

PN-AAV-742



Guide to  
Mass Media and  
Support Materials  
for Nutrition Education  
in Developing Countries

*A. Supplement*

PIN-HAY-79<sup>2</sup>

# Guide to Mass Media and Support Materials for Nutrition Education in Developing Countries: *A Supplement*

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*An International Nutrition Communication Service (INCS) Publication*

by

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Manoff International Inc.

• June 1987 •

This publication has been developed through subcontract to Education Development Center Inc.,  
under AID/DAN-1065-A-00-4026-00 Office of Nutrition-Science and Technology Bureau,  
Agency for International Development, Washington, D.C.

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## Introduction

This is a supplement to the 1985 *Guide to Mass Media and Support Materials for Nutrition Education in Developing Countries*. The two volumes together provide a unique opportunity to review the products of nutrition education programs over the past ten years. They highlight programs in Indonesia, Brazil, Colombia, and the Dominican Republic, whose successes are well known. They also review the materials of other good but less well-documented programs, such as those of the Congo, India, Ecuador, and Jamaica. Taken together, this body of work is instructive for nutrition educators because it illustrates that adherence to certain design principles produces an educational program that effects significant changes in nutritional knowledge, attitudes, and practices. These principles include:

- involving the target audience in establishing educational priorities and goals
- thinking strategically about how to obtain the broadest, highest frequency coverage of the target audience
- designing creative messages that stimulate behavior change by the target audience
- ensuring, before launch, that the program and its elements are understood, memorable, persuasive, believable, and relevant, and ones that can be acted upon
- monitoring progress during program implementation to ensure that the program remains responsive to the needs of the target audience.

A comparison of the 1985 *Guide* with the *Supplement* reveals several trends in nutrition education. First, nutrition educators are using more television and video. The *Guide* highlighted the Brazil Breastfeeding Promotion Program, which was one of the first programs to use television. Now there are examples of television and video programs from India, Colombia, and Chile. Radio has continued to be important, but its full potential has not been realized. Several programs have used radio spots, and in Colombia and India, there has been some experimentation with formats for instructional radio programming. The article that follows on the use of radio is included with the hope of reviving interest in this approach.

Second, state-of-the-art nutrition education programs have expanded the role of community educational agents. For years, the job of these workers was to give nutrition talks on the basic food groups, food preparation, and a variety of other subjects. The talks did not address the real needs of mothers and were not designed to change behavior. Now that growth monitoring pro-

grams have a strong educational component, these community workers have become nutrition counselors, delivering an individualized message to each mother, doing what Richard K. Manoff says (in *Social Marketing: New Imperatives for Public Health*) is critical to success, "delivering the precise message, to the precise person at the precise moment when it is needed." The idea of nutrition counseling based on growth monitoring results started in Indonesia with the Family Nutrition Improvement Program, which was reviewed in the 1985 *Guide*. It was developed further in the Indonesian Nutrition Communications and Behavior Change (NCBC) Project, also reviewed in the *Guide*. Now it has been further refined and is being used in the Dominican Republic, Ecuador, and India. These programs are reviewed in the *Supplement*. Evaluations of the NCBC Project and the Applied Nutrition Education Project in the Dominican Republic indicate that this approach holds great promise for improving child feeding practices and improving child growth.

Finally, there have been important advances in approaches to nutrition-related subject matter in other programs. Most notable are diarrheal disease control programs, where more attention is being given to feeding during diarrhea, though the emphasis on recuperative feeding is still insufficient. To accommodate these materials, a new chapter has been added in the *Supplement*.

Many people helped us assemble the *Supplement*. First, we thank all of you who sent us your materials and gave us information on their design and use. Second, the INCS Clearinghouse of Nutrition Education Materials at the Education Development Center, and specifically Christine Hollis, assisted in locating new materials. Third, the Clearinghouse on Maternal Nutrition and Infant Feeding at the American Public Health Association, and specifically Gayle Gibbons and Anne Kepple, who shared materials and provided us with some reviews. Finally, others who made a special effort to provide information or photographs of these materials include Ted Rodarm of World Neighbors, and Mark Rasmuson of the Academy for Educational Development. Eve Epstein edited this volume.

The *Supplement* is dedicated to the many committed and creative people who have worked on nutrition education programs, mostly without recognition, but with the belief that people can change and better their own practices and lives when they have clear, feasible instructions and persuasive reasons for doing so. We learn from these experiences and look to the future.

## Using Radio in Nutrition Education Programs

This volume describes a number of projects in which radio has been used to disseminate health education messages. The 1985 *Guide* and this *Supplement* indicate that well structured and well written radio programs have proven to be effective in:

- creating an awareness of important health and nutrition concepts
- teaching new health information
- motivating people to change critical health-and nutrition-related behaviors
- training and supporting community health workers who serve as important channels for health education messages to reach widely dispersed rural populations
- reaching decision makers who can reinforce, clarify, and promote health messages
- assisting communities to mobilize and take preventive actions that result in improved community health.

This article has two purposes. First, it provides guidelines for developing radio programs that are effective educational tools. Second, it reminds those who use radio of some general principles that apply to all kinds of educational programs, regardless of medium.

Instructional radio programs can make a difference in health education projects. However, they are technically demanding and require considerable skill and creativity. Here are some suggestions that will help planners maximize the potential of radio programming:

**Developing the script.** The instructional design of the radio script determines how successfully the program communicates the message and stimulates the desired behavioral changes. Thus, choosing a scriptwriter who understands the subtleties and complexities of writing for radio is essential to success. The scriptwriter must have excellent writing skills, knowledge of the target audience, and the ability to focus the program carefully on its instructional objectives.

**Types of radio formats.** Various types of radio formats are used in health education projects, including drama, spots (usually one to two minutes in duration), public service announcements (often called PSA's and similar to spots), talk shows, interviews, comic dialogue and variety shows. Findings from a number of projects using radio reveal that the dramatic format tends to be a popular programming device.

**Using a dramatic format.** Drama is an excellent programming format for nutrition education. This programming device seeks to create a sense of empathy with listeners, assuring them that they are not alone in their struggle. A well designed radio drama presents fictional characters whose problems, frustrations, and feelings match those of the audience. When the audience can relate the dramatized concerns to their own situations, they are more likely to make the advocated behavior changes.

**Creating mental images.** Because a radio involves only the sense of hearing, it is essential that radio drama use dialogue, sound effects, and music to help listeners use their imagination and develop mental images. By carefully selecting words and sounds, the radio scriptwriter creates a memorable word picture striving to engage the listener in a one-to-one relationship in which there is a sense of personal involvement. The following guidelines help strengthen the mental image:

- Characters are recognized by their voices. Therefore, the audience must be able to distinguish between different voices.
- Characters should use names often when speaking to each other. For example, when two characters meet, their dialogue might be:  
*Mrs. LaSilolo:* "Ah Mrs. LaMavuso, how are you this morning?"  
*Mrs. LaMavuso:* "I'm well, thank you. And you, Mrs. LaSilolo, how are you?"
- The number of characters should be kept to a minimum to avoid confusion.
- Since the listener cannot see where the action is taking place, location can be made clear by using sound effects or having a character say something about the location.
- Each program or spot should be limited to a single message which can be repeated in different ways. The introduction of multiple messages may cause confusion.
- Since this is an aural medium, words should be as simple as possible with multisyllabic words kept to a minimum.

As this volume demonstrates, successful education programs are conceived and implemented within a structured conceptual framework, radio is no exception. Four key elements of this framework are summarized below.

### 1. *Preliminary research and pretesting*

Education programs must be culturally relevant to the intended audience. Thus, qualitative research that searches out possible resistance points and develops an understanding of beliefs, attitudes, and practices is critical prior to message development. This information is then used to craft the message. Effective messages developed in this way have the following characteristics:

- They are specific about the behavior or attitude that needs to be changed.
- They mention the major resistance points to change, offer a solution, and clearly identify the benefits of the change.
- They use local language and expressions to heighten audience receptivity.
- They feature characters recognized as advice givers within the target culture.

Pretesting of all materials is essential. It determines the effectiveness of the messages as well as changes required prior to full-scale production. Pretesting must be conducted in a typical setting with members of the intended audience.

### 2. *Integration of educational components*

Use of integrated media is an effective way to reinforce educational program concepts. However, consistency among all messages is essential so that the audience is not confused by conflicting information. For example, when instructions are given both in print and on radio for mixing oral rehydration solution, the same measurements and terminology must be used. Pretesting will help ensure that all messages are consistent and clear.

### 3. *Community Involvement*

Community involvement should be planned in the early stages of the project because it is critical to the success of education programs. People must

be made to feel that they are included in planning, developing and implementing the messages if they are to take a personal interest. In addition, designers of radio programs can develop seminars, workshops, and other special events to motivate community workers and leaders both to support the radio programs and to link their own educational efforts with the broadcasts. Also, informal discussion groups can be arranged where local leaders have an opportunity to comment on the broadcasts and exchange ideas about the kinds of follow-up activities that might be effective.

### 4. *Monitoring and evaluation*

Diligent monitoring and evaluation ensure the best utilization of program resources and maximize program impact. Approaches and instruments must focus on the following dimensions:

- **Comprehension** — Is the message understood by the audience?
- **Acceptability** — Is there anything that is offensive or distasteful?
- **Credibility** — Is there anything that the audience does not believe?
- **Involvement** — Does the audience believe the message is directed at them or to others?
- **Action capability** — Can the audience act upon the recommended practices, or are there practical obstacles to implementation?

Radio is an important medium for communication and can be an effective instructional tool in health education projects. However, if radio's potential is to be fully realized, planners of radio programs must give sufficient time to design, keeping in mind the aforementioned guidelines and general principles.

Maria E. Carrington

## How to Use this Supplement

This *Supplement* is organized by the topics listed in the table of contents. Each review has been assigned an **entry number**. These numbers are used in cross referencing and indicate that an entry is (1) part of a comprehensive program, or (2) listed under more than one topic.

The program and materials reviews are indexed by region/country and language. Non-print media materials are indicated in each index by a star (★) preceding the title of the entry. **Entry numbers** are used rather than page numbers to indicate their location in this *Supplement*. Also provided is a list of contacts and their addresses.

## Comprehensive Nutrition Education Programs

Comprehensive nutrition education programs use an integrated approach, several media, and cover a variety of topics. This section reviews four of these projects, which stand out as some of the most encouraging work done in the past five years:

- The Applied Nutrition Education Project (The Dominican Republic)
- Tamil Nadu Integrated Nutrition Project (India)
- Integrated Child Development Services Project (India)
- CARE/Congo Nutrition Project (The Congo)

Each review includes a history and summary of the project, its objectives, and a list of materials. Individual materials from these projects are reviewed in separate sections of the *Supplement* arranged by subject. CHETNA, India and L'Atelier de Matériel Audio-Visuel, Cameroon are reviewed at the end of this section. Both groups are involved in materials development and production, and are active in the area of nutrition.

### The Applied Nutrition Education Project

1

**COUNTRY:** The Dominican Republic

**LANGUAGE:** Spanish

**DESCRIPTION:** growth chart, flip charts with accompanying audio cassettes, counseling cards, calendar, brochure, poster, newsletters

**Review:** This educational program was designed to show the extent to which education and promotion alone could lead to changes in nutritional status. Food handouts common in the CARITAS program were eliminated. After two years of full operation, an evaluation showed that this community nutrition program centered on growth monitoring and nutrition education reduced grade II and III malnutrition in the project area by about 35%.

The design of the project was comprehensive, beginning with formative research and following through with a carefully designed strategy based on the research findings. The strategy contained three major activities: promotion, individual counseling linked with growth monitoring, and group education. Included in the promotional materials were:

- identification cards for the community health workers to give prestige and legitimize their role within the community,
- a program brochure showing how this program differs from previous ones,
- a newsletter published twice a year for broad circulation and a mimeograph distributed to project personnel every other month (the purpose of these materials is to maintain a sense of team effort), and
- a poster and calendar (see below).

The materials for individual counseling consist of a set of counseling cards that remind the worker what to say to mothers of children of various ages who are gaining or not gaining weight [33]. Work sheets [34]



were created to assist the promotor in tailoring the messages on the cards to individual situations. These work sheets are to record the agreement between health worker and mother about what the mother will try to do to improve her child's status.

The group materials consist of flip charts with accompanying cassettes [71]. Each cassette contains a dialogue between two women about a practice that the project's formative research indicated was difficult to change. The flip chart and the cassette function in tandem. The characters in the flip chart are represented by the voices on the tape. When a question is asked, the worker stops the tape and poses the question to the group of mothers. After they have discussed their ideas, the cassette is restarted, and an explanation of the correct answer is given.

**CONTACT:** Caritas or CRS/Dominican Republic or INCS - Manoff International



2

**¿Sabe Si Su Niño Está Sano?  
Pregúntele al Promotor**  
(Do You Know If Your Child Is Healthy?  
Ask the Promotor)

**COUNTRY:** The Dominican Republic

**LANGUAGE:** Spanish

**DESCRIPTION:** calendar, 11" x 17", color

**REVIEW:** The graphic on the calendar repeats the poster. It shows a health worker talking to a mother about the value of the growth chart in monitoring a child's growth. It was developed to remind mothers that each month they should see the health promotor to have their baby weighed. It also increases the visibility of the promotor.

3

**¿Sabe Si Su Niño Está Sano?  
Pregúntele al Promotor**  
(Do You Know If Your Child Is Healthy?  
Ask the Promotor)

**COUNTRY:** The Dominican Republic

**LANGUAGE:** Spanish

**DESCRIPTION:** poster, 17" x 23", color

**REVIEW:** This poster is designed to promote the growth monitoring work of the community health worker.



## Tamil Nadu Integrated Nutrition Project

4

**COUNTRY:** India

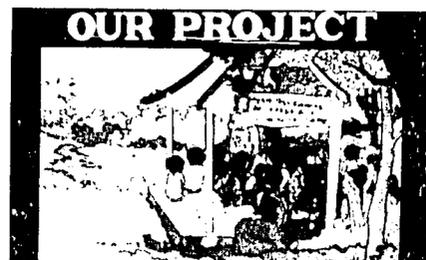
**LANGUAGE:** Tamil and some English

**DESCRIPTION:** vitamin A flannelgraph, set of health cards, six posters, stickers, weight poster, two flash cards, identity card, flip books, films, booklets.

**REVIEW:** The Tamil Nadu Integrated Nutrition Project (TNIP) focuses on reducing malnutrition through an integrated program which includes (1) nutrition services, (2) rural health services, (3) communications, and (4) monitoring and evaluation. The objectives of the communications component are: to increase families' knowledge of health and nutrition; to increase their participation in and benefits from project services; and to increase their knowledge of specific methods to improve nutritional habits. Essential to this project is the community nutrition worker. Most of the educational materials are designed to assist her in educating communities, particularly mothers, or to improve her image in the community. A wide variety of media are being used to reach mothers with information on vitamin A, growth monitoring, immunization, pre-natal care, and diarrheal disease control.

Some of the original materials from this project were reviewed in the 1985 *Guide*. Since then, additional materials have been developed. These new materials include films on growth monitoring, a package of materials on vitamin A, an identity card which provides space for a child's picture and gives information on breastfeeding and the introduction of semi-solid foods, and a flip book which explains the project. For individual reviews see [14, 61, 148].

**CONTACT:** Tamil Nadu Integrated Nutrition Project



## Integrated Child Development Services Project

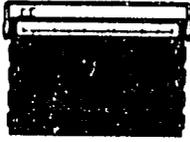
*COUNTRY:* India

*LANGUAGE:* Gujarati and Marati

*DESCRIPTION:* counseling cards, radio spots and 15-minute radio programs, training films, promotional materials such as tin plate, project logo, growth monitoring chart, pregnant mother action card

*REVIEW:* The Integrated Child Development Services (ICDS) Project, with support from USAID/India, works in two districts with the Government of India on improving the training of the anganwadi worker and the quality and effectiveness of health and nutrition education, with particular emphasis on pregnant women and children under three. Pregnant women will be given an action card [12] during their last trimester. This card contains advice on pre-natal nutrition and encourages the women to go to the anganwadi. Information on young child health and nutrition is conveyed at the growth monitoring session using the counseling cards [35]. Growth monitoring serves as an aid to diagnosing individual children's health problems and helps the anganwadi worker target timely and appropriate advice to mothers. In addition, there are radio spots and a 15-minute radio program that will be listened to at the anganwadi and used by the worker to stimulate discussion. This project had an excellent formative research component that guided message design. The Government of India employs Indian market research firms and advertising agencies for research and creative work.

*CONTACT:* Integrated Child Development Project  
or Manoff International



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## CARE/Congo Nutrition Project

6

**COUNTRY:** The Congo

**LANGUAGE:** French

**DESCRIPTION:** three posters, one wall chart, three songs

**REVIEW:** These materials represent a joint effort between CARE/CONGO and the Government of the People's Republic of the Congo to launch a comprehensive nutrition education program to improve nutrition-related behaviors. The materials are designed for communication workers to teach mothers about new practices. Villagers were involved from the outset in the design. Mothers named the fictitious characters represented in the posters [59], and assisted in developing the two major themes — infant care and feeding and growth monitoring [94]. Before the final versions were printed or taped, the materials were pretested over a period of several months to determine which were the most effective instructional tools. The songs carry various messages, including on breastfeeding and weaning. They were recorded in three different languages by local musicians, aired on radio, and taught during village meetings.

**CONTACT:** CARE/Congo or CARE/New York




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## L'Atelier de Matériel Audio-Visuel (AMA)

7

**COUNTRY:** Cameroon and other African countries

**LANGUAGE:** English and French

**DESCRIPTION:** flip chart, flannelgraphs, posters

**REVIEW:** This group designs, tests, and produces educational materials such as comic books, flannelgraphs, flip charts, posters, and silk screen artwork. It has recently instituted a program of summer training sessions in its design and production methodologies. It is not a research group, so little formative research is done prior to designing materials. Its primary strength is in production. For review of material see [135].

**CONTACT:** L'Atelier de Matériel Audio-Visuel



An activity of  
Nehru Foundation for Development

8

### Centre for Health Education, Training and Nutrition Awareness (CHETNA)

*COUNTRY:* India

*LANGUAGE:* Gujarati, Hindi, and English

*DESCRIPTION:* materials package that include a recipe book, a manual on the weaning process, flip charts, and a variety of training cards

*REVIEW:* CHETNA is a group of non-formal education experts that have worked independently and with a variety of groups developing materials on a wide range of health related topics [13]. Their materials have usually been pretested with villagers, so illustrations and explanations are clear. However, the group does little formative research. Training guides are usually included as part of CHETNA's materials packages.

*CONTACT:* CHETNA

## Maternal Nutrition

Maternal nutrition continues to receive less attention than it deserves. There still has been no major effort or campaign focusing solely on this subject. Instead, mention given to it comes as an afterthought in breastfeeding promotion or in comprehensive materials. However, in India, the Tamil Nadu Integrated Nutrition Program [ 4] and the Integrated Child Development Services Project [5] have produced specific materials focusing on maternal nutrition. The ICDS materials include radio spots and the Pregnant Mother's Action Card [12]. They are currently being tested in Maharashtra and Gujarat. Another example of this type of effort is taking place in the Gambia where INCS is helping improve the feeding practices of pregnant women in collaboration with Save the Children Federation. A locally based maternal dietary supplement has been developed and successfully field tested. A pictorial assessment card for use in screening at-risk pregnancies is being developed as part of an overall communications strategy. Preliminary results indicate that education, marketing, and communications interventions have contributed to a reduction of low birth weight prevalence in a pilot project area. Project materials are in the final stages of development but were not available for review at this time. For more information contact INCS - Education Development Center.

### Pregnant Mother's Action Card

12

**COUNTRY:** India  
**LANGUAGE:** Gujarati and Marati  
**DESCRIPTION:** card, single color  
 See ICDS [5]

**Review:** The card is given to a pregnant woman during the last three months of pregnancy by an anganwadi worker or health visitor. It urges the woman to (1) take iron and folic acid pills (2) eat more food (3) go to the anganwadi center for supplemental food, and (4) go for tetanus shots. The card has empty boxes where the woman can keep daily track of her compliance with these recommendations. Radio spots promote the card and reinforce its recommendations.

**CONTACT:** Integrated Child Development Services  
 or Manoff International



### ICDS Informational Flip Chart

13

**COUNTRY:** India  
**LANGUAGE:** Hindi  
**DESCRIPTION:** flip chart, 24" x 19", color, 10 pages  
 See CHEFNA [8]

**Review:** This illustrated flip chart contains many messages for pregnant and nursing women and mothers of young children about the services offered by the Integrated Child Development Services Project. Additional messages stress the importance of a sufficient and balanced diet for pregnant women and women who nurse, and of medical check-ups for pregnant mothers and children.

**CONTACT:** CHEFNA



கனிகரற்றது தாய்ப்பாலே!



14

## Flannelgraph and Booklet on Breastfeeding

**COUNTRY:** India

**LANGUAGE:** Tamil and English

**DESCRIPTION:** flannelgraph with booklet  
See TNIP [4]

**REVIEW:** This flannelgraph is used to structure group discussion. It focuses primarily on breastfeeding [61], and offers dietary advice for nursing women.

**CONTACT:** Tamil Nadu Integrated Nutrition Project

15

## Nutritional Flash Cards

**COUNTRY:** India

**LANGUAGE:** Tamil and English

**DESCRIPTION:** flash cards  
See TNIP [4]

**REVIEW:** These flash cards are for community use. The message is that pregnant women and nursing mothers need to maintain healthy diets.

**CONTACT:** Tamil Nadu Integrated Nutrition Project

16

## Ante-natal Care

**COUNTRY:** Pakistan

**LANGUAGE:** English and Urdu

**DESCRIPTION:** flip chart, color, 17 pages

**REVIEW:** This flip chart was developed to assist midwives in advising, guiding, and supervising women during pregnancy. Pregnant women are encouraged to begin regular pre-natal visits to maternal and child health centers and told what to expect at each visit. Common problems during pregnancy are discussed on the chart, as is the importance of good nutrition. Breastfeeding is promoted, and how to prepare the breasts for breastfeeding is described. Each page of the flip chart has a picture on one side and, on the other, a written explanation to guide midwives in talking to mothers.

**CONTACT:** I.H. Prince Aga Khan



17

## Para Evitar Problemas durante el Embarazo y Parto una Señora Necesita . . .

(To Prevent Problems during Pregnancy and Birth a Woman Needs . . .)

**COUNTRY:** Guatemala

**LANGUAGE:** Spanish

**DESCRIPTION:** pamphlet, 8.5" x 11", color  
See series [137]

**REVIEW:** This leaflet is designed to encourage a woman to have pre-natal checks-ups, eat more of the foods she normally eats and, if feeling nausea, eat smaller portions more frequently.

**CONTACT:** Foster Parents Plan International



## Food for Pregnant Women

18

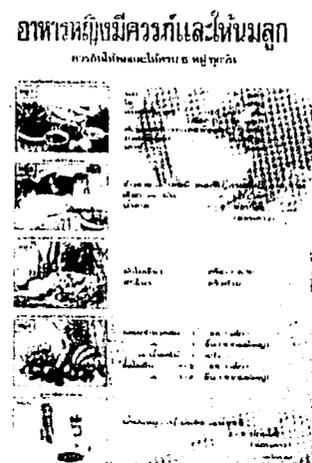
**COUNTRY:** Thailand

**LANGUAGE:** Thai

**DESCRIPTION:** poster, 15" x 20", color

**REVIEW:** This poster advises pregnant women to eat foods from the five groups everyday.

**CONTACT:** Thailand Department of Commerce



## Kurang Darah Membahayakan Jiwa Ibu Dan Bayinya (Anemia Causes Problems in the Mother and Baby)

19

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** poster, 19" x 25", color

**REVIEW:** This poster with captioned pictures targets pregnant women. It urges them to (1) take an iron pill every day during the last six months of pregnancy, (2) eat more vegetables, beans, and nuts every day, and (3) seek advice from the health center, weighing group, and nutrition worker.

**CONTACT:** UNICEF Indonesia



## Mothers Who Eat Good Food Will Have Healthy Babies

20

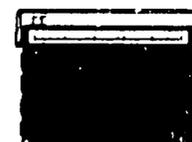
**COUNTRY:** Non-specific

**LANGUAGE:** English

**DESCRIPTION:** radio script

**REVIEW:** This script emphasizes the connection between a baby's health and a mother's diet and says that a mother who eats good food will have a healthy baby. The text explains how a mother can tell if she is undernourished or anemic by examining the color of her tongue, gums, and lower eyelids. Instructions are given for adapting the script to local situations. The script is accompanied by a booklet which provides additional information on good nutrition.

**CONTACT:** The Developing Countries Farm Radio Network, c/o Massey-Ferguson Ltd.



## General Infant Feeding

This section highlights materials that present an overview of the feeding of young children. The past five years have seen several major educational efforts to improve infant feeding practices. They are:

- El Camino de la Salud (Colombia)
- PEM-PAAMI (Ecuador)
- PREMI (Ecuador)
- Applied Nutrition Education Project (The Dominican Republic)
- Integrated Child Development Services (India)

These efforts have been designed either in connection with or as part of the promotion of growth monitoring programs. They touch on breastfeeding, the introduction of solid foods, and the transition to a family diet. Materials dedicated exclusively to breastfeeding or weaning are reviewed in separate sections of the *Supplement*.

### El Camino de la Salud (The Road to Health)

26

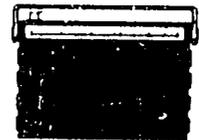
**COUNTRY:** Colombia

**LANGUAGE:** Spanish

**DESCRIPTION:** 12 15-minute television programs,  
17 10-minute radio programs

**REVIEW:** El Camino de la Salud was produced in 1984 by La Pontificia Universidad Javeriana and supported by the United Nations University as part of a national mass media education campaign (CAMINA). The programs were developed using a social marketing methodology with careful formative research and materials pre-testing. Creative formats explain how parents and their local health centers should work together to keep children on the road to health. Topics include growth monitoring [90] and weaning [73]. Two recurrent themes are that parents must take the initiative for good child care and insist on the services due them and that the health center is a place for preventive and promotive activities, such as growth monitoring and information on infant feeding.

In the television programs, a narrator opens the program with a question on the specific program theme. This question is directed to several mothers with newborn babies in mock street interviews. Correct and incorrect responses are given. The mothers are invited to the local health center to hear the answer given by the resident doctor, who continues to explain and develop the theme. The main points are then dramatized in a common family situation. To reinforce these points, the doctor returns to give a summary, and the narrator concludes the program by repeating the advice given and inviting mothers in the television audience to go to the health center nearest them for more information.



The radio programs parallel the information and format of the television programs. Each program opens with the narrator in a studio with a health center doctor and invited mothers. A question central to the theme of the day is asked, and several mothers give answers. Then the doctor explains and elaborates on the mothers' answers. Following this is "Listener's Mailbag," where a letter is selected and dramatized to reinforce the information given by the doctor. To conclude the program, the doctor summarizes the main points, and the narrator invites the mothers in the radio audience to visit the health center and use its services so that their children can grow up to be strong, healthy, alert, and intelligent.

**CONTACT:** United Nations University or Manoff International

## El Camino de la Salud (The Road to Health)

27

**COUNTRY:** Colombia

**LANGUAGE:** Spanish

**DESCRIPTION:** two 15-minute television programs



**REVIEW:** Both programs focus on good infant nutrition. A mother recounts that she breastfed her baby until he was four months old, then stopped; and started giving him soups and liquified foods. The child lost weight, but luckily she took him to the health center where she was advised to continue breastfeeding in addition to giving him solid foods. He recovered and is on the road to health again. At this point, the doctor advises viewers to register their children at the health center, get a health control card, and ask for advice on what foods to give their babies. Breastfeeding is advocated for four months, at which time pureed foods should be added and breastfeeding continued. The narrator ends by repeating the message and urging mothers to go with their babies to the health center.

## PEM-PAAMI (Maternal Child Supplementary Feeding Program)

28

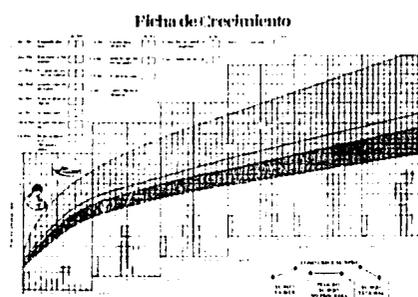
**COUNTRY:** Ecuador

**LANGUAGE:** Spanish

**DESCRIPTION:** child health card, counseling cards, radio spots

**REVIEW:** This pilot project was initiated to improve the national supplemental feeding program. It is now being incorporated with PREMI, the national child survival program. The objective of PEM-PAAMI is to promote child growth and development by enhancing breastfeeding and improving infant feeding practices. Project materials were developed for the country's two distinct cultural regions, the coast and the sierra. The project strategy has three key components. First is the new national health card Carnet de Salud Infantil (at right), which families must show to register children for school. Second is a set of counseling cards [29] which assist health workers in explaining to mothers how to help their children grow better and gain weight each month. Advice given depends on the child's age and whether or not he or she has gained weight. The health worker selects one card to use in counseling mothers to manage a critical nutrition practice. Third is a group of radio spots developed to reinforce several of the concepts on the counseling cards. Tests of all materials had positive results.

**CONTACT:** ININMS or INCS-Manoff International





29

## Child Feeding Counseling Cards

*COUNTRY:* Ecuador

*LANGUAGE:* Spanish

*DESCRIPTION:* counseling cards, black and white, laminated

*REVIEW:* This series of counseling cards is designed for use by village nutrition workers in counseling mothers on specific actions they can take to maintain or improve their child's health. The front of each card shows a drawing of the recommended activity and on the back are questions for counseling. Breastfeeding and weaning are the major topics. The cards discuss the introduction of semi-solid foods at various ages, and the messages are governed by the child's age, and whether or not the child is ill. The card on the left shows a child from the sierra who is not gaining weight. The card on the right shows a child from the coast who is gaining weight. Both cards address children age five to six months.

30

## PEM-PAAMI Radio Spots-Child Feeding

*COUNTRY:* Ecuador

*LANGUAGE:* Spanish

*DESCRIPTION:* ten two-minute radio spots

*REVIEW:* These ten spots are really two groups of five spots, with one group designed for the coastal region and the other designed for the sierra. The spots for the coast are recorded to reflect the regional way of speaking, and their themes stress the major regional problem which is early abandonment of breastfeeding. The spots for the sierra are in Spanish and Quechua and stress the introduction of appropriate weaning foods, which is the major problem in this region. These spots were designed after careful research and received good exposure. They had positive results on practices, especially on the coast.



## PREMI-Child Survival Program

31

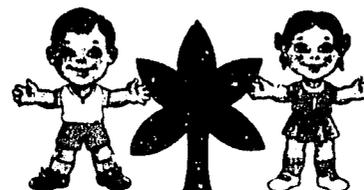
**COUNTRY:** Ecuador

**LANGUAGE:** Spanish

**DESCRIPTION:** growth card, radio spots, radio series, almanac, growth monitoring manual, health center procedure guide, other materials on the other child survival strategies

**REVIEW:** PREMI began with a focus on immunization and oral rehydration and recently has turned its attention to its other two strategies, growth monitoring and infant feeding. It has relied on the work done on the PEM - PAAMI Project [28] in developing activities for these two strategies. In 1986, PREMI launched growth monitoring nationwide during an immunization campaign. A manual was developed along with posters for health center walls showing the correct procedure. PREMI is about to initiate a 30-episode radio series on nutrition covering growth monitoring and child feeding. The series features a female doctor who travels the country as a substitute in the health centers. PREMI is also developing a radio course. To date print materials have been limited, but an almanac was produced (see below), and a comic book based on the radio series is forthcoming.

**CONTACT:** Ministry of Health or Instituto Nacional Para la Niñez y la Familia



DIA DE EMISION

## Almanaque de la Salud Infantil - 1987 (Almanac of Infant Health - 1987)

32

**COUNTRY:** Ecuador

**LANGUAGE:** Spanish

**DESCRIPTION:** almanac, newsprint, black and white, 14 pages

**REVIEW:** In addition to listing Saints' days and other standard information, this almanac features a different health topic each month and provides general information on it. About half of the months highlight child nutrition, discussing malnutrition, breastfeeding, how to produce more breastmilk, child feeding, and growth monitoring.



### Child Feeding Counseling Cards

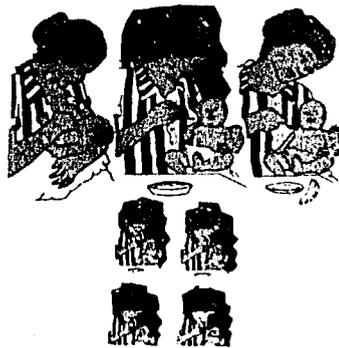
**COUNTRY:** The Dominican Republic

**LANGUAGE:** Spanish

**DESCRIPTION:** counseling cards, color, laminated  
See ANEP [1]

**REVIEW:** This series of counseling cards is designed for use by village nutrition workers in counseling mothers on specific actions they can take to maintain or improve their child's health. The counseling is to be done after the child has been weighed, so cards are organized and the messages governed by the age of the child, whether or not the child has gained weight, and whether or not the child is ill. The front of each card illustrates the desired action, and the back contains guidelines for counseling. The illustration here shows two of the cards, both for children five to eight months old. The one on the left represents the feeding messages for a child who has gained weight, and the one on the right represents those for the child who has not.

**CONTACT:** Caritas or CRS/Dominican Republic or INCS - Manoff International



### Volantes (Worksheets)

**COUNTRY:** The Dominican Republic

**LANGUAGE:** none

**DESCRIPTION:** five sheets, single color  
See ANEP [1]

**REVIEW:** These sheets are hand-outs for mothers whose children have not gained weight. Each sheet is identical to a companion counseling card for a particular age range. After counseling the mother, the health worker gives her the sheet and reviews with her exactly what she is to do during the next month so her child will gain weight. The health worker circles the picture representing the action the mother agrees to take, such as feeding her child four times each day. The mother records her actions in the boxes under the drawing.

**CONTACT:** Caritas or CRS/Dominican Republic or INCS - Manoff International



## Counseling Cards

35

**COUNTRY:** India  
**LANGUAGE:** Gujarati and Marati  
**DESCRIPTION:** set of 15 cards, color  
 See ICDS [5]

**REVIEW:** These counseling cards are used by the anganwadi workers in the USAID assisted Integrated Child Development Services Project to explain health education messages to mothers. They help standardize the messages and, at the same time, offer flexibility in adapting the messages to each mother's particular situation. Each card carries specific advice for the mother at the time she is most in need of the information. The age and health condition of the child determine the advice that the mother will receive. Each card has illustrations on one side to aid the mother and anganwadi worker in remembering the indicated actions. The other side has questions and answers to guide the anganwadi's discussion with the mother. The cards are color-coded, with "green" representing children who are growing well and "yellow" for children who are not growing. The card on the left represents a child who is gaining weight, the card on the right represents a child who is not.

**CONTACT:** Integrated Child Development Services or Manoff International



## Alimentación en el 1<sup>er</sup> Año de Vida (Feeding During the 1st Year of Life)

36

**COUNTRY:** Guatemala  
**LANGUAGE:** Spanish  
**DESCRIPTION:** pamphlet, 8.5" x 11", color, fold out  
 See series [137]

**REVIEW:** This pamphlet encourages exclusive breastfeeding from birth through three months. It gives examples of types of appropriate foods to offer beginning at four months. It encourages the parent to give food slowly and in small portions so that the child can become accustomed to food during this period. It teaches that when the child is older the parent should give the child the same foods the family eats four to five times a day, using the child's own plate and allowing the child time to eat.

**CONTACT:** Father Parents Plan International



## Health Education Posters

37

**COUNTRY:** Pakistan  
**LANGUAGE:** Urdu  
**DESCRIPTION:** cotton hangings, color

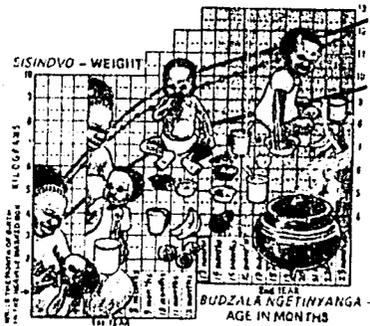
**REVIEW:** Each hanging contains a message, such as breastfeeding or feeding a child with a cup and spoon.

**CONTACT:** UNICEF/Pakistan





## Swaziland Child Nutrition Guidelines



Prepared by the National Nutrition Council  
with assistance from UNICEF Swaziland



38

## Booklet on Nutrition

**COUNTRY:** Bangladesh

**LANGUAGE:** Bengali

**DESCRIPTION:** booklet, color, 15 pages

**REVIEW:** This picture booklet tells the story of infant feeding from the first days of life through weaning. It was designed for field workers who in turn could use it as an instructional device when explaining child feeding to villagers. It discusses how long to breastfeed, when to start weaning, and what are proper weaning foods.

**CONTACT:** PIACT/Bangladesh

39

## Swaziland Child Nutrition Guidelines

**COUNTRY:** Swaziland

**LANGUAGE:** English

**DESCRIPTION:** booklet, 52 pages

**REVIEW:** This guide book is designed to train community workers and to help them teach mothers. It focuses on breastfeeding, weaning practices, growth monitoring, ORT, immunization, and birth spacing. It is easy to read and informative. It outlines problems comprehensively through line illustrations and charts. The back cover folds out presenting a multi-colored chart titled *When a Child Does Not Grow Well* [91]. The reverse side of this chart, *How to Feed Young Children Well*, illustrates child feeding during the first two years.

**CONTACT:** National Nutrition Council

40

## Continue Breastfeeding, Porridge, and Fruits

**COUNTRY:** Commonwealth of Dominica and St. Vincent/Grenadines

**LANGUAGE:** English

**DESCRIPTION:** four posters, 17" x 23.5", color

**REVIEW:** This set of posters illustrates the four stages of feeding children up to one year of age. Each poster shows one stage and indicates that breastfeeding is continued throughout. The four stages are: (1) breastfeeding only from birth to three months; (2) introducing porridge and fruits from four to six months; (3) introducing soft, mashed foods from the family pot during months six through nine; and (4) eating the same foods as the family from nine months to one year.

**CONTACT:** Caribbean Food and Nutrition Institute

## Nutrition

41

**COUNTRY:** Pakistan

**LANGUAGE:** English

**DESCRIPTION:** flip chart, 14" x 10", color, with leaflets

**REVIEW:** This flip chart on nutrition contains general information on infant feeding. Several pages map out what foods to feed a young child and at what age. Food preparation is also described. For a review of this flip chart, see [136].

**CONTACT:** H.H. Prince Aga Khan



## Kunci Nasehat Gizi (Key to Nutrition Advice)

42

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** wheel that is rotated by hand

**REVIEW:** This material goes along with the flip chart reviewed in the 1985 *Guide* (see p. 26). The wheel is designed to give mothers nutritional advice about their children based on the current growth status of the child. The steps outlined on the wheel reflect the steps in growth monitoring, and an arrow provides direction. The steps shown are:

- (1) Go to the health post, bringing the child's growth chart, and check in with the health worker.
- (2) Have the child weighed.
- (3) Go to the health worker to discuss and document new information on the card.
- (4) Go to the nutritional counselor for advice.



The wheel has three separate windows which display information on the age and growth status of the child. The counselor uses that information in advising the mother on how to feed her child. The information is specific, and the entire process is manageable, effective, and conceptually sound.

**CONTACT:** Usaha Perbaikan Gizi Keluarga

## Infant Care and Feeding

43

**COUNTRY:** Non-specific

**LANGUAGE:** English, French, and Spanish

**DESCRIPTION:** flip chart, black and white

**REVIEW:** This chart focuses on pre-natal care, breastfeeding, and weaning practices. It portrays the husband as playing an important role in nutrition, helping to grow lots of vegetables, which are good for mother and child. The presentation is simple line drawings with text on the back of each page.

**CONTACT:** World Neighbors





44

### Ces Activités Protègent la Mère et l'Enfant (These Activities Protect Mother and Child)

**COUNTRY:** Ivory Coast

**LANGUAGE:** French

**DESCRIPTION:** poster, 23" x 35", color

**REVIEW:** This is a multi-topic poster which focuses on general infant feeding.

**CONTACT:** Ministry of Health

45

### Health Education Project

**COUNTRY:** Tanzania

**LANGUAGE:** Swahili

**DESCRIPTION:** handbills on nutrition

**REVIEW:** Nutrition handbills are used in tandem with oral presentations and face-to-face counseling. The message to mothers is to breastfeed children and supplement their diets with vegetables and proteins. The handbills are line drawings and are to be colored in with crayon. Each picture is captioned with a message and numbered indicating a sequence.

**CONTACT:** CPHE-Project



KUANZEA UMRY WA MAMA  
WA MITOJO CHAKULA CHA  
MCHANGANYIKO NI MCHUMBU.

46

### ICDS Informational Flip Chart

**COUNTRY:** India

**LANGUAGE:** Hindi

**DESCRIPTION:** flip chart, 24" x 19", color, 10 pages

**REVIEW:** This is a multi-topic flip chart on services offered by ICDS. It discusses infant feeding in a general way [13].

**CONTACT:** CHETNA



## Breastfeeding

Breastfeeding continues to be a crucial target area for education. The messages continue to be motivational and behavioral in nature. The most noteworthy development in breastfeeding education is the focus on changing the practices of urban hospital personnel. Thailand and Indonesia have produced innovative materials that are designed to encourage hospital workers to promote breastfeeding rather than bottle feeding from the moment the mother enters the maternity ward, and to reinforce the idea after the child is born.

### Bangkok Hospitals Breastfeeding Promotion Campaign

51

*COUNTRY:* Thailand

*LANGUAGE:* Thai

*DESCRIPTION:* two posters, 15" x 20.5", color, decals, brochures, sleeveless infant shirt

*REVIEW:* These materials were designed to make breastfeeding the infant feeding method of choice in maternity wards in Bangkok hospitals. The posters show mothers holding and nursing healthy babies. The infant shirt has a picture of a healthy, happy baby across the chest and next to it the campaign logo. This campaign was accompanied by intensive training of hospital nurses and doctors. It has been viewed as a success in establishing breastfeeding as routine practice in the hospital.

*CONTACT:* Ministry of Public Health, INCS -- Education Development Center



### Poster on Breastfeeding

52

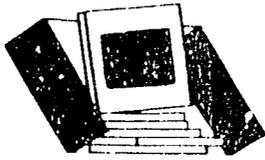
*COUNTRY:* Thailand

*LANGUAGE:* Thai

*DESCRIPTION:* two posters, 20" x 14", color

*REVIEW:* These posters promote the message among mothers and hospital personnel that breastfeeding is best.





53

## Rooming In

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** slide set with sound and one-half-inch video-Beta, color

**REVIEW:** The primary purpose of this video and slide presentation is to encourage hospital personnel to promote breastfeeding rather than bottle feeding among urban women. The audience is urged to avoid giving free samples of infant formula, as this often encourages mothers to bottle feed. Additional health messages focus on pre- and post-natal care. Indonesia has been conducting special training for hospital personnel on breastfeeding through a variety of organizations.

**CONTACT:** Voluntary Health Services of Indonesia

54

## Aleitamento Materno (Breastfeeding Promotion Campaign)

**COUNTRY:** Brazil

**LANGUAGE:** Portuguese

**DESCRIPTION:** flip chart, slides

**REVIEW:** This campaign was initiated in 1981. It was carefully planned with materials aimed at policy makers. The objectives were (1) to convince them of the importance of breastfeeding and (2) to stimulate the development of legislation to alter work conditions and thus facilitate breastfeeding. The materials are designed for the urban woman with no support system once she returns home from the hospital. Anecdotal evidence indicates that the campaign has been very successful.

**CONTACT:** Brazil-INAN or UNICEF/Brazil



55

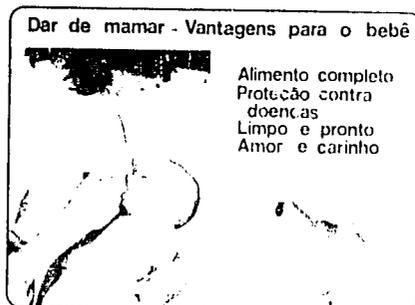
## Aleitamento Materno (Breastfeeding)

**COUNTRY:** Brazil

**LANGUAGE:** Portuguese

**DESCRIPTION:** flip chart, 10" x 18", black and white photos

**REVIEW:** This series of photographs shows the various aspects of breastfeeding and emphasizes specific points, such as the importance of colostrum for a child's health. Each photograph has a set of questions on the back designed for use in a group discussion.

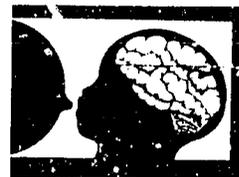


## Aleitamento Materno (Breastfeeding)

56

**COUNTRY:** Brazil  
**LANGUAGE:** Portuguese  
**DESCRIPTION:** 46 slides, color

**REVIEW:** This slide set is designed to motivate mothers to breastfeed their children. It emphasizes how mothers can produce enough milk and stresses the fact that the antibodies in breastmilk help protect children from diseases.



## Breast Is Best League Campaign

57

**COUNTRY:** Belize  
**LANGUAGE:** English  
**DESCRIPTION:** pamphlets, bumper sticker, hot line

**REVIEW:** This ongoing urban-based campaign for mothers who work at and away from home features a hotline serviced by volunteers. The message conveyed is that breastfeeding is best.

**CONTACT:** Breast is Best League



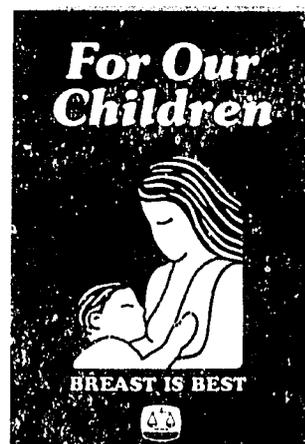
## For Our Children

58

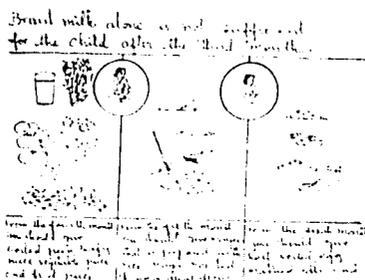
**COUNTRY:** Malaysia  
**LANGUAGE:** English and Malay  
**DESCRIPTION:** one poster, 13 pamphlets, films, public service announcements, slides

**REVIEW:** These materials are part of an ongoing campaign supported by government ministries and private organizations including women's groups. The message is that breast is best, and bottle feeding is dangerous. All materials have the campaign logo.

**CONTACT:** Consumer's Association of Penang



CAP BREASTFEEDING CAMPAIGN



59

### L'Enfant Nourri au Biberon N'est Pas en Bonne Santé, Il A Une Mauvaise Croissance (The Bottled Child Is Not in Good Health, His Growth Is Stunted)

### L'Enfant Allaité au Sein Est en Bonne Santé, Il A Une Bonne Croissance (The Child Who Is Breastfed Is in Good Health, He Grows Well)

COUNTRY: Congo

LANGUAGE: French

DESCRIPTION: two posters, 18" x 17", color  
See CARE/Congo [6]

REVIEW: One poster shows a child in poor health because he is bottle fed, not breastfed. The poster indicates that he suffers from chronic diarrhea and shows severe deficiencies in weight and size for his age. Mrs. Zoba (which means Mrs. Stupid in the local dialect) is harming her child by not breastfeeding. The other poster shows Mrs. Mayele (which means Mrs. Bright in the local dialect) with a baby who is healthy and shows steady signs of growth. This is the result of breastfeeding and proper health care.

CONTACT: CARE/Congo or CARE/New York

60

### Breastfeeding Flash Cards

COUNTRY: India

LANGUAGE: Tamil and English

DESCRIPTION: flash cards  
See TNIP [4]

REVIEW: These cards encourage mothers to breastfeed and, once a child reaches six months, to introduce semi-solid foods.

CONTACT: Tamil Nadu Integrated Nutrition Project

61

### Flannelgraph on Breastfeeding

COUNTRY: India

LANGUAGE: Tamil and English

DESCRIPTION: flannelgraph and booklet, color  
See TNIP [4]

REVIEW: This flannelgraph and accompanying booklet explain the importance of breastfeeding instead of bottle feeding. Additional information includes advice on diet for nursing women and on introducing semi-solid foods to the child's diet.

CONTACT: Tamil Nadu Integrated Nutrition Project

**J'Allaite Mon Enfant,  
Il Est Heureux et en Bonne Santé**  
(*I Breastfeed My Child,  
He Is Happy and in Good Health*)

62

**COUNTRY:** Ivory Coast

**LANGUAGE:** French

**DESCRIPTION:** poster, 23" x 58", color

**REVIEW:** This poster encourages breastfeeding by explaining that mother's milk is the best milk for babies because it protects babies from diseases, is always available, and is easy to digest.

**CONTACT:** Ministry of Health



**Dar Pecho**  
(*Give the Breast*)

63

**COUNTRY:** Non-specific

**LANGUAGE:** Spanish

**DESCRIPTION:** film (16 mm), ten minutes

**REVIEW:** This is a motivational film on breastfeeding for pregnant women. It discusses preparing for breastfeeding, nipple care, and positions for breastfeeding. It also covers the advantages of breastfeeding and nutrition of the nursing mother. Women are encouraged to breastfeed for as long as possible. This film deals realistically with working outside the home and breastfeeding.

**CONTACT:** Videograph



**El Mejor Alimento Para Tu Bebe Es . . .  
La Leche Materna**  
(*The Best Food For Your Baby Is ... Breastmilk*)

64

**COUNTRY:** Guatemala

**LANGUAGE:** Spanish

**DESCRIPTION:** pamphlet, 8.5" x 11", color, fold out  
See series [137]

**REVIEW:** This pamphlet emphasizes the advantages of breastmilk.

**CONTACT:** Foster Parents Plan International



**Breastmilk is Best**

65

**COUNTRY:** Thailand

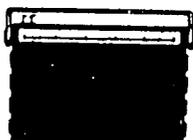
**LANGUAGE:** Thai

**DESCRIPTION:** pamphlet, 8.5" x 11", color

**REVIEW:** This pamphlet says that breastfeeding is modern, not old fashioned and it lists the advantages of breastmilk.

**CONTACT:** Ministry of Public Health





66

### El Camino de la Salud (The Road to Health)

**COUNTRY:** Colombia

**LANGUAGE:** Spanish

**DESCRIPTION:** two ten-minute radio programs, one 15 minute TV program

**REVIEW:** These programs are directed towards mothers and focus on the importance of breastfeeding. After asking several mothers what the most nutritious food is and receiving answers like meat, eggs, vegetables, and cow's milk, the narrator invites the health center doctor to give the correct answer and explain it. The doctor says that mother's milk contains all the nutrients that a baby needs and protects the baby against infectious diseases. He says nothing can replace it. He urges mothers to put their babies to the breast as soon as they are born and at any time that they want to feed, and to eat well and drink lots of fluids. The message is that semi-solid foods should be gradually introduced at four months of age, but breastfeeding should continue at least until the child is two years old. A dramatization follows, reinforcing all these points. The programs end with a summary and invitation to visit the health center.

**CONTACT:** United Nations University  
or Manoff International



67

### Lo Mejor: Lactancia Materna (The Best: Breastfeeding)

**COUNTRY:** Guatemala

**LANGUAGE:** Spanish

**DESCRIPTION:** 74 slides, color, with audio cassette and script

**REVIEW:** This slide tape set describes the nutritional, health, and economic advantages of breastfeeding. It also gives tips on the management of breastfeeding and answers common questions of breastfeeding mothers. It was produced in collaboration with the Guatemalan National Commission for the Promotion of Breastfeeding and the National Board for Non-formal Education.

**CONTACT:** UNICEF/Guatemala

## Weaning

The weaning period is a critical time for a young child because of increased nutritional requirements for growth. Although there has been growing recognition of the importance of the weaning period, actual message content has changed little since the 1985 *Guide*. The only new messages seem to be those on food consistency contained in the counseling cards [29, 33] and the materials from the Dominican Republic, Ecuador, and Colombia. Special weaning education programs are underway in the Cameroon, Indonesia, Zaire, Ecuador and Swaziland but none of their materials were ready for inclusion in this *Supplement*.

### Alimentación del Niño de Cinco hasta Ocho Meses (Feeding Children from Five to Eight Months)

71

**COUNTRY:** The Dominican Republic

**LANGUAGE:** Spanish

**DESCRIPTION:** flip chart, 21" x 17", silk screen on cloth, color, with audio cassette and question reminder card  
See ANEP [1]

**Review:** The flip chart emphasizes the quantity and consistency or thickness of food prepared for children five to eight months. Foods should be introduced in the fifth month and breastfeeding should continue. The precarious period between five and eight months is emphasized because the formative research indicated that the food being given to children in this age group was too dilute. The flip chart emphasizes the quantity and consistency or thickness of food prepared for these children. To standardize the message and make the presentation more entertaining, the community worker uses the flip chart with a story recorded on a cassette. For each page of the flip chart there is a dialogue that ends with one mother asking another mother a question. When the question is asked, the health worker stops the tape and repeats the question to the group, using her reminder card. After the mothers have discussed the question, the tape is restarted. The "correct answer" and explanation are given and the dialogue continues. The main themes of this module are to improve the consistency of an infant's food and to feed more frequently.

**CONTACT:** Caritas CRS Dominican Republic or  
INCS - Manoff International



72

### Fuersan (Strong/Healthy)

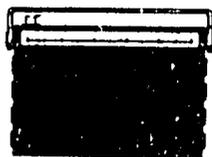
*COUNTRY:* Ecuador

*LANGUAGE:* Spanish and Quechua

*DESCRIPTION:* two two-minute radio spots  
See PEM-PAAMI [28]

*REVIEW:* These spots were designed for the sierra area where the nutritional quality of the weaning foods given to young children is poor. The food promoted here is a mix of cereal and legume flours that is first toasted in oil and then cooked in a porridge for the child. The mix is made from ingredients commonly found in homes. The spots were successful in increasing awareness of the mix and reminding mothers to use it.

*CONTACT:* ININMS or Manoff International



73

### El Camino de la Salud (The Road to Health)

*COUNTRY:* Colombia

*LANGUAGE:* Spanish

*DESCRIPTION:* one ten-minute radio program, one  
15-minute TV program  
See El Camino de la Salud [26]

*REVIEW:* These materials focus on weaning. The programs open with mothers being asked when they should begin feeding their baby solid foods. They give varying answers of from one to four months. The doctor urges mothers to give babies only breast milk during the first four months and then begin to add foods like cereals, fruits, and vegetables. He emphasizes that foods may be mashed at first, but the goal is a diet of solid foods. This explanation is followed by a dramatization of two mothers shopping for food and discussing what they feed their babies. One mother articulates the main points suggested by the doctor, adding that mashed or pureed foods can be given at four months to help massage the child's gums. She states that at nine months, in addition to breastfeeding, the child should be eating whatever the adults are eating, though half the volume. The doctor and narrator close with a restatement of basic themes and urge mothers to use health center services.

*CONTACT:* United Nations University or Manoff International



## Food for the Baby, Newborn to One Year

74

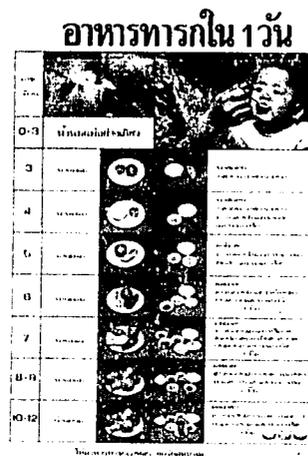
**COUNTRY:** Thailand

**LANGUAGE:** Thai

**DESCRIPTION:** poster, 15" x 20", color

**REVIEW:** This poster is designed for mothers of young children. The message is certain foods make children healthy and strong. And the poster encourages mothers to share this information about child feeding with everyone.

**CONTACT:** Veterans Hospital, Bangkok



## Food for Infants, Newborn to 12 Months

75

**COUNTRY:** Thailand

**LANGUAGE:** Thai

**DESCRIPTION:** pamphlet, 8.5" x 11", color

**REVIEW:** The message is if you give food early, children will be healthy and strong. The pamphlet shows how to prepare food for a child and highlights good foods to use. Included is a pictorial graph titled food for the newborn to one year. This graph illustrates which foods to introduce, and at what age. Breastfeeding is to be continued throughout each stage.

**CONTACT:** Ministry of Public Health



## Baby's Food for Good Health

76

**COUNTRY:** Non-specific

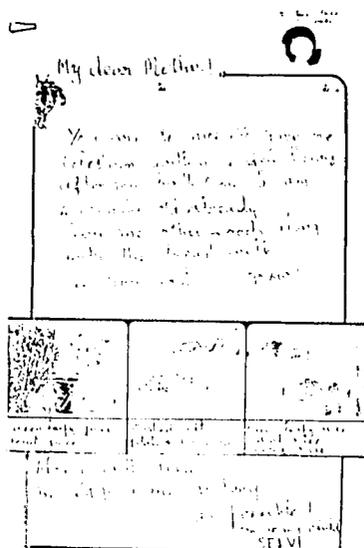
**LANGUAGE:** English

**DESCRIPTION:** story book, color, 11 pages

**REVIEW:** This booklet conveys the message that after four months the baby's diet must be supplemented with foods from three major food groups. It gives an in-depth description of food preparation for a weaning child and offers information about nutritionally balanced meals and good health.

**CONTACT:** Asian Cultural Center for UNESCO





77

## Poster on Weaning Practices

**COUNTRY:** India

**LANGUAGE:** Tamil and English

**DESCRIPTION:** small poster  
See TNIP [4]

**REVIEW:** This poster illustrates weaning practices, recommends that weaning begin at four months, and reminds the mother to breastfeed.

**CONTACT:** Tamil Nadu Integrated Nutrition Project

78

## Nutrition

**COUNTRY:** Cameroon

**LANGUAGE:** French and English

**DESCRIPTION:** flip chart, 19" x 5", color, with booklet

**REVIEW:** This is a multi-topic flip chart on general nutrition, with weaning as one subject. See [135].

**CONTACT:** Atelier de Matériel Audio-Visuel



**A PARTIR DE 5 MOIS  
EN PLUS DU SEIN...**



**JE LUI DONNE CHAQUE JOUR**

79

## À Partir de Cinq Mois en Plus du Sein Je Lui Donne Chaque Jour (Starting at Five Months in Addition to Breastfeeding, I Give Him These Foods)

**COUNTRY:** Ivory Coast

**LANGUAGE:** French

**DESCRIPTION:** poster, 23" x 58", color

**REVIEW:** This colorful poster shows a mother giving her healthy child soft food. Its basic message is that after five months, babies should be given semi-solid foods in addition to breastmilk. The poster also shows the three food groups which ensure energy, growth, and protection from disease.

**CONTACT:** UNICEF/Ivory Coast

## Growth Monitoring

There are few better forums for nutrition education than growth monitoring. As indicated by the materials described in this section, growth monitoring is usually included as part of a comprehensive nutrition program, since it adds to the program's overall effectiveness. The nutrition educator's job is to create a demand for growth monitoring services by ensuring that families understand its value, and to provide child caretakers with specific advice tailored to their child and to their individual situation. The counseling cards developed in the Dominican Republic [33], Ecuador [29], and India [35] are for use in the final growth monitoring step, which is talking to the mother and giving her information on which to act.

### El Camino de la Salud (The Road To Health)

90

**COUNTRY:** Colombia

**LANGUAGE:** Spanish

**DESCRIPTION:** five ten-minute radio programs, one 15-minute television program  
See El Camino de la Salud [26]

**REVIEW:** These six programs emphasize the importance of frequent weight checks to determine if the child's weight corresponds to his age. The message is "appearance could be deceiving." The principal points are: (1) register your child with the health center; (2) get a health control card; (3) bring baby for monthly weight checks; and (4) ask doctor how your baby is progressing.

**CONTACT:** United Nations University of Manoff International



### Child Nutrition Guidelines

91

**COUNTRY:** Swaziland

**LANGUAGE:** English

**DESCRIPTION:** booklet, color, 52 pages

**REVIEW:** Growth monitoring is highlighted in this booklet on child nutrition. It shows how to weigh, plot and interpret the growth chart. Its cover unfolds presenting a multi-colored growth chart titled *When a Child Does Not Grow Well*, and gives recommendations on what to do.

**CONTACT:** National Nutrition Council

### Swaziland Child Nutrition Guidelines



Prepared by the National Nutrition Council  
with assistance from UNICEF Swaziland



92

## Hlola Kukhula Kwemntfwanakho...

**COUNTRY:** Swaziland

**LANGUAGE:** Siswati

**DESCRIPTION:** poster, 24" x 18", color

**REVIEW:** This poster encourages mothers to weigh their children monthly at the health center to determine if the child is healthy. It shows two boys of the same age with their growth cards. The undernourished boy is not an extreme case but is an example of chronic undernutrition, which is a problem in Swaziland. Although by sight mothers may not recognize that the smaller boy is sick, the growth chart makes the differences very apparent.

**CONTACT:** Health Education Centre

93

## Child Growth Curve Poster

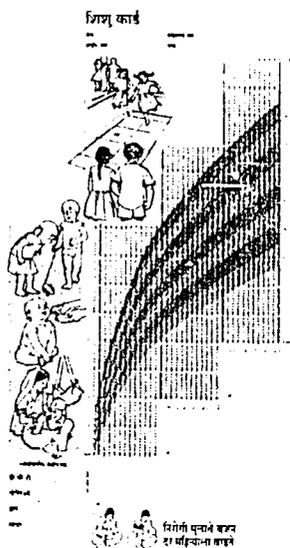
**COUNTRY:** India

**LANGUAGE:** no words

**DESCRIPTION:** poster, color  
See ICDS [5]

**REVIEW:** This poster is designed to motivate mothers to take children for weighing. It is constructed so that mothers will put it on their walls rather than fold it up and store it. It is durable enough so it can be taken to the weighing session each month. The design of the growth card is innovative, using "bubbles" or small circles instead of a grid. Its effectiveness is currently being tested.

**CONTACT:** Integrated Child Development Services or Manoff International



94

## Appréciation de l'État Nutritionnel de l'Enfant (Appraise the Nutritional State of Children)

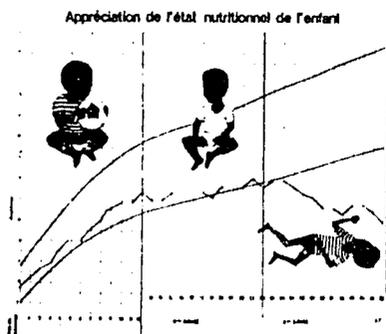
**COUNTRY:** The Congo

**LANGUAGE:** French and English

**DESCRIPTION:** poster, 24" x 23", color  
See CARE/Congo [6]

**REVIEW:** Each mother receives a growth card during the village meetings so that she can keep her own record of her baby's progress. She is instructed to bring the card each time she takes her child to the clinic so the doctor or attendant can check the child's current weight and height. The growth chart fits into a plastic sleeve (not shown) that illustrates how to mix oral rehydration solution using readily available materials, sugar cubes, and a cap from an empty beer bottle.

**CONTACT:** CARE/Congo or CARE/New York



## Nutritional Status

95

**COUNTRY:** India  
**LANGUAGE:** Tamil and English  
**DESCRIPTION:** brochure and flash cards  
 See TNIP [4]

**REVIEW:** This illustrated brochure on growth monitoring explains to mothers why it is important to measure their children, how to measure, and how to determine if the child is in danger. Also included is advice on diet and on assessing the nutritional status of children by using an arm-circumference tape. The flash cards repeat the message and are used by health workers as instructional aids.

**CONTACT:** Tamil Nadu Integrated Nutrition Project

## Growth Chart

96

**COUNTRY:** The Dominican Republic  
**LANGUAGE:** Spanish  
**DESCRIPTION:** growth chart, two sizes (individual and wall), color  
 See ANEP [1]

**REVIEW:** The wall size chart is used to track community progress and as an organizing tool. The smaller fold-out chart is for mothers. It presents the standard growth curve and contains the major program messages on child feeding. The poster [3] promoted child weighing for this program.

**CONTACT:** Caritas CRS Dominican Republic or  
 INCS - Manoff International

### CURVA DE CRECIMIENTO PARA NIÑOS DE 0 A 5 AÑOS



## Nutrition

97

**COUNTRY:** Pakistan  
**LANGUAGE:** English  
**DESCRIPTION:** flip chart, 14" x 10", color, with leaflets

**REVIEW:** A section of this multi-topic flip chart stresses growth monitoring. For a review of this flip chart see [136].

**CONTACT:** H.H. Prince Aga Khan

### ROAD TO BETTER HEALTH CARE

Personal, Individual, Family, and Community Health Care  
 Right up to the door of the child, the road to better health care.



## Child Survival and Development in Uganda

98

**COUNTRY:** Uganda  
**LANGUAGE:** English  
**DESCRIPTION:** calendar

**REVIEW:** This colorful, simply illustrated calendar promotes an array of child survival messages including growth monitoring. There is a drawing of children being weighed, indicating the importance of growth monitoring. Each picture has two to three frames which illustrate the important concepts of the month.

**CONTACT:** UNICEF/Uganda

### Watch Your Child GROW HEALTHY



MARCH 1986						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

UNICEF - Child Survival & Development in Uganda



## Feeding During Diarrhea

At the time of the publication of the 1985 *Guide*, a number of projects focused intensive educational efforts on the prevention of death from diarrhea with oral rehydration therapy (home-made solution and/or use of oral rehydration packets). Recently, however, people working on diarrheal disease control have recognized that feeding during and after diarrhea is equally important and must be part of the educational package. The materials described below are restricted to the nutritional aspect of diarrheal disease control. Although some work has been done in this area, much more is needed.

### Mass Media and Health Practices Project

101

*COUNTRY:* The Gambia

*LANGUAGE:* Wolof, Mandinga, and English

*DESCRIPTION:* posters, flyers, radio programs

*REVIEW:* This project began in 1981 and focused on children under the age of five who are most at risk from the serious repercussions of diarrheal diseases. Combining a mass media approach with health worker training and interpersonal communication, the project emphasized making, using, and storing oral rehydration solution (ORS). Following the initial focus on the preparation of ORS, the project's messages were refined to stress good infant feeding practices that could break the vicious cycle of diarrhea and malnutrition. Special emphasis was placed on identifying solid foods, also called "power" foods, for children recovering from diarrhea. Local dishes and locally available foods such as groundnuts, sugar, milk, and oil were recommended to mothers as good food sources for their children.

*CONTACT:* Department of Medical and Health Services or Academy for Educational Development



## Feeding a Sick Child

102

**COUNTRY:** The Gambia

**LANGUAGE:** English

**DESCRIPTION:** poster, 24" x 27", color

**REVIEW:** Designed for village mothers, this poster shows a mother with her sick child and conveys the following messages:

- Continue breastfeeding as usual.
- If the child has diarrhea, give a sugar-salt solution to prevent dehydration and restore appetite.
- Add sugar and milk to the child's pap at the time of feeding to make it taste better.
- Try to give small amounts often, even if the child has no appetite.
- When the child is recovering, continue breastfeeding.
- Give solid foods, especially oil, sugar, milk, and groundnuts to restore weight and power.
- Give extra food until the child's weight and power are restored.



## When Your Baby Is Recovering from Diarrhea, Give Him Solid Foods to Restore His Power

103

**COUNTRY:** The Gambia

**LANGUAGE:** English

**DESCRIPTION:** poster, color and black and white

**REVIEW:** One side of this poster shows a mother feeding her child and lists names of foods to be given. The other side shows black and white pictures of recommended foods that give extra power, including fish, oil, groundnuts, milk, sugar, and eggs. The names of recommended foods are shown in Wolof and Mandinka.



## Special Diet for Diarrhea

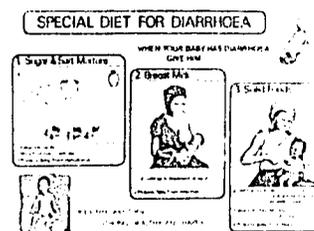
104

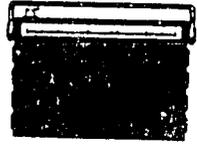
**COUNTRY:** The Gambia

**LANGUAGE:** English and Wolof

**DESCRIPTION:** poster, 23" x 16", color

**REVIEW:** This poster illustrates through four pictures how to care for a child who has diarrhea. The first picture shows how to mix ORS properly. The second picture reminds mothers to continue nursing as usual, since this protects the baby from infection. The third picture shows a mother giving solid foods and urges continuing foods like boiled rice or rice and groundnut porridge rather than watery paps. It also instructs mothers to give extra food for two days after diarrhea ends to protect the baby from malnutrition. The fourth picture shows a healthy baby, the result of good care during a case of diarrhea.





105

### Diarrheal Disease Control Program

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** radio spots, two posters (three different sizes)

**REVIEW:** This single-topic campaign was initiated by the Ministry of Health with assistance from the Academy for Educational Development. The primary message concerns how to care for a child with diarrhea. To date there has been little emphasis on the important area of feeding, but this will receive attention in the future.

**CONTACT:** Center for Community Health Education



106

### Anak Mencret Dan Lemas ... Berikan Oralit (A Child with Diarrhea and Weakness ... Give Oral Rehydration Solution)

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** poster, 19" x 14", color

**REVIEW:** This poster shows a child with diarrhea. The message is that mothers should give ORS when children have this illness. Directions are given for preparing and administering ORS.

107

### Anak Mulai Mencret

#### (A Child Who Has Just Started with Diarrhea)

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** poster, 19" x 14", color

**REVIEW:** Designed for mothers and health workers, this poster emphasizes that children who suffer from diarrhea should be given ORS to replace fluids, minerals, and nutrients. In addition, it urges mothers to continue breastfeeding and feed children soft food.



## Mass Media and Health Practices Project

108

*COUNTRY:* Swaziland

*LANGUAGE:* Siswati

*DESCRIPTION:* posters, flyers, yellow flags, health worker manuals, 15 20- minute radio programs, one two-minute public service announcement

*REVIEW:* The Swaziland diarrheal disease control campaign began in 1983. It demonstrates the impact that radio can have when radio listenership is high (80%) and when incorporated within a systematic framework that includes interpersonal communication, and emphasizes self-reliance. The objective of the campaign is to help reduce the incidence of sickness and death related to diarrheal diseases by informing people of the nature of these diseases and how to identify them, how to take the necessary preventive actions, and how to treat victims.

Important campaign components were (1) the diagnosis of dehydration, (2) mixing, administering, and storing oral rehydration solution, and (3) special infant feeding and child care advice. Since studies had shown that potassium depletion was a significant problem in children sick with diarrhea, specific potassium-rich foods were recommended in the infant feeding messages. The yellow flags identified the homes of trained village volunteers, thus expanding the face-to-face support available to rural villagers. The project was very successful and plans are underway to expand this systematic approach to other areas of development.

*CONTACT:* Health Education Centre or Academy for Educational Development



## Making, Using, and Storing ORS

109

*COUNTRY:* Swaziland

*LANGUAGE:* Siswati

*DESCRIPTION:* radio script, five minutes

*REVIEW:* This radio script explains the importance of mixing, using, and storing ORS. It recommends a soft diet such as soft porridge, umphungo, emahewu, and fresh fruit to replace important nutrients lost during diarrhea.



110

## Breastfeeding and Supplementary Diet During Diarrhea

**COUNTRY:** Swaziland

**LANGUAGE:** Siswati

**DESCRIPTION:** radio script, 20 minutes

**REVIEW:** This script provides the following instructions regarding child nutrition during diarrhea:

- Mothers should continue breastfeeding their infants because diarrhea robs babies of important nutrients that can be replaced by breast milk.
- Mothers should give ORS since ORS replaces important nutrients, fluids, and salts that are lost through diarrhea.
- Fluid intake should be increased, since the loss of body fluids during diarrhea is potentially fatal.
- Children should be given a soft diet to replace nutrients lost during diarrhea.
- For those children no longer being breastfed, clean cups and spoons should be used instead of bottles.



111

## Ayihlome Maswati (Arm Yourself, Swazis, Against the Deadly Disease)

**COUNTRY:** Swaziland

**LANGUAGE:** Siswati

**DESCRIPTION:** poster, 16" x 21", color

**REVIEW:** This poster was designed to provide information on diarrhea management. Four pictures explain how to treat diarrhea in young children. The first picture reinforces the importance of continuing breastfeeding to help replace vitamins and nutrients lost through diarrhea. The second picture describes how to mix ORT. The third and fourth pictures describe the types of foods that should be eaten to help restore energy and power.



AYIHLOME MASWATI

## The Promotion of ORT: An Educational Campaign

112

**COUNTRY:** India  
**LANGUAGE:** Gujarati  
**DESCRIPTION:** banners, poster (metal), rehydration spoons, tumblers games, jingles, slogans, mud wall painting, film, slides, newspaper advertising

**REVIEW:** This project began in 1985 and focused on the training of anganwadi workers. Its main objective was to arrest the effects of diarrheal disease (dehydration) on children. An educational campaign combining interpersonal communication and media materials was initiated to create awareness about diarrheal disease and ORT. Formative research was conducted and materials were pretested.

The two primary messages were: (1) To prevent dehydration, use oral rehydration therapy. The necessary ingredients are salt, sugar, and water, and they are available in the home. Be sure to mix the solution correctly. (2) Continue with regular feeding and breastfeeding.

**CONTACT:** CARE/India



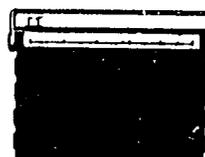
## El Camino de la Salud (The Road To Health)

113

**COUNTRY:** Colombia  
**LANGUAGE:** Spanish  
**DESCRIPTION:** four ten-minute radio programs, two 15-minute television programs

**REVIEW:** These six programs emphasize the importance of giving babies suero oral when they have diarrhea to replace the liquids and salts lost. Instructions are given on preparing the suero oral and mothers are told how and when to give the solution. Additional messages include: (1) giving medication to the child only if prescribed by a doctor; (2) keeping a supply of suero oral in the house; (3) continuing feeding, giving the child plenty of liquids and soft foods; (4) continuing breastfeeding; and (5) taking the child to the nearest health center if his or her health worsens.

**CONTACT:** United Nations University or Manoff International



114

## Diarrhée Sauvons Nos Enfants Rehydratation Orale (Diarrhea Save Our Children Oral Rehydration)

**COUNTRY:** Cameroon

**LANGUAGE:** French and English

**DESCRIPTION:** flip chart, 19" x 26", color, and booklet

**REVIEW:** This flip chart provides information on the causes and treatment of diarrhea. Instructions are given on how to make and give ORS, as well as how to care for a child during and after a diarrheal episode. Mothers are advised to continue breastfeeding and, after 12 hours, to give a soft diet. Recommended foods for a soft diet are listed. Additional health messages include washing hands with soap, teaching children good hygiene, and keeping foods covered. Bottle feeding is not discouraged, instead mothers are reminded to use boiled water when preparing the bottle.

**CONTACT:** Atelier de Matériel Audio-Visuel

115

## Counseling Cards

**COUNTRY:** India

**LANGUAGE:** Gujarati and Marati

**DESCRIPTION:** set of 15 cards, color  
See ICDS [5]

**REVIEW:** Several cards of this set on child feeding describe how to prepare and administer ORS to a child sick with diarrhea. They contain special feeding messages for ill children including stressing the need for mothers to continue feeding their children even if they resist.

**CONTACT:** Integrated Child Development Services  
or Manoff International



## General Nutrition

Materials in this section present a general overview of nutritional concepts. These concepts include foods and their nutritional composition, basic food preparation techniques, utilization of foods by the body, and the importance of providing the correct diet for everyone in the family. Many of these materials, such as those from Indonesia, are designed to involve participants in the learning process by allowing them to discover answers for themselves. There are many materials from World Neighbors which cover a range of nutrition related topics from beans to hen farming. World Neighbors encourages participants to engage in self help projects through creative problem solving and community participation. Also included in this section is a school based nutrition education project "Nutrition Magician." This project has been successful in stimulating improved nutrition related practices among school children and highlights the importance of incorporating practical subject matter with skills like reading.

### Family Nutrition Improvement Program (UPGK)

121

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** two board games, card game, a set of unserialized posters, one fold-out poster

**REVIEW:** These materials are patterned after the pilot project entitled "Non-Formal Participatory Nutrition Education" initiated by Save the Children. That project was reviewed in the the *Guide*. The materials for UPGK are similar in design. They use a non-formal education methodology. However, they focus more specifically on nutrition related topics. Their primary objectives are to create awareness about nutrition and to involve the community in problem identification and solution. Although the materials are packaged together, each item can be used independently.

**CONTACT:** Usaha Perbaikan Gizi Keluarga

### Aneka Pengetahuan Gizi (The Many Different Things to Know about Nutrition)

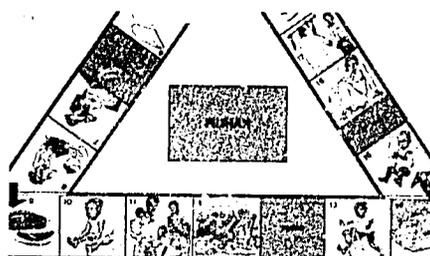
122

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** playing board, dice, three decks of cards

**REVIEW:** This is a rather elaborate game which provides an excellent overview of nutrition. It uses questions and answer cards along with fact cards. Participants roll the dice and pick up a card which directs their next move. The primary objective of the game is to create awareness about UPGK as well as basic nutritional concepts.



123

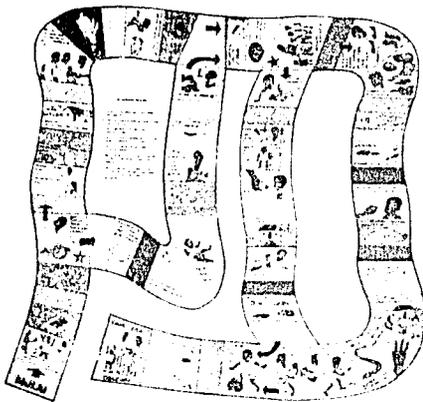
### Liku-Liku Perbaiki Gizi (Nutrition Improvement Snake)

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** playing board, markers, dice

**REVIEW:** This game requires a minimum of four players. It can accommodate up to 16 people divided into groups of four. The objective is to travel around the board toward the end, which is signaled by a happy family. To traverse the board participants roll the dice and must answer the question contained within the square where they land. The topics are primarily nutrition related and pose problems villagers face daily. Concepts such as birth control and breastfeeding are introduced.



LIKU-LIKU PERBAIKAH GIZI



124

### Poster Terbuka Unserialized Posters

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** 10 posters, 30" x 40", color

**REVIEW:** This set of posters shows various scenes from community life, with the focus on illness and nutrition. They are not arranged in sequential order nor is there a set story. Instead groups of cards are given to participants to structure stories about real events and then to work out solutions to problems, or to seek better ways of doing things.

125

### Poster Lipat Story with a Gap

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** poster, 11" x 17", color

**REVIEW:** This poster has four panels that show two different scenes, one of a village with problems and one without. It is an instructional aid designed to structure discussions with villagers about community life. First the villagers talk about what they see in the poster. Then they relate it to their own community. The first part deals with existing problems such as dirty water. It helps the villagers to identify certain conditions as problems. The group leader then folds the chart and a new picture is created of a clean, organized village. Now the villagers are asked how can they achieve this and what the available resources are for taking immediate and long term action.



## Kartu Jodoh (Looking for a Mate)

126

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** 28 playing cards, color

**REVIEW:** These cards are separated into problem and solution cards, with different colors distinguishing each set. The objective of the game is to pair the appropriate cards and discuss the concepts contained in the pairs. These cards deal specifically with nutrition related topics such as breastfeeding, growth monitoring, and prevention of vitamin A deficiency.



## Nutrition Magician

127

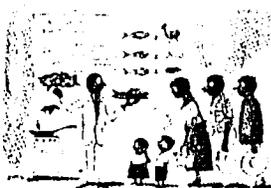
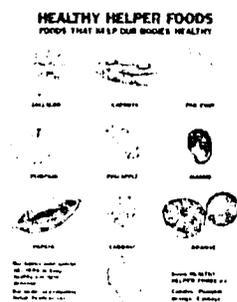
**COUNTRY:** Jamaica

**LANGUAGE:** English

**DESCRIPTION:** three posters, flash cards, teacher's manual

**REVIEW:** The Nutrition Magician is the name of the main character in a pilot project created by the Jamaican Ministry of Education with assistance from the International Nutrition Communications Service (INCS). The purpose of the Jamaica Primary Nutrition Education Project was to look at the success of teaching nutrition concepts as part of a primary school reading program. A manual consisting of illustrated stories, cartoons, and various exercises emphasizes nutritional concepts and provides practice in reading. Messages are geared to children's real life situations, such as eating a mix of foods throughout the day, since few of them can get three balanced meals per day. It also has activities that children can do in school and at home. Flash cards and posters illustrating the three food groups are used by the teacher to reinforce the educational messages. The project evaluation showed that the program has (1) increased students' reading ability and their nutritional knowledge, and (2) achieved some success in changing their food related behavior.

**CONTACT:** Ministry of Education, INCS - Education Development Center



128

## Nutrition Magician

*COUNTRY:* Jamaica

*LANGUAGE:* English

*DESCRIPTION:* two posters, 18" x 22", color, flash cards

*REVIEW:* These posters and flash cards categorize three food groups:

- (1) Go foods for energy to study, work and play, such as yams, cane, rice, ackee, flour, banana, butter, potato.
- (2) Grow foods for growing, such as chicken, cheese, milk, sardines, peanuts, peas, beans, and fish.
- (3) Healthy helper foods for good health such as callaloo, pumpkin, orange, cabbage, papaya, and sour-sop.

They are used to help students recognize good foods while improving their language skills.

129

## Fish Is Good for You

*COUNTRY:* Non-specific

*LANGUAGE:* English, French, and Spanish

*DESCRIPTION:* filmstrip, color, and script

*REVIEW:* This filmstrip discusses the nutritional importance of fish for both adults and children. The frames are animations which illustrate what types of food contain protein, what protein does, and how it combats malnutrition. The film also emphasizes the importance of refrigeration, provides guidance on determining if fish is fresh, and offers recommendations on how to cook and clean fish. The script has sample questions for discussion.

*CONTACT:* World Neighbors

130

## Grow Fruit for Family Use

*COUNTRY:* Non-specific

*LANGUAGE:* English, French, and Spanish

*DESCRIPTION:* filmstrip, color, and script

*REVIEW:* These materials assist the user in motivating people to grow fruit. The film highlights the nutritional value of fruits. It also discusses all aspects of fruit growing and the differences among fruits. The script can be modified to fit local situations.

*CONTACT:* World Neighbors

## Lima Beans ... A Valuable Source Of Protein

131

*COUNTRY:* Peru

*LANGUAGE:* English and Spanish

*DESCRIPTION:* filmstrip, color, and script

*REVIEW:* This is a comprehensive lesson on the nutritional content and value of lima beans, which are an excellent source of protein. Most of the script addresses recipes and how to prepare lima beans.

*CONTACT:* World Neighbors



## Down, Down With Hunger Up, Up With More Food

132

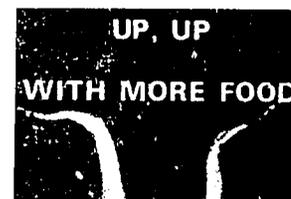
*COUNTRY:* India

*LANGUAGE:* English and Hindi

*DESCRIPTION:* filmstrip and script

*REVIEW:* These materials are directed toward a rural audience. They offer many approaches to dealing with the problem of hunger including local production, such as house gardens, fruit and vegetable cultivation, and intercropping. Nutritious foods such as eggs are highlighted. The pictures are clear and show the whole community of children, young adults, men, and women working together.

*CONTACT:* World Neighbors



## Quinoa Protein for the Highlands

133

*COUNTRY:* Peru

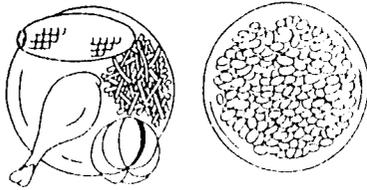
*LANGUAGE:* English and Spanish

*DESCRIPTION:* filmstrip, color, and script

*REVIEW:* This material describes the value of quinoa and includes some recipes. Quinoa is a protein-rich cereal that is inexpensive and available in the Andes. It contains vitamins, minerals, and carbohydrates and can substitute for milk, eggs, cheese, and meat.

*CONTACT:* World Neighbors





134

## The Human Body

*COUNTRY:* Non-specific

*LANGUAGE:* English, French, and Spanish

*DESCRIPTION:* flip chart, 8.5" x 11", black and white

*REVIEW:* This flip chart consists solely of line drawings. It emphasizes that health is a person's most valuable possession, and that each individual is responsible for taking care of it. It gives a brief but thorough explanation of human anatomy. It highlights the relationship between good health and good nutrition and promotes the importance of eating a variety of foods. The text is written on the back of each page.

*CONTACT:* World Neighbors

135

## Nutrition

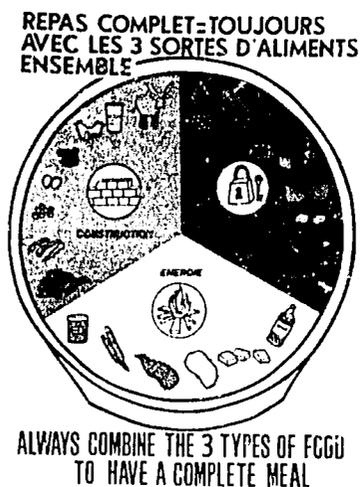
*COUNTRY:* Cameroon

*LANGUAGE:* French and English

*DESCRIPTION:* flip chart, 19" x 5", color and booklet

*REVIEW:* This flip chart is divided into five sections. The first section is on the three food groups (energy, construction, and protection) and emphasizes combining foods from all three groups to ensure a complete diet. The second section is on weighing and includes a weight chart that shows what the child should weigh at given months. It also shows that malnutrition occurs when the child does not receive a well balanced diet that includes foods from the three groups. The third section gives a detailed explanation of the weaning process and how to feed children from four to six months of age, six to nine months, and nine months to a year and a half [78]. Both good and bad methods of weaning are described. The fourth section is on prevention of infant diseases such as whooping cough, measles, malaria, and worms. Mothers are encouraged to breastfeed rather than use bottles that are often a source of contamination. The fifth section is on the many causes of diarrhea and includes information on how to alleviate conditions which cause it.

*CONTACT:* Atelier de Matériel Audio-Visuel



## Nutrition

136

**COUNTRY:** Pakistan

**LANGUAGE:** English

**DESCRIPTION:** flip chart, 14" x 10", color, 23 pages, with leaflets

**REVIEW:** This flip chart is for use with village mothers. It discusses all aspects of nutrition for the family. It offers colorful pictures of breastfeeding, growth charts, good foods to eat, immunization, and growth monitoring. On the back of each page is an explanation of the concept and how to communicate the message. Leaflets are available for distribution. Their content matches that of the flip chart, but they have no instructional text. These small leaflets are excellent handouts which supplement and reinforce the learner's experience.

**CONTACT:** H. H. Prince Aga Khan

### NUTRITION



Good nutrition keeps  
the family healthy.

## Series of Pamphlets on Nutrition and Health

137

**COUNTRY:** Guatemala

**LANGUAGE:** Spanish

**DESCRIPTION:** pamphlets, 8.5" x 11", color

**REVIEW:** These pamphlets reinforce the health and nutrition education efforts of health center personnel and community workers. They cover breastfeeding [64], child feeding [36], pre-natal care [17], and other nutrition related topics. They are for families who attend clinics and are used to stimulate discussion and then as reminders for families once they are home.

**CONTACT:** Foster Parents Plan International



## Alimentación y Nutrición: Una Necesidad Básica

138

### (Food and Nutrition: A Basic Need)

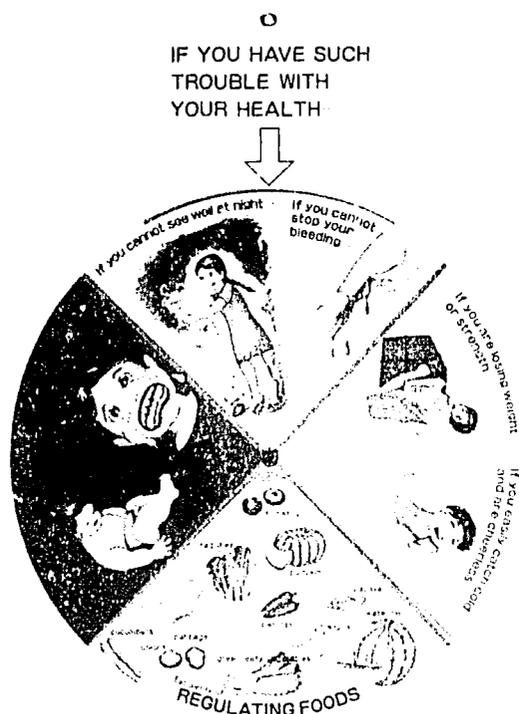
**COUNTRY:** Chile

**LANGUAGE:** Spanish

**DESCRIPTION:** ten-minute video, color, UHS (NTS)

**REVIEW:** This video, produced and pretested in 1986, is the first of a three-part series on food and nutrition. It was designed to be used alone or in combination with interpersonal education and group discussion. The objectives are (1) to motivate, (2) to systemize food and nutrition knowledge, and (3) to introduce the themes of prevention of malnutrition and diet requirements. The video covers the importance of food and nutrition, diet and dietary requirements, malnutrition, and causes of nutrition problems.

**CONTACT:** Instituto de Nutrición y Tecnología de los Alimentos



139

## A Balanced Diet

*COUNTRY:* Non-specific

*LANGUAGE:* English

*DESCRIPTION:* rotating wheel, color

*REVIEW:* The objectives of this wheel are to introduce three concepts:

- (1) the idea of classifying foods into three groups according to nutritional composition
- (2) the relationship between certain diseases and lack of particular nutrients
- (3) the importance of having a nutritionally balanced diet for healthy living.

Suggestions for using the wheel include showing it to stimulate discussions among women and girls who prepare family meals. It should be demonstrated by an instructor before it is turned over to a group.

*CONTACT:* Asian Cultural Center for UNESCO

140

## Radio Spots

*COUNTRY:* Lesotho

*LANGUAGE:* Sesotho

*DESCRIPTION:* four radio spots,  
40 seconds each and a recipe book

*REVIEW:* These four radio spots were written to promote the recipe book among rural women. Each program contains a nutrition message and an announcement about the booklet. Each program is a conversation between a mother and her daughter about the food she is preparing. The mother mentions the particular food, and why it is important in one's diet.

*CONTACT:* Lesotho Distance Teaching Centre



## Nutrition Related Disease

The major objective of educational projects on nutrition related disease is to create awareness among target populations so that they can recognize, treat, and, most importantly, prevent these illnesses. Prevention is critical since many of these diseases are difficult to treat in their advanced stages. It often involves specific changes in practices, such as daily use of appropriate vegetables iodized salt, or fortified foods. A sufficient supply of the needed nutrient must be available so that these practices can be implemented. Therefore, close coordination between the educational project and the health, agriculture, or marketing systems is essential.

### The Disease of Hunger

146

*COUNTRY:* Zaire

*LANGUAGE:* French and English

*DESCRIPTION:* filmstrip, color, with script

*REVIEW:* This filmstrip tells a story about an African family whose youngest child suffers from malnutrition. The onset of the disease causes the parents to take the child to his grandparent's home to be cured. A village meeting is arranged, and various explanations are offered as to why this child is sick. Bad spirits and omens are considered to be responsible. A village health worker enters the meeting and suggests that perhaps malnutrition is the cause. She explains a bit about malnutrition, and a group discussion ensues. Several preventive recommendations are offered, including planning family meals properly and making sure that the younger children are eating. The film finishes on a happy note, the child returning home with his health restored. The child's uncle relays the new information about malnutrition to the villagers.

*CONTACT:* World Neighbors



### Save Our Children's Eyes

147

*COUNTRY:* Non-specific

*LANGUAGE:* English

*DESCRIPTION:* pamphlet, color

*REVIEW:* This pamphlet emphasizes the importance of giving children vitamin A capsules or liquid solution to prevent blindness caused by vitamin A deficiency. It also stresses giving children dark green, leafy vegetables or yellow fruits daily and breastfeeding young children as preventive measures.

*CONTACT:* Helen Keller International

#### Treat Children Who Need Vitamin A

**Give now** 200,000 IU Vitamin A capsule (or 100 mg liquid solution)

**Give tomorrow** 200,000 IU Vitamin A capsule (or 100 mg liquid solution)

**Give again in 2 weeks** 200,000 IU Vitamin A capsule (or 100 mg liquid solution)

**Attention:** Do not give this treatment to children who are already being given



FIGURE 1. Vitamin A capsules. © Helen Keller International



148

### Vitamin A Flannelgraph

*COUNTRY:* India

*LANGUAGE:* Tamil

*DESCRIPTION:* flannelgraph and booklet, color  
See TNIP [4]

*REVIEW:* This flannelgraph and booklet explain the importance of giving vitamin A to young children as protection against night blindness. It tells mothers about the various food groups that contain vitamin A and about supplementary vitamin A drops.

*CONTACT:* Tamil Nadu Integrated Nutrition Project

149

### Vitamin A Cards

*COUNTRY:* India

*LANGUAGE:* Tamil and English

*DESCRIPTION:* flash cards  
See TNIP [4]

*REVIEW:* These cards teach mothers about vitamin A deficiency and encourage them to give children under six years of age a dose of vitamin A by mouth every six months.

*CONTACT:* Tamil Nadu Integrated Nutrition Project

150

### Buta Senja Adalah Awal Kebutaan Cegahlah Dengan

*(Night Blindness Is the Beginning of  
Blindness You Can Prevent It by...)*

*COUNTRY:* Indonesia

*LANGUAGE:* Bahasa Indonesia

*DESCRIPTION:* poster, 19" x 25", color

*REVIEW:* Three separate pictures show (1) a child with night blindness, (2) a mother giving her child fresh fruits and vegetables at least once a day to prevent night blindness, and (3) a mother giving her child one vitamin A tablet every six months to prevent night blindness. The poster illustrates the progression of nutritional blindness and offers recommendations on how to prevent it. The last line on the poster suggests that mothers ask for advice at the monthly weighing session.

*CONTACT:* UNICEF Indonesia

BUTA SENJA ADALAH AWAL KEBUTAAN



## Teka Teki Tentang Kesehatan Mata (Game about Eye Care)

151

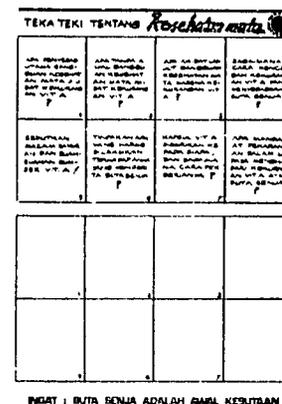
**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** playing board with cards  
See UPGK [121]

**REVIEW:** This game requires participants to match the correct answer card to each question written on the playing squares of the board. The thematic content involves eye health and all aspects of eye care, including the symptoms, treatment, and prevention of nutritional blindness.

**CONTACT:** Usaha Perbaikan Gizi Keluarga



## Teka Teki Tentang Kurang Darah (A Game about Anemia)

152

**COUNTRY:** Indonesia

**LANGUAGE:** Bahasa Indonesia

**DESCRIPTION:** playing board with cards  
See UPGK [121]

**REVIEW:** This game is similar to the eye care game [151]. However, the topic is the symptoms and treatment of iron deficiency.

**CONTACT:** Usaha Perbaikan Gizi Keluarga



## Cobrão

153

**COUNTRY:** Brazil

**LANGUAGE:** Portuguese

**DESCRIPTION:** card game

**REVIEW:** This educational game can be used in schools, clubs, or clinic waiting rooms. The objective is to answer the questions posed on each card. The correct response and a brief explanation are on the reverse side. There are several topics covered including iron deficiency. For example one question is, "How can we better absorb the iron in vegetables?"

**CONTACT:** Associação Brasileira de Tecnologia



154

## Nutrition

*COUNTRY:* Pakistan

*LANGUAGE:* English

*DESCRIPTION:* flip chart, 11" x 17", color

*REVIEW:* This section of the flip chart "Nutrition" [136] discusses nutritional deficiencies and the resulting diseases. For example, it includes information and instruction on how to treat and prevent goiter and anemia. This material is geographically specific and not suited for generic application in other areas.

*CONTACT:* H.H. Prince Aga Khan

155

## Goiter

*COUNTRY:* Pakistan

*LANGUAGE:* Khawar and Urdu

*DESCRIPTION:* booklet, color

*REVIEW:* This illustrated booklet covers goiter prevention and treatment. It describes the consequences of iodine deficiency for pregnant women and school age children and the importance of using iodized salt. Illustrations and text were pretested with villagers for comprehension and acceptability.

*CONTACT:* H.H. Prince Aga Khan



## Goiter

156

*COUNTRY:* Pakistan

*LANGUAGE:* English

*DESCRIPTION:* flip chart, 10" x 14", color, 17 pages

*REVIEW:* This flip chart explains in detail the problems of goiter, how it occurs, and how it can be diagnosed. Information is provided on both prevention and treatment. The use of iodized salt is advocated for prevention.

*CONTACT:* H.H. Prince Aga Khan



## Poster of a Woman with Goiter

157

*COUNTRY:* Nepal

*LANGUAGE:* Nepali

*DESCRIPTION:* poster, black and white

*REVIEW:* This poster shows a Nepalese woman with goiter, a condition resulting from iodine deficiency. It is part of a program undertaken by Nepal to eradicate endemic goiter through an intensive inoculation campaign which began about five years ago. The goal was to inoculate two million people using Nepalese field crews to hike the mountains and administer the shots. It has been regarded as a successful stop-gap measure, but the underlying cause of goiter remains.

*CONTACT:* UNICEF/Nepal



## Contacts and their Addresses

**ACADEMY FOR EDUCATIONAL DEVELOPMENT**  
1255 Twenty-Third Street, N.W.  
Washington, D.C. 20037, U.S.A.

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CLEARINGHOUSE ON INFANT FEEDING AND  
MATERNAL NUTRITION**  
1015 Fifteenth Street, N.W.  
Washington, D.C. 20005, U.S.A.

**ASIAN CULTURAL CENTER FOR UNESCO**  
No. 6, Fukuromachi, Shinjuku-ku  
Tokyo 162, Japan

**ASSOCIAÇÃO BRASILEIRA DE TECNOLOGIA  
ALTERNATIVA NA PROMOÇÃO DA SAÚDE**  
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CEP 04034  
São Paulo, Brazil

**ATELIER DE MATÉRIEL AUDIO-VISUEL**  
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Yaounde, Cameroon

**BREAST IS BEST LEAGUE**  
44 Gabourel Lane  
Belize City, Belize

**CARE CONGO**  
P.O. Box 1055  
Brazzaville, Congo

**CARE INDIA**  
P.O. Box 4220  
New Delhi, India 110048

**CARE NEW YORK**  
660 First Avenue  
New York, NY 10016, U.S.A.

**CARIBBEAN FOOD AND NUTRITION INSTITUTE**  
P.O. Box 140  
Kingston, Jamaica, W.I.

**CENTER FOR COMMUNITY  
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**CHETNA**  
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**CONSUMERS ASSOCIATION OF PENANG**  
87, Jalan Cantonment  
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P.O. Box 192  
Sumbawanga, Tanzania

**CATHOLIC RELIEF SERVICES (CRS) /  
CARITAS DOMINICAN REPUBLIC**  
Apartado 1457  
Santo Domingo, Dominican Republic

**THE DEVELOPING COUNTRIES  
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c/o Massey Ferguson Ltd.  
595 Bay Street  
Toronto, Ontario, M5G 2C3 Canada

**ECUADOR-MINISTRY OF HEALTH  
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Quito, Ecuador

**FOSTER PARENTS PLAN INTERNATIONAL**  
155 Plan Way  
Warwick, RI 02886, U.S.A.

**THE GAMBIA-DEPARTMENT OF  
MEDICAL AND HEALTH SERVICES**  
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Banjul, The Gambia

**H.H. PRINCE AGA KHAN**  
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Karachi, Pakistan

**HEALTH EDUCATION CENTER**  
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**HELEN KELLER INTERNATIONAL**  
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Brasília, DF, Brazil

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Quito, Ecuador

**INSTITUTO NACIONAL PARA LA NIÑEZ  
Y LA FAMILIA (INNFA)**  
Olmedo 953 y Benalcázar  
Quito, Ecuador

**INSTITUTO DE NUTRICIÓN Y TECNOLOGIA  
DE LOS ALIMENTOS**  
Casilla 15138  
Santiago P, Chile

**INTEGRATED CHILD DEVELOPMENT SERVICES**  
 Department of Women and Child Development  
 Ministry of Human Resource Development  
 Shastri Bhawan  
 New Delhi 110001, India

**INTERNATIONAL NUTRITION COMMUNICATION SERVICE (INCS)**  
 Education Development Center, Inc.  
 55 Chapel Street  
 Newton, MA 02160, U.S.A.

**IVORY COAST-MINISTRY OF HEALTH**  
 Institut de Santé Publique  
 B. P. V47  
 Abidjan, Cote D'Ivoire

**JAMAICA-MINISTRY OF HEALTH**  
 10 Caledonia Avenue  
 Kingston, 5, Jamaica, W.I.

**LESOTHO DISTANCE TEACHING CENTRE**  
 P.O. Box 781  
 Maseru, Lesotho

**MANOFF INTERNATIONAL**  
 2001 "S" Street, N.W., Suite 420  
 Washington, D.C. 20009, U.S.A.

**PAN (PLAN NACIONAL DE ALIMENTACIÓN Y NUTRICIÓN)**  
 Ministerio de Planeación  
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**PIACT BANGLADESH**  
 1-7 Block-A  
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**SWAZILAND NATIONAL NUTRITION COUNCIL**  
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**TAMIL NADU INTEGRATED NUTRITION PROJECT**  
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**THAILAND-DEPARTMENT OF COMMERCE**  
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**THAILAND-MINISTRY OF PUBLIC HEALTH**  
 Nutrition Division  
 Bangkok, Thailand

**UNICEF BRAZIL**  
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**UNICEF COTE D'IVOIRE**  
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**UNICEF GUATEMALA**  
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**UNICEF INDONESIA**  
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 Jakarta 12920, Indonesia

**UNICEF NEPAL**  
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 Kathmandu, Nepal

**UNICEF PAKISTAN**  
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 Islamabad, Pakistan

**UNICEF UGANDA**  
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 Kampala, Uganda

**UNITED NATIONS UNIVERSITY**  
 Toho Seimei Building  
 15-1 Shibuya 2-chome  
 Shibuya-ku  
 Tokyo 150, Japan

**USAHA PERBAIKAN GIZI KELUARGA**  
 Directorate of Nutrition  
 Ministry of Health  
 Jalan #23A  
 Percetakan/Negara, Indonesia

**VETERANS HOSPITAL**  
 Bangkok, Thailand

**VIDEOGRAPH**  
 2833 25th Street  
 San Francisco, CA 94110, U.S.A.

**WORLD NEIGHBORS DEVELOPMENT COMMUNICATIONS**  
 5116 North Portland  
 Oklahoma City, OK 73112, U.S.A.

## Materials by Region and Country

The program and materials reviews are indexed by region/country and language. Non-print media materials are indicated in each index by a star (★) preceding the title of the entry. **Entry numbers** are used rather than page numbers to indicate their location in this *Supplement*.

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