

Infant and Young Child Feeding



Counselling Cards for Community Workers

Acknowledgments

This set of *Counselling Cards* is part of *The Community Infant and Young Child Feeding (IYCF) Counselling Package*, developed under a strategic collaboration between the United Nations Children's Fund (UNICEF) New York and the combined technical and graphic team of Nutrition Policy Practice (NPP) and the Center for Human Services, the not-for-profit affiliate of University Research Co., LLC (URC/CHS). *The Community IYCF Counselling Package* includes the *Facilitator Guide*, Appendices, and *Training Aids*, for use in training community workers; the *Participant Materials*, including training "handouts" and monitoring tools; a set of 28 *IYCF Counselling Cards* and companion *Key Messages Booklet*; 3 *Take-home Brochures*; and a *Planning and Adaptation Guide* including a "Clip Art" Compendium for use by national or local stakeholders in adapting this package for use in their own settings. All of the materials found in the *Community IYCF Counselling Package* are available in their electronic formats to facilitate their dissemination and adaptation.

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

The Community IYCF Counselling Package has been developed by the UNICEF New York team of Nune Mangasaryan, Senior Advisor, Infant and Young Child Nutrition; Christiane Rudert, Nutrition Specialist (infant feeding); Mandana Arabi, Nutrition Specialist (Complementary Feeding); in close collaboration with the NPP and URC/CHS team of Maryanne Stone-Jiménez, IYCF Training Expert; Mary Lung'aho, IYCF Community/Emergencies Expert; Peggy Koniz-Booher, IYCF Behaviour Change and Job Aids Expert. The package layout and illustrations were developed by Victor Nolasco, Senior Graphic Illustrator; and Kurt Mulholland, Senior Graphic Artist. Many country teams (national authorities, program staff and communities) involved in developing and pretesting previous materials also warrant acknowledgment for their contributions.

The package was reviewed by WHO headquarters colleagues: Carmen Casanovas (Technical Officer), Constanza Vallenias (Medical Officer) and the HIV component by Nigel Rollins (Scientist). External reviewers also included Felicity Savage and Rukhsana Haider, and comments were received from Holly Blanchard (Maternal Child Health Integrated Program). The contribution of the Ministry of Health, UNICEF-Zambia, staff from various partner agencies and the community workers who participated in the field test of the package in August 2010 in Lusaka, Zambia, is also acknowledged.

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Positive counselling skills

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

Listening and Learning skills

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

Building Confidence and Giving Support skills

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



IYCF 3-Counselling:

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

Step 1: Assess: ask, listen and observe

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

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

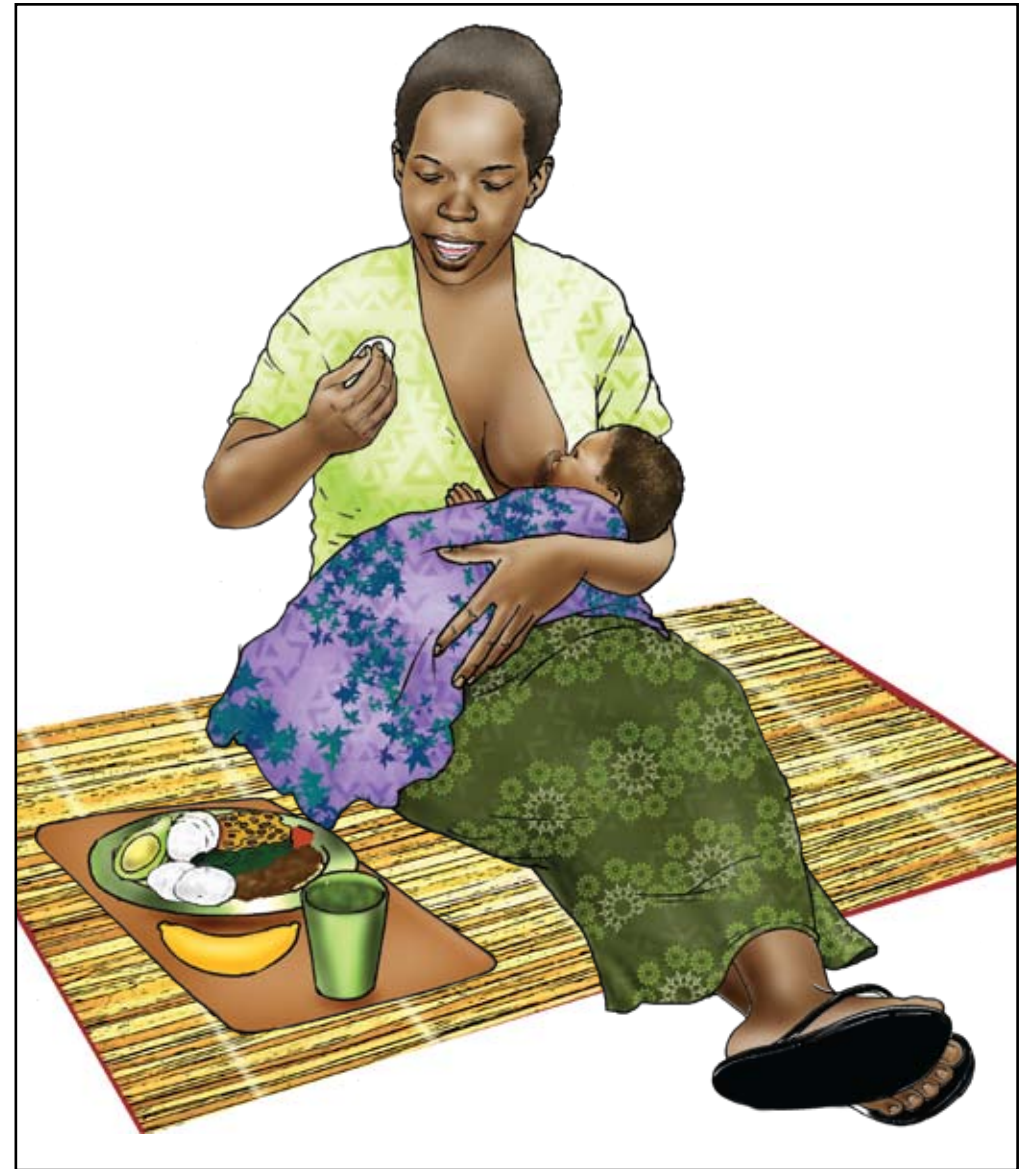
- Decide if the feeding you observe is age-appropriate and if the condition or health of the child and mother (or caregiver) is good.
- If there are no apparent difficulties, praise the mother (or caregiver) and focus on providing information needed for the next stage of the child’s development.
- If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

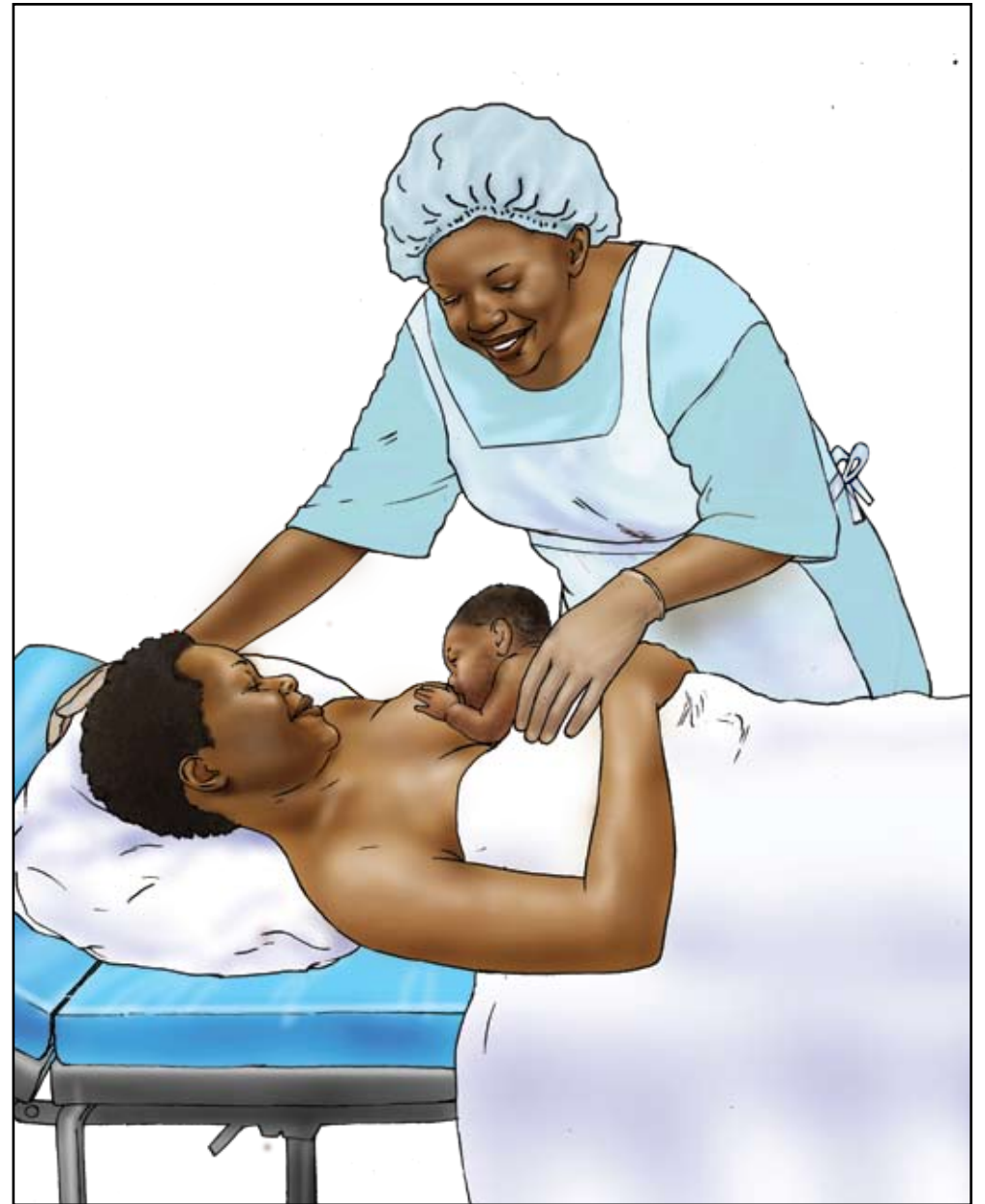
the condition or health of the child or mother (or caregiver) is poor, prioritize the difficulties.

- Answer the mother’s (or caregiver’s) questions if any.

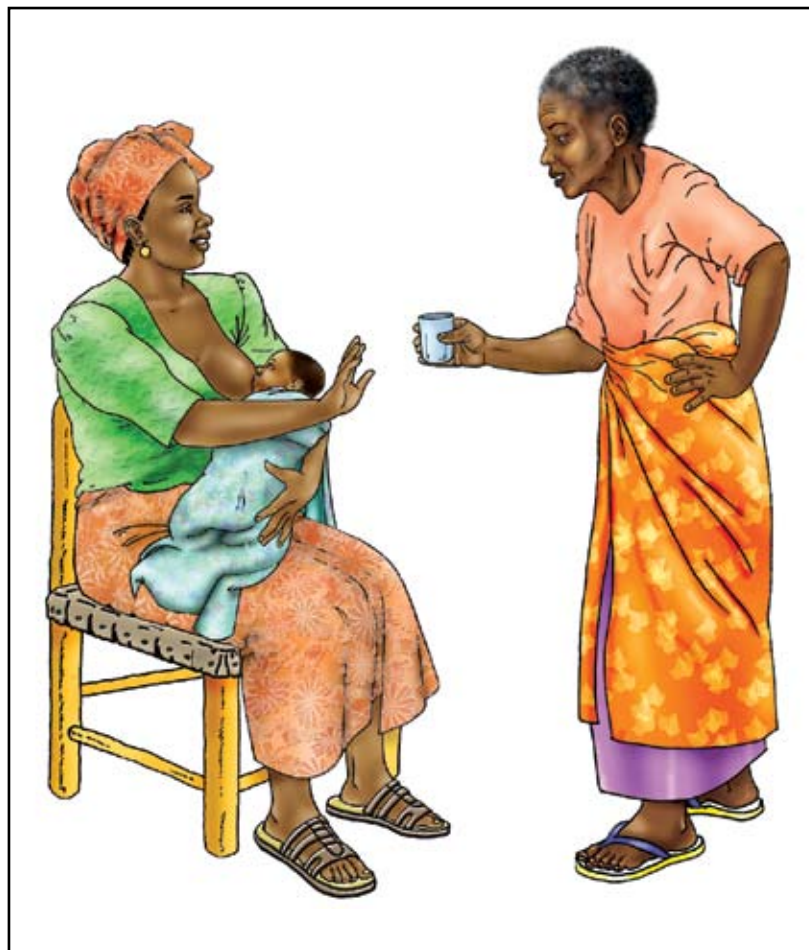
Step 3: Act: discuss, suggest a small amount of relevant information, agree on doable action

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





During the first 6 months



During the first 6 months



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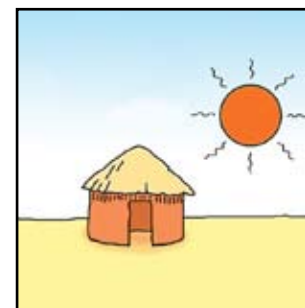
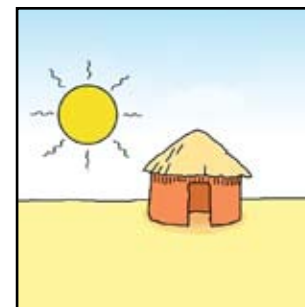


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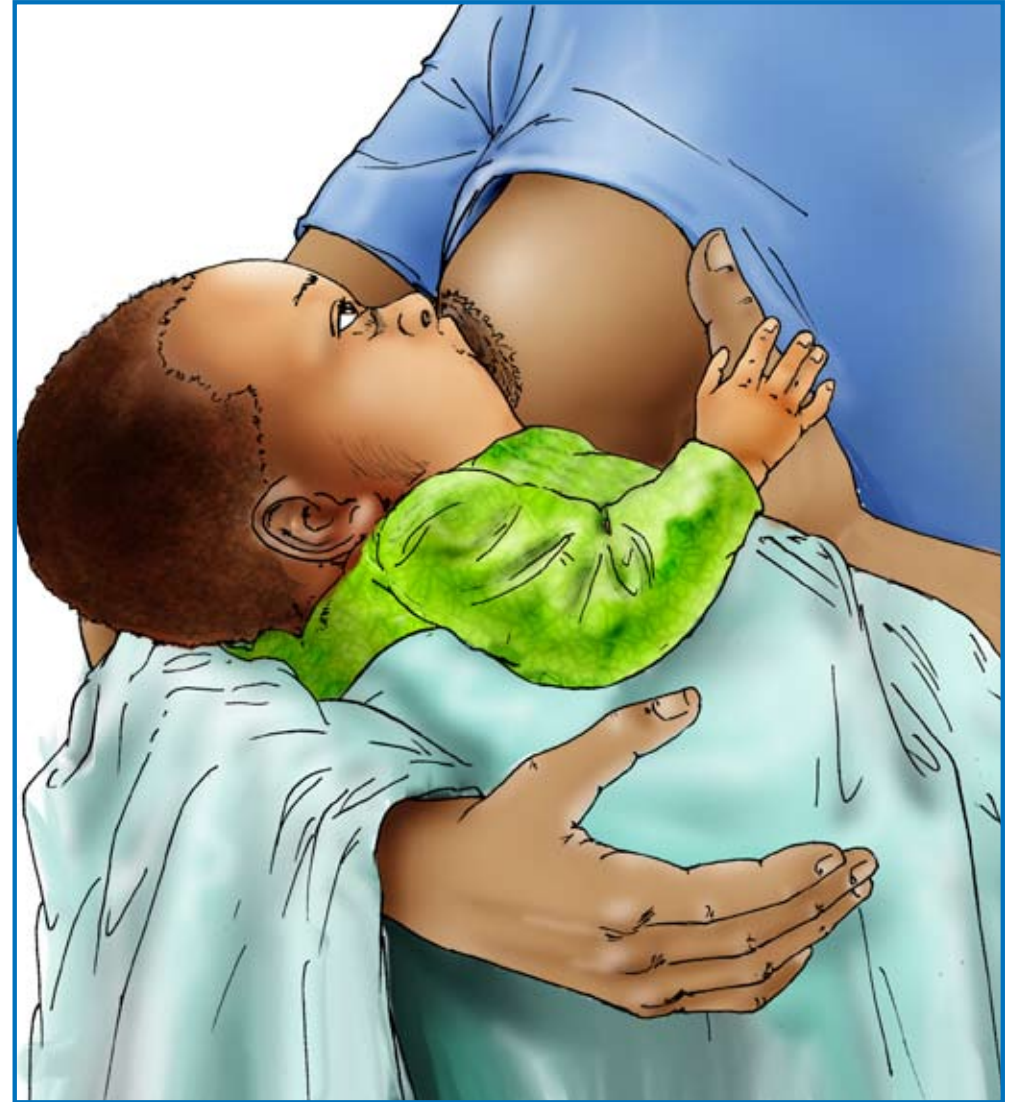


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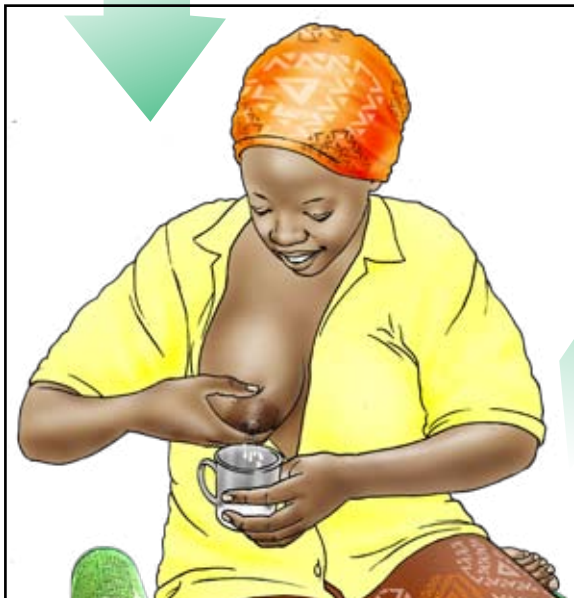
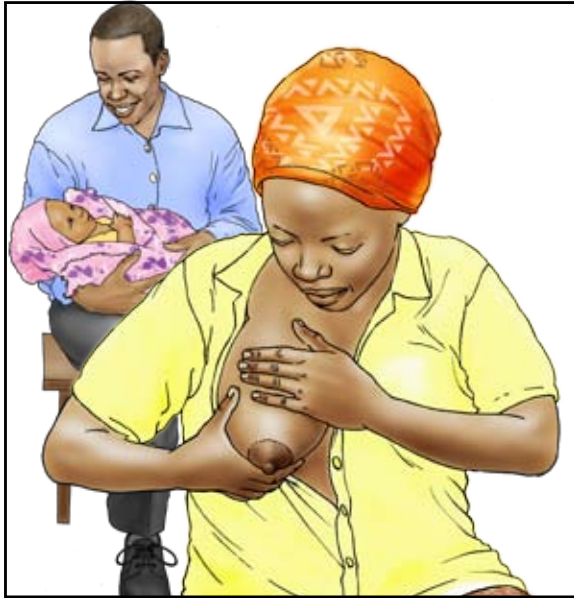




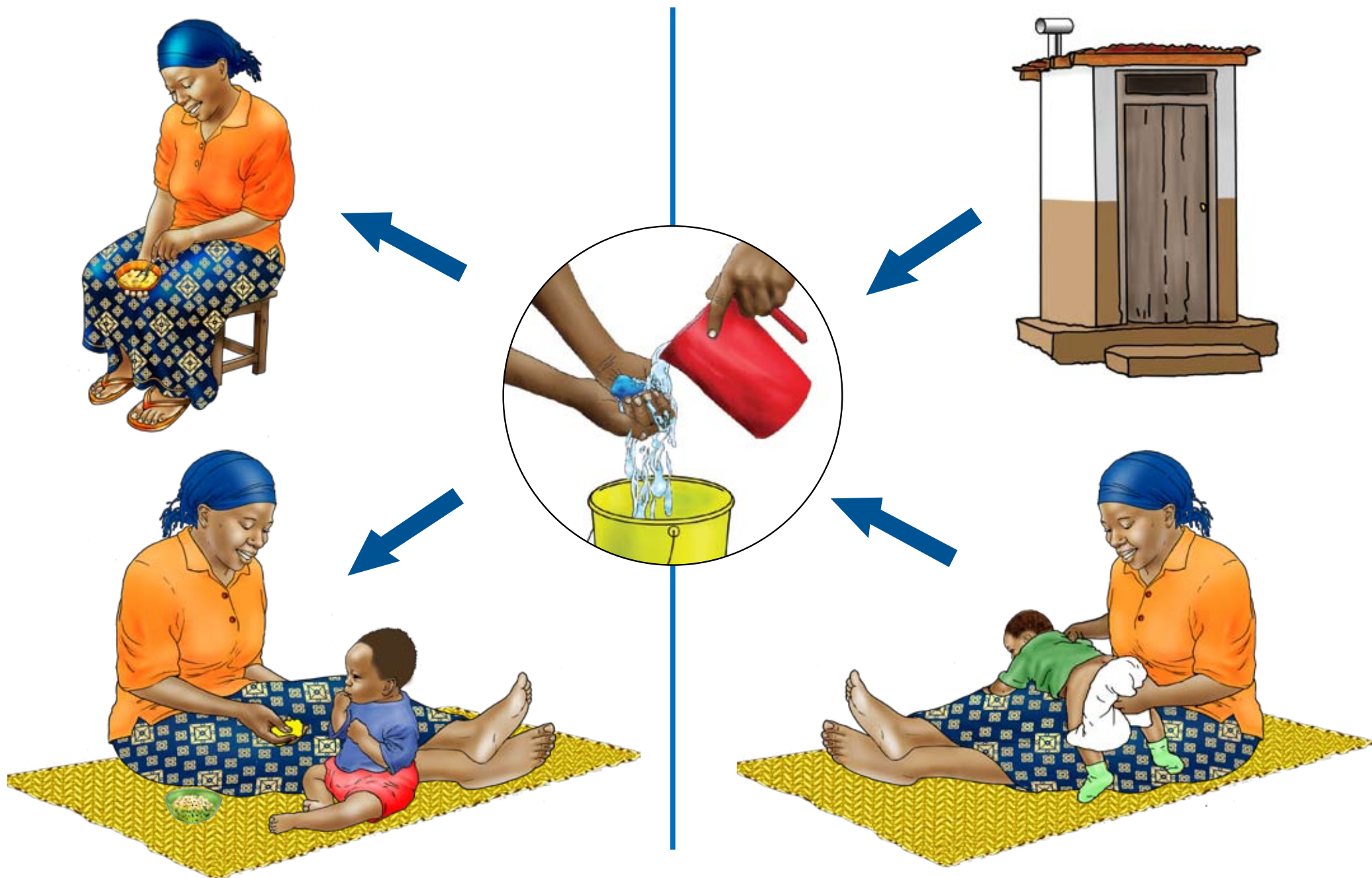








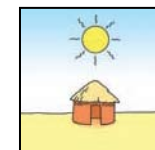
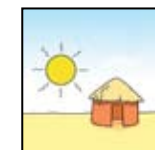
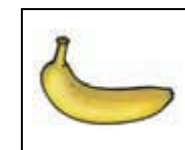




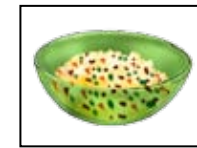
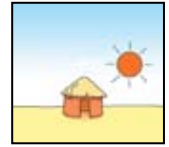
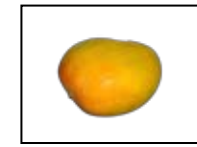
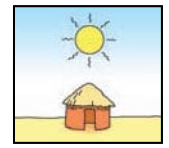
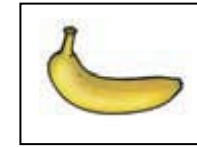
Start feeding at 6 months



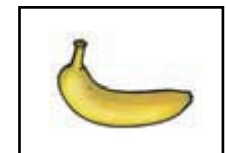
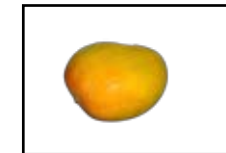
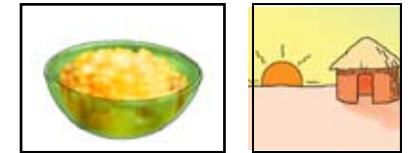
From 6 up to 9 months

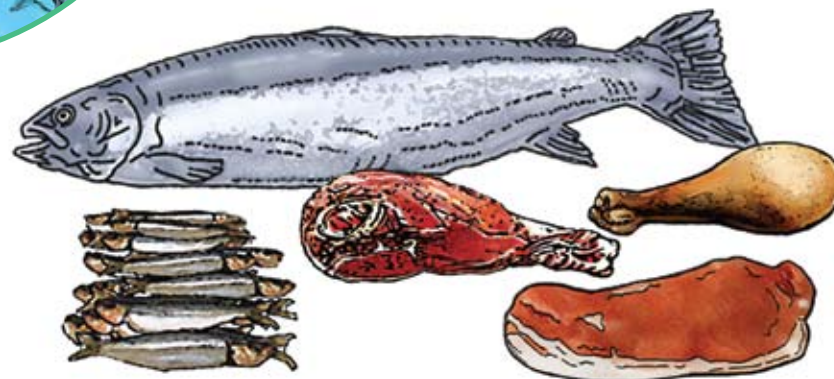
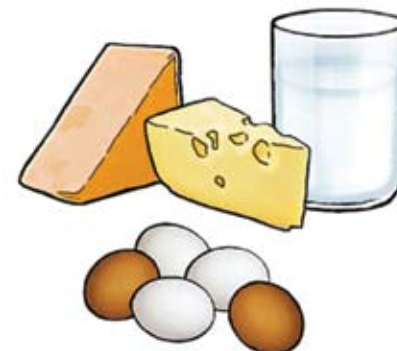


From 9 up to 12 months



From 12 up to 24 months



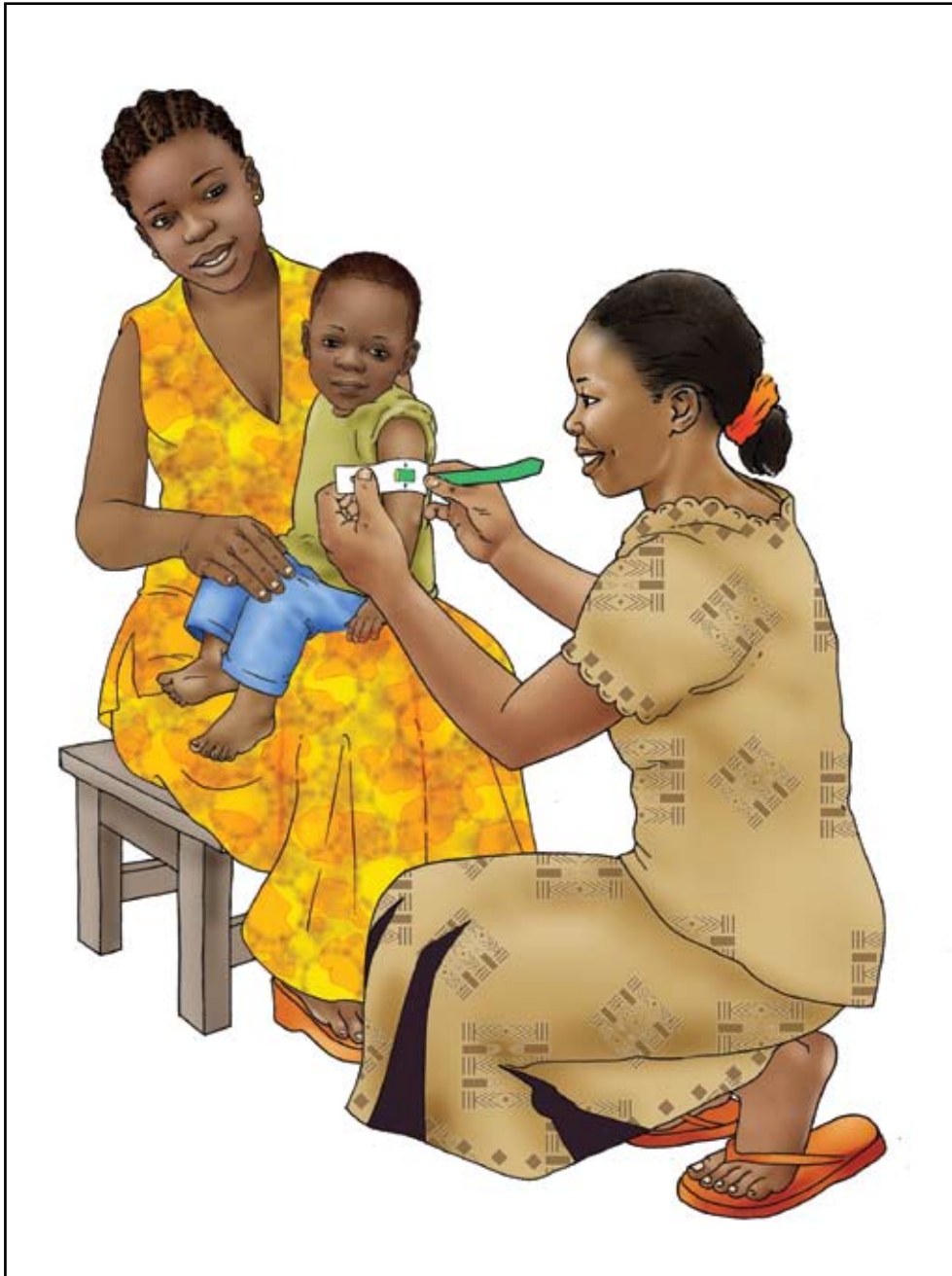


Less than 6 months



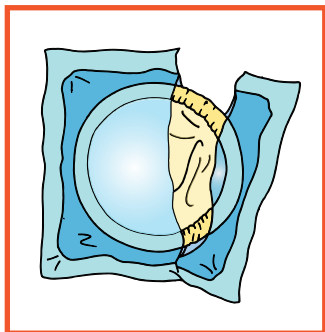
More than 6 months







LAM
(Exclusive breastfeeding)



Male & Female Condom



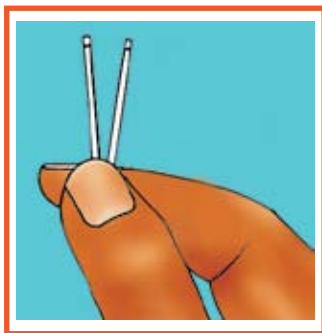
Abstinence
(Avoiding intercourse)



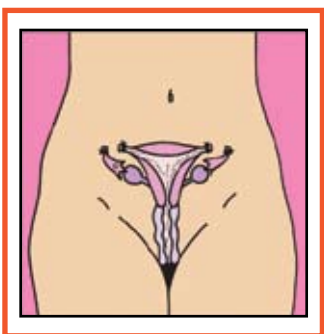
Injectables
(Depro-Provera®)



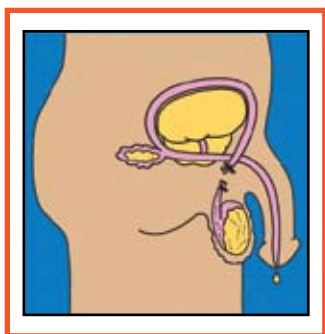
Oral Contraceptives



Norplant



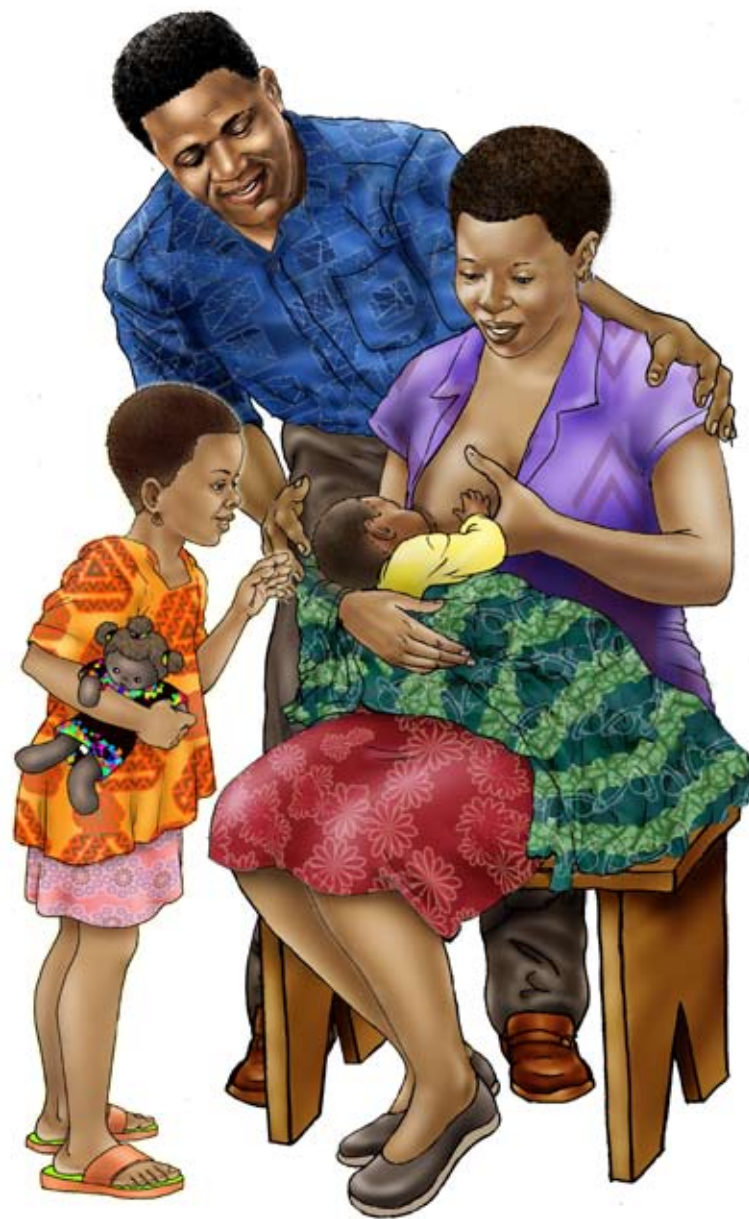
Tubal Ligation



Vasectomy



IUD



If a woman is HIV infected...

Card 21

What is the risk of HIV passing to her baby when NO preventive actions are taken?



Out of 100 babies born to HIV infected women:



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



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



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

**Protect your baby –
get tested and know your HIV status!**

If a woman is HIV infected...

Card 22

What is the risk of HIV passing to her baby if both take ARVs and practise exclusive breastfeeding during the first 6 months?



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



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



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

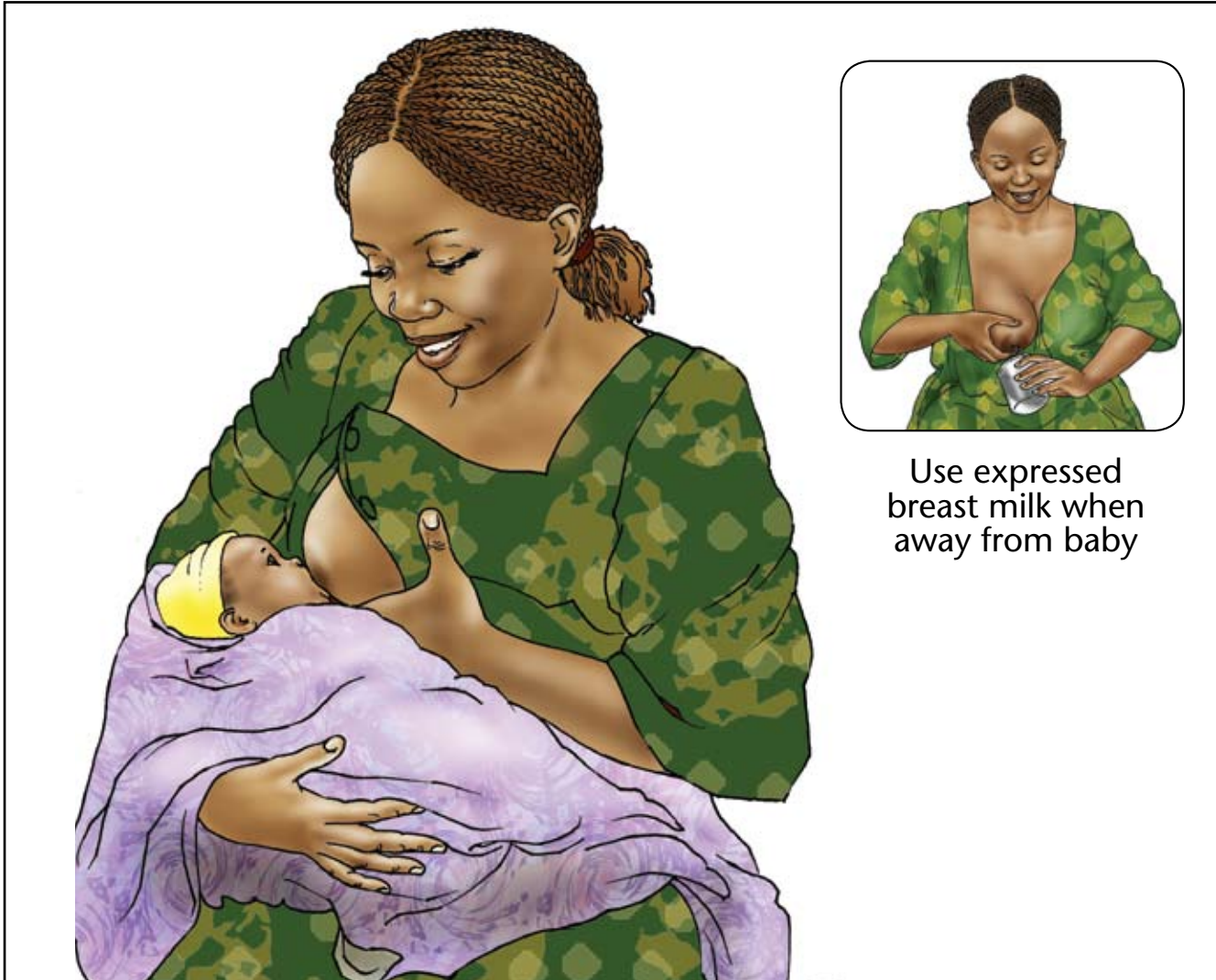


Breastfeeding babies (less than 3) can become infected. Exclusive and safer breastfeeding reduces the risk.

**Protect your baby –
get tested and know your HIV status!**

Exclusively Breastfeed and Take ARVs

Only Breast Milk

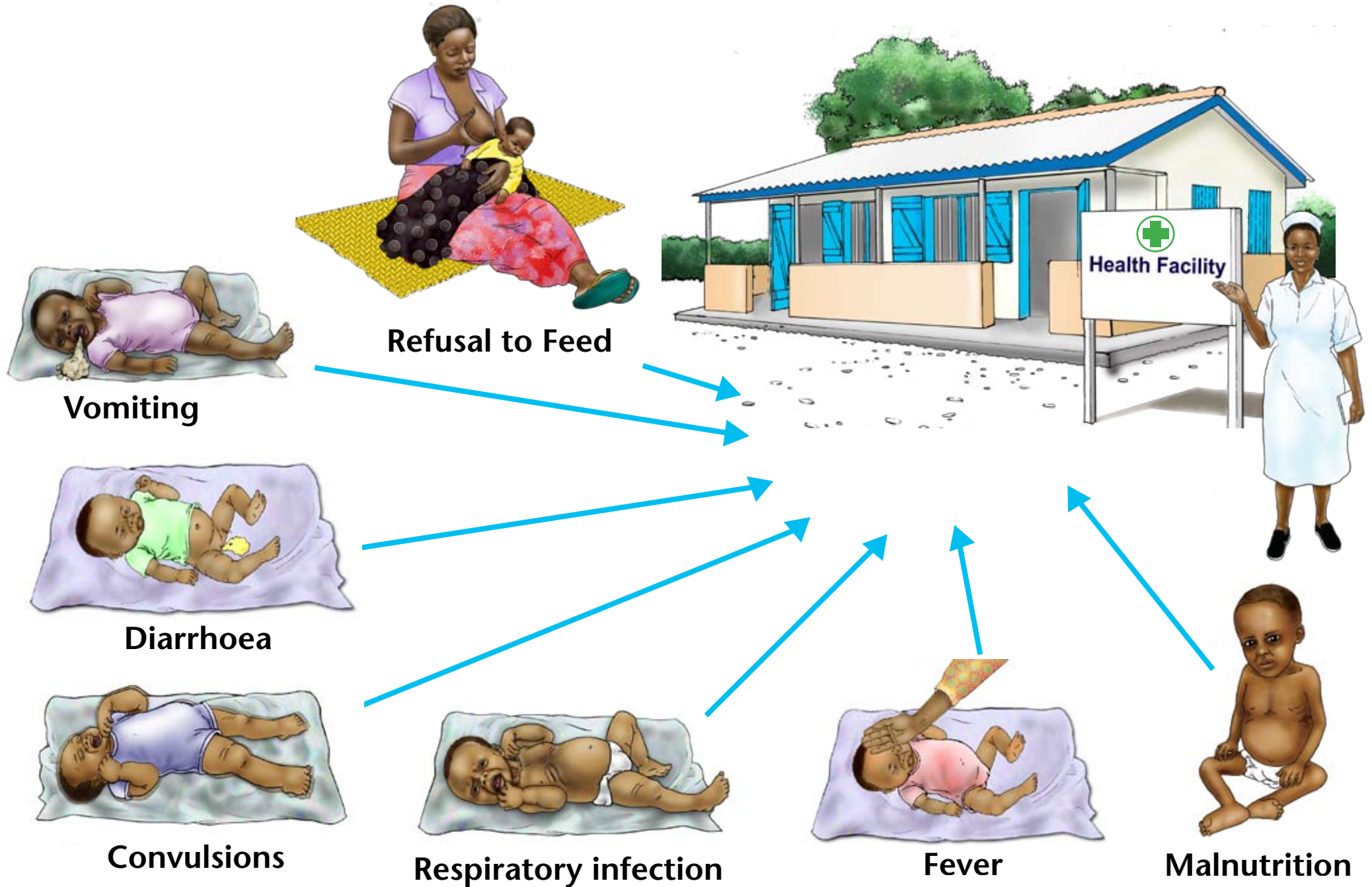


Exclusively Breastfeed even when there are no ARVs

Only Breast Milk



Use expressed
breast milk when
away from baby

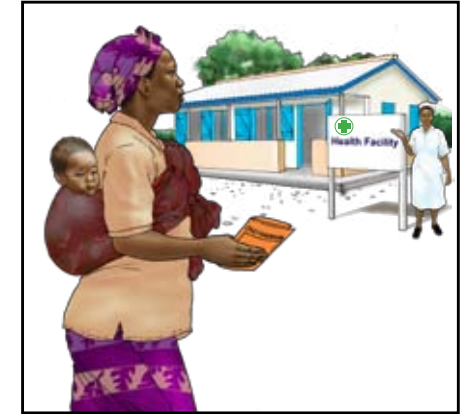
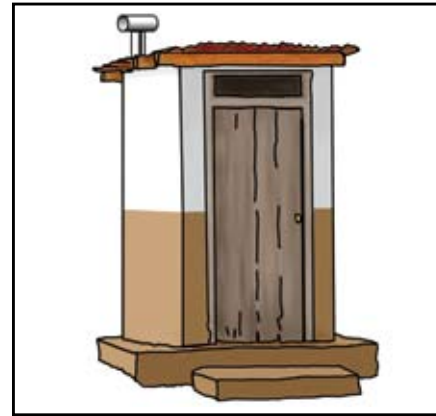
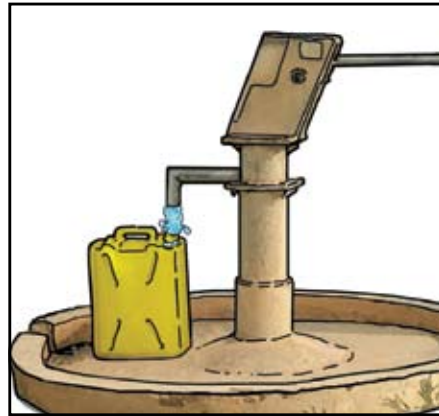


Avoid All Breastfeeding

Only Infant Formula






Conditions Needed To Avoid All Breastfeeding







Non-Breastfed Child from 6 Up to 24 Months



Each day add

Each day add

Each day add

