

# Key Messages Booklet



*The Community  
Infant and Young Child Feeding  
Counselling Package*



# Key Messages Booklet

*The Community  
Infant and Young Child Feeding  
Counselling Package*





## Counselling Cards: Key Messages

1. Nutrition for pregnant and breastfeeding women .....	1
2. Pregnant woman / delivery in facility .....	2
3. During the first 6 months, your baby needs ONLY breast milk .....	3
4. Importance of exclusive breastfeeding during the first 6 months.....	4
5. Breastfeed on demand, both day and night (8 to 12 times) to build up your breast milk supply .....	5
6. Breastfeeding Positions .....	6
7. Good Attachment .....	7
8. Feeding a low birth weight baby .....	8
9. How to hand express breast milk and cup feed .....	9
10. When you are separated from your baby .....	10
11. Good hygiene (cleanliness) practices prevent disease .....	11
12. Start complementary feeding when baby reaches 6 months .....	12
13. Complementary feeding from 6 up to 9 months.....	14
14. Complementary feeding from 9 up to 12 months .....	16
15. Complementary feeding from 12 up to 24 months .....	18
16. Food Variety.....	20
17. Feeding the Sick Baby under 6 months of age .....	21
18. Feeding the Sick Child older than 6 months of age .....	22
19. Regular growth monitoring and promotion.....	23
20. Optimal family planning promotes improved health and survival for both mother and child .....	24
21. If a woman is HIV infected..... What is the risk of HIV passing to her baby when NO preventive actions are taken? .....	25

*continued*

## 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.

22.	If a woman is HIV infected.....	
	<i>What is the risk of passing HIV to her baby if both take ARVs and practise exclusive breastfeeding during the first 6 months?</i> .....	26
23a.	Exclusively Breastfeed and Take ARVs .....	27
23b.	Exclusively breastfeed even when there are no ARVs .....	29
24.	When to bring your child to the health facility .....	30
<b>Special Circumstance Cards</b>		
	<b>Card 1:</b> Avoid all Breastfeeding .....	31
	<b>Card 2:</b> Conditions needed to avoid all breastfeeding .....	32
	<b>Card 3:</b> Non-breastfed child from 6 up to 24 months .....	33
<b>Take-home brochures</b>		
	Nutrition During Pregnancy and Breastfeeding .....	34
	How to Breastfeed Your Baby .....	36
	How to Feed a Baby After 6 Months .....	38

## Nutrition for pregnant and breastfeeding woman



- \* During your pregnancy, eat one extra small meal or “snack” (extra food between meals) each day to provide energy and nutrition for you and your growing baby.
- \* During breastfeeding, eat two extra small meals or “snacks” (extra food between meals) each day to provide energy and nutrition for you and your growing baby.
- \* You need to eat the best foods available, including milk, fresh fruit and vegetables, meat, fish, eggs, grains, peas and beans.
- \* Drink whenever you are thirsty.
- \* Taking tea or coffee with meals can interfere with your body’s use of the foods. Limit the amount of coffee you drink during pregnancy.
- \* During pregnancy and breastfeeding, special nutrients will help your baby grow well and be healthy.
- \* Take iron and folic acid tablets to prevent anaemia during pregnancy and for at least 3 months after your baby’s birth.
- \* Take vitamin A tablets immediately after delivery or within 6 weeks so that your baby receives the vitamin A in your breast milk to help prevent illness.
- \* Use iodised salt to help your baby’s brain and body develop well.
- \* Attend antenatal care at least 4 times during pregnancy. These check-ups are important for you to learn about your health and how your baby is growing.
- \* Take de-worming tablets to help prevent anaemia.
- \* To prevent malaria, sleep under an insecticide-treated mosquito net and take anti-malarial tablets as prescribed.
- \* Learn your HIV status, attend all the clinic appointments and take your medicines as advised by your health provider.
- \* Adolescent mothers: you need extra care, more food and more rest than an older mother. You need to nourish your own body, which is still growing, as well as your growing baby’s.

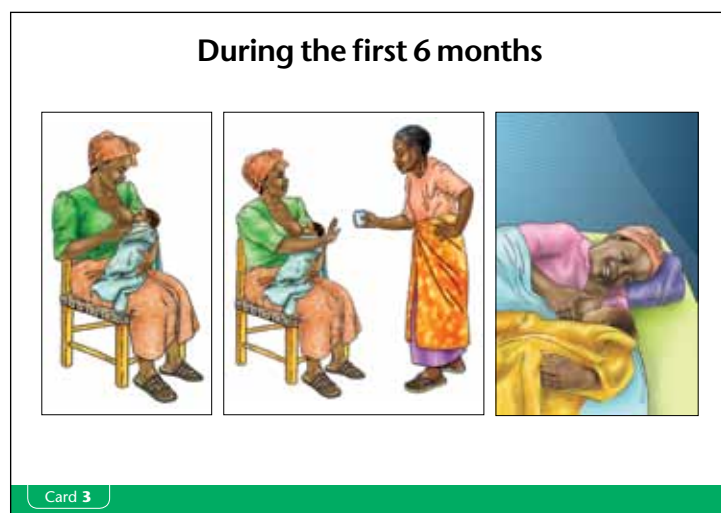
## Pregnant woman / Delivery in facility



- \* Hold your newborn skin-to-skin immediately after birth. This will keep your baby warm and breathing well, help him or her reach the breast easily, and help you and your baby feel close.
- \* Begin breastfeeding within the first hour of birth. Early breastfeeding helps the baby learn to breastfeed while the breast is still soft, and helps reduce your bleeding.
- \* Colostrum, the thick yellowish milk, is good for your baby.
- \* Colostrum helps protect your baby from illness and helps remove the first dark stool.
- \* Breastfeed frequently to help your breast milk 'come in' and to ensure plenty of breast milk.
- \* Do not give water or other liquids/fluids to your baby during the first days after birth. They are not necessary and are dangerous for your newborn.



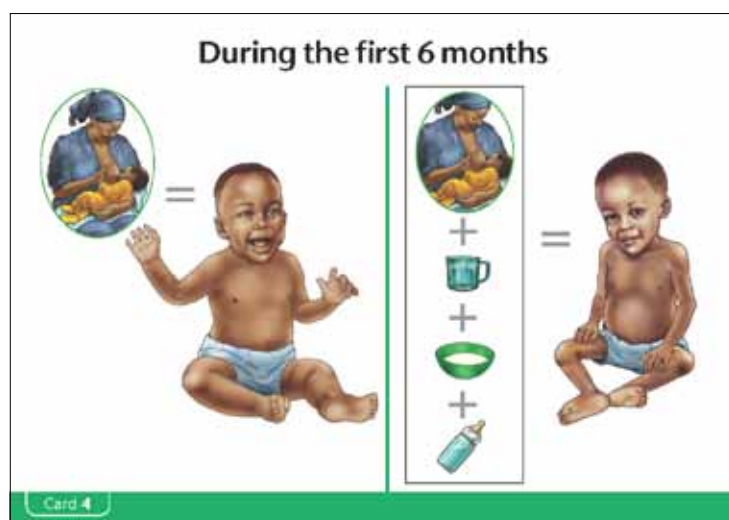
## During the first 6 months, your baby needs ONLY breast milk



- \* Breast milk provides all the food and water that your baby needs during the first 6 months.
- \* Do not give anything else, not even water, during your baby's first 6 months.
- \* Even during very hot weather, breast milk will satisfy your baby's thirst.
- \* Giving your baby anything else will cause him/her to suckle less and will reduce the amount of breast milk that you produce.
- \* Water, other liquids and foods can make the baby sick.
- \* You can give medicines if they are recommended by your health provider.

**Note for community worker:** *There may be a period of 24 hours in the first day or two when the baby feeds only 2 to 3 times. After the first few days, frequent breastfeeding is important for establishing a good supply.*

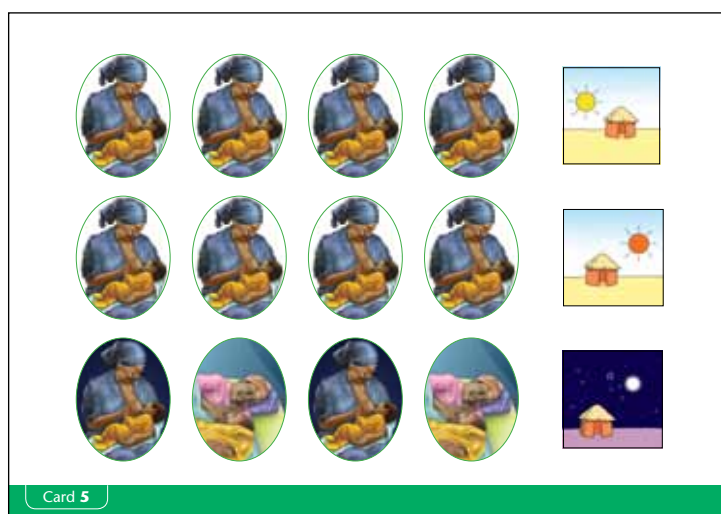
## Importance of exclusive breastfeeding during the first 6 months



- \* Exclusive breastfeeding means feeding your baby **ONLY** breast milk for the first 6 months.
- \* Breast milk provides all the food and water that your baby needs during the first 6 months of life.
- \* Exclusive breastfeeding for the first 6 months protects your baby from many illnesses, such as diarrhoea and respiratory infections.
- \* When you exclusively breastfeed your baby during the first 6 months and have no menses, you are protected from another pregnancy.
- \* Mixed feeding means feeding your baby both breast milk and any other foods or liquids, including infant formula, animal milks, or water.
- \* Mixed feeding before 6 months can damage your baby's stomach.
- \* Mixed feeding increases the chances that your baby will suffer from illnesses such as diarrhoea and pneumonia, and from malnutrition.
- \* Giving your baby foods or any kind of liquids other than breast milk, including infant formula, animal milks, or water before 6 months can damage your baby's stomach. This reduces the protection that exclusive breastfeeding gives, and all of the benefits that your baby gets from your breast milk.

**Note for community worker:** If a mother is HIV-infected, refer to Counselling Cards 21 to 23b or the 3 Special Circumstance Cards for information on HIV and infant feeding.

## Breastfeed on demand, both day and night (8 to 12 times) to build up your breast milk supply

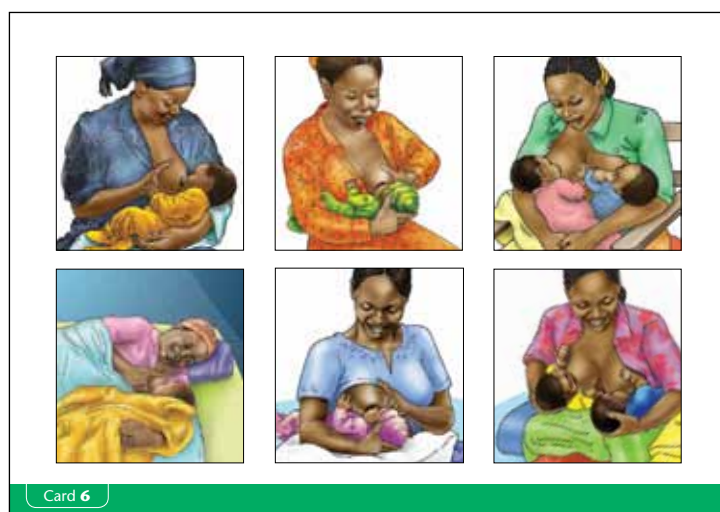


- \* Breastfeed your baby on demand, day and night.
- \* More suckling (with good attachment) makes more breast milk.
- \* Crying is a late sign of hunger. Early signs that your baby wants to breastfeed include:
  - Restlessness
  - Opening mouth and turning head from side-to-side
  - Putting tongue in and out
  - Suckling on fingers and fists
- \* Let your baby finish one breast before offering the other. Switching back and forth from one breast to the other prevents the baby from getting the nutritious 'hind milk'. The 'fore milk' has more water and satisfies the baby's thirst. The 'hind milk' has more fat and satisfies your baby's hunger.
- \* If your baby is ill or sleepy, wake him or her to offer the breast often.
- \* Do NOT use bottles, teats or spouted cups. They are difficult to clean and can cause your baby to become sick.

### Notes for community worker:

- \* If a mother is concerned about her baby getting enough milk, encourage the mother and build her confidence by reviewing how to attach and position the baby to her breast.
- \* Reassure her that her baby is getting enough milk when her baby is:
  - not visibly thin (or is getting fatter/putting on weight, if he or she was thin earlier)
  - responsive and active (appropriately for his or her age)
  - gaining weight - refer to the baby's health card (or growth velocity table if available). If you are not sure if the weight gain is adequate, refer the child to the nearest health facility.
  - when baby passes light-coloured urine 6 times a day or more while being exclusively breastfed

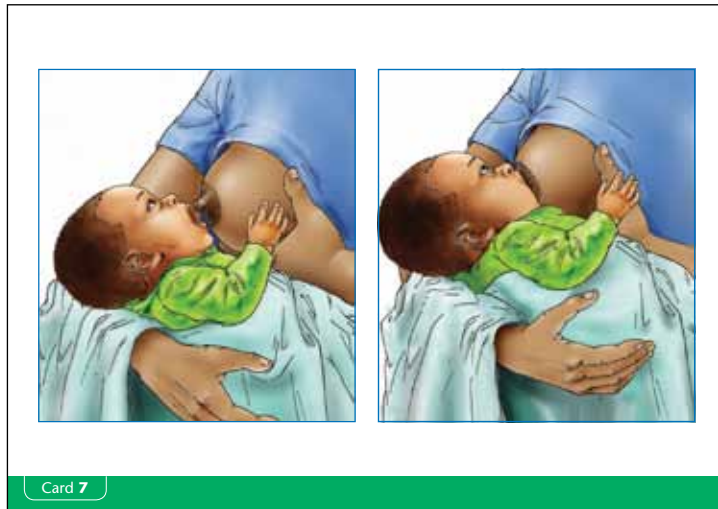
## Breastfeeding positions



- \* Good positioning helps to ensure that your baby suckles well and helps you to produce a good supply of breast milk.
- \* **The four key points about your baby's position are: straight, facing the breast, close, and supported:**
  - \* The baby's body should be straight, not bent or twisted, but with the head slightly back
  - \* The baby's body should be facing the breast not held flat to your chest or abdomen, and he or she should be able to look up into your face
  - \* The baby should be close to you
  - \* You should support the baby's whole body, not just the neck and shoulders, with your hand and forearm
- \* **There are different ways to position your baby:**
  - \* Cradle position (most commonly used)
  - \* Cross cradle position (good for small babies)
  - \* Side-lying position (use to rest while breastfeeding and at night)
  - \* Under-arm position (use after caesarean section, if your nipples are painful or if you are breastfeeding twins or a small baby)

**Note for community worker:** *If an older baby is well-attached and suckling well, there is no need to change position.*

## Good attachment



- \* Good attachment helps to ensure that your baby suckles well and helps you to produce a good supply of breast milk.
- \* Good attachment helps to prevent sore and cracked nipples.
- \* Breastfeeding should not be painful.
- \* Get help to improve the attachment if you experience pain.
- \* **There are 4 signs of good attachment:**
  1. Baby's mouth is wide open
  2. You can see more of the darker skin (areola) above the baby's mouth than below
  3. Baby's lower lip is turned outwards
  4. Baby's chin is touching mother's breast
- \* **The signs of effective suckling are:**
  - a. The baby takes slow deep suckles, sometimes pausing.
  - b. You may be able to see or hear your baby swallowing after one or two suckles.
  - c. Suckling is comfortable and pain free for you.
  - d. Your baby finishes the feed, releases the breast and looks contented and relaxed.
  - e. The breast is softer after the feed.
- \* Effective suckling helps you to produce milk and satisfy your baby.
- \* After your baby releases one breast offer your baby the other breast. This will ensure that your baby stimulates your milk production in both breasts, and also gets the most nutritious and satisfying milk.

## Feeding a low birth weight baby

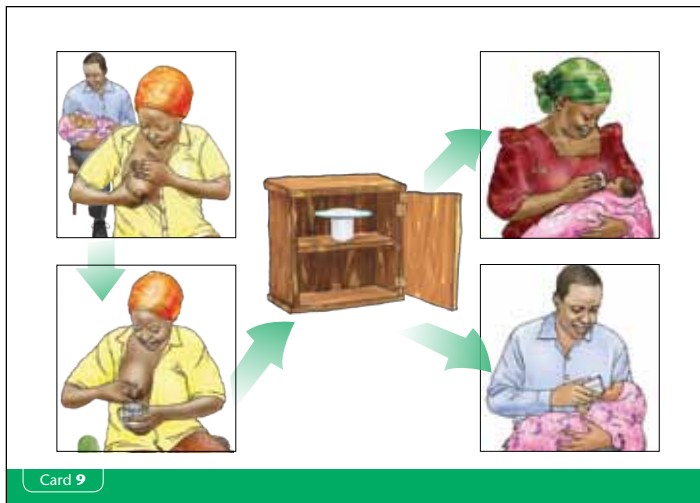


- \* Breast milk is especially adapted to the nutritional needs of low birth weight infants.
- \* The best milk for a low birth weight infant, including babies born early, is the breast milk from the baby's own mother.
- \* The cross cradle and underarm positions are good positions for feeding a low birth weight baby.
- \* Breastfeed frequently to get baby use to the breast and to keep the milk flowing.
- \* Long slow feeds are fine. It is important to keep the baby at the breast.
- \* If the baby sleeps for long periods of time, you may need to unwrap the baby or take off some of his or her clothes to help waken him or her for the feed.
- \* Breastfeed the baby before he or she starts to cry.
- \* Earlier signs of hunger include a COMBINATION of the following: being alert and restless, opening mouth and turning head, putting tongue in and out, sucking on hand or fist.

### Notes for community worker:

- \* *Direct breastfeeding of a very small baby may not be possible for several weeks. Mothers should be taught and encouraged to express breast milk and feed the breast milk to the infant using a cup.*
- \* *Kangaroo mother care provides skin-to-skin contact, warmth and closeness to the mother's breast.*
- \* *Kangaroo mother care encourages early and exclusive breastfeeding, either by direct feeding or using expressed breast milk given by cup.*
- \* *Different caregivers can also share in the care of the baby using the same Kangaroo method position.*

## How to hand express breast milk and cup feed



- \* Make sure your hands and utensils are clean.
- \* Wash your hands with soap and running water.
- \* Clean and boil the container you will use to collect your breast milk.
- \* Get comfortable.
- \* It is sometimes helpful to gently stroke your breasts. A warm cloth may help stimulate the flow of milk.
- \* Put your thumb on the breast above the dark area around the nipple (areola) and the other fingers on the underside of the breast behind the areola.
  - With your thumb and first 2 fingers press a little bit in towards chest wall and then press gently towards the dark area (areola).
  - Milk may start to flow in drops, or sometimes in fine streams. Collect the milk in the clean container.
  - Avoid rubbing the skin, which can cause bruising, or squeezing the nipple, which stops the flow of milk.
  - Rotate the thumb and finger positions and press/compress and release all around the areola.
- \* Express one breast for at least 3 to 5 minutes until the flow slows, then express the other breast, then repeat both sides again (20 to 30 minutes total).
- \* Store breast milk in a clean, covered container. Milk can be stored 6 to 8 hours in a cool place and up to 72 hours in the back of the refrigerator.
- \* Give baby expressed breast milk from a cup. Bring cup to the baby's lower lip and allow baby to take small amounts of milk, lapping the milk with his or her tongue. Do not pour the milk into baby's mouth.
- \* Pour just enough breast milk from the clean covered container into the feeding cup.
- \* Bottles are unsafe to use because they are difficult to wash and can be easily contaminated.



## When you are separated from your baby



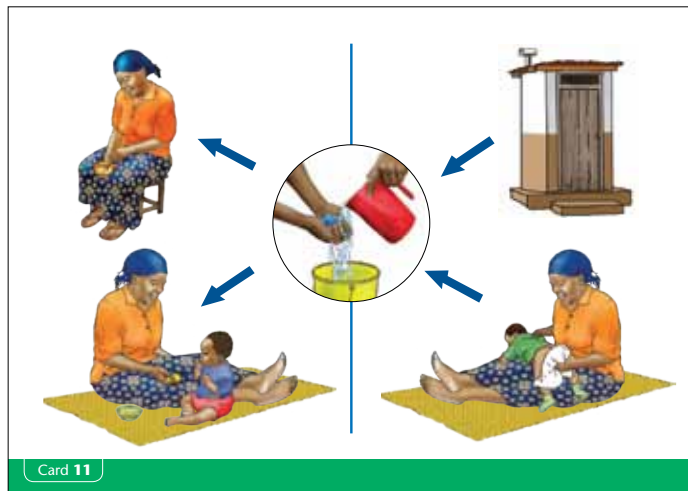
- \* Learn to express your breast milk soon after your baby is born. (CC 9)
- \* Breastfeed exclusively and frequently for the whole period that you are with your baby.
- \* Express and store breast milk before you leave your home so that your baby's caregiver can feed your baby while you are away.
- \* Express breast milk while you are away from your baby. This will keep the milk flowing and prevent breast swelling.
- \* Teach your baby's caregiver how to use a clean open cup to feed your baby while you are away.
- \* Expressed breast milk (stored in a cool, covered place) stays in good condition for 8 hours, even in a hot climate.
- \* Take extra time for the feeds before separation from baby and when you return home.
- \* Increase the number of feeds while you are with the baby. This means increasing night and weekend feedings.
- \* If possible, carry the baby with you to your work place (or anytime you have to go out of the home for more than a few hours). If this is not possible, consider having someone bring the baby to you to breastfeed when you have a break.
- \* Get extra support from family members in caring for your baby and other children, and for doing household chores.

### Notes for a working mother with formal employment:

- \* *Get your employer's consent for:*
  - *breastfeeding breaks at your work place and flexible working hours*
  - *safe storage of expressed breast milk at your work place*



## Good hygiene (cleanliness) practices prevent disease



- \* Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses.
- \* Wash your hands with soap and water before preparing foods and feeding baby.
- \* Wash your hands and your baby's hands before eating.
- \* Wash your hands with soap and water after using the toilet and washing or cleaning baby's bottom.
- \* Feed your baby using clean hands, clean utensils and clean cups.
- \* Use a clean spoon or cup to give foods or liquids to your baby.
- \* Do not use bottles, teats or spouted cups since they are difficult to clean and can cause your baby to become sick.
- \* Store the foods to be given to your baby in a safe clean place.

## Starting Complementary Feeding when baby reaches 6 months



- \* Starting at about 6 months, your baby needs other foods in addition to breast milk.
- \* Continue breastfeeding your baby on demand both day and night.
- \* Breast milk continues to be the most important part of your baby's diet.
- \* Breastfeed first before giving other foods.
- \* When giving complementary foods, think: Frequency, Amount, Thickness, Variety, Active/responsive feeding, and Hygiene
  - **Frequency:** Feed your baby complementary foods 2 times a day
  - **Amount:** Give 2 to 3 tablespoonfuls ('tastes') at each feed.
  - **Thickness:** should be thick enough to be fed by hand
  - **Variety:** Begin with the staple foods like porridge (corn, wheat, rice, millet, potatoes, sorghum), mashed banana or mashed potato
  - **Active/responsive feeding**
    - Baby may need time to get used to eating foods other than breast milk.
    - Be patient and actively encourage your baby to eat.
    - Don't force your baby to eat.
    - Use a separate plate to feed the baby to make sure he or she eats all the food given.
  - **Hygiene:** Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses. (CC 11)
    - Use a clean spoon or cup to give foods or liquids to your baby.
    - Store the foods to be given to your baby in a safe hygienic place.
    - Wash your hands with soap and water before preparing foods and feeding baby.
    - Wash your hands and your baby's hands before eating.
    - Wash your hands with soap and water after using the toilet and washing or cleaning baby's bottom.

**Note about the size of cups:**

- \* *All cups shown and referred to in the Counselling Cards are mugs which have a volume of 250 ml. If other types or sizes of cups are used to feed a baby, they should be tested to see what volume they hold and the recommended quantities of food or liquid should be adjusted to the local cup or mug.*

**Note: After 6 months, you can no longer use LAM.**

- \* *You will need to use another family planning method even though your menses has not yet returned.*
- \* *There are many methods of family planning that will not interfere with breastfeeding.*

# Complementary feeding from 6 up to 9 months



- \* Continue breastfeeding your baby on demand both day and night. This will maintain his or her health and strength as breast milk continues to be the most important part of your baby's diet.
- \* Breast milk supplies half (1/2) baby's energy needs from 6 up to 12 months.
- \* Breastfeed first before giving other foods.
- \* When giving complementary foods to your baby, think: Frequency, Amount, Thickness, Variety, Active/responsive feeding, and Hygiene
  - **Frequency:** Feed your baby complementary foods 3 times a day
  - **Amount:** Increase amount gradually to half (1/2) cup (250 ml cup: show amount in cup brought by mother). Use a separate plate to make sure young child eats all the food given
  - **Thickness:** Give mashed/pureed family foods. By 8 months your baby can begin eating finger foods
  - **Variety:** Try to feed a variety of foods at each meal. For example: Animal-source foods (flesh meats, eggs and dairy products) 1 star\*; Staples (grains, roots and tubers) 2 stars\*\*; Legumes and seeds 3 stars\*\*\*; Vitamin A rich fruits and vegetables and other fruits and vegetables 4 stars\*\*\*\* (CC 16).

## Notes for community worker:

- \* Foods may be added in a different order to create a 4 star food/diet.
  - Animal source foods are very important. Start animal source foods as early and as often as possible. Cook well and chop fine.
  - Infants can eat well-cooked and finely-chopped eggs, meat and fish even if they don't have teeth.
  - Additional snacks (extra food between meals) such as fruit or bread with nut paste) can be offered once or twice per day.
  - If you prepare food for the baby that has oil or fat in it, use no more than half a teaspoon per day.

**Notes for community worker continued:**

- *Use iodised salt*
- *Each week you can add one new food to your child's diet*
- *Avoid giving sugary drinks*
- *Avoid sweet biscuits*

- **Active/responsive feeding**
  - Be patient and actively encourage your baby to eat.
  - Don't force your baby to eat.
  - Use a separate plate to feed the baby to make sure he or she eats all the food given.
- **Hygiene:** Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses. (CC 11)
  - Use a clean spoon or cup to give foods or liquids to your baby.
  - Store the foods to be given to your baby in a safe hygienic place.
  - Wash your hands with soap and water before preparing foods and feeding baby.
  - Wash your hands and your baby's hands before eating.
  - Wash your hands with soap and water after using the toilet and washing or cleaning baby's bottom.

**Note about the size of cups:**

- \* *All cups shown and referred to in the Counselling Cards are mugs which have a volume of 250 ml. If other types or sizes of cups are used to feed a baby, they should be tested to see what volume they hold and the recommended quantities of food or liquid should be adjusted to the local cup or mug.*

**Note: After 6 months, you can no longer use LAM.**

- \* *You will need to use another family planning method even though your menses has not yet returned.*
- \* *There are many methods of family planning that will not interfere with breastfeeding.*

# Complementary feeding from 9 up to 12 months



- \* Continue breastfeeding your baby on demand both day and night. This will maintain his or her health and strength as breast milk continues to be the most important part of your baby's diet.
- \* Breast milk supplies half (1/2) baby's energy needs from 6 up to 12 months.
- \* Breastfeed first before giving other foods.
- \* When giving complementary foods to your baby, think: Frequency, Amount, Thickness, Variety, Active/responsive feeding, and Hygiene
  - **Frequency:** Feed your baby complementary foods 4 times a day
  - **Amount:** Increase amount to half (½) cup (250 ml cup: show amount in cup brought by mother). Use a separate plate to make sure young child eats all the food given.
  - **Thickness:** Give finely chopped family foods, finger foods, sliced foods.
  - **Variety:** Try to feed a variety of foods at each meal. For example: Animal-source foods (flesh meats, eggs and dairy products) 1 star\*; Staples (grains, roots and tubers) 2 stars\*\*; Legumes and seeds 3 stars\*\*\*; Vitamin A rich fruits and vegetables and other fruits and vegetables 4 stars\*\*\*\* (CC 16).

## Notes for community worker:

- \* Foods may be added in a different order to create a 4 star food/diet.
  - Animal source foods are very important. Start animal source foods as early and as often as possible. Cook well and chop fine.
  - Additional nutritious snacks (extra food between meals) such as pieces of ripe mango, papaya, banana, avocado, other fruits and vegetables, boiled potato, sweet potato and fresh and fried bread products can be offered once or twice per day.
  - Use iodised salt
  - Avoid giving sugary drinks
  - Avoid sweet biscuits

- **Active/responsive feeding**
  - Be patient and actively encourage your baby to eat.
  - Don't force your baby to eat.
  - Use a separate plate to feed the baby to make sure he or she eats all the food given.
- **Hygiene:** Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses. (CC 11)
  - Use a clean spoon or cup to give foods or liquids to your baby.
  - Store the foods to be given to your baby in a safe hygienic place.
  - Wash your hands with soap and water before preparing foods and feeding baby.
  - Wash your hands and your baby's hands before eating.
  - Wash your hands with soap and water after using the toilet and washing or cleaning baby's bottom.

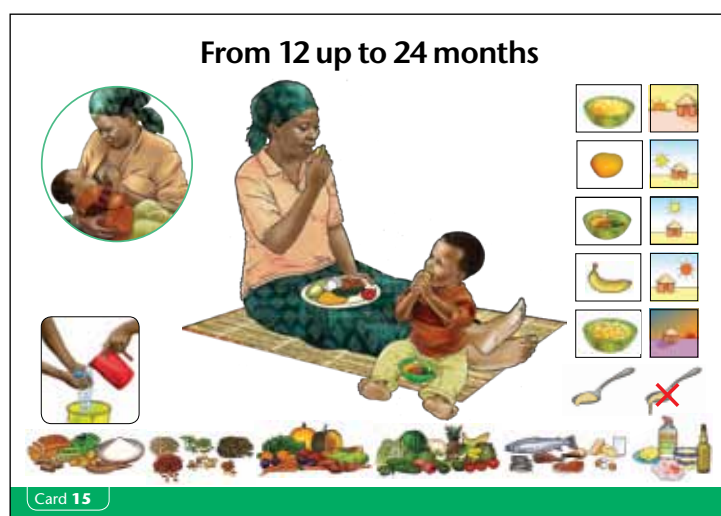
**Note about the size of cups:**

- \* *All cups shown and referred to in the Counselling Cards are mugs which have a volume of 250 ml. If other types or sizes of cups are used to feed a baby, they should be tested to see what volume they hold and the recommended quantities of food or liquid should be adjusted to the local cup or mug.*

**Note: After 6 months, you can no longer use LAM.**

- \* *You will need to use another family planning method even though your menses has not yet returned.*
- \* *There are many methods of family planning that will not interfere with breastfeeding.*

## Complementary feeding from 12 up to 24 months



- \* Continue breastfeeding your baby on demand both day and night. This will maintain his or her health and strength as breast milk continues to be the most important part of your baby's diet.
- \* Breast milk continues to make up about one third (1/3) of the energy needs of the young child from 12 up to 24 months.
- \* To help your baby continue to grow strong and breastfeed, you should use a family planning method to prevent another pregnancy
- \* When giving complementary foods to your baby, think: Frequency, Amount, Thickness, Variety, Active/responsive feeding, and Hygiene
  - **Frequency:** Feed your young child complementary foods 5 times a day
  - **Amount:** Increase amount to three-quarters ( $\frac{3}{4}$ ) to 1 cup (250 ml cup: how amount in cup brought by mother). Use a separate plate to make sure young child eats all the food given
  - **Thickness:** Give family foods cut into small pieces, finger foods, sliced food
  - **Variety:** Try to feed a variety of foods at each meal. For example: Animal-source foods (flesh meats, eggs and dairy products) 1 star\*; Staples (grains, roots and tubers) 2 stars\*\*; Legumes and seeds 3 stars\*\*\*; Vitamin A rich fruits and vegetables and other fruits and vegetables 4 stars\*\*\*\* (CC 16).

### Notes community worker:

- \* Foods may be added in a different order to create a 4 star food/diet.
  - Animal source foods are very important. Start animal source foods as early and as often as possible. Cook well and chop fine.
  - Additional nutritious snacks (extra food between meals) such as pieces of ripe mango, papaya, banana, avocado, other fruits and vegetables, boiled potato, sweet potato and fresh and fried bread products can be offered once or twice per day.
  - Use iodised salt
  - Avoid giving sugary drinks
  - Avoid sweet biscuits



- **Active/responsive feeding**
  - Be patient and actively encourage your baby to eat.
  - Don't force your baby to eat.
  - Use a separate plate to feed the baby to make sure he or she eats all the food given.
- **Hygiene:** Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses. (CC 11)
  - Use a clean spoon or cup to give foods or liquids to your baby.
  - Store the foods to be given to your baby in a safe hygienic place.
  - Wash your hands with soap and water before preparing foods and feeding baby.
  - Wash your hands and your baby's hands before eating.
  - Wash your hands with soap and water after using the toilet and washing or cleaning baby's bottom.

**Note about the size of cups:**

- *All cups shown and referred to in the Counselling Cards are mugs which have a volume of 250 ml. If other types or sizes of cups are used to feed a baby, they should be tested to see what volume they hold and the recommended quantities of food or liquid should be adjusted to the local cup or mug.*

## Food Variety

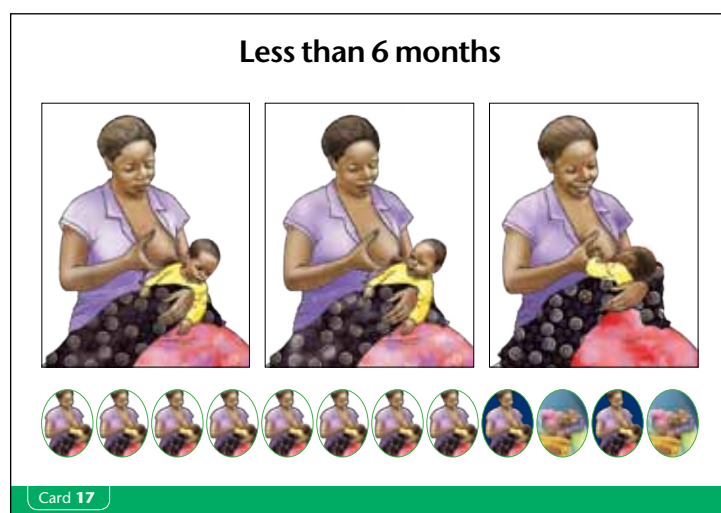


- \* Continue to breastfeed (for at least 2 years) and feed a variety of foods at each meal to your young child. For example:
  - Animal-source foods (meat, chicken, fish, liver), and eggs, milk and milk products 1 star\*
  - Staples (maize, wheat, rice, millet and sorghum); roots and tubers (cassava, potatoes) 2 stars\*\*
  - Legumes (beans, lentils, peas, groundnuts) and seeds (sesame) 3 stars\*\*\*
  - Vitamin A-rich fruits and vegetables (mango, papaya, passion fruit, oranges, dark-green leaves, carrots, yellow sweet potato and pumpkin), and other fruit and vegetables (banana, pineapple, watermelon, tomatoes, avocado, eggplant and cabbage) 4 stars\*\*\*\*

### Notes for community worker:

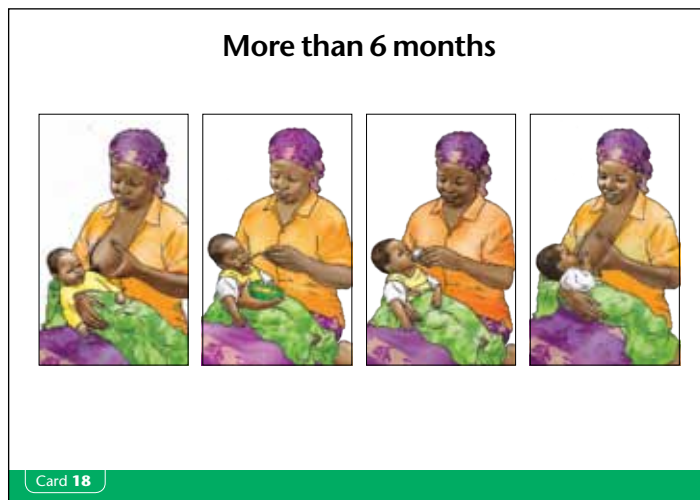
- \* Foods may be added in a different order to create a 4 star food/diet.
  - Introduce animal source foods early to babies and young children and give them as often as possible. Cook well and chop fine.
  - Additional nutritious snacks (extra food between meals) such as pieces of ripe mango, papaya, banana, avocado, other fruits and vegetables, boiled potato, sweet potato and fresh and fried bread products can be offered once or twice per day.
  - Use iodised salt.

## Feeding the sick baby less than 6 months of age



- \* Breastfeed more frequently during illness, including diarrhoea, to help the baby fight sickness, reduce weight loss and recover more quickly.
- \* Breastfeeding also provides comfort to your sick baby. If your baby refuses to breastfeed, encourage your baby until he or she takes the breast again.
- \* Give only breast milk and medicines recommended by your doctor/ health care provider.
- \* If the baby is too weak to suckle, express breast milk to give the baby. This will help you to keep up your milk supply and prevent breast difficulties.
- \* After each illness, increase the frequency of breastfeeding to help your baby regain health and weight.
- \* When you are sick, you can continue to breastfeed your baby. You may need extra food and support during this time.

## Feeding the sick child more than 6 months of age



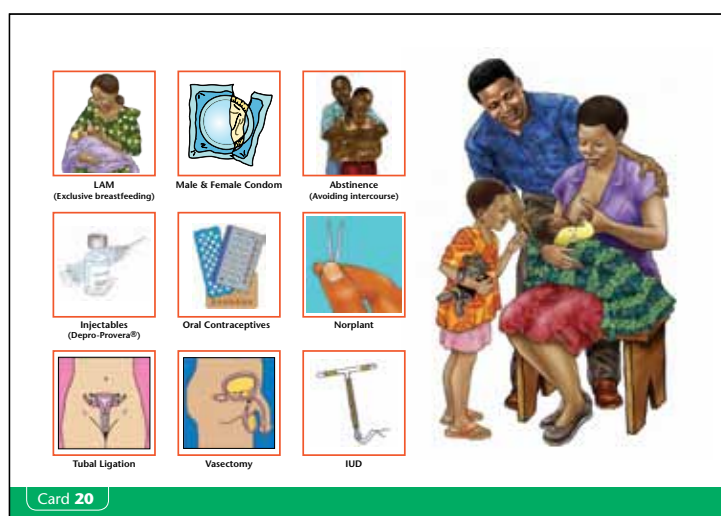
- \* Breastfeed more frequently during illness, including diarrhoea, to help your baby fight sickness, reduce weight loss and recover more quickly.
- \* Your baby needs more food and liquids while he or she is sick.
- \* If your child's appetite is decreased, encourage him or her to eat small frequent meals.
- \* Offer the baby simple foods like porridge and avoid spicy or fatty foods. Even if the child has diarrhoea, it is better for him or her to keep eating.
- \* After your baby has recovered, actively encourage him or her to eat one additional meal of solid food each day during the following two weeks. This will help your child regain the weight he or she has lost.
- \* When you are sick, you can continue to breastfeed your baby. You may need extra food and support during this time. When you are sick, you will also need plenty of liquids.

## Regular growth monitoring and promotion



- \* Attend regular growth monitoring and promotion sessions (GMP) to make sure your baby is growing well.
- \* Take your baby to growth monitoring and promotion monthly during the first year.
- \* A healthy child who is growing well should gain weight every month. If your child is not gaining weight or is losing weight, there is a problem.
- \* Attending growth monitoring and promotion sessions can help identify nutrition problems your child may have, such as severe thinness or swelling. Nutrition problems may need urgent treatment with special (therapeutic) foods.
- \* Measuring the upper arm of a child over 6 months (MUAC) also identifies severe thinness.
- \* During growth monitoring and promotion sessions, you can ask questions about your child's growth, health and nutrition.
- \* It is important to address poor growth and other signs of poor nutrition quickly, as soon as they are identified. If the problem is severe, you should immediately take your child to the nearest health facility.
- \* When you go to the health centre for growth monitoring, ask about family planning too.
- \* You should also ask about your baby's immunization schedule. Immunizations protect babies against several diseases.

## Optimal family planning promotes improved health and survival for both mother and child



- \* Healthy timing and spacing of pregnancy means waiting at least 2 to 3 years before becoming pregnant again.
- \* Spacing your children allows:
  - More time to breastfeed and care for each child.
  - More time for your body to recover between pregnancies.
  - More money because you have fewer children, and thus fewer expenses for school fees, clothing, food, etc.
- \* Feeding your baby only breast milk for the first 6 months helps to space births in a way that is healthy for both you and your baby.
- \* By exclusively breastfeeding your baby for the first 6 months you can prevent pregnancy ONLY if:
  - you feed the baby only breast milk
  - your menstrual period has not returned
  - your baby is less than 6 months old
- \* This family planning method is called the Lactational Amenorrhea Method, or LAM.
  - L = lactational
  - A = no menses
  - M = method of family planning
- \* If any of these three conditions change, you are no longer protected from becoming pregnant again.
- \* It is important to seek advice from the nearest clinic about what modern family planning methods are available, as well as when and how to use them.

## If a woman is HIV infected.....

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



- \* A woman infected with HIV can pass HIV to her baby during pregnancy, labour, delivery or through breastfeeding.
- \* Not all babies born to women with HIV become infected with HIV, however.
- \* If NO preventive actions are taken to prevent or reduce HIV transmission, out of every 100 HIV-infected women who become pregnant, deliver, and breastfeed for up to two years, about 35 of them will pass HIV to their babies:
  - 25 babies may become infected with HIV during pregnancy, labour and delivery
  - 10 babies may become infected with HIV through breastfeeding, if the mothers breastfeed their babies for up to 2 years

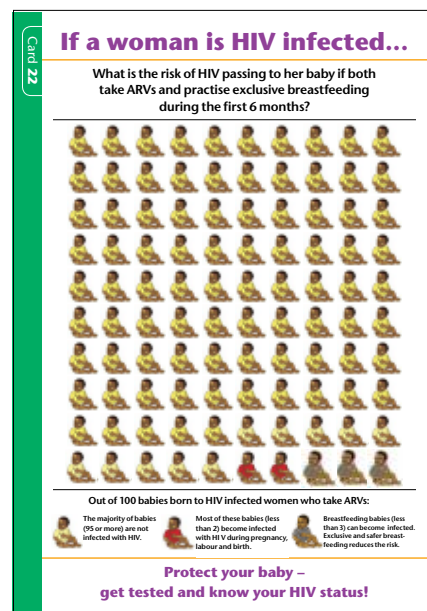
**The other 65 women will NOT pass HIV to their babies.**

- \* All women with HIV should prevent HIV re-infection by practising safer sex. This means using condoms during pregnancy and during breastfeeding.
- \* All breastfeeding mothers infected with HIV should seek immediate help or treatment at their nearest health facility if they have any infections or breast problems.

**Notes for community worker:** Use this card if the mother asks about risks of breastfeeding.

## If a woman is HIV infected.....

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



- \* A woman infected with HIV should be given special medicines (called antiretroviral drugs or ARVs) to decrease the risk of passing HIV to her infant during pregnancy, birth, or breastfeeding.
- \* A baby born to a woman who is HIV-infected should also receive special medicines (ARVs) to decrease the risk of getting HIV during the breastfeeding period.
- \* Throughout the entire period of breastfeeding, antiretroviral drugs are strongly recommended for either the HIV-infected mother or her HIV exposed infant.
- \* If an HIV-infected mother and her baby practise exclusive breastfeeding during the first six months and either the mother or baby take ARVs throughout the breastfeeding period, the risk of infection greatly decreases.
- \* If these preventive actions are taken, out of every 100 HIV-infected women who become pregnant, deliver, and breastfeed for at least one year, less than 5 of them will pass HIV to their babies:
  - 2 babies may become infected with HIV during pregnancy, labour and delivery
  - 3 babies may become infected with HIV through breastfeeding

**More than 95 of these women will NOT pass HIV to their babies.**

**Notes for community worker:** Use this card if the mother asks about risks of breastfeeding.



## Exclusively Breastfeed and Take ARVs



- \* Infant feeding recommendations are given to the mother at health facility
- \* Exclusive breastfeeding (giving ONLY breast milk) for the first 6 months together with special medicines (ARVs) for either mother or baby greatly reduces the chance of HIV passing from an HIV-infected mother to her baby.
- \* When an HIV-infected mother exclusively breastfeeds, her baby receives all the benefits of breastfeeding including protection from diarrhoea and other illnesses.
- \* Use counselling cards on exclusive breastfeeding and building your milk supply (Counselling Cards 3 to 7).
- \* Support the mother to feed her baby:
  - Follow recommended breastfeeding practices.
  - Very important to avoid mixed feeding.
  - Identify breast conditions of the HIV-infected mother and refer for treatment.
- \* HIV-exposed babies should be tested when they are about 6 weeks old.
- \* All babies who test positive at 6 weeks should breastfeed exclusively until 6 months, even in the absence of ARV interventions, and then continue to breastfeed for up to two years or longer. Complementary foods should be introduced at 6 months, as recommended.
- \* All breastfeeding babies who test negative at 6 weeks should continue to exclusively breastfeed until 6 months, even in the absence of ARV interventions, and continue to breastfeed until 12 months. Complementary foods should be introduced at 6 months, as recommended. After 12 months, breastfeeding should only stop once a nutritionally adequate and safe diet without breast milk can be provided.

### Notes for community worker:

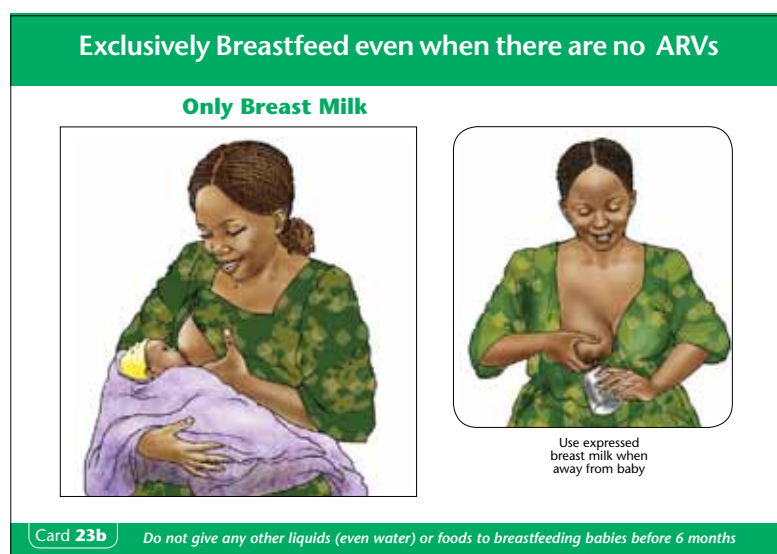
- \* When mother is on life-long treatment and breastfeeds, her baby should receive daily NVP from birth to 6 weeks.
- \* With one type of ARVs (depends on national policy) mother takes these medicines up to 1 week after breastfeeding stops and her baby receives daily NVP from birth to 6 weeks.
- \* With another type of ARVs (depends on national policy) mother takes these medicines for 1 week after birth and her baby receives daily NVP from birth until 1 week after breastfeeding stops.

**Notes for community worker continued:**

- \* *Explain the benefits of ARVs, both for the mother's health if she needs them and for preventing transmission of HIV to her baby.*
- \* *Support HIV-infected women to go to a clinic that provides ARVs, or refer for ARVs.*
- \* *Reinforce the ARV message at all contact points with HIV-infected women and at infant feeding support contact points.*
- \* *Refer to health facility if HIV-infected mother changes feeding option or her ARVs are going to run out soon.*

**Reminder:** This *Counselling Card* is for countries where national policy for HIV exposed infants is exclusive breastfeeding + ARVs.

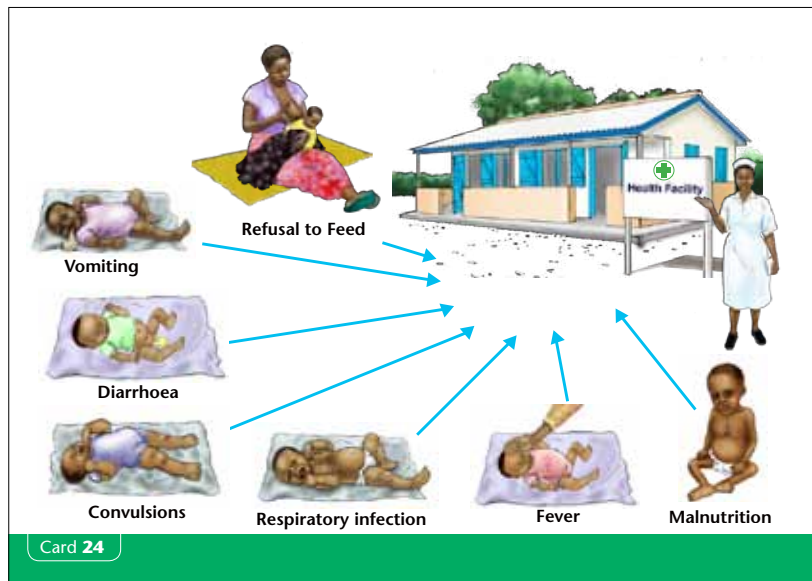
## Exclusively breastfeed even when there are no ARVs



- \* Exclusively breastfeeding (giving ONLY breast milk) for the first 6 months.
- \* Exclusive breastfeeding (giving ONLY breast milk) for the first 6 months greatly reduces the chance of HIV passing from an HIV infected mother to her baby.
- \* When an HIV-infected mother exclusively breastfeeds, her baby receives all the benefits of breastfeeding including protection from diarrhoea and other illnesses.
- \* Mixed feeding (feeding baby both breast milk and any other foods or liquids, including infant formula, animal milks, or water) before 6 months greatly increases the chances of an HIV-infected mother passing HIV to her baby.
- \* Mixed feeding can cause damage to the baby's stomach. This makes it easier for HIV and other diseases to pass into the baby.
- \* Mixed feeding also increases the chance of the baby dying from other illnesses such as diarrhoea and pneumonia because he or she is not fully protected through breast milk and the water and other milks or food can be contaminated.
- \* If an HIV-infected mother develops breast problems, she should seek advice and treatment immediately. She may be encouraged to express and heat treat her breast milk so that it can be fed to her baby while she is recovering.
- \* Use counselling cards on exclusive breastfeeding and building your milk supply (Counselling Cards 3 to 7).
- \* HIV-exposed babies should be tested for HIV when they are about 6 weeks old.

**Notes for community worker:** An HIV-infected mother should exclusively breastfeed during the first 6 months even if there is not always access to ARVs.

## When to bring your child to the health facility



- ✱ Take your child immediately to a trained health worker or clinic if any of the following symptoms are present:
- Refusal to feed and being very weak
  - Vomiting (cannot keep anything down)
  - Diarrhoea (more than 3 loose stools a day for two days or more and/or blood in the stool, sunken eyes)
  - Convulsions (rapid and repeated contractions of the body, shaking)
  - The lower part of the chest sucks in when the child breathes in, or it looks as though the stomach is moving up and down (respiratory infection)
  - Fever (possible risk of malaria)
  - Malnutrition (loss of weight or swelling of the body)

## Avoid All Breastfeeding



- \* Infant feeding recommendations are given to the mother at health facility.
- \* Exclusive replacement feeding (giving ONLY infant formula) for the first 6 months eliminates the chance of passing HIV through breastfeeding.
- \* Replacement feeding is also accompanied with provision of ARVs for the mother (at least 1 week after birth) and the infant (for six weeks after birth).
- \* Maintaining the mother's central role in feeding her baby is important for bonding and may also help to reduce the risks in preparation of replacement feeds.
- \* Mixed feeding (feeding baby both breast milk and any other foods or liquids, including infant formula, animal milks, or water) before 6 months greatly increases the chances of an HIV-infected mother passing HIV to her baby.
- \* Mixed feeding is always dangerous for babies less 6 months. A baby less than 6 months has immature intestines. Other food or drinks than breast milk can cause damage to the baby's stomach. This makes it easier for HIV and other diseases to pass to the baby.
- \* Support the mother to feed her child:
  - No mixed feeding
  - No dilution of formula
  - Help mother read instructions on formula tin
  - Feed the baby with a cup
  - See Special Circumstances Card 2
- \* Refer to health facility if her baby gets sick with diarrhoea or other illnesses or she has difficulty obtaining sufficient formula.

**Reminder:** This *Counselling Card* is only for countries where national policy for HIV exposed infants is exclusive replacement feeding OR for mothers who decided at the health facility to opt out of breastfeeding + ARVs.

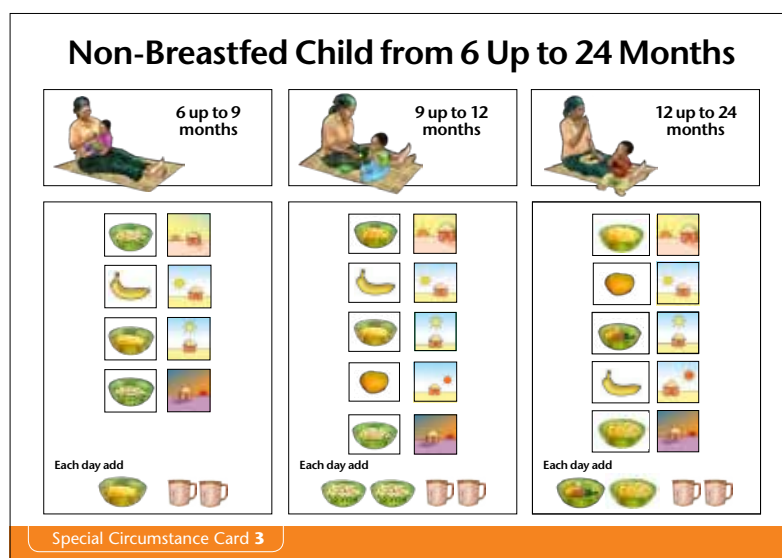
## Conditions needed to avoid all breastfeeding



- \* Infant feeding recommendations are given to the mother at health facility.
- \* Wash hands with soap and water before preparing formula and feeding baby.
- \* Make sure to get enough supplies for the baby's normal growth and development until he or she reaches at least 6 months. (A baby needs about 40 tins of 500g in formula for the first 6 months.)
- \* Always read and follow the instructions that are printed on the tin very carefully. Ask for more explanation if you do not understand.
- \* Use clean water to mix with the infant formula. If they can, prepare the water that is needed for the whole day. Bring the water to a rolling boil for at least 2 minutes and then pour into a flask or clean covered container specially reserved for boiled water.
- \* Keep or carry boiled water and infant formula powder separately to mix for the next feeds, if the mother is working away from home or for night feeds.
- \* Wash the utensils with clean water and soap, and then boil them to kill the remaining germs.
- \* Use only a clean spoon or cup to feed the baby. Even a newborn baby learns quickly how to drink from a cup. Do not use bottles, teats or spouted cups.
- \* Store the formula tin in a safe clean place.
- \* Only prepare enough infant formula for one feed at a time, and use the formula within one hour of preparation.
- \* DO NOT reintroduce breastfeeding: avoid any mixed feeding.

**Reminder:** This *Counselling Card* is only for countries where national policy for HIV exposed infants is exclusive replacement feeding OR for mothers who decided at the health facility to opt out of breastfeeding + ARVs.

## Non-breastfed child from 6 up to 24 months



**Note for community worker:** Only use this card for non-breastfed children who are between 6 and 24 months.

- \* A minimum of 2 cups of milk each day is recommended for all children under 2 years of age who are no longer breastfeeding.
- \* This milk can be either commercial infant formula, that is prepared according to directions, or animal milk, which should always be boiled for children who are less than 12 months old. It can be given to the baby as a hot or cold beverage, or can be added to porridge or other foods.
- \* All children need complementary foods from 6 months of age.
- \* The non-breastfed child from 6 up to 9 months needs the same amount of food and snacks as the breastfed child of the same age plus 1 extra meal plus 2 cups of milk each day (1 cup = 250 ml).
- \* The non-breastfed child from 9 up to 12 months needs the same amount of food and snacks as the breastfed child of the same age plus 2 extra meals plus 2 cups of milk each day.
- \* The non-breastfed child from 12 up to 24 months needs the same amount of food & snacks as the breastfed child of the same age plus 2 extra meals plus 2 cups of milk each day.
- \* After 6 months, also give 2 to 3 cups of water each day, in especially hot climates.



## Safe preparation of food

- \* Good hygiene (cleanliness) is important to avoid diarrhoea and other illnesses.
- \* Use clean utensils and store foods in a clean place.
- \* Cook meat, fish and eggs until they are well done.
- \* Wash vegetables, cook immediately for a short time and eat immediately to preserve nutrients.
- \* Wash raw fruits and vegetables before eating.
- \* Wash your hands with soap and water before preparing foods and after using the toilet and washing baby's bottom.



## Other important tips

- \* Rest more during the last 3 months of pregnancy and the first months after delivery.
- \* To prevent malaria, sleep under an insecticide-treated mosquito net.
- \* Take anti-malarial tablets as prescribed.
- \* Take de-worming tablets to treat worms and help prevent anaemia.
- \* Do not use alcohol, narcotics or tobacco products.



## Nutrition and HIV care

- \* Know your HIV status.
- \* To know your HIV status you must take a test.
- \* If you are HIV-infected, consult your health care provider on your care and treatment, and on how best to feed your baby.



- \* If you are HIV-infected, you need extra food to give you extra energy.

- \* Protect yourself and your baby from HIV and other sexually transmitted infections during pregnancy and while you are breastfeeding by practicing safe sex.



- \* Use condoms consistently and correctly. Consult a family planning counsellor.

This brochure was adapted and updated for UNICEF New York from material developed by University Research Co., LLC in Tanzania, Kenya, Malawi, and recently in Uganda under the NuLife Program: USAID Cooperative Agreement 717-A-00-08-00006-00, February 2010.

# Nutrition During Pregnancy and Breastfeeding





## Practice Good Nutrition

### What do you need to know?



- \* During your pregnancy, eat 3 meals each day plus one extra small meal or "snack" (food taken in between main meals).
- \* During breastfeeding, eat 3 meals each day plus two extra small meals or "snacks".
- \* Eat different types of local available foods each day.
- \* No special food is required to produce breast milk.
- \* Adolescent mothers need more food, extra care and more rest.

## Plan a 4 - Star Diet ★★☆☆



**Staples:** grains such as maize, wheat, rice, millet and sorghum, and roots and tubers such as cassava and potatoes  
**1 star ★**



**Legumes** such as beans, lentils, peas, groundnuts, and seeds such as sesame  
**2 stars ★★**



**Vitamin A-rich fruits and vegetables** such as mango, papaya, passion fruit, oranges, dark-green leaves, carrots, yellow sweet potato and pumpkin and **other fruits and vegetables** such as banana, pineapple, avocado, watermelon, tomatoes, eggplant and cabbage  
**3 stars ★★★**



**Animal-source foods** including foods such as meat, chicken, fish, liver and eggs and dairy products  
**4 stars ★★★★★**



Oil and fat such as oil seeds, margarine, ghee and butter improve the absorption of some vitamins and provide extra energy.

## Protect Your Health

### Pregnant and breastfeeding women need to:



- \* Attend antenatal care at least 4 times during pregnancy starting as early as possible.
- \* Drink whenever you are thirsty.
- \* Avoid taking tea or coffee with meals and limit the amount of coffee you drink during pregnancy.

### What supplements do you need?

\* You need iron and folic acid tablets during pregnancy and for at least 3 months after your baby's birth.



- \* Take iron tablets with meals to increase absorption.
- \* Always use iodised salt to prevent learning disabilities, delayed development, and poor physical growth in the baby; and goitre in the mother.
- \* Take vitamin A supplements immediately after birth or within 6 weeks after delivery to ensure that your baby receives the vitamin A in your breast milk.

## How to prevent common breastfeeding difficulties

- \* Position and attach your baby correctly on the breast. Breastfeeding should not hurt.

- \* If you develop cracked nipples, put some breast milk on them. Do not use any types of creams or ointments except when prescribed by a health care provider.



- \* Feed frequently to prevent your breasts from becoming swollen.

- \* If the baby misses a feed you should express some milk to keep your breasts soft.

- \* Keep expressed breast milk in a cool place, but not for longer than 6 to 8 hours.

- \* If one or both of your breasts become painful or hot to the touch, see a health care provider.

- \* Check for sores and thrush in your baby's mouth. If you find any, see a health care provider.

- \* Mixed feeding (combining breast milk with anything else) is not healthy for your baby before 6 months of age. Mixed feeding reduces the amount of milk that you produce and can make your baby sick.

- \* If you have trouble practicing exclusive breastfeeding, discuss your situation with a trained counsellor.



## Things to remember

- \* Exclusive breastfeeding during the first six months protects you from getting pregnant as long as your periods have not returned. Consult a family planning counsellor as soon as possible after giving birth.

- \* When your baby is 6 months old, continue breastfeeding and begin giving other foods.

- \* Watch for signs of diarrhoea, fever, difficulty breathing, or refusal to feed because these need prompt attention.

- \* If a woman is HIV-infected, she should not feed her baby from a nipple that is cracked or bleeding. Instead, feed from the other breast and express and discard the milk from the breast that is affected.



- \* Getting infected or re-infected with HIV while breastfeeding increases the risk of mother to child transmission. Practice safe sex by using condoms consistently and correctly.

- \* To protect your baby, know your HIV status.



This brochure was adapted and updated for UNICEF New York from material developed by University Research Co., LLC in Tanzania, Kenya, Malawi, and recently in Uganda under the Nuffile Program. USAID Cooperative Agreement 7717-A-00-08-00006-00. February 2010.

# Breastfeeding

## What do I need to know?



- \* Breast milk provides all the food and water that your baby needs during the first 6 months of life.
- \* Make sure you feed your baby the first yellowish milk known as colostrum.
- \* Colostrum protects your baby from many diseases.
- \* Exclusive breastfeeding means giving breast milk only, and nothing else (no other milks, foods or liquids, not even sips of water), except for medicines prescribed by a doctor or nurse.
- \* Feeding your baby both breast milk and other foods or liquids, including infant formula, animal milks, or water (called 'mixed feeding') before 6 months reduces the amount of milk that you produce and can make your baby sick.

## Help baby attach to your breast



- \* Put the baby to your breast within the first hour of birth.
- \* Good attachment helps to ensure that your baby suckles well.
- \* Good attachment helps you to produce a good supply of breast milk.
- \* Good attachment helps to prevent sore and cracked nipples.



- \* To make sure your baby is attached well:
  - Touch baby's lips with your nipple
  - Wait until your baby's mouth opens wide
  - Quickly bring onto your breast from below, aiming your nipple up towards the roof of the baby's mouth
  - Baby should take a big mouthful of breast



- \* The 4 signs of good attachment are:
  1. Baby's mouth is wide open
  2. You can see more of the darker skin (areola) above the baby's mouth than below
  3. Baby's lower lip is turned outwards
  4. Baby's chin is touching your breast
- \* Your baby should take slow deep sucks while breastfeeding, sometimes pausing.

## How often should I breastfeed?



- \* Breastfeed your baby on demand, both day and night, at least 8 to 12 times each day.
- \* Frequent feeding will help your body to produce breast milk.
- \* Continue to feed until your baby finishes the breast and comes off on his or her own. Offer the other breast and let your baby decide if he or she wants more or not.

- \* You will know if your baby is taking enough breast milk if he or she passes light-coloured urine at least 6 times a day and is gaining weight.



## Feed more as the baby grows



**Begin to feed at 6 months**  
**Type of food:**  
 Soft porridge, well mashed food  
**How often:**  
 2 to 3 times each day  
**How much:**  
 2 to 3 tablespoons at each meal



**From 6 up to 9 months**  
**Type of food:**  
 Mashed food  
**How often:**  
 2 to 3 times each day and 1 to 2 snacks  
**How much:**  
 2 to 3 tablespoons up to one-half (1/2) cup at each meal



**From 9 up to 12 months**  
**Type of food:**  
 Finely chopped or mashed food and foods that baby can pick up with his or her fingers  
**How often:**  
 3 to 4 times each day and 1 to 2 snacks  
**How much:**  
 At least one half (1/2) cup at each meal



**From 12 up to 24 months**  
**Type of food:**  
 Family foods, chopped or mashed if necessary  
**How often:**  
 3 to 4 times each day and 1 to 2 snacks  
**How much:**  
 Three-quarters (3/4) up to 1 full cup at each meal

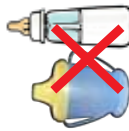
\* A snack is extra food between meals

\*\* A cup is 250 ml

## Things to remember



- \* Between the age of 6 months and 2 years a child needs to continue breastfeeding.
- \* If you are not breastfeeding, feed your baby two cups (500 ml total) of milk every day.
- \* Avoid giving a baby tea, coffee, soda and sugary or coloured drinks. Limit amount of fresh juices.
- \* Always feed the baby using a clean open cup. Do not use bottles, teats or cup with a mouth piece.



- \* Continue to take your child to the clinic for regular check-ups and immunizations.
- \* During illness give the baby small frequent meals and more fluids, including breast milk or other liquids. Encourage the baby to eat a variety of (his or her) favourite soft foods. After illness feed more food and more often than usual for at least 2 weeks.



## How to Feed a Baby After 6 Months

This brochure was adapted and updated for UNICEF New York from material developed by University Research Co., LLC in Tanzania, Kenya, Malawi, and recently in Uganda under the NuLife Program: USAID Cooperative Agreement 717A-00-08-00006-00, February 2010.



## After 6 Months

### What do you need to know?

- \* For the first 6 months, exclusively breastfeed your baby (no other milks, foods or liquids, not even sips of water).



- \* When your baby reaches 6 months, continue breastfeeding on demand both day and night.
- \* Breast milk continues to be an important part of the diet until the baby is at least 2 years.
- \* When feeding a baby between 6 and 12 months old, always give breast milk first before giving other foods.
- \* After 6 months of age, children should receive vitamin A supplements twice a year. Consult your health care provider.

### When your baby first starts to eat

- \* Give your baby 1 or 2 tablespoons of soft food three times each day. Gradually increase the frequency, amount, thickness and variety of food.



- \* Enrich the baby's porridge and mashed foods with breast milk, mashed groundnuts, fruits and vegetables, and start animal source foods as early and as often as possible.

- \* Your baby needs a variety of foods:



- \* Infants only need a very small amount of oil (no more than one half (1/2) teaspoon per day).



### Safe preparation and storage

- \* Wash your hands with running water and soap before preparing food, and before feeding your baby. Baby's hands should be washed also. Wash your hands after changing nappies or going to the toilet.



- \* Wash all bowls, cups and utensils with clean water and soap. Keep covered before using.



- \* Prepare food in a clean area and keep it covered. A baby should have his or her own cup and bowl.



- \* Serve food immediately after preparation.

- \* Thoroughly reheat any food that has been kept for more than an hour.

- \* Babies gradually learn to feed themselves. An adult or an older child should encourage the baby to eat enough food and ensure that the food remains clean.



