Infant Feeding Counselling Cards

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Infant Feeding Counselling Cards

This counselling card flip chart is based on the National Infant and Young Child Feeding Policy. These counselling cards have been created to help health workers trained in infant feeding counselling to support HIV-positive mothers. All HIV-positive mothers should receive counselling on how to feed their babies. This includes general information about the risks and benefits of different infant feeding options, and specific guidance on selecting the best option for their situation. Whatever a mother decides, she should be supported in her choice.

Counsellors using these counselling cards should have received specific training on infant and young child feeding counselling. These cards include a flow chart illustrating the counselling process and counselling cards to be used during one-on-one sessions with pregnant woman and mothers. These counselling cards are supported by take-home brochures that can be given to mothers to support the practices related to their chosen feeding option.

Counselling Skills

Listening and learning skills

1) Use helpful non-verbal communication
    - Keep head level with mother
    - Listen closely
    - Remove barriers
    - Take time
    - Touch appropriately
2) Ask open questions
3) Use responses and gestures that show interest
4) Reflect back what the mother is saying
5) Avoid judging words

General counselling guidelines

- Greet the mother/caregiver and establish confidence
- Ask the mother about the baby's age and feeding practices
- Listen to the concerns of the mother an d father
- Praise what the mother is doing right
- Identify feeding difficultly if any and causes
- Observe the baby and mother
- Answer any questions
- Discuss possible options to overcome the difficulty
- Present options and help mother select one that she can try.

HOW TO USE THE FLOW CHART

1. IF THIS IS THE FIRST INFANT FEEDING COUNSELLING SESSION:

And she is pregnant:

- Follow steps 1-4. if she needs time to decide which feeding option to choose, follow steps 1-3 and ask her to return to discuss step 4
- If she is early in her pregnancy ask her to return again closer to her delivery date to review how to feed her baby.

If she already has a child:

- Follow steps 1-3. if the mother is not breastfeeding at all, however, do not discuss the advantages and disadvantages of breastfeeding.
- Continue with steps 5.

2. IF THE MOTHERS HAS ALREADY BEEN COUNSELLED AND CHOSEN A FEEDING METHOD, BUT SHE HAS NOT YET LEARNED HOW TO PRACTICE IT:

And she is pregnant

- Do step 4 only.

And she already has a child:

- Begin with step 4 and continue with step 5

3. IF THIS IS A FOLLOW-UP VISIT:

- Begin with step 5
- Review how to practice the feeding method.

REMEMBER:

- Use “listening and learning skills” and skills for building confidence and giving support.
- Check to ensure that the mother understands what you have discussed
- Arrange for follow up or referral as needed.

COUNSELLING FLOW CHART

STEP 1
Explain the risks of mother-to-child transmission

STEP 2
Explain the advantages and disadvantages of different feeding options starting with the mother’s initial preference

STEP 3
Explore with the mother her home and family situation and help the mother choose an appropriate feeding option

STEP 4
Explain how to practice the chosen feeding option and give her the appropriate take-home pamphlet

How to practice exclusive breastfeeding for the first 6 months

How to give only formula
Remind the mother that she can never breastfeed if chooses formula

STEP 5
Follow-up with the mother and baby

- Monitor growth
- Check feeding practices
- Check for signs of illness
- Discuss feeding for infants 6 to 24 months

CARD 1: The risk of mother-to-child transmission

USE WITH: All HIV positive woman who are being counselled for the first time

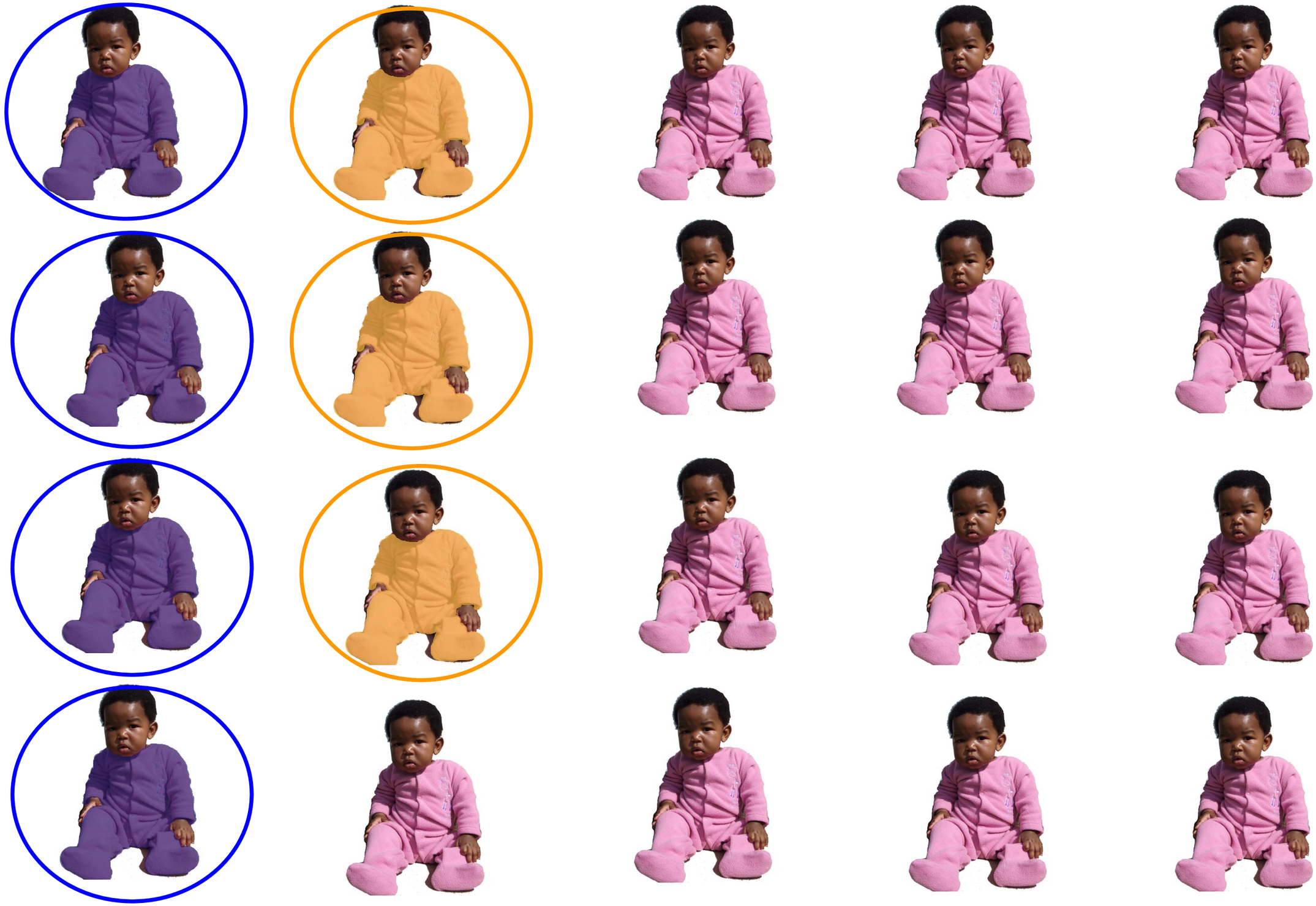
ASK: What have you heard about how HIV is passed from mothers to babies? Do you know how many babies get infected through breastfeeding?

KEY MESSAGES

- Women who are HIV infected can pass HIV to their babies by during pregnancy, delivery, or breastfeeding.
- Not all babies born to HIV-infected woman will become infected.
- Imagine 20 babies being born to women with HIV. About 13 of those babies will never become infected even if they are breast-fed by their mothers until 2 years of age. These are the babies in pink.
- If no preventive measures are taken, about 4 will be infected through pregnancy and delivery; these are the babies in blue. About 3 will be infected through breastfeeding these are the babies in orange. If a mother breastfeeds her baby exclusively for six months, fewer than one baby of 20 (instead of 3 of 20) will be infected through breastfeeding. If the mother gives replacement milk from birth, 3 babies out of 20 will die before 12 months of other causes like malnutrition, diarrhoea or other common childhood illnesses.
- The risk of passing HIV through breastfeeding to your baby is higher when you have been recently infected (or re-infected) with HIV, you are at the AIDS stage of the disease, you breastfeed and give other foods and liquids (called mix feeding) at the same time, if you have sores on your nipples, or you breastfeed for a long time (usually more than 18 months or 2 years).
- There are ways of reducing the risk of HIV transmission to your baby by using ARVs and practicing your chosen feeding option exclusively for six months. It is important to go for PMTCT services to reduce the risk.
- Your baby can be tested for HIV at 6 weeks of age. Remember to take your baby to the health center for testing.

ASK: What questions or concerns do you have about what we have just discussed?

REMEMBER : AT EACH FOLLOW UP VISIT DISCUSS THE CHOSEN FEEDING OPTION AND REINFORCE AND SUPPORT THE CHOSEN OPTION WITH RELEVANT INFORMATION.



Infected through pregnancy and delivery

Infected through breastfeeding

Not infected

CARD 2: Choices for feeding your baby if you are HIV positive

USE WITH: All HIV-positive woman who are being counselled for the first time

ASK: What choices do women who are HIV positive have for feeding their babies?

KEY MESSAGES

- There are two ways HIV-positive women can feed their babies during the first 6 months: giving only breastmilk or giving only formula.
- If you choose to breastfeed, it must be exclusive, which means giving only breastmilk (including expressed breastmilk) without any other food or drink, not even water. However drops or syrups of medicines can be given when medically prescribed. This is the safest way for you to breastfeed your baby for the first 6 months.
- If you choose to give formula, it means that the baby receives only formula and is never breastfed.
- Babies under six months do not need water, teas, juice or any other food. Give only medicines that have been prescribed by your health care provider.
- Whatever choice you make you need to follow for it exclusively until the baby completes 6 months.

ASK: What questions or concerns do you have about what we have just discussed?

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OR

CARD 3: Benefits of exclusive breastfeeding

USE WITH: HIV-positive women who are being counselled for the first time.

ASK: What so you see in this picture? What do you think “exclusive breastfeeding” means?

KEY MESSAGES

Benefits of breastfeeding:

- Breastmilk is the perfect food for babies, it has all of the nutrients and water a baby needs..
- Breastmilk protects them from many diseases, especially diarrhoea and pneumonia..
- Breastmilk is free, always available, and does not need any special preparation.
- Exclusive breastfeeding for the first few months may lower the risk of passing HIV compared to mixed feeding.
- Exclusive breastfeeding helps you recover from childbirth and protects you from getting pregnant again too soon.

ASK: What questions or concerns do you have about what we have just discussed?

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CARD 4: Advantages and disadvantages of commercial infant formula

USE WITH: Women who are HIV positive

ASK: What have you heard about infant formula? Do you know anyone who has given their baby infant formula?

KEY MESSAGES

Advantages

- Giving only formula does not place the baby at risk of HIV infection.
- Formula is made especially for infants.
- Formula includes most of the nutrients that an infant needs.
- Other family members can help feed the infant.
- If the mother falls ill, others can feed her baby while she recovers.

Disadvantages

- Formula does not have antibodies that protect babies from infection. A baby who is fed formula is more likely to get diarrhoea and pneumonia and may develop malnutrition.
- It requires a continuous, reliable supply of formula to prevent malnutrition. This can be difficult.
- Formula is very expensive.
- Families need soap for cleaning cups and utensils used in preparing the formula.
- Safe preparation of formula requires clean, boiled water; this also requires fuel.
- Formula needs to be made fresh for each feed, according to the directions, day and night, unless she has access to a refrigerator.
- The infant needs to drink from a cup, which may take time to learn.
- The mother must stop breastfeeding completely or the baby will be at risk of HIV infection. In some settings, the family, neighbours or friends may question a mother who does not breastfeed about her HIV status.
- The mother may become pregnant again soon

ASK: What questions or concerns do you have about what we have just discussed?

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FORMULA

CARD 5: Helping a mother decide how best to feed her baby

USE WITH: ALL HIV-positive woman who are being counselled for the first time to choose the most appropriate feeding option

ASK: the question in the left hand column while pointing to the drawing that corresponds to each question. Her responses to all of these questions can help a woman choose the most suitable method for her situation, after she has learned the advantages and disadvantages of each method.

	BEST FEEDING OPTION	
Questions for the mother	**Breastfeeding**	**Formula Feeding**
Where do you get your drinking water?	River, stream, pond, well	Standpipe, tap or buy clean water
What kind of toilet do you have?	None or pit latrine	VIP latrine or flush toilet
How much money could you afford for formula, fuel and safe drinking water each month*?	She does not have enough money each month	She does have enough money available for formula each and every month
Do you have money for transportation to get formula when you run out?	No, sometimes	Always
Can you prepare each feed with boiled water and clean utensils?	No, sometimes	Always
How would you arrange night feed?	Preparation of formula feeds at night difficult	Preparation of milk feeds at night possible
Does your family know you are HIV positive?	No	Yes
Is your family supportive of formula feeding and are they willing to help?	Family not supportive and not willing to help, or don't know – can't discuss	Family supportive and willing to help

*you will need to know the monthly cost of formula in your community.

Based on the answers the mother gives, the health worker should advise her to choose the best method for her situation. Always be supportive no matter what decision she makes.

REMEMBER : AT EACH FOLLOW UP VISIT DISCUSS THE CHOSEN FEEDING OPTION AND REINFORCE AND SUPPORT THE CHOSEN OPTION WITH RELEVANT INFORMATION.

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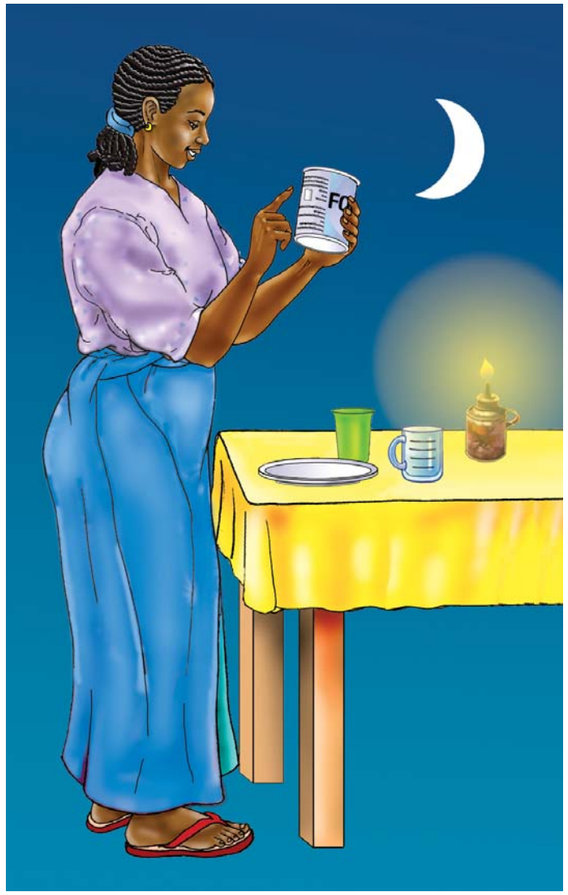

CARD 6: Understanding exclusive breastfeeding

USE WITH: Mothers who have decided to breastfeed their baby.

ASK: What so you see in this picture? What does “exclusive breastfeeding” mean? Why is exclusive breastfeeding important?

KEY MESSAGES

- Breastmilk is the perfect food for babies, it has all of the nutrients and water a baby needs for the first 6 months.
- Exclusive breastfeeding means giving only breastmilk to a baby for the first six months of life. This means a baby does not receive water, other liquids, or foods, except for medicines and vitamins prescribed by a doctor or nurse.
- If you give other foods or liquids (including water, juice, teas, other milks) to a baby—even in small amounts—while breastfeeding, it can increase the risk of HIV infection to your baby.
- Be sure to hold and attach your baby to the breast properly.
- Check for sores in your baby’s mouth every day and get them treated as soon as possible.
- Come back if you have any problems with breastfeeding or sore nipples or red, painful breasts.

ASK: What questions or concerns do you have about what we have just discussed? Is there any reason why you will not be able to exclusively breastfeed? What are the challenges you expect? How can you overcome those challenges?

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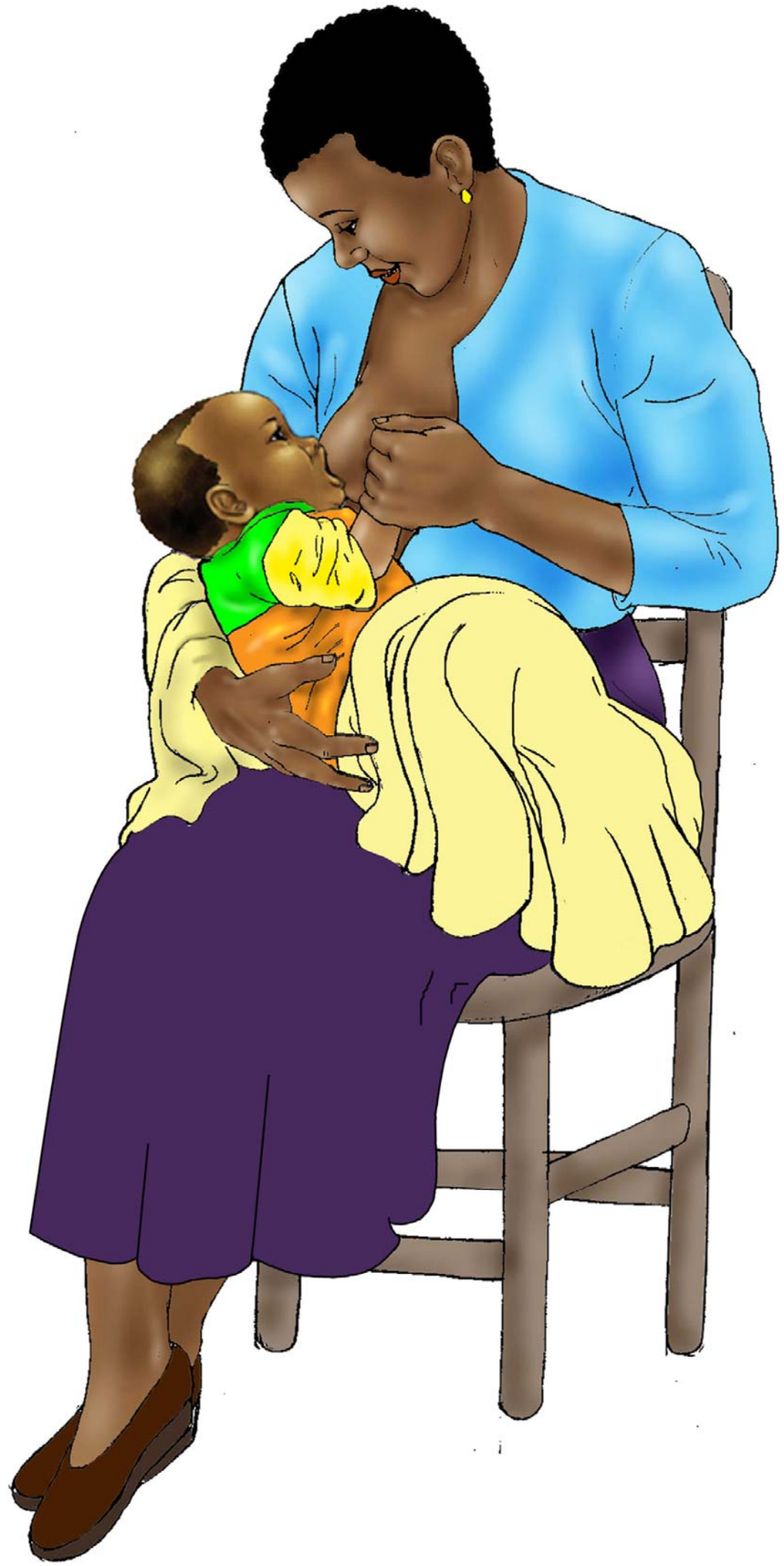

CARD 7: How to exclusively breastfeed your baby for the first 6 months

USE WITH: Mothers who have decided to breastfeed their baby.

ASK: What do you see in this picture? How soon after birth do woman you usually begin breastfeeding?

KEY MESSAGES

- After giving birth, put the baby in skin-to-skin contact and start breastfeeding within the first hour of birth.
- The first yellowish and watery milk that comes in is very good for your baby. Giving it is like a vaccination and protects your baby from many diseases.
- Breastfeed your baby day and night and whenever the baby wants to eat.
- Starting breastfeeding early and breastfeeding your baby often will help your body make enough milk and keep your breasts from getting engorged (swollen).
- You will know that your baby is getting enough milk if she /he urinates at least six times per day. The urine should be light in colour and not strong smelling.
- If you choose to breastfeed, it must be exclusive. This means that baby has only breastmilk (no water, teas, juices, food or other milk) for the first 6 months.

ASK: What questions or concerns do you have about what we have just discussed?

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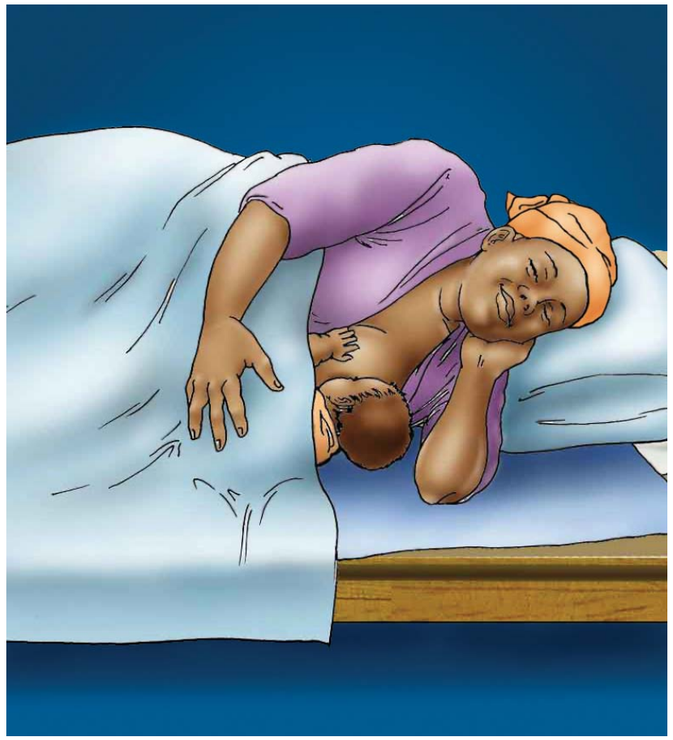

CARD 8: How to hold and attach your baby for breastfeeding

USE WITH: Mothers who have chosen to breastfeed

ASK: Can you show me how you would hold your baby when breastfeeding? How would you attach the baby to the breast?

KEY MESSAGES

- It is important to hold and attach your baby correctly when breastfeeding in order to prevent breast problems.
- Hold the baby close to you, facing the breast, with his/her neck and body straight and supported.
- Support the breast by holding your fingers against your chest wall below your breast. Your first finger should support the breast, with your thumb above. Do not hold your fingers too close to the nipple.
- Remember: safer breastfeeding means giving only breastmilk and not giving any other foods or drinks, not even water for the first 6 months. It is important to seek care immediately if there is a problem. This will help your breast health and your baby's survival.

REVIEW: The take-home flyers on how to exclusively breastfeed and proper positioning and attachment with the mother.

ASK: What questions or concerns do you have about what we have just discussed? What difficulties do you think you might have with exclusive breastfeeding? How can you deal with those difficulties?

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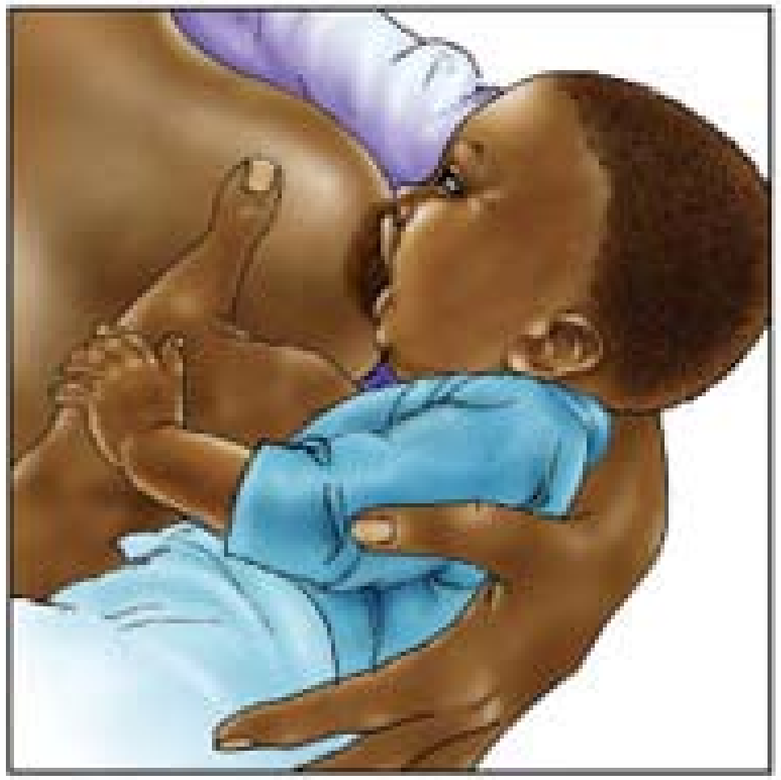

CARD 9: Hand expressing breastmilk

USE WITH: Women who have chosen exclusive breastfeeding and need to leave their babies for a short time, have mastitis, engorged breasts, babies who are unable to suckle, babies with low birth weight, and breastfeeding women who are transitioning after 6 months.

ASK: What do you see in this picture? Have you ever expressed breastmilk? If yes, how? When can it be helpful to express breastmilk?

KEY MESSAGES

- There are many reasons why expressing breastmilk is useful and important for women who are exclusively breastfeeding:
  - To leave milk for your baby if you are going to be away.
  - If your breasts are so swollen that they are uncomfortable and it is difficult for your baby to breastfeed.
  - If your baby was born early, is too small to suckle well, is weak or refusing to suckle.
  - To maintain breastmilk production if you or your baby are sick.
  - To apply to cracked or sore nipples to help them heal.
- How to express
  - Wash the cup or jar and its cover with warm, clean water and soap. It is best to boil these utensils to make sure they are clean.
  - Wash your hands with soap and clean water before and after expressing milk.
  - Sit or stand comfortably in a quiet, private place. Drink something warm and try to relax. It may help if someone massages your back.
  - Apply a warm clothe to your breasts. Lightly massage them and gently pull or roll your nipples.
  - Put your thumb on the breast above the nipple and areola (coloured area) and your first finger below the nipple and areola. Support your breast with your other fingers.
  - Gently press your thumb and first finger together. Press and release, press and release, in order to start the milk flowing. This should not hurt. It is does, then you are not doing it right.
  - Press the same way on the sides of the areola in order to empty all parts of the breast.
  - Do not squeeze the nipple itself or rub your fingers over the skin. Your fingers should roll over the breast.
  - Express one breast until the flow slows, and then change to the other breast. Then do both breasts again.
  - Change hands when one gets tired. You can use either hand for either breast.

Store your expressed breastmilk in a clean, covered container in a cool place until you are ready to feed your baby. Expressed milk can be stored for up to 8 hours in a cool place. [If a mother has a refrigerator, expressed breastmilk can stay for 72 hours.]

REVIEW: The take-home flyers on how to hand expressing breastmilk.

ASK: What questions or concerns do you have about what we have just discussed? What difficulties might you have with expressing milk? How

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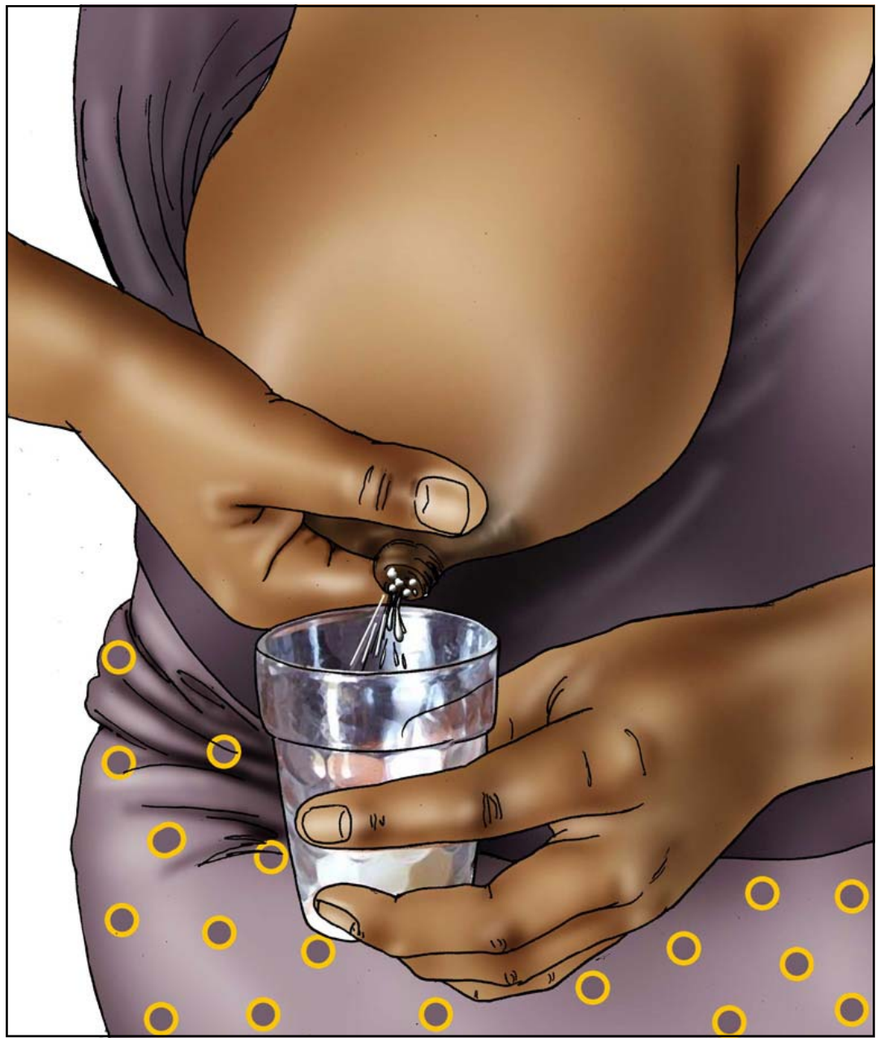

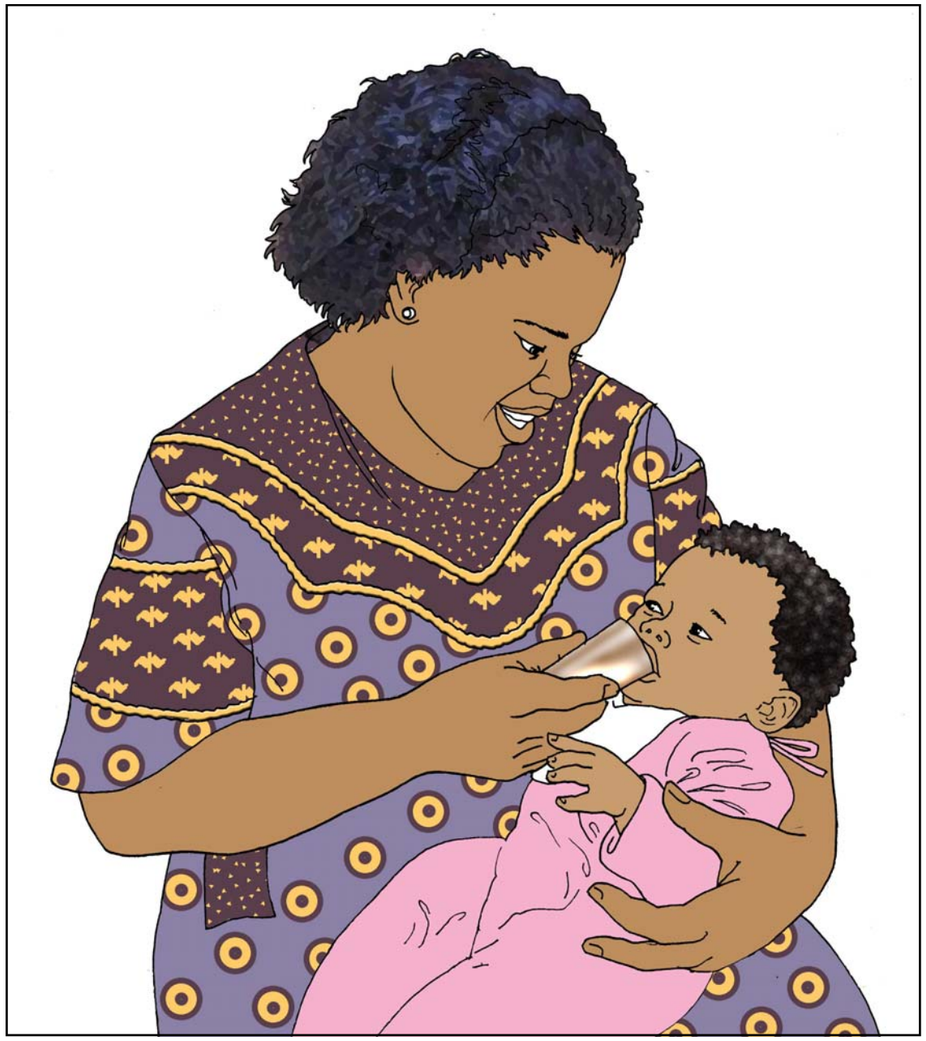

CARD 10: How to prepare formula in a hygienic way

USE WITH: HIV-positive woman who have chosen exclusive formula feeding for the first 6 months.

ASK: What do you see in these pictures? Why do you think she is doing this? Is this something you can do? What are some ways that you can practice good hygiene when preparing formula?

KEY MESSAGES

Simple ways to practice good hygiene are to:

KEEP CLEAN
- Wash your hands with soap and water before preparing formula or before feeding your child and also after going to the toilet.
- Wash your child's cup thoroughly with soap and clean, warm water and boil it.
- Keep food preparation surfaces clean using water and soap or detergent to clean them every day.
- The baby's dishes and utensils should only be used for feeding the baby.

USE SAFE WATER
- Use water that has been boiled for mixing formula.

REVIEW: The brochure, "How to feed your baby formula."

DEMONSTRATE how to measure and prepare formula.

ASK: What questions or concerns do you have about what we have just discussed? What difficulties might you have in preparing formula? How can you deal with those difficulties?

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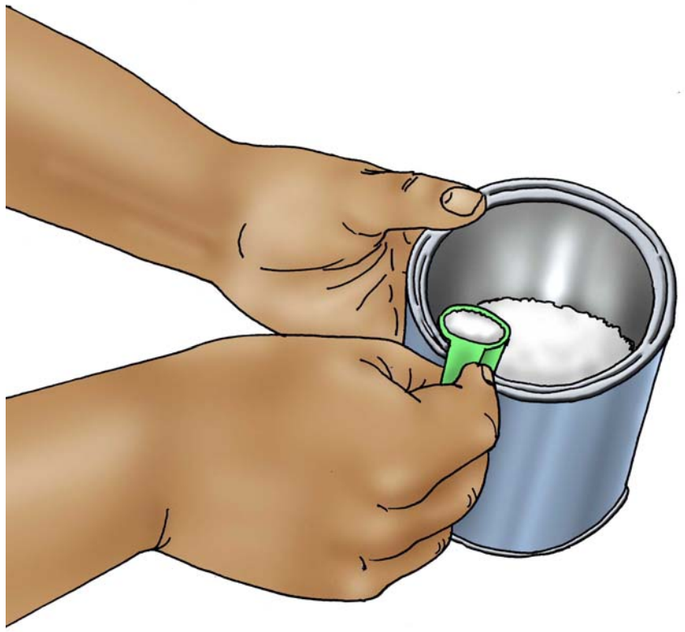
FORMULA



CARD 11: How to feed your baby formula with a cup

USE WITH: HIV-positive woman who have chosen to use infant formula

ASK: What do you see in this picture? What do you think about how this baby is being fed? Have you ever this done before?

KEY MESSAGES

- If you decide to feed your baby only formula for the first six months, it is best to feed from a cup. This is better than bottle feeding because:
- It is harder to clean bottles and keep them clean, so they can have many germs that can make your baby sick
- You have to pay more attention to your baby when you cup-feed than when you use a bottle, and this can help to stimulate and comfort him/her
- Prepare enough formula for one feed and give that formula to the baby immediately after it is prepared.

DEMONSTRATE CUP FEEDING WITH THE MOTHER'S BABY OR A DOLL

- Clean the cup with soap and water before filling it with formula
- Make sure your baby is awake. Sit in an upright position holding your baby. Put a cloth underneath his/her chin to catch any spills.
- Hold the cup to the baby's lips and pour it carefully so that the milk touches the lips and swallows.
- Do not pour the milk quickly or push on the baby's lower lip. Let the baby take the milk at his/her own speed.
- When the baby closes the mouth and turns away, she/he has had enough.
- If your baby does not drink very much, offer him/her more at the next feed or feed him/her earlier than usual.
- Talk to your baby and look into your baby's eyes to show your love.

Review: the take-home flyer on cup-feeding with the mother

ASK: What questions or concerns do you have about what we have just discussed? What difficulties do you think you might have with cup-feeding? How can you deal with those difficulties?

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CARD 12: Infant formula—important facts

USE WITH: HIV-positive woman who have chosen to use infant formula

ASK: What do you see in this picture? Why do you think it is important to follow the instruction for making formula exactly? Have you ever seen formula prepared? If yes, how was it done?

KEY MESSAGES

- If you have decided to give your baby formula, your baby will not need any other foods, liquids, or water for the first 6 months old. Do not breastfeed or give her food, water or any other types of liquids
- Your baby can become sick or not grow well if she/he does not drink enough formula or if you do not prepare it correctly.
- If you do not have enough formula, do NOT add more water to make it last longer.
- Prepare the formula soon before giving it to your baby so that it has time to cool. (Formula should be given within one hour of preparation)
- Only make enough formula for one feed at a time. Formula that is left out for more than one hour may spoil and make your baby sick. If there is formula left throw it away, do not store it for later.
- Do not keep formula in a flask. You can keep hot water in the flask to make more formula for each feed.
- Be sure to check the expiry date on the tin before preparing formula for your baby.

Month	Number of 500 g tins needed per month	Number of 450 g tins needed per month	Number 400 g tins needed per month
First month	4	5	5
Second month	6	6	8
Third month	7	8	9
Fourth month	7	8	9
Fifth month	8	8	10
Sixth month	8	9	10

ASK: What questions or concerns do you have about what we have just discussed?

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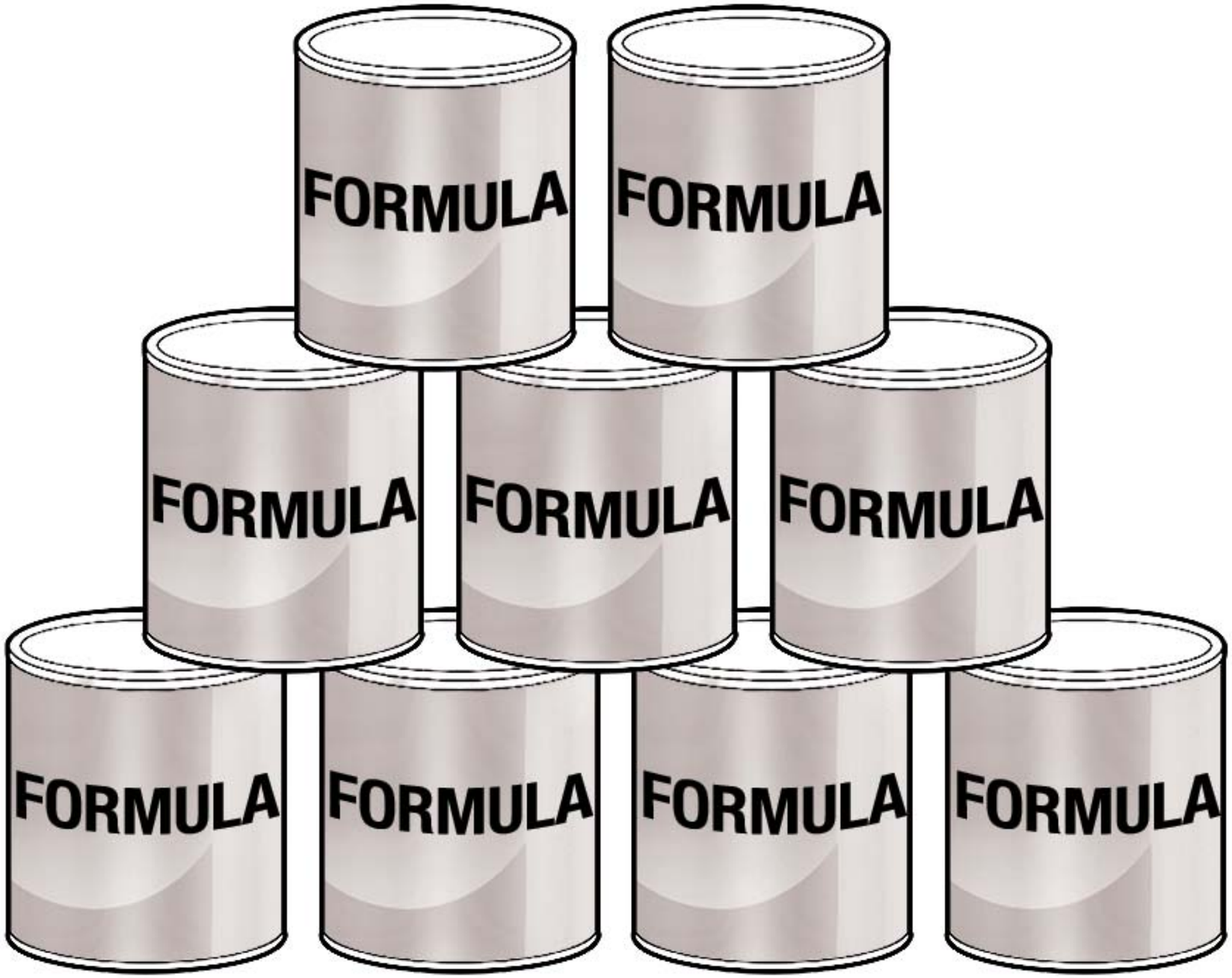
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CARD 13: Complementary Foods

USE WITH: Mothers with babies 6 months of age and older

ASK: What do you see in this picture? At what age do babies need to start to eat food in addition to breastmilk? What are the best foods for babies at 6 months?

KEY MESSAGES

- After your baby completes 6 months, start to give a variety of foods in addition to either breastmilk or formula to help your baby grow and develop.
- If you are breastfeeding, continue to breastfeed on demand during the day and the night. If you are not breastfeeding, continue to give your baby formula.
- Start with 1-2 spoons of thick porridge, and then begin to add soft, mashed foods.
- Give your baby more as he or she grows older. By 12 months your baby can eat one cup of food at each meal.
- As your baby grows, give you baby more foods in addition to breastmilk.
- Give healthy snacks between meals, such as fruit, yogurt, or peanut butter on bread.
- If your baby seems thirsty, give water from a cup. Give water after or between meals. If your baby is not breastfed, he or she will need 2 to 4 cups of water each day.

ASK: What questions or concerns do you have about what we have just discussed?

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CARD 14: Complementary Foods

USE WITH: Mothers with babies 6 months of age and older

ASK: What do you see in this picture? What foods does your family eat most often?

KEY MESSAGES

Every day, your baby needs:

- **Fruits and vegetables to protect your baby from illness**
  - Orange fruits and vegetables, such as carrots and apricots, and dark green vegetables, such as spinach and other green leafy vegetables are especially good
  - Other fruits and vegetables that are available are pear, cabbage, carrot, pumpkin, tomatoes, peaches, apricots, beet root, oranges, onions, green pepper
- **Meat, milk, beans, nuts and eggs to build muscles**
  - Chicken, fish, red meats, pork or liver are very important. Eggs, beans, milk, peanuts, cheese, peas, lentils, and nuts are also very good.
- **Starches for energy**
  - Give thick porridges and grains served together with other foods, such as meat, vegetables, or beans.
  - Sorghum, wheat, maize, rice, potatoes, bananas, fermented porridge
- **Oils and fats for brain development**
  - Add a spoon of oil (sunflower, vegetable, nut), butter, margarine, or lard to porridges. Pumpkin seeds and mayonnaise can also be given

Remember:

- Avoid giving candy, cakes, and sugary drinks, such as soda, tea, and fruit juices. These foods fill your baby up without giving your baby any important nutrients.
- Food specially fortified for infants older than 6 months, such as fortified cereals, are very good for your baby.

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MAYO
OLD FASHIONED
PEANUT BUTTER

CARD 15: How to feed your baby after 6 months

USE WITH: Mothers with babies 6 months of age and older

ASK: What do you see in this picture? What foods does your family eat most often?

KEY MESSAGES

- Give family foods that are mashed or cut into smaller pieces
- Feed your baby with his or her own bowl and spoon. Allow your baby to feed himself/herself with “finger foods”
- Encourage your baby to eat, be patient, and give your baby time. Once your baby stops eating, wait a little, and then offer more. Do not force-feed your baby
- Introduce one new food at a time. If your baby does not like a food the first time, try preparing it in a different way or try mixing it with breast milk if you have been breastfeeding
- If your baby does not finish a meal, serve the next meal sooner or give more at the next meal
- Feed your baby as soon as he or she seems hungry
- Bring your baby to be weighed once a month to be sure he/she is growing well

ASK: What questions or concerns do you have about what we have just discussed?

REMEMBER: AT EACH FOLLOW UP VISIT DISCUSS THE CHOSEN FEEDING OPTION AND REINFORCE AND SUPPORT THE CHOSEN OPTION WITH RELEVANT INFORMATION.

CARD 16: Keeping food clean and safe

USE WITH: Mothers with babies 6 months of age and older

ASK: What are ways to keep our children clean and healthy? What are things you do in your home to keep your children and food clean? What are changes you could make to keep your home cleaner and safer?

KEY MESSAGES

Keep Clean

- Wash your hands and your baby's hands with soap and running water before preparing food or serving food, after touching raw meat, and after using the toilet or changing diapers. Then let your hands air dry.
- Wash utensils, bowls, and cups, and kitchen area with hot water and soap.
- Store food in covered, clean containers off of the ground, away from dirt and insects.

Use Safe Food and Water

- Always boil water before giving it to a baby.
- Use pasteurized milk. If your infant is younger than 12 months old, boil cow milk before use.
- Give liquids in a cup without a spout. Avoid using baby bottles.
- Wash fruits and vegetables in clean water, especially if they are not peeled.
- Carefully follow the instructions on the box for powdered milk or infant formula.

Cook Thoroughly and Keep Food at Safe Temperatures

- Serve foods immediately after cooking. Prepare only enough food for one meal at a time.
- If you do not have a refrigerator, store cooked food in a covered container and use within two hours.
- Leftover food can be stored in a clean, covered container in the refrigerator for up to 24 hours but should be thoroughly re-heated before serving.

ASK: What questions or concerns do you have about what we have just discussed?

REMEMBER : AT EACH FOLLOW UP VISIT DISCUSS THE CHOSEN FEEDING OPTION AND REINFORCE AND SUPPORT THE CHOSEN OPTION WITH RELEVANT INFORMATION.

CARD 17: Feeding an HIV-positive baby from 6 to 24 months

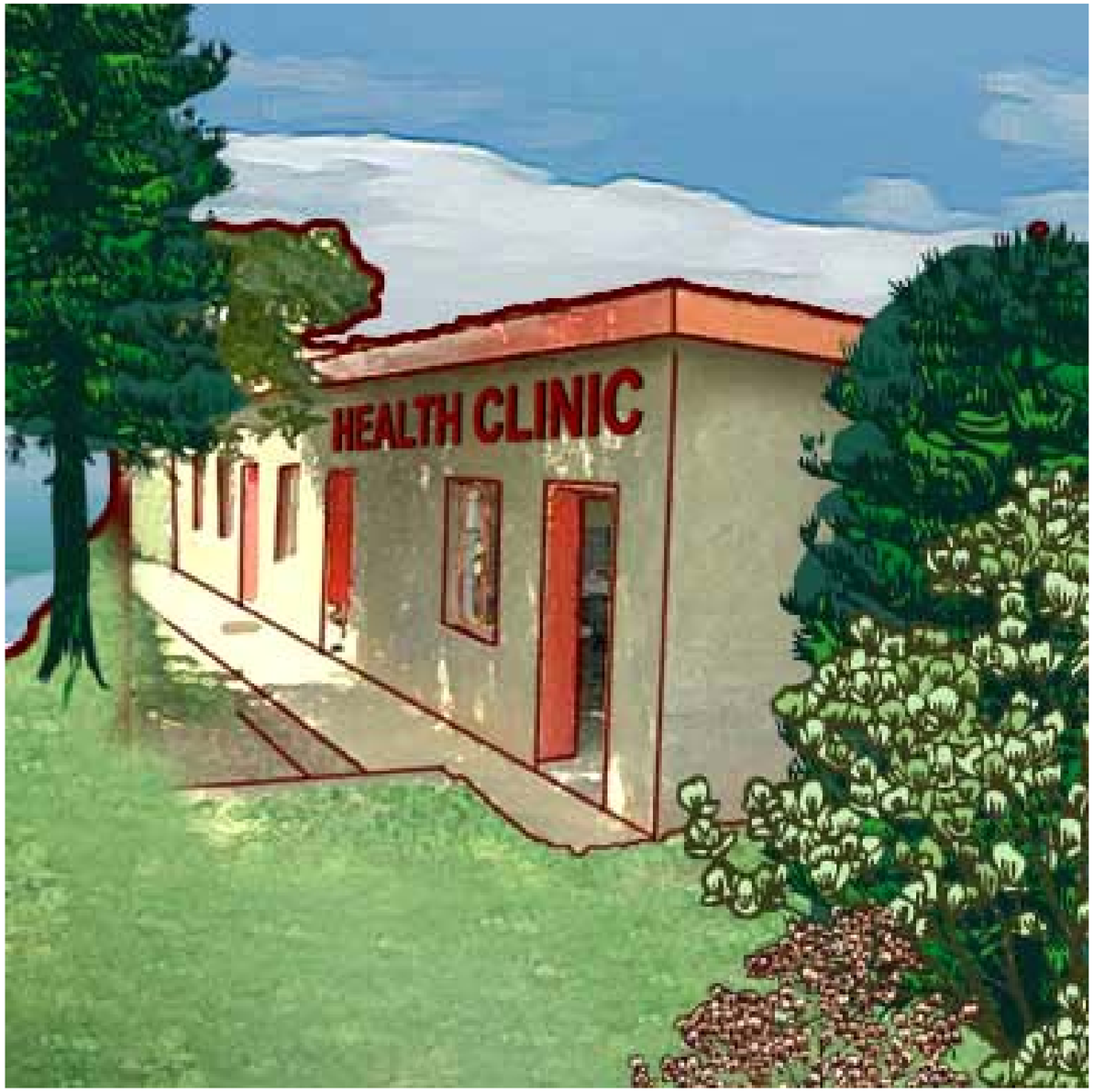
USE WITH: Mothers and caregivers with babies 6 months of age and older who have tested positive for HIV

ASK: What do you see in this picture?

KEY MESSAGES

- After children complete 6 months, they need additional food as well as breastmilk. HIV-positive children need extra energy and nutrients to grow and fight infections, even when the child appears healthy or has a weak appetite
- Continue breastfeeding for as long as possible
- Follow the directions of the medical treatment prescribed by the health worker
- Feed your child 5-8 times per day with nutritious foods and energy-rich foods
- Give germinated, fermented, or fortified foods when possible
- Meals should include meat, eggs, milk, or vegetables as well as staple foods, such as maize or porridge
- Give your child vitamin A drops twice per year. If available, give your child daily micronutrient supplements also
- Take extra care with food safety and hygiene to avoid infections
- Your child should be weighed and measured every month to make sure he/she is growing well

REMEMBER : AT EACH FOLLOW UP VISIT DISCUSS THE CHOSEN FEEDING OPTION AND REINFORCE AND SUPPORT THE CHOSEN OPTION WITH RELEVANT INFORMATION.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