Disinfection with chlorine tablets or chlorine solution (e.g., WaterGuard) is the preferred method for household water treatment.

HOW TO DISINFECT

**CHLORINATION (PREFERRED METHOD)**
1. Add chlorine solution or tablet to low-turbidity water* according to the instructions on the package.
2. Wait 30 minutes before drinking.

**SOLAR DISINFECTION**
1. Fill clean, colorless plastic bottle with clear water*.
2. Shake bottle to oxygenate.
3. Place bottle in direct sunlight, preferably on a rack or corrugated metal roof, for a minimum of 6 hours. (Solar disinfection may require up to 48 hours on a cloudy day, depending on the intensity of sunlight.)
4. Allow water to cool.
5. Solar disinfection may not be appropriate in all climates and is not effective on rainy days. Consider using chlorination as an alternate method.

**BOILING**
1. Bring water to a rolling boil (many large bubbles on the surface) and continue boiling for 1 minute.
2. Allow water to cool. Store properly in a covered container to avoid recontamination.
3. Boiling may contribute to indoor air pollution and is a relatively expensive method. Consider using chlorination instead.

*CHW TIP:
*Turbid (unclear) and murky water should be filtered before treating with chlorine solution or solar disinfection.
IMPORTANCE OF FOOD SAFETY
- Dirty hands, dishes, and surfaces may contain tiny amounts of feces that when ingested can cause diarrhea and illness.
- Raw animal products, including eggs and milk, can carry dangerous bacteria and viruses that can be transferred to other foods during handling and preparation. Cooking at high temperatures kills these germs.

KEEPING THE COOKING AREA CLEAN
- Always wash hands with soap before handling food.
- Wash and sanitize all surfaces/equipment used for food preparation.
- Wash cups, dishes, and utensils with soap and rinse with disinfected water before using.
- Keep clean dishes off of the ground and dry them on an elevated dish rack.

PROPER HANDLING OF FOOD
- Keep raw meats, poultry, and fish separate from other foods. Use separate equipment and utensils (e.g., cutting board and knife) when handling raw animal foods.
- Wash fruits and vegetables with clean water, especially if eaten raw.
- Keep foods covered to prevent flies and rodents from contaminating food.

IMPORTANCE OF COOKING THOROUGHLY
- Cook meat, poultry, and fish thoroughly, until juices are clear and no longer pink.
- Cooked food should be eaten within 2 hours; after that it must be recooked to kill germs that may have grown in the food during that time.
WHAT TO EAT IN THE HOUSEHOLD

- You and your family should eat 3 meals and 2 snacks per day.
- Each meal should include foods from the 3 main categories:
  - **Energy-giving foods (carbohydrates):** e.g., maize, sweet potatoes, green bananas, millet, rice, wheat, sorghum, cassava, Irish potatoes.
  - **Body-building foods (proteins & fats):** e.g., meat, milk, butter, eggs, fish, soya beans, beans, groundnuts, peas.
  - **Protective foods (vitamins and minerals):** e.g., carrots, eggplant, fruits, onions, bananas, dark leafy greens.
- Always use iodized salt when cooking and preparing food to promote brain development.

IMPORTANT FOODS FOR CHILDREN UNDER 5, PREGNANT WOMEN, AND NURSING MOTHERS

- Nutrient rich foods are especially important for young children, pregnant women, and nursing mothers.
- Children grow quickly and need a lot of nutrients to develop their brains and bodies.
- Make sure you and your child eat:
  - **Iron-rich foods:** e.g., meat, fish, eggs, green leafy vegetables, groundnuts, beans.
  - **Vitamin A rich foods:** e.g., liver, eggs, orange sweet potatoes, pumpkins, dark leafy greens, carrots.
  - **Folic-acid rich foods:** e.g., dark leafy greens, legumes, citrus fruits, juices.

CHW TIP:
If it is culturally appropriate, encourage the household not to share plates and to provide a separate plate of food for each member of the household, including young children.

FOOD PREPARATION

- All family members should wash their hands with soap and clean water before preparing food and eating.
- Use safe drinking water and follow food safety guidelines (see FOOD SAFETY; MAKING WATER SAFE TO DRINK).

BUYING AND STORING IODIZED SALT

- Check packaging for the name and address of the producer and expiration date. Dispose of salt after the expiration date.
- Use moisture-proof packages such as plastic bags or bottles, and always keep containers closed.
- Store iodized salt away from direct sunlight, excessive heat, and humidity. Store on shelves with adequate ventilation.
26 - PROPER SANITATION
WHY HYGIENE AND SANITATION MATTERS

- Poor sanitation is the leading cause of illnesses such as diarrhea, which can be deadly, especially for young children.
- Using an improved sanitation facility helps prevent the spread of illness by preventing waste from coming into contact with water sources, open fields, and flies.
- Handwashing with soap prevents dirty hands from coming into contact with food or a person's mouth (see HANDWASHING).
- Food safety ensures that foods from the field are cleaned and properly cooked before eating and keeps flies from contaminating food (see FOOD SAFETY).
- Water disinfection makes contaminated water safe to drink (see MAKING WATER SAFE TO DRINK).
- A “protective play space” keeps children away from animal feces and other dirty objects on the ground.

BUILDING / MAINTAINING A LATRINE

- A proper pit latrine should be 4-5 meters deep and have:
  1. A solid slab or platform. This can be made from concrete, cement, logs with earth and mud, or any other material as long as it is solid and adequately covers the pit.
  2. A vent pipe to reduce odor and prevent flies from breeding.
  3. Walls, a roof, and a door for privacy.
- The latrine should be built at least 30 meters away from any water source.
- Clean the latrine regularly using a broom, water, and disinfectant.

CHW TIP:
If the household does not have a latrine and expresses interest in building one, inform the WASH Facilitator to follow up at the household.
27 - HOW TO SET UP A HANDWASHING STATION

1. Dig a hole
2. Dig another hole
3. Build a wooden frame
4. Place a pot of water
5. Place a block of soap
6. Place a container for rinsing
7. Place a container for soap
8. Build a small shelter
9. Hang a cloth for drying hands
MATERIALS

- A basic, low-cost “tippy tap” can be constructed using locally available materials.
- You will need: 2m forked sticks (x2) and 1m forked sticks (x2), spade or other digging tool, water container (e.g., jerry can, plastic bottle), soap, string, and a nail or other object to make holes in the water container and soap.

INSTRUCTIONS

1. Identify a location within 10 paces of the latrine to set up a handwashing station.
2. Dig 2 holes 0.5 meter deep and 1 meter apart.
3. Place the forked sticks in the holes, then fill the holes with soil and rocks. Pack tightly.
4. Heat the nail and make 2 holes in the water container.
5. Make a hole in the soap and tie it to the string.
6. Hang the soap and water container from a stick that is supported on the forked sticks.
7. Fill the water container with clean water and tie a string to the top of the container. Attach the other end of the string to another stick that will be used as a foot lever.
8. Make a gravel basin between the sticks to prevent the water from forming a puddle or muddy area.

ADDITIONAL TIPS

- Never allow hands to come into direct contact with the water container; while washing your hands, use the foot lever to tilt the water container or ask someone else to dispense water.
- Always keep soap near the handwashing station.
- Only fill the water container with clean water. Even water retrieved from a safe water source may be contaminated (see MAKING WATER SAFE TO DRINK).
28 - PREVENTING ILLNESS BY WASHING HANDS WITH SOAP
WHEN TO WASH HANDS

- Handwashing with soap should be done frequently to limit illness.
- The most important times to wash hands with soap are:
  1. After using the toilet.
  2. Before handling and preparing food.
  3. Before feeding a child.
  4. After cleaning a child or handling feces.
  5. Before eating.

HOW TO WASH HANDS

- How to wash hands with soap:
  1. Wet hands with clean water.
  2. Lather hands and nails thoroughly with soap.
  3. Rinse hands well with clean water.
  4. Dry hands with a clean towel or air dry.
- If soap is not available, ash can also be used to clean hands.
- Always use soap or ash! Rinsing hands with water alone is less effective at preventing infection and illness.

CHW TIP:
Set a good example and always wash hands with soap before handling newborns, assessing danger signs, and administering medication.
If possible, demonstrate the proper steps for washing hands with soap.
29 - DISPOSING OF WASTE SAFELY
WHY IS IT IMPORTANT TO DISPOSE WASTE SAFELY
- Solid wastes can lead to groundwater contamination, the spread of disease, air pollution, and odor.
- Proper disposal and maintenance of waste is important for protecting your health, keeping your environment clean, and keeping away pests.
- Always dispose of waste in a properly maintained refuse pit.
- You may keep a separate pit for composting food and biodegradable waste (e.g., animal, farm, and kitchen waste), which can then be used as manure.
- Reuse and recycle metal, glass, paper, and cloth whenever possible.

HOW TO MAINTAIN A SAFE REFUSE PIT
- Your refuse pit should be at least 1.5 meters deep.
- Keep your refuse pit at least 10 meters away from the kitchen and a water source.
- At least once a week, cover waste with a layer of soil to prevent flies and rodents from breeding.
- When the pit is full, cover with a thick layer of soil and dig a new pit.

HOW TO SAFELY DISPOSE OF FECES
- Always dispose feces in a latrine. If a latrine is not available, dispose of feces in a separate pit and cover regularly with dirt (see PROPER SANITATION).
- Wash your hands with soap and water after handling feces each time (see PREVENTING ILLNESS BY WASHING HANDS WITH SOAP).