

Nigeria: Complementary Feeding and Food Demonstration Training

Training Handouts



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PRE-TEST

Instructions: Mark **True** or **False** under each statement.

1. Good nutrition is essential to children, adults, and the elderly.
2. Young girls need special attention regarding good nutrition.
3. The nutritional status of pregnant women has nothing to do with the nutritional status of their newborn baby.
4. All pregnant women should eat one extra nutritious meal and snack daily.
5. Breastfeeding mothers do not need to eat extra meals to breastfeed their babies.
6. Babies can hardly survive on only breastmilk during hot days.
7. Complementary foods are better introduced from the age of 4–5 months.
8. At six months, the first foods the baby takes should be the texture of breastmilk so that the young baby can swallow it easily.
9. A seven-month-old baby should be fed meals and snacks 3–4 times a day.
10. Meat, eggs, and fish can cause abdominal pains if given to babies 9–12 months.
11. A good complementary food should consist of items from all the food groups available in the country.
12. Water from wells is always clean and safe.
13. Adding groundnut or soya beans to local pap increases its energy content.
14. Breastmilk is not safe for children ages 20–24 months.
15. Food demonstrations can only be done by health providers.

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MANUAL QUESTIONS

1. What are the titles of the manuals?

2. How many sections can they identify in the *Complementary Feeding Manual*?

3. What are the two main topics addressed in the *Food Demonstration Manual*?

4. Which recipe is the most delicious?

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HANDOUT #1: WATERBORNE DISEASES

Instructions: Write the name of the waterborne disease next to its definition.
You will find the possible diseases listed at the bottom of the page.

	Acute bacterial infection of the intestinal tract. It causes severe attacks of diarrhoea that, without treatment, can quickly lead to acute dehydration and death.
	Mounting evidence suggests that poor water, sanitation, and hygiene (WASH) conditions, including contaminated water, can contribute to this through three main pathways: diarrhoea, intestinal worm infections, and environmental enteric dysfunction (EED). EED is the chronic damage to the intestinal lining caused by continuous consumption of high bacteria loads.
	Caused by a variety of micro-organisms, including viruses, bacteria, and protozoans. Diarrhoea causes a person to lose both water and electrolytes, which leads to dehydration and, in some cases, to death. Ingestion of food or water contaminated with excreta is the main cause of this type of childhood disease.
	People become infected with intestinal parasites (also known as helminths) through contact with soil that has been contaminated with human faeces from an infected person, or by eating contaminated food.
	Long-term exposure to low concentrations of arsenic in drinking water causes painful skin keratosis (hardened lesions) and can result in cancer of the skin, lungs, bladder, and kidney.
	Bacterial infection caused by ingesting contaminated food or water. Symptoms are characterized by headaches, nausea, and loss of appetite.
	People contract the disease (also known as dracunculiasis) when drinking water contaminated with the <i>Dracunculus</i> larvae. The larvae mature into large (up to a metre long) adult worms and leave the body after about a year, causing debilitating ulcers.

Guinea-worm disease

Cholera

Undernutrition

Diarrhoea

Typhoid fever

Arsenicosis

Intestinal worms

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