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Facilitator's Guide for Conducting Mother-to-Mother Support Group Monthly Meetings in Ghana



November 2017

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ABOUT SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a seven-year USAID-funded cooperative agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

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Introduction

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a seven-year USAID-funded program to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes.

In Ghana, SPRING has been working in Northern and Upper East Regions where rates of child undernutrition are among the highest in the country. Currently, SPRING's activities cover 15 districts and 405 communities through partnerships with the Ghana Health Service and other agencies. While the SPRING program addresses the entire community, the focus of action is on 1,000-day households—households with a pregnant or lactating woman or a child under the age of two years. The focus is on these households because the first 1,000 days of a child's life are the time to prevent undernutrition and ensure healthy growth. Losses during this period cannot be recovered as the child develops.

SPRING works in collaboration with local district assemblies and institutions like the Ghana Health Service, the Ministry of Food and Agricultural, and the Environmental Health Unit, among others, in three broad areas.

1. Nutrition, with a focus on improving infant and young child feeding – SPRING works to improve capacity of health facility-based staff and community-based health volunteers to promote and improve infant and young child feeding (IYCF) practices including early introduction and exclusive breastfeeding; timely and appropriate complementary feeding; and effective decision-making through growth chart monitoring and targeted counselling.
2. Water, sanitation, and hygiene – SPRING encourages proper hygiene through the promotion of four key water, sanitation, and hygiene behaviours: (1) safe disposal of human and animal feces, (2) clean and safe play spaces for children, (3) safe water consumption through appropriate water treatment including boiling, and (4) handwashing with soap at critical times.
3. Agriculture – SPRING's agriculture focus is limited to reducing aflatoxin exposure through infected groundnuts. Program activities include capacity building for agriculture extension agents to engage farmers through Farmer Field Schools, aflatoxin awareness campaigns, and promoting good agronomic practices to ensure the production of aflatoxin-free groundnuts to increase household income and reduce consumption.

Social and behaviour change communication (SBCC) cuts across all SPRING activities. SPRING uses a variety of communication channels including mass media, interpersonal communication, and community-based platforms to improve access to critical information and to motivate health providers and families to adopt key nutritional practices.

This guide is to be used by community health volunteers to guide mother-to-mother support group (MTMSG) discussions with caregivers of children under 2 years of age. For sessions 3 and 8, please ask a community health worker to help support the discussions and respond to questions about care and services. Please use this guide with the companion communication materials: a radio serial drama entitled "Shrubs that Grow Become Tomorrow's Forest," IYCF counselling cards and adapted counselling cards, and short videos. Each session will spark conversation among mothers and caregivers about child undernutrition and motivate them to try good nutritional practices at home. After each session, help members name a behaviour that they will practice at home and then ask them to be prepared to come back and talk about it in the next session.

Using This Guide to Conduct a Mother-to-Mother Support Group Meeting

This guide is designed to be used with a mother-to-mother support group over the course of nine meetings. Each session should last one hour. Sessions may go longer if participants would like.

This guide gives step-by-step instructions for each session, including when to use the communication materials provided by SPRING. The communication materials include

- the original radio serial drama on infant and young child feeding and hygiene practices—"The Shrubs of Today Become Tomorrow's Forest" (six episodes);
- infant and young child feeding (IYCF) counselling cards, including adapted counselling cards; and
- four short counselling videos on breastfeeding and complementary feeding practices.

[Note: these materials can also be used during individual counselling sessions if participants ask for some additional information or support after the session.]

Make sure you have received the package of these materials from SPRING and that you are familiar with them before you start your sessions. The IYCF counselling cards may be accessed at the local health facility or online.

Remember, if you choose to play one of the radio episodes, you will need to have a radio player available and be in a meeting location where everyone can hear the episode clearly.

Use the materials during the sessions. They help to make the session more lively and interesting.

The main goals of these sessions are to get participants to *try* recommended behaviours at home and to recollect information or a process of performing a specific task related to IYCF. At the end of each session, ask for volunteers to try some of the behaviours that you talked about. In the next meeting, let participants talk about their experiences. If they had challenges, let the group help them find ways to address the problems. Also help them celebrate what worked!

Recording and Reporting Support Group Activities

This guide also includes reporting forms to help you report on each activity (Annex 1). These reports are important to track the number of caregivers that participate, how many sessions are conducted, and if there are any changes that need to be made. These forms will be collected by the secretary of the mother-to-mother support group or a community health volunteer every month.

Sessions

The 9 session topics in this guide are:

Session 1: Introducing the Mother-to-Mother Group

Session 2: Early Initiation and Exclusive Breastfeeding of Children 0–6 months old

Session 3: Management of Breastfeeding Difficulties

Session 4: How to Reduce Contamination of Food and Water Given to Children 6 Months of Age and Older

Session 5: How to Give Mixed and Enriched Foods to Children 6 Months of Age and Older

Session 6: How to Give Liver to Children 6 Months of Age and Older

Session 7: How to Give Boiled Water to Children 6 Months of Age and Older

Session 8: Feeding a Sick Child

Session 9.: Referrals to Health Facilities

Session 1: Introduction to the Mother-to-Mother Support Group

Time: 60 minutes

Objectives:

- To introduce the importance of infant and young child feeding (IYCF)
- To explain the purpose of the mother-to-mother support group meetings
- To introduce participants to the materials to be used: radio program "Shrubs of Today Become Tomorrow's Forest," short counselling videos, and counselling cards

Materials:

- "Shrubs of Today Become Tomorrow's Forest," radio serial drama: Episode 1—Protect and Nourish the Seedlings for the First 1,000 Days (run time: about 20 minutes)
- IYCF counselling cards (use adapted counselling card 1 – Annex 2)
- Short counselling videos on breastfeeding and complementary feeding

Step 1: Welcome everyone to the session

Ask:

- any participant to say a prayer.
- all participants to introduce themselves.

Step 2: Introduce the purpose of the mother-to-mother support groups and what they will be doing

Say:

- The groups will help caregivers of children under two years of age to learn about and discuss the importance of infant and young child nutritional practices during a child's first 1,000 days.
- After each session, each of you will be encouraged to try the new behaviours at home and come back to the group and discuss what worked and what was challenging. The group is here to support everyone.
- Each session will last about an hour but as a group, we can agree to extend the discussion as we go along.
- We will meet at the same place and same time that we designate today. There are 13 sessions and you are all encouraged to come to each session.
- We will use IYCF counselling cards, short videos, and a radio program, "The Shrubs of Today Become Tomorrow's Forest," to help with our discussion.

Step 3: Agree on group rules, norms and meeting schedule

Say:

- It is important that everyone feels comfortable to talk freely in this group. Anything confidential said in the group should not be repeated to others outside the group.
- It is important to respect others when talking.

- It is important to come on time.
- Remember, this group is meeting to learn and discuss new topics and to support each other as we try new behaviours at home to improve the health of our children and families.

Ask:

- the group for other ‘rules’ and write them down in a notebook. You can remind members about these rules whenever necessary.
- the group to agree on a time and location for the meetings.

Step 4: Play Episode 1 of the “*Shrubs of Today Become Tomorrow’s Forest*”

Say:

- "The Shrubs of Today Become Tomorrow’s Forest" is a radio drama that is on air now. We are going to listen to the first episode which talks about the importance of child nutrition during the first 1,000 days of a child’s life to prevent stunting and anaemia.

Play the radio drama, episode 1 (it is about 20 minutes).

Step 5: Short group discussion

Ask:

- What are the main messages you heard in the program?
- Do you have any questions about what was discussed in the program?
- Why do you think nutrition is important during a child’s first 1,000 days?

Listen and note all responses.

Say:

- During our meetings, we will be listening to the radio program and discussing what happens.

Step 6: Summarize the key messages for this lesson

Say:

- The first 1,000 days of a child’s life are from the beginning in the womb to 2 years of age (show adapted IYCF card 1 in Annex 2).
- It is a critical period because poor growth (both in the body and in the mind) during this period cannot be corrected later.
- Many children are suffering from poor growth, and we all need to take action to change this.
- Actions include feeding the child with nutritious food and protecting the child from illness just as a farmer feeds and protects crops from damage.

Step 7: Group wrap-up

Say:

- Tell your friends and family to listen to the new radio program "Shrubs of Today Become Tomorrow's Forest" at home. It is aired on selected FM stations. We'll be listening to the program together and discussing it in some our sessions.

Ask:

- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 2: Early Initiation and Exclusive Breastfeeding of Children 0–6 Months Old

Time: 60 minutes

Objectives:

- To understand the benefits of exclusive breastfeeding for children 0–6 months old
- To know basic breastfeeding techniques for children 0–6 months old

Materials:

- "Shrubs of Today Become Tomorrow's Forest," radio serial drama: Episode 2—Welcoming the Shrub: Immediate and Exclusive Breastfeeding (run time: about 25 minutes)
- IYCF counselling cards: 2, 3, 4, 5 and 6

Key Messages:

Apply proper breastfeeding techniques with children under 6 months old.

- Put the newborn baby to the breast immediately (within 60 minutes) after birth.
- Give nothing else besides breast milk since breast milk contains enough food and water for all of the baby's needs.
- Have patience while breastfeeding; use both breasts at each feeding and feed 10–12 times (on demand) through the day and night.

Step 1: Introduce session

Say:

- Today's discussion is on exclusive breastfeeding for children 0–6 months old.

Step 2: Introduce the radio episode to the group

Say:

- We are going to listen to the second episode of the "Shrubs of Today Become Tomorrow's Forest," entitled *Welcoming the Shrub: Immediate and Exclusive Breastfeeding*

Play the radio drama, episode 2.

Step 3: Group discussion

Ask:

- What were the main messages you heard in the program?
- Why is exclusive breastfeeding important to the infant, mother, family, and community?
- What are the risks of not exclusively breastfeeding to the infant, mother, family, and community?
- What are the recommended breastfeeding practices for a child less than 6 months old?

Listen and note all responses.

Step 4: Ask the group if they have any more questions about exclusive breastfeeding

- Answer the questions using the IYCF counselling cards.
- If you are unable to answer a participant question, write it down to discuss with the health worker after the session.

Step 5: Summarize the main points about exclusive breastfeeding – use counselling cards to summarize these points (refer to counselling cards 2, 3, 4, 5, and 6)

- Frequent skin-to-skin contact between mother and infant leads to *bonding* and better brain, emotional and social development of the infant. Close contact and attention help infants feel secure and loved, which is important for their growth and development.
- Breastfeeding frequently from birth helps the baby learn to attach and helps to prevent breast engorgement and other complications in the mother.
- Giving water (in addition to or instead of breast milk) will fill the infant's stomach leading to less suckling and less breast milk being consumed; less breast milk will be produced by the mother.
- Exclusive breastfeeding from birth up to 6 months of age, on demand 12 times or more a day and night, helps produce lots of breast milk.
- Crying is a late sign of hunger; breastfeed on cue/demand when one of the following is seen: restlessness, opening mouth and turning head from side to side, putting tongue in and out, sucking of finger or fists, or smacking of lips.
- Switching back and forth from one breast to the other frequently prevents the infant from getting the nutritious "hind milk." The baby should empty one breast completely before being switched to the other breast.

Step 6: Encourage members to practice the key behaviour discussed

- Identify a willing (volunteer) mother ready to practice exclusive breastfeeding.
- The volunteer mother will share her experience during the next meeting

Ask:

- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 3: Management of Breastfeeding Difficulties*

[***Note:** Arrange for CHWs to support this session]

Time: 60 minutes

Objectives:

- To identify common breastfeeding difficulties
- To know the ways to prevent the complications of breastfeeding difficulties
- To know how to address challenges of "not enough" breast milk

Materials:

- "The Shrubs of Today Become Tomorrow's Forest," radio serial drama: Episode 4—Nurturing the Sprout with the best Nutrition: Tips on Successful Breastfeeding (run time: about 25 minutes)
- IYCF counselling cards 2, 3, 4, 7 and adapted counselling card 3 (Annex 3)
- Pictures from IYCF manual: breast engorgement, sore/cracked nipple, plugged duct, mastitis, inverted nipple
- Short counselling videos on breastfeeding, attachment, and cradle and underarm hold

Key Messages:

- Feed babies only breast milk for the first 6 months of life; feed no water or porridge.
- Breastfeed a baby at least 8 times during each day and also breastfeed at night.
- Take time to breastfeed, emptying both breasts at each feeding.

Step 1: Review previous session on breastfeeding

Ask:

- How many of you practiced last month's key behaviour?
- How many were not able to and what were some of the challenges you faced?
- What are some things we can do to support those who could not perform the key behaviour?

Step 2: Introduce the session

Say:

- Today's discussion is on management of breastfeeding difficulties.

Step 3: Introduce the radio episode to the group

Say:

- We are going to listen to the fourth episode of the "Shrubs of Today Become Tomorrow's Forest," entitled *Nurturing the Sprout with the best Nutrition: Tips on Successful Breastfeeding*.
- Today's episode will follow our characters as they address difficulties with breastfeeding.

Play the radio drama, episode 4.

Step 4: Group discussion

Ask:

- What were the key messages you heard in the radio episode?
- What are the common breastfeeding problems you and others in the community have experienced?
- How does one know a mother has a breastfeeding difficulty in the community?

Show the pictures of common breastfeeding difficulties using the IYCF cards.

Ask:

- Are these breastfeeding difficulties similar to those identified in the community?
- What symptoms do women with breastfeeding difficulties present in the community?
- How might these conditions be prevented in the community?

Listen and note all responses.

- Answer the questions using the IYCF counselling cards.
- If you are unable to answer a participant question, write it down to discuss with the health worker after the session.

Step 5: Summarize the main points about management of breastfeeding difficulties

- Any woman can suffer from a breastfeeding difficulty, therefore it is very important to visit your clinic as early as possible for assistance if it's happened.
- Allow the baby to continue breastfeeding regularly.
- Building a mother's confidence is important in producing enough milk.
- Removing plenty of breast milk from the breast is also very important to increasing the milk supply.
- Demonstrate that every mother needs to be supported to effectively breastfeed her child, especially in the event of "not enough" breast milk, by assisting the mother to address the difficulty.

Step 6: Ask the group if they have any more questions about breastfeeding difficulties

- Answer the questions using counselling cards.
- If you are unable to answer a participant question, write it down to discuss with the health worker after the session.

Ask:

- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 4: How to Reduce Contamination of Food and Water Given to Children 6 Months of Age and Older

Time: 60 minutes

Objectives:

- To know the importance of handwashing before food preparation and feeding
- To know the importance of warming food before feeding children 6 months of age and older

Materials:

- "Shrubs of Today Become Tomorrow's Forest," radio serial drama: Episode 3—Practicing Proper Hygiene (run time: about 25 minutes)
- IYCF counselling card 12 and adapted IYCF card 3 (Annex 4)
- Tippy Tap
- Soap
- Ash

Key Messages:

- Wash your hands with soap under running water at important times throughout the day: after using the latrine, before eating, and before feeding the baby and washing the babies' hands.
- Make a Tippy Tap for a convenient handwashing stations. [Use adapted IYCF card 3 in Annex 4]

Step 1: Review the last session on exclusive breastfeeding

Ask:

- Of those with infants less than 6 months old, how many practiced the last session's key behaviour?
- How many were not able to and what challenges did you face?
- What are some things we can do to support those who could not perform the key behaviour?

Step 2: Introduce the session

Say:

- Today's discussion is on ways to reduce contamination of food and water given to children 6 months of age and older.

Step 3: Introduce the radio episode to the group

Say:

- We are going to listen to the third episode of the "Shrubs of Today Become Tomorrow's Forest," entitled *Practicing Proper Hygiene*.

Play the radio drama, episode 3.

Step 4: Group discussion

Ask:

- What key messages do you remember from the episode?
- Do your children fall sick?
- What do you think makes our children fall sick?
- Does contamination of our hands also make our children sick? How?
- How can we break contamination of our hands during feeding our children?
- What are some important things to consider about proper handwashing?
- What are warm foods?
- Do you give warm foods to your children?

Listen and note all responses.

Step 5: Ask the group if they have any more questions about reducing food contamination

- Answer the questions.
- If you are unable to answer a participant's question, write it down to discuss with the SPRING/GHS team after the session.

Step 6: Summarize the main points about reducing food contamination

- Washing hands with water and soap before preparing food and feeding children prevents them from falling sick. Hands should be washed all the times, but if you have lack of water, you should wash your hands at least during four critical times: before eating; before feeding children; after using toilets; after cleaning children's poo.
- Food gets contaminated from handling by mothers and children at the point of feeding the children.
- Handwashing with soap under running water by both mother and child before feeding will help to reduce contamination, which leads to growth of the children.
- Warm foods (and not hot foods) should be given to children.
- Reheat foods to make them warm.
- Warm foods are free from germs.
- Feed children with warm foods all the time.

Step 7: Develop household action plan and close

Ask:

- for volunteer mothers with children older than 6 months who will agree to practice the key behaviour to reduce food contamination. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 5: How to Give Mixed and Enriched Foods to Children 6 Months of Age and Older

Time: 60 minutes

Objectives:

- To understand why it's important to give children 6 months of age or older a variety of nutritious foods
- To know how to give a variety of nutritious foods to children 6 months of age or older

Materials:

- "Shrubs of Today Become Tomorrow's Forest," radio serial drama: Episode 5—Feeding the New Growth, Introducing nutritious, local foods (run time about 25 minutes)
- IYCF counselling cards 14, 15, 16 and 17
- Short counselling video: Complementary Feeding, Enriched Porridge
- Short counselling video: Complementary Feeding – Enriched Mashed Yam
- Phone that can play videos if available
- Food items

Key Messages:

- Give children 6 months of age and older mixed food (coloured food), for example, porridge mixed with ground nut and green vegetables, or beans, or carrot, or orange flesh sweet potatoes, or small fish or meat (pieces of meat or meat soup).
- Enrich food with oil, such as palm oil.

Step 1: Review the last session – reducing food contamination

Ask:

- Can someone summarize the key points from the last session?
- Did anyone try some of the key behaviours and note them? What were the challenges? What worked well?
- What are some things we can do to support those who could not perform the key behaviour?

Say:

- Offer those who volunteered to share words of encouragement and thank them for sharing.

Step 2: Introduce the session

Say:

- Today's session is how to give mixed and enriched foods (some may call this "complementary feeding") to children 6 months of age and older

Ask:

- Can anyone list the types of foods you give to children older than 6 months of age?

Listen and note all responses.

Step 3: Introduce the radio episode to the group

Say:

- We are going to listen to the fifth episode of the "Shrubs of Today Become Tomorrow's Forest," entitled *Feeding the New Growth: How to Feed Babies 6–12 Months*.

Play the radio drama, episode 5.

Step 4: Group discussion

Ask:

- What key messages do you remember from the episode?
- Ask: do you mix foods you give your children and if you do why? If not why not?

Listen and note all responses.

Facilitator emphasizes that mixing foods ensures that variety of nutrients are available for good growth of children

Step 5: Group work

- Divide participants into three groups.
- Make sure at least one person in each group has a copy of the short counselling video on a mobile phone or if this is not possible, use the IYCF counselling cards.

Ask:

- groups to watch the two short videos on enriched foods. If the videos are not available, review the counselling cards.
- each group to discuss the video or cards and identify other ways they can make enriched meals using nutritious foods they can find near their homes.
- each group to appoint a member to present group discussion.

Step 6: Summarize the main points about enriched and mixed foods using the IYCF counselling cards

Say:

- Different foods have different levels of nutrients.
- Mixing foods or making foods "coloured" ensure increased levels of nutrients are available for children's growth.
- A little drop of oil in the child's porridge can enrich it by increasing the energy level. Enrichment is adding nutrients that were lost or diminished during food processing or were not originally present.

- Enriched foods are foods that oil/fats are added to increase energy levels in less volume and can also increase nutrient density. [Use IYCF counselling cards with complimentary food as support material.]

Step 7: Develop household action plan and close

Ask:

- for volunteer mothers with children 6 months or older who will agree to practice key behaviour on enriched mixed foods. Ask them to practice and make a note about what went well or what challenges they faced. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 6: How to Give Liver to Children 6 Months of Age and Older

Time: 60 minutes

Objectives:

- To know the benefits of giving liver to children 6 months of age and older
- To know ways to add liver to meals for children 6 months of age and older

Materials:

- Adapted IYCF adapted counselling card 1 (Annex 2)
- Samples of fried, roasted, dried, grilled and raw liver
- Food containers

Key Messages:

- Give children 6 months of age and older 20 grams of boiled or roasted or cooked liver at least every two weeks.

Step 1: Review the last session – giving mixed and enriched foods to children older than 6 months

Ask:

- Can someone summarize the key points from the last session?
- Did anyone try some of the key behaviours and note them? What were the challenges? What worked well?
- What are some things we can do to support those who could not perform the key behaviour?

Say:

- Offer those who volunteered to share words of encouragement and thank them for sharing.

Step 2: Introduce the session

Say:

- Today's session is on how to give liver to children 6 months of age and older

Step 3: Group discussion

Ask:

- Who eats liver at home and why?
- What are the benefits of eating liver?
- Can you give your children liver?
- How do you prepare liver before eating?

- What are the challenges to giving liver to children?
Listen and note all responses and clarify any misinformation.

Say:

- Mixing foods ensures that a variety of nutrients is available for good growth of children.

Step 4: Summarize the main points about giving liver to children 6 months of age and older [cooking demonstration with liver if possible]

Say:

- Liver is boneless and can be given to children 6–24 months.
- Liver can be boiled, grilled, fried, dried or roasted before eating.
- Liver is a rich source of iron (blood).
- Liver contains very high levels of iron, which contribute significantly to the reduction of anaemia in children.
- A thumb size of liver consumed every two weeks can help to reduce anaemia in children
- Whenever available it should be given to children to eat.
- Give one to four spoons of food to children 6 months old, increasing by age as the counselling card shows.

Step 5: Develop household action plan and close

Ask:

- for volunteer mothers with children older than 6 months who will agree to try giving liver to those children and make a note about what went well or what challenges they faced. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 7: How to Give Boiled Water to Children 6 Months of Age and Older

Time: 60 minutes

Objectives:

- To know the importance of giving boiled water to children 6 months of age and older
- To know how to give boiled water to children 6 months of age and older

Materials:

- Adapted IYCF counselling card 4 (Annex 5)
- Cooking Utensils
- Water
- Cooking items
- Potable Water

Key Messages:

- Always boil any water that you give children who are 6 months of age or older.

Step 1: Review the last session – giving liver to children 6 months of age and older

Ask:

- Can someone summarize the key points from the last session?
- Did anyone try some of the key behaviours and note them? What were the challenges? What worked well?
- What are some things we can do to support those who could not perform the key behaviour?

Say:

- Offer those who volunteered to share words of encouragement and thank them for sharing.

Step 2: Introduce the session

Say:

- Today's session is on how to give boiled water to children 6 months of age and older.

Step 3: Group discussion

Ask:

- What makes your water unclean?
- Why should uncleanliness be prevented?
- How can the uncleanliness be prevented?

- How many opportunities do you have to boil water during the day?
- How can the boiled water be stored safely for children?

Listen and note all responses and clarify any misinformation.

Step 4: Summarize main points about giving boiled water to children 6 months of age and older [add demonstration of boiling water if possible]

Say:

- Water gets contaminated at the source and from handling.
- Contaminated water can cause diseases (like diarrhoea, cholera and others), malnutrition, and death.
- Boiling water can prevent water from being contaminated. Boiled water can be obtained by the cooking process and does not require extra resources.
- Boiled water can be safely stored in clean containers for 24 hours and given to children.

Step 5: Develop household action plan and close

Ask:

- for volunteer mothers with children older than 6 months of age who will agree to practice key behaviour related to giving their child boiled water and make a note about what went well or what challenges they faced. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 8: Feeding a Sick Child*

*[*Note: Arrange for CHWs to support this session]*

Time: 60 minutes

Objectives:

- To name the recommended practices for feeding a sick child
- To identify signs of illness that need attention from a health provider

Materials:

- IYCF counselling cards 9, 11 and 19
- Picture of a sick child

Key Messages:

- A sick baby often does not feel like eating, but needs even more strength to fight the illness.
- Breastfeed more frequently during diarrhoea to help the baby fight the sickness and not lose weight.
- If the baby is too weak to suckle, express breast milk to give to the baby either by cup or using a spoon.
- Recognize and respond to signs of baby's illness: lethargy, fever, diarrhoea, vomit, lack of appetite, difficulty breathing.
- Encourage the baby until he or she takes the breast again.

Step 1: Review the last session – how to give boiled water to children 6 months of age and older

Ask:

- Can someone summarize the key points from the last session?
- Did anyone try some of the key behaviours and note them? What were the challenges? What worked well?
- What are some things we can do to support those who could not perform the key behaviour?

Say:

- Offer those who volunteered to share words of encouragement and thank them for sharing.

Step 2: Introduce the session

Say:

- Today's discussion is on how to feed a sick child

Step 3: Group activity

Divide mothers into four groups. Each group discusses one of the following within their group.

- Identify one person to present back the key points of the group discussion.

- How do you feed a child who is *less than 6 months old during illness*? How do you feed a child who is *less than 6 months old after illness*?
- How do you feed a child who is *older than 6 months during illness*? How do you feed a child who is *older than 6 months after illness*?

Step 4: Group discussions

Ask:

- each group to present their discussion to the larger group
- what signs will a mother/father/caregiver see in a child before sending the child to a health facility?
- participants to take turns and tell the rest of the group one danger sign under a referral point and where they think such a condition should be sent.

Listen and note all responses. Correct any answers as necessary.

Step 5: Ask the group if they have any more questions about how to feed a sick child

- Answer the questions.
- If you are unable to answer a participant question, write it down to discuss with the SPRING team after the session.

Step 6: Summarize the main points about feeding a sick child

- Indicate that responsive feeding can improve recovery during and after illness.
- Maintain regular breastfeeding for an infant less than 6 month old. Continue breastfeeding and add 4 star meals for a child older than 6 months of age.
- These should be done according to the recommended IYCF feeding practices for breastfeeding and complementary feeding for a sick child, offering favourite foods more often.
- Keep child clean and dry day and night.
- Any child showing a danger sign should be sent immediately to the health facility.

Step 7: Develop household action plan and close

Ask:

- for volunteer mothers with children under 6 months of age who will agree to practice key behaviour on feeding a sick child and make a note about what went well or what challenges they faced. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

Session 9: Referrals to Health Facilities

Time: 60 minutes

Objectives:

- To identify when children require referral to a health facility
- To know how to assist family members to make referrals

Materials:

- IYCF counselling cards 21 and 22
- Growth charts

Key Messages:

- Identify conditions that require referrals

Step 1: Review the last session – how to feed a sick child

Ask:

- How many practiced last session's key behaviour?
- How many were not able to and what were the challenges they faced?
- What are some things we can do to support those who could not perform the key behaviour?

Say:

- Offer those who volunteered to share words of encouragement and thank them for sharing.

Step 2: Introduce the session

Say:

- Today's discussion is on referrals to health facilities.

Ask:

- participants to name some instances when a child may require referral.
- participants to describe how referral is done.

Listen and note all responses. Correct any answers as necessary.

Step 3: Summarize the main points about referrals to health facilities

- When the child's condition cannot be handled at the community level, send the child to a higher level where it can be managed.
- Mothers and caregivers should send the child early to save the life of the child. The following conditions require referral: child due or overdue for immunization, vitamin A; growth faltering for 2–3 months; diarrhoea for three days; blood in stool; fever; child not getting better even after treatment; child with convulsion; cannot breastfeed, eat or drink; coughing and breathing problems.

- *Key steps for referral:* Explain to mothers why child should be sent to a health facility; encourage caregiver to visit the health facility and follow up.

Step 4: Develop household action plan and close

Ask:

- for volunteer mothers with children less than 2 years of age who will agree to explain why a child should be sent to a health facility in the next session. Let them know we will discuss their experience in the next session.
- if there is anyone who would like to talk to you separately about child nutrition practices and invite her to come see you.

Thank the participants and remind them of the time, location, and place of the next meeting.

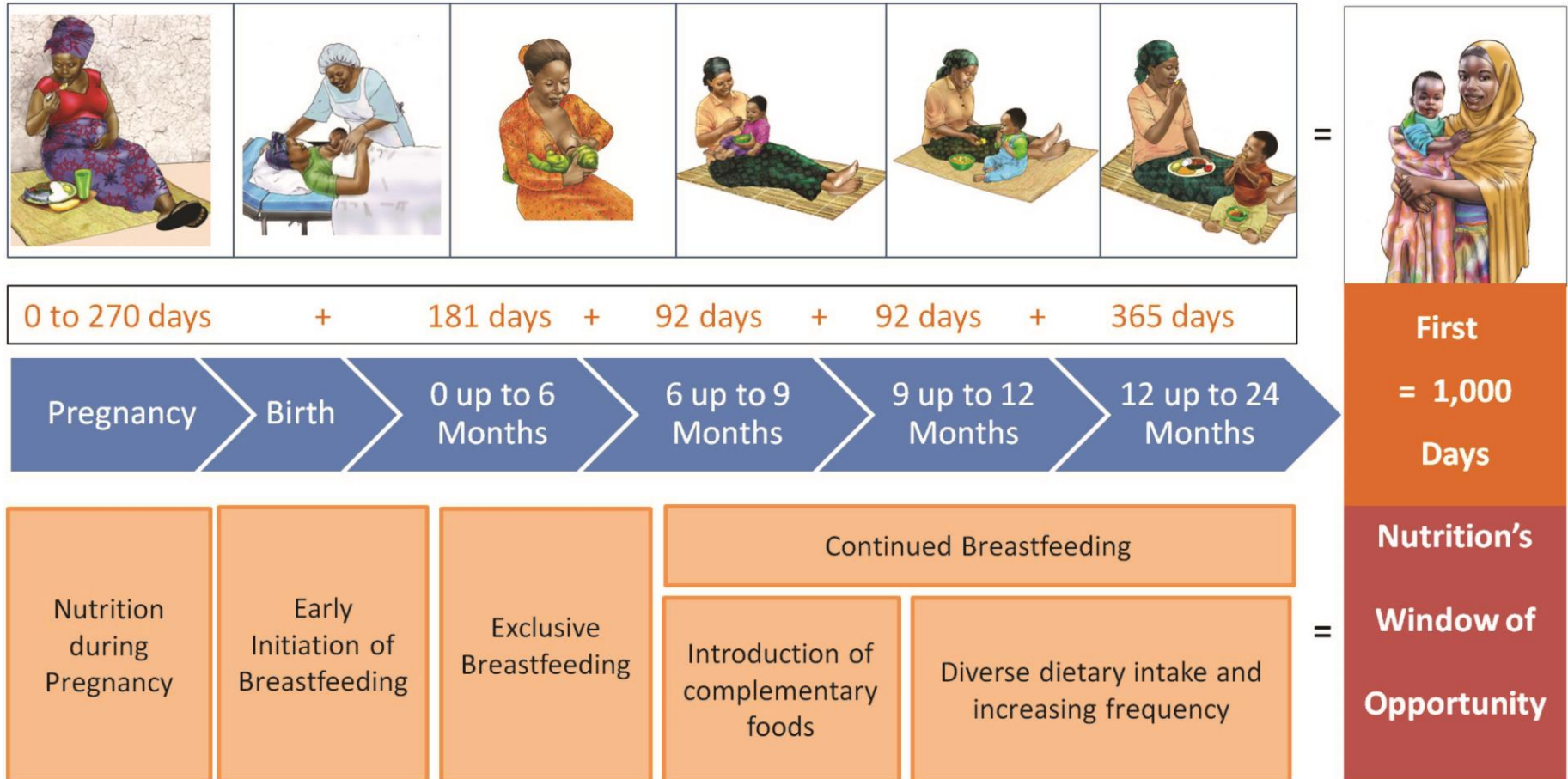
Annex 1: Monthly Report Template

Checklist for monthly reporting

MOTHER-TO-MOTHER SUPPORT GROUP MEETING

NAME OF MOTHER	1	2	3	5	6	7	8	9	10	11	12

Nutrition during the 1000-Day Window



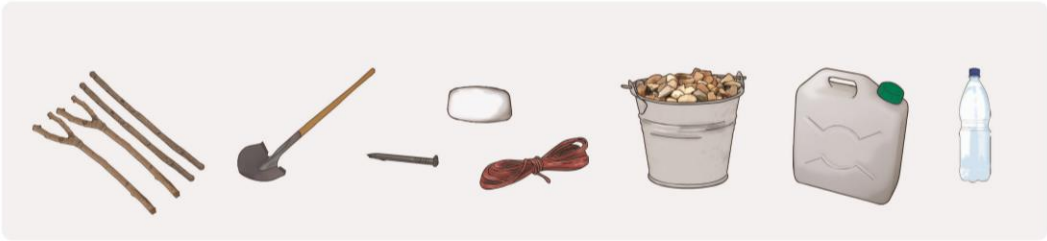
CARD 1

Breastfeeding Issues



CARD 2

Annex 4: Adapted IYCF Card 3



1



2



3



4



5



6



7



8



9



CARD 3

Boil water for your children over 6 months to drink



SPRING

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