

Feeding during illness



Ministry of Women & Child Development
Government of India, 2018

14





How far have we come in ensuring Exclusive Breastfeeding?



Display the card

Initiate a discussion by asking participants to read each question and everyone to respond to the questions.



You can make use of the following smaller questions to initiate the discussions.

Ask after question number 2:

- How many babies are exclusively breastfed? How many out of ten? How many of them are not given even water?

Ask after question number 4:

- Do you remember why we had advised all mothers against bottle feeding? Why bottle feeding is dangerous?

Ask after question number 5:

- Do you remember what we had decided to do to help mothers provide exclusive Breast Feeding?

Make use of the points given on the right side to explain.

What is Exclusive Breastfeeding?

When the mother only feeds only breast milk to the baby, not even water, then it is considered exclusive breastfeeding.

Why do some mothers not exclusively breast feed their children?

The most common reason for not practicing exclusive breastfeeding is the belief that the child is thirsty, and giving water to the baby. This is most prevalent during summer. If the child is thirsty, the best practice should be to give more breast milk than giving water.

Why it is dangerous to use bottles?

The most dangerous practice is to use a bottle to feed milk and water to the baby. Since the bottles and nipples cannot be cleaned properly, they pose a source of infection causing diarrhea in babies. This can even cause death of the child.

The action points we had decided for ensuring the exclusive breastfeeding were as follows:

When we meet a child younger than 6 months:

- We will find out from the family if they are giving anything else to the child besides breast milk and will advise them to discontinue it. We will explain the family that introducing other liquids during this period can lead to infections like diarrhea.
- We will find out from the family about **bottle feeding** and will advise them to stop it immediately.
- We will make use of every opportunity in the first 6 months to counsel and follow-up with the family about exclusive breastfeeding, such as;
 - Meeting during first home visit, immediately after birth.
 - Meeting the mother during VHSND, in the first 6 months
 - Whenever the child or mother falls ill during the first 6 months

It is important to visit the families of babies when they are around the age of 3 months, as that is the most likely time when they will stop exclusive breastfeeding.



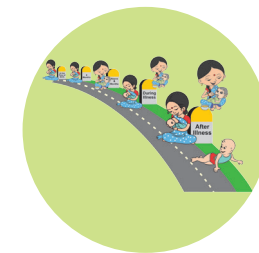
10 Minute

M14

Feeding during illness

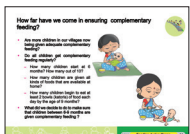
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How far have we come in ensuring Exclusive Breastfeeding?



1. What do we mean by exclusive breastfeeding?
2. Are majority of the children in our villages now being exclusively breastfed?
3. Why do some mothers not practice exclusive breastfeeding continuously?
4. How many children are getting bottle feeding?
5. Are we visiting the families of 3 to 4 month-old children regularly?





How far have we come in ensuring complementary feeding?



Ask participants to read the questions written in front one by one. For each question give enough time for responses and remind them about the decisions taken earlier.

Make use of these additional questions to facilitate the discussion

Ask after question number 1:

- Is the family aware about when to initiate and what to give for complementary feeding?

Ask after question number 2:

- How do you know that all children are getting complementary feeding regularly?
- If no, what are the reasons?

Ask after question number 3:

- Do you remember what we had decided to do to help mothers ensure timely complementary feeding?

Take a note of why families are not giving CF regularly. We are expecting that one of the reasons is that the child is not fed well due to illness.

The action points for ensuring timely initiation of complementary feeding were follows:

Giving attention to children aged 5 months:

- We will use the home visit planner and make home visits to all children aged 5 months.
- We will ask the families if they are feeding anything else to child besides breastmilk.
- We will ask when are they planning to initiate the complementary feeding and if necessary will advice on complementary feeding.

Giving attention to children aged between 6 – 8 months:

- We will use the home visit planner and make home visits to all children aged between 6 – 8 months.
- We will ask families whether the child is being fed anything other than breast milk, what is the child eating, how much and who is feeding the child.
- With the help of a bowl, we will try to understand the quantity of complementary food given to child in last 24 hours and will counsel accordingly.
- We will advice mothers to feed the child as per the appetite, even during and after an illness.
- We will demonstrate how to prepare and feed semi-solid food using home cooked meal.
- We will note down the home visit date in our home visit planner and will regularly do follow-up visits.



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How far have we come in ensuring complementary feeding?



- Are more children in our villages now being given adequate complementary feeding?
- Do all children get complementary feeding regularly?
 - How many children start at 6 months? How many out of 10?
 - How many children are given all kinds of foods that are available at home?
 - How many children begin to eat at least 2 bowls (katoris) of food each day by the age of 9 months?
- What did we decide to do to make sure that children between 6-9 months are given complementary feeding ?





What do people in our community do about feeding when their child is sick?



Tell the participants:

“We have discussed about Breastfeeding and Complementary feeding, now let us discuss what happens when the child is ill”.



Display the card. Ask the participants to read the first question and give some time for discussion. Repeat this for all questions. Emphasize that they should speak about what families and children are actually doing at home, not about what the participants feel how children should be fed.

In addition to the questions given in the slide



Ask

- “What do the families do about breastfeeding the child during illness?”
- “Do they feed anything else besides breast milk during child's illness?”
- “Do they stop giving some food during illness which they were giving earlier? If yes, what?”
- “After how many days of illness do the families start giving proper complementary feeding to the child again?”

Make a note of the responses.



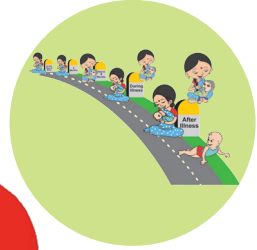
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Feeding during illness

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What do people in our community do about feeding when their child is sick?



- What do mothers feed their children during illness?
 - If their child is less than 6 months of age
 - If their child is more than 6 months of age
- What does the child eat after recovering from illness?
- What happens to the practice of breastfeeding, if the mother falls ill?





Illness is a common cause of poor complementary feeding, why?



Tell the participants:

Now we know that when a child falls ill, the complementary feeding reduces, let's discuss why does that happen.



Ask the participants to read the question and look at the pictures given on the card. Encourage them to explain what the picture shows.



Using the points on the right side, help the participants understand how illness leads to poor complementary feeding.

It is observed that Illness is a common cause of poor feeding for children below 6 months of age or above 6 months of age. The most common causes are:

Loss of appetite

- When children fall sick they may refuse to eat or feed mainly due to loss of appetite.
- This leads to poor exclusive breast feeding and complementary feeding.
- It is common to see loss of appetite in adults too.
- Children regain the lost appetite as soon as they recover from illness.

Feeding practices and beliefs

- There is a common belief in the community that certain food items should not be given to a child during illness or after the illness.
- Families prefer to give light or easy to digest food irrespective of the appetite.
- Often such food is not sufficient to fulfill the needs of the child during and after illness and may hamper the growth of the child.



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Illness is a common cause of poor complementary feeding, why?



What happens during illness that leads to poor feeding of the child?





What should a mother feed a child during illness?



Ask participants to look at each picture and the cases.



Ask them to read what is written along with each illustration, one by one.



Start with children less than six months old, let there be a discussion on what happens to child's feeding, and what the mother should do, during and after illness. Use the points on the right to explain further where ever necessary.

Then repeat the same for children older than six months old.

Then discuss in the same manner what happens to breastfeeding when the mother falls sick.

1

Case 1: During illness - Child less than 6 months

What will the child do:

- If the child is very ill, s/he might reduce or completely stop intake of breast milk.
- If the child is not very ill but is irritable, then the child might want to frequently have breast milk. The child will be thirsty particularly when s/he has fever.

What should a mother do:

- Breastfeeding will be the most acceptable food for the child. Mother should try to breastfeed more often. This will help to quench child's thirst as well as provide nourishment.

2

Case 2: Child less than 6 months - After illness

What will the child do:

- Child will be more hungry; will demand to be breastfed more frequently.

What should a mother do:

- Mother should feed as per the demand of the child. If the mother has been breastfeeding her child regularly, s/he will be able to produce more milk as per demand.

3

Case 3: Child more than 6 months - During illness -

What will the child do:

- If the child has started complementary feeding, s/he is likely to reduce or stop eating.
- The child is likely to demand more breastfeeding.

What should a mother do:

- Mother should breastfeed more often when the child is ill.
- If the child is willing to eat, mother should continue to feed all kinds of foods. If the child has lost appetite, the mother should encourage the child to eat at least small meals and should give varied, child's favorite and appetizing foods.

4

Case 4: Child more than 6 months - After illness-

What will the child do:

- As the child recovers from the illness, his/her appetite will increase and he/she will want to eat more. If the child is not feeling hungry, it is likely that s/he has still not recovered from his/her illness.

What should a mother do:

- Mother should feed the child as per his/her appetite. There is no need to restrict how much the child should eat. The child who is recovering from an illness requires more food, than before the illness. This is because the body tries to make up for the loss during the period of illness.
- Mother should also offer the child as much variety of food as possible. This will help the child get all the nutrients s/he needs for recovery from illness and for growth.

5

Case 5: If mother falls ill

- She should continue to breastfeed the child as per the demand. Most of the illnesses in the mother will not affect the child if mother continues to breast feed. If the mother is HIV infected, there is a chance that the child may also get infected. In such cases it is important to give exclusive breastfeeding for six months, since that is safer than non-exclusive breastfeeding. HIV infected mother should continue to take ART during this time.



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Feeding during illness

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What should a mother feed a child during illness?



Less than 6 months



During illness
Continue Breastfeeding

1

More than 6 months



After illness
Increase breastfeeding

2



During illness
Continue Breastfeeding & complementary feeding

3



After illness
Continue Breastfeeding & Increase complementary feeding

4



During illness
Continue Breastfeeding and give complementary feeding

5





How important is Breast feeding for a sick child?



Ask the participants to read the case on the card.



Ask

- Do you see such cases in the village?
- How do such mothers manage?

Encourage the participants to discuss the above points and ask them to narrate a true story based on their experiences from the field.

Summarize the discussion using the points mentioned on right side.

Importance of breast feeding for children above six months;

- Some mother continue breastfeeding children till the child is about two years of age, but some may stop breastfeeding early.
- When a child in this age falls sick, s/he usually finds it comfortable to breastfeed even if s/he does not want to take complementary feeding. Breastmilk is a wholesome food for the child and also a safe source of water, so it becomes very convenient for the mother as well to breastfeed when the child is sick.
- If a child falls sick after s/he has stopped breastfeeding, it is not possible for the mother to restart breastfeeding, and it can become difficult to manage feeding the child.
- Sometimes, such mothers may resort to bottle-feeding to comfort the child, and this can be dangerous.
- In this way, a mother who continues to breastfeed her child until 2 years has the advantage of being able to provide breastmilk when her child falls sick during this age.



15 Minute

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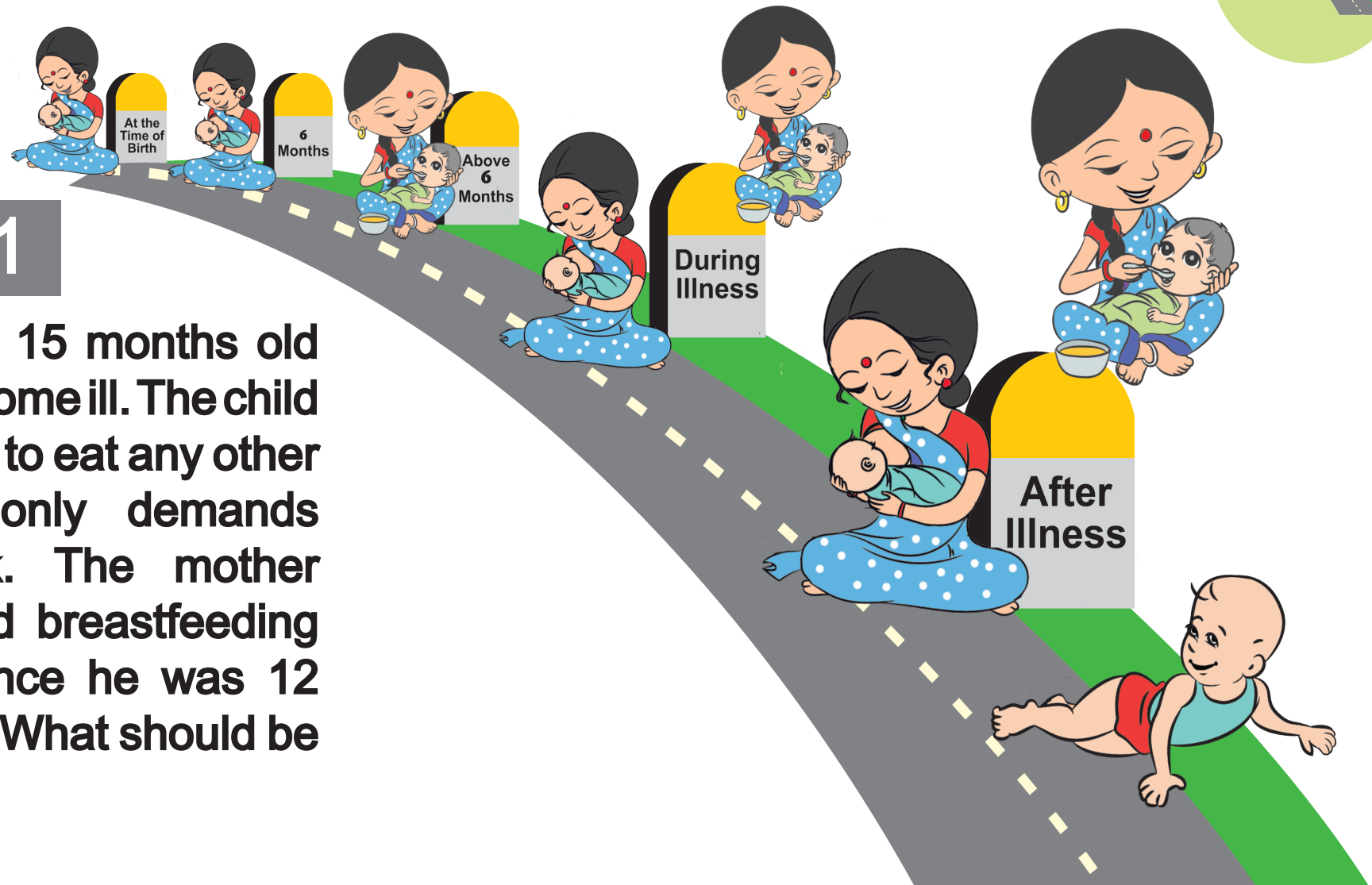
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How important is Breast feeding for a sick child?



Case 1

The child is 15 months old and has become ill. The child is not willing to eat any other food and only demands breast milk. The mother had stopped breastfeeding the child since he was 12 months old. What should be done now?





What opportunities do we have to tell families about feeding during and after illness?

Today, we discussed the importance of feeding the child during and after illness. Tell the participants that we are going to do two role plays today in which we will learn how to encourage the family to feed the child during and after illness.



Use the points mentioned on right side for doing the role play. Let each role play go on for 10 minutes and make sure that every participant is watching the role plays carefully.

Use this checklist to see if following has been covered in role play and debrief after the role play:

Role Play 1: Checklist

- Did the AWW ask about the illness in detail?
- Did the AWW ask about how much the child had been breastfed over the last 2 days?
- Did the AWW ask about how much food has the child eaten in the last 2 days?
- Did the AWW first assess and then advise?
- Did the AWW advise increased breastfeeding during illness?
- Did the AWW advise increased complementary feed after illness?
- Did the AWW record the home visit in home visit register 8 / Mobile Phone (in ICT –RTM districts)?
- Did the AWW record illness in register 9/ Mobile Phone (in ICT –RTM districts)?

Role Play 2: Checklist

- Did the AWW ask about the illness in detail?
- Did the AWW ask about how much the child had been breastfed over the last 2 days?
- Did the AWW ask about how much food has the child eaten in the last 2 days?
- Did the AWW first assess and then advise?
- Did the AWW advise increased CF after illness?
- Did the AWW record illness in register 9/ Mobile Phone (in ICT –RTM districts)?

Instructions for Role Play

Role Play 1:

1. We will need 3 characters to enact this role play

- Mother of 15 month-old child
- Father
- AWW

2. AWW gets to know of a 15 month-old child in her village who is suffering from diarrhea. She makes a home visit to this family and has a conversation with mother and father of this child. The purpose of her conversation is to advise them on feeding during and after illness.

3. Duration – 10 minute.

Role Play 2:

1. We will need 2 characters to enact this role play

- Mother-in-law
- AWW

2. Mother-in-law has brought her 9 month old granddaughter to VHSND for measles vaccine. AWW, while interacting with mother-in-law, gets to know that the granddaughter has been ill since one week and the fever has now subsided since 2 days. AWW has a conversation with mother-in-law and the purpose of this conversation is to advise her on feeding after illness.

3. Duration – 10 minute.

The other participants should listen to the conversations carefully and note down the important messages given during the conversations. At the end of role play discuss about the messages given correctly or not. Note if any other relevant point was missed out.



25 Minute

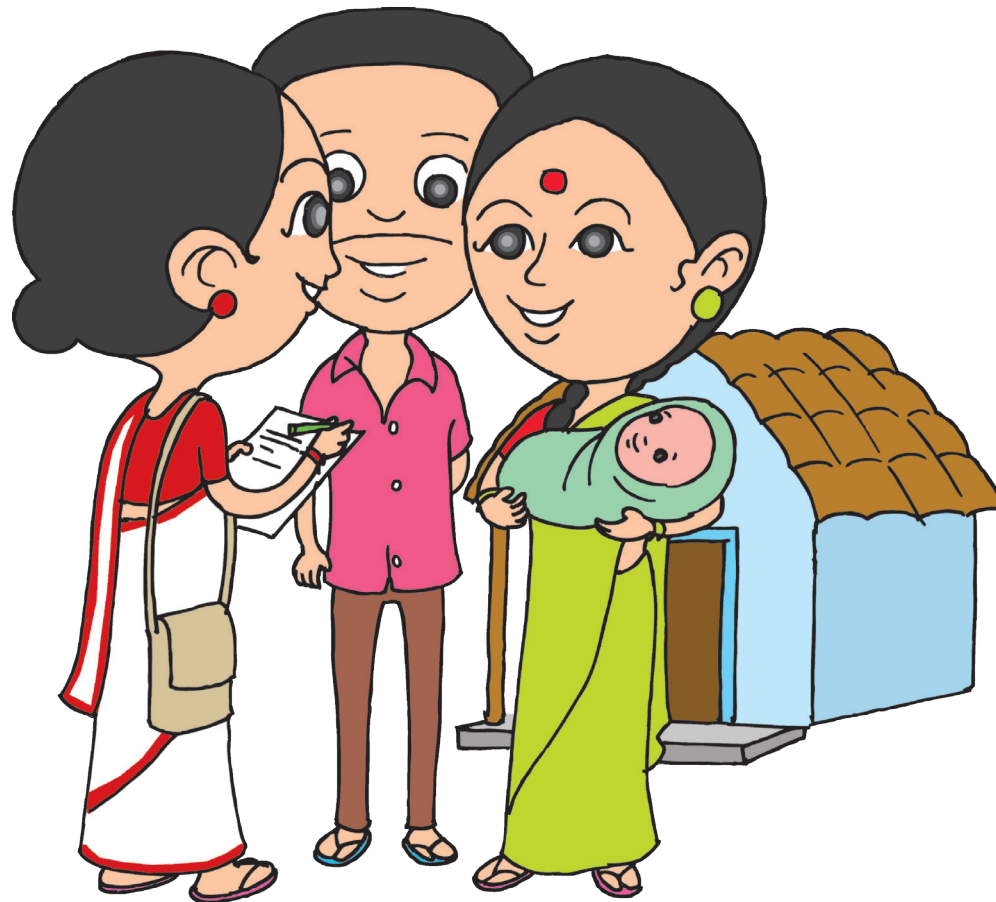
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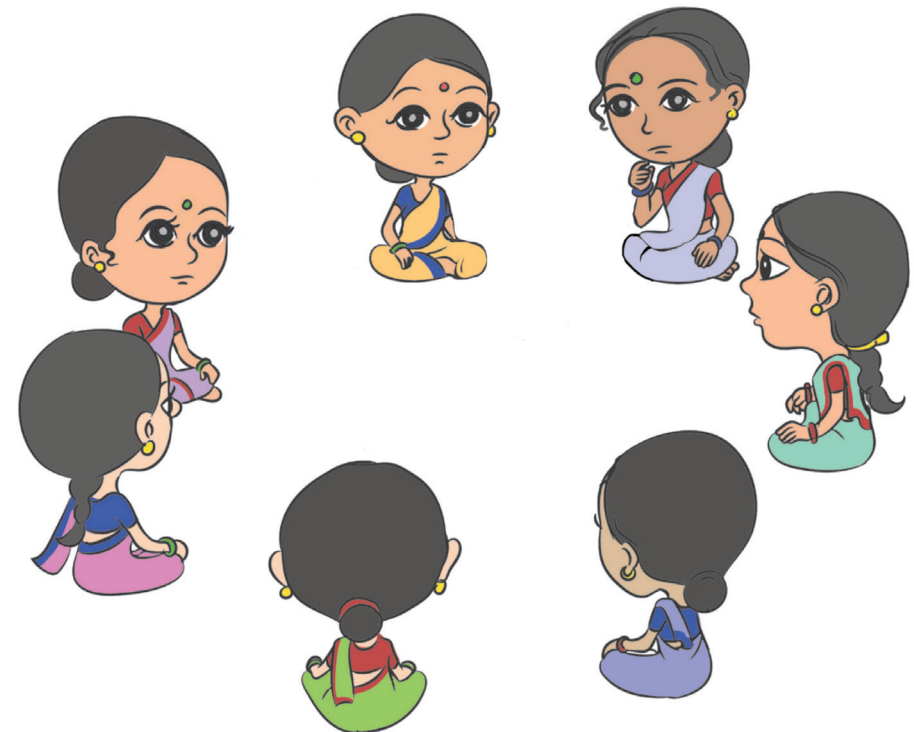
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What opportunities do we have to tell families about feeding during and after illness?

Role Play



Home Visit



VHSN Day/Group meeting





Summary of Feeding during and after illness



Share with the participants that now we will summarize what we have learned today with respect to feeding during and after illness.



Display the card and ask the participants to read the points one by one. Encourage them to explain each point in brief and appreciate them for giving correct response.

If necessary explain the points one by one.



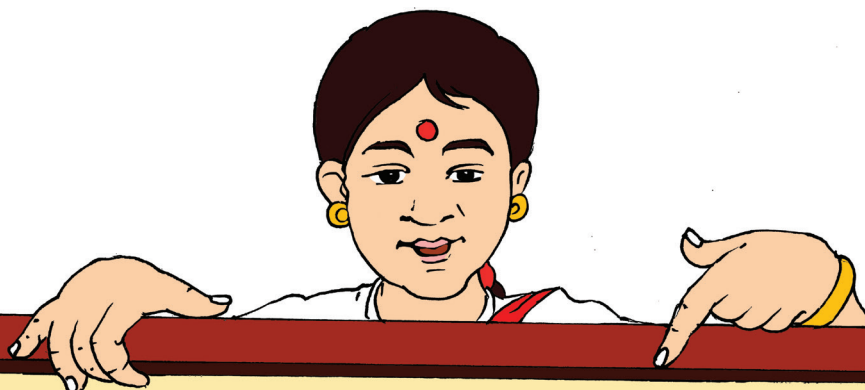
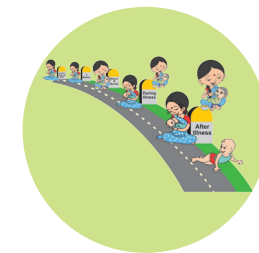
5 Minute

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Feeding during illness

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Summary of Feeding during and after illness



Why is it important

- The major cause of stunting is poor complementary feeding and repeated illnesses. If the child falls ill repeatedly and is eating less food during and after illness then the opportunity to gain height during this period is lost.

Why children stop feeding?

- Loss of appetite during illness is one of the major causes of poor feeding.

How should children be fed during and after illness?

- Mother should continue the breastfeeding and increase the frequency of breastfeeding during and after illness.
- Mother should Increase the quantity and frequency of complementary feeding after illness and feed as per the child's appetite.

It is important that the mother should continue to breast feed the child till 2 years of age so that enough milk is available to the child during this period.





Action Points



Display the card and ask the participants to read the points one by one. Explain every point in brief.

It is important to visit the family as soon as you get to know that the child or mother is ill.



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Feeding during illness

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Action Points



As soon as we come to know about illness of mother or child in our village we will make a home visit to that family.

- **We will ask the family about the status of breastfeeding and complementary feeding.**
- **We will enquire about what do they plan to feed the child after illness.**
- **If necessary, we will explain them about increasing the frequency of breastfeeding during and after illness.**
- **We will explain them about increasing the quantity and frequency of complementary foods as per the appetite the child.**



- 1 *Why this Monthly Meeting ?*
- 2 *Making or updating Home Visit Planner & Initiating Home Visits*
- 3 *Planning and Organizing Community Based Events at AWC*
- 4 *Observing Breastfeeding in Newborn Babies - Why and How*
- 5 *Identification and Care of a Weak Newborn baby*
- 6 *Complementary Feeding: Diet Diversity*
- 7 *Preventing Anemia in Women*
- 8 *Assessment of Growth in Children*
- 9 *Ensuring that Complementary Feeding improves over time*
- 10 *Ensuring Exclusive Breastfeeding*
- 11 *Care of the Weak Newborn Baby - How many weak babies are we missing?*
- 12 *How to ensure timely initiation of Complementary Feeding*
- 13 *Identifying and preventing Severe Acute Malnutrition*
- 14 **Feeding During Illness**
- 15 *Supporting mothers with issues in Breastfeeding*
- 16 *How to take care of weak newborn with the help of Kangaroo Mother Care*
- 17 *Identification & Referral of Sick Newborn*
- 18 *Preventing illnesses to avert Malnutrition and Death*
- 19 *Prevention of Anemia in girls and adolescents*
- 20 *Birth Preparedness- For Institutional and Home Delivery*
- 21 *Preparation During Pregnancy: For NewBorn Care & Family Planning*

