## INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESS

# **COUNSEL THE MOTHER**

World Health Organization and UNICEF 1997

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## COUNSEL THE MOTHER

## **INTRODUCTION**

You have learned how to treat the sick child and how to teach the mother to continue treatment at home. For many sick children, you will also need to assess feeding and counsel the mother about feeding.

For all sick children going home, you will also advise the mother when to return for follow-up visits and teach her signs that mean to return immediately for further care.

Recommendations on FOOD, FLUID, and WHEN TO RETURN are given on the chart titled "Counsel the Mother" (called the *COUNSEL* chart in this module).

#### **LEARNING OBJECTIVES**

This module will describe and allow you to practice the following tasks:

- \* assessing the child's feeding
- \* identifying feeding problems
- \* counselling the mother about feeding problems
- \* advising the mother to increase fluid during illness
- \* advising the mother:
  - when to return for follow-up visits,
  - when to return immediately for further care,
  - when to return for immunizations.

In practicing these tasks, you will focus on:

- \* giving relevant advice to each mother
- \* using good communication skills
- \* using a Mother's Card as a communications tool

Even though you may feel hurried, it is important to take time to counsel the mother

carefully and completely. You have been learning communication skills throughout this course. When counselling a mother, you will use some of the same communication skills that you have already practiced when assessing and treating the child.

For example, you will **ask the mother questions** to determine how she is feeding her child. You will then **listen carefully to the mother's answers** so that you can make your advice relevant to her.

You will **praise** the mother for appropriate practices and **advise** her about any practices that need to be changed. You will **use simple language** that the mother can understand. Finally, you will **ask checking questions** to ensure that the mother knows how to care for her child at home.

{Module 05 - page 002.jpg}

## FEEDING RECOMMENDATIONS

This section of the module will explain the feeding recommendations on the *COUNSEL* chart and any local adaptations. The recommendations are listed in columns for 5 age groups. You need to understand all of the feeding recommendations, but you will not need to explain them all to any one mother. You will first ask questions to find out how her child is already being fed. Then you will give **only the advice that is needed** for the child's age and situation.

These feeding recommendations are appropriate both when the child is sick and when the child is healthy. During illness, children may not want to eat much. However, they should be offered the types of food recommended for their age, as often as recommended, even though they may not take much at each feeding. After illness, good feeding helps make up for weight loss and helps prevent malnutrition. When the child is well, good feeding helps prevent future illness.

Sick child visits are a good opportunity to counsel the mother on how to feed the child both during illness and when the child is well.

## **RECOMMENDATIONS FOR AGES UP TO 4 MONTHS**

The best way to feed a child from birth to at least 4 months of age is to breastfeed exclusively. Exclusive breastfeeding means that the child takes only breastmilk and no additional food, water, or other fluids (with the exception of medicines and vitamins, if needed). Note: If other fluids and foods are already being given, counselling is needed as described in section 3.1 of this module.

Breastfeed children at this age as often as they want, day and night. This will be at least 8 times in 24 hours.

The advantages of breastfeeding are described on the next page.

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#### Breastmilk contains exactly the nutrients needed by an infant. It contains:

Protein Fat Lactose (a special milk sugar) Vitamins A and C Iron

*These nutrients are more easily absorbed from breastmilk* than from other milk. Breastmilk also contains essential fatty acids needed for the infant's growing brain, eyes, and blood vessels. These fatty acids are not available in other milks.

### Breastmilk provides all the water an infant needs, even in a hot, dry climate.

*Breastmilk protects an infant against infection.* An infant cannot fight infection as well as an older child or an adult. Through breastmilk, an infant can share his mother's ability to fight infection. Exclusively breastfed infants are less likely to get diarrhoea, and less likely to die from diarrhoea or other infections. Breastfed infants are less likely to develop pneumonia, meningitis, and ear infections than non-breastfed infants.

### Breastfeeding helps a mother and baby to develop a close, loving relationship.

*Breastfeeding protects a mother's health.* After delivery, breastfeeding helps the uterus return to its previous size. This helps reduce bleeding and prevent anaemia. Breastfeeding also reduces the mother's risk of ovarian cancer and breast cancer.

It is best not to give an infant below the age of 4 months any milk or food other than breastmilk. For example, do not give cow's milk, goat's milk, formula, cereal, or extra drinks such as teas, juices, or water. Reasons:

- Giving other food or fluid reduces the amount of breastmilk taken.
- Other food or fluid may contain germs from water or on feeding bottles or utensils. These germs can cause infection.
- Other food or fluid may be too dilute, so that the infant becomes malnourished.
- Other food or fluid may not contain enough Vitamin A.
- Iron is poorly absorbed from cow's and goat's milk.
- The infant may develop allergies.
- The infant may have difficulty digesting animal milk, so that the milk causes diarrhoea, rashes, or other symptoms. Diarrhoea may become persistent.

# Exclusive breastfeeding will give an infant the best chance to grow and stay healthy.

# **RECOMMENDATIONS FOR AGES 4 MONTHS UP TO 6 MONTHS**

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Most babies do not need complementary foods before 6 months of age. Breastmilk remains the child's most important food, but at some time between the ages of 4 and 6 months, some children begin to need foods in addition to breastmilk. These foods are often called complementary or weaning foods because they complement breastmilk.

The mother should only begin to offer complementary foods if the child shows interest in semisolid foods, appears hungry after breastfeeding, or is not gaining weight adequately. The child may show interest by reaching for the mother's food, or by opening her mouth eagerly when food is offered.

By 6 months of age, all children should be receiving a thick, nutritious complementary food.

It is important to continue to breastfeed as often as the child wants, day and night. The mother should give the complementary foods 1-2 times daily **after** breastfeeding to avoid replacing breastmilk.

## 预览已结束,完整报告链接和二维码如下:

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