# MAMI Assessment Guide

Management of small & nutritionally at-risk infants under six months & their mothers

---

## 1. Danger Signs

### General Danger Signs:
- Unable to breastfeed / drink
- Vomits everything
- Health worker concerned about mother's mental health

### MAMI-Specific Danger Signs:
- Bilateral pitting oedema (+, ++, ++++)
- Mother appears out of touch with reality or at risk of harming herself or infant; visible physical neglect (mother or infant)

---

## 2. Clinical Signs and Symptoms

### IMCI Main Symptoms:

**Ask:**
- Diarrhoea?
- Fever?
- Cough?
- Any other problem?

**Look:**
- Severe pallor (anaemia)
- Any other illness (refer to IMCI)

**Check** for congenital condition/disability causing feeding difficulty:
- Breathlessness or excessive sweating when feeding
- Coughing and eye tearing while feeding (signs of unsafe swallowing)
- Abnormal tone or posture
- Cleft lip or palate
- Tongue tie

**Measure:**
- WAZ or WLZ
- MUAC

---

## 3. Infant Growth

**Ask:**
- Has infant recently lost weight or failed to gain adequate weight, including neonate who has not regained birthweight? (reported or documented)

**Measure:**
- WAZ or WLZ
- MUAC

---

## 4. Key MAMI Risk Factors

**Ask:**
- Are you the infant's biological mother? If not: what is the reason?
- Is the infant born too early (preterm) or too small (low birthweight)?
- Is infant from multiple birth?
- Is mother an adolescent (under 19 years of age)?
- If mother HIV+: any concerns?
- Does infant cry excessively or have sleep problems?
- Any other concerns (e.g. maternal TB, other illness, colic)?

**Measure:**
- Mother MUAC

---

## 5. Screening Infant Feeding Risk

**Ask:**
- Over the last two weeks, how often have you been bothered by the following problems:
  - Little interest or pleasure in doing things?
  - Feeling down, depressed, or hopeless?

**Calculate Screening Score**

**Check:**
- Health worker concerned about mother's mental health

---

## 6. Screening Maternal Mental Health

**Notes**
1. Refer to MAMI Counselling Cards and Support Actions Booklet.
2. Cleft lip/palate and tongue tie may not require hospital referral depending on severity, age of infant, and service availability. Referral to community-based specialist may be sufficient.
3. If a child has a congenital condition/disability but normal anthropometry, then non-urgent hospital referral is appropriate.
4. Failure to gain adequate weight is defined as weight gain less than 5g/kg/day or failure to gain weight as reported by the mother.
5. The decision to enrol infants from multiple births or from adolescent mothers with MUAC less than 230mm less than 230mm based on these criteria alone will depend on case load and context.
6. The MAMI Maternal Mental Health Screening uses the Patient Health Questionnaire-2 (PHQ-2) which screens for depression. Information on calculating the score is provided in the MAMI Maternal Mental Health Summary

---

## 7. Assessment

### Assess

<table>
<thead>
<tr>
<th>Signs</th>
<th>Classify</th>
<th>Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANY ONE OR MORE OF THE FOLLOWING SIGNS:</td>
<td>VERY SEVERE DISEASE (INFANT)</td>
<td>Provide pre-referral treatment according to IMCI</td>
</tr>
<tr>
<td>- Not able to feed at all or</td>
<td>Refer URGENTLY to hospital (treatment of acute problem(s) plus MAMI-specific support)</td>
<td></td>
</tr>
<tr>
<td>- Convulsions or</td>
<td>OR</td>
<td></td>
</tr>
<tr>
<td>- Convulsions or</td>
<td>If referral is REFUSED or NOT FEASIBLE, treat at nearest health facility until referral is feasible</td>
<td></td>
</tr>
<tr>
<td>- Severe chest indrawing or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Fast breathing or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- High or low body temperature or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Movement only when stimulated or no movement at all or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Bilateral oedema (+, ++, or ++++)</td>
<td>SEVERE MENTAL HEALTH CONCERN (MOTHER)</td>
<td>Refer URGENTLY to specialised MHPSS services</td>
</tr>
</tbody>
</table>

### Classify

<table>
<thead>
<tr>
<th>Any One or More of the Following Signs:</th>
<th>High Risk (Infant)</th>
<th>Manage any minor illness according to IMCI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants under 6 weeks: MUAC less than 110 mm</td>
<td>Enrol in MAMI Outpatient Care</td>
<td></td>
</tr>
<tr>
<td>Infants 6 weeks to less than 6 months: MUAC less than 115 mm or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WAZ less than -2 or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WLZ less than -2 or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recent weight loss or failure to gain weight or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonate has not regained birthweight by two weeks of age</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Alert

**IMCI Main Symptom(S) Requiring Hospital Referral or**

**Any Congenital Condition/Disability Causing Feeding Difficulty**

**Infant Feeding Screening:**

**Any One or More of the Following Signs:**

**Table:**

<table>
<thead>
<tr>
<th>Infant Feeding Screening</th>
<th>Moderate Risk (Infant and/Or Mother)</th>
<th>Enrol in MAMI Outpatient Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant absent or dead</td>
<td>Conduct FEEDING ASSESSMENT to determine level of risk</td>
<td></td>
</tr>
<tr>
<td>Infant born preterm or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low birthweight or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multiple birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adolescent mother (under 19 years)</td>
<td>Conduct MATERNAL MENTAL HEALTH ASSESSMENT to determine level of risk</td>
<td></td>
</tr>
<tr>
<td>Mother HIV+ with concerns</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant cries excessively / has sleep problems or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother MUAC less than 230mm or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any other concerns</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Maternal Mental Health Screening:**

**Screening score 3+ or**

- Health worker concerned about mother's mental health

**Low Risk (Infant and Mother)**

- Praise & reassure
- Refer to routine healthcare & IYCF counselling

**Notes:**
1. Refer to MAMI Counselling Cards and Support Actions Booklet.
2. Cleft lip/palate and tongue tie may not require hospital referral depending on severity, age of infant, and service availability. Referral to community-based specialist may be sufficient.
3. If a child has a congenital condition/disability but normal anthropometry, then non-urgent hospital referral is appropriate.
4. Failure to gain adequate weight is defined as weight gain less than 5g/kg/day or failure to gain weight as reported by the mother.
5. The decision to enrol infants from multiple births or from adolescent mothers with MUAC less than 230mm less than 230mm based on these criteria alone will depend on case load and context.
6. The MAMI Maternal Mental Health Screening uses the Patient Health Questionnaire-2 (PHQ-2) which screens for depression. Information on calculating the score is provided in the MAMI Maternal Mental Health Summary