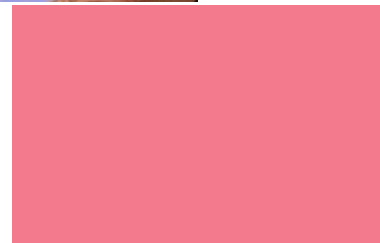


Care for Child Development

Health Worker Manual



Care for Child Development
Health Worker Manual

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Introduction

Children need good care. Their survival through childhood depends on adults who notice when they are hungry or sick, and are able to meet their needs.

Good care also means keeping children safe from harm, and giving them love, attention, and many opportunities to learn. From birth, children build ties to special adults and look to them to learn important skills. What children learn from these relationships helps to prepare them for life.

This course on **Counsel the Family on Care for Child Development** supports the efforts of families and others in your community who are trying **to raise healthy, happy children**. They may live in poverty and face many other challenges. The children they raise may be their own. Or they may have accepted the task of raising other children in their family or community. You can help them be better able to care for their children, even under difficult conditions.

Most families are trying to do the best they can for their children.

Help families feel confident and good about giving care.

Course objectives

At the end of the course on **Counsel the Family on Care for Development**, you will be able to:

- Identify the interaction between a child and a parent or other person – the primary caregiver – who most directly takes care of the child.
- Counsel the family on activities to strengthen the relationship between the child and the caregiver.
- Advise the family on appropriate play and communication activities to stimulate the child's growth and healthy development.

As you learn these tasks, you will focus on observing caregivers with their children.

Using good communication skills, you will counsel the family.

Course methods and materials

In this course, you will read about, observe, and practise counselling the family and others who care for a young child.

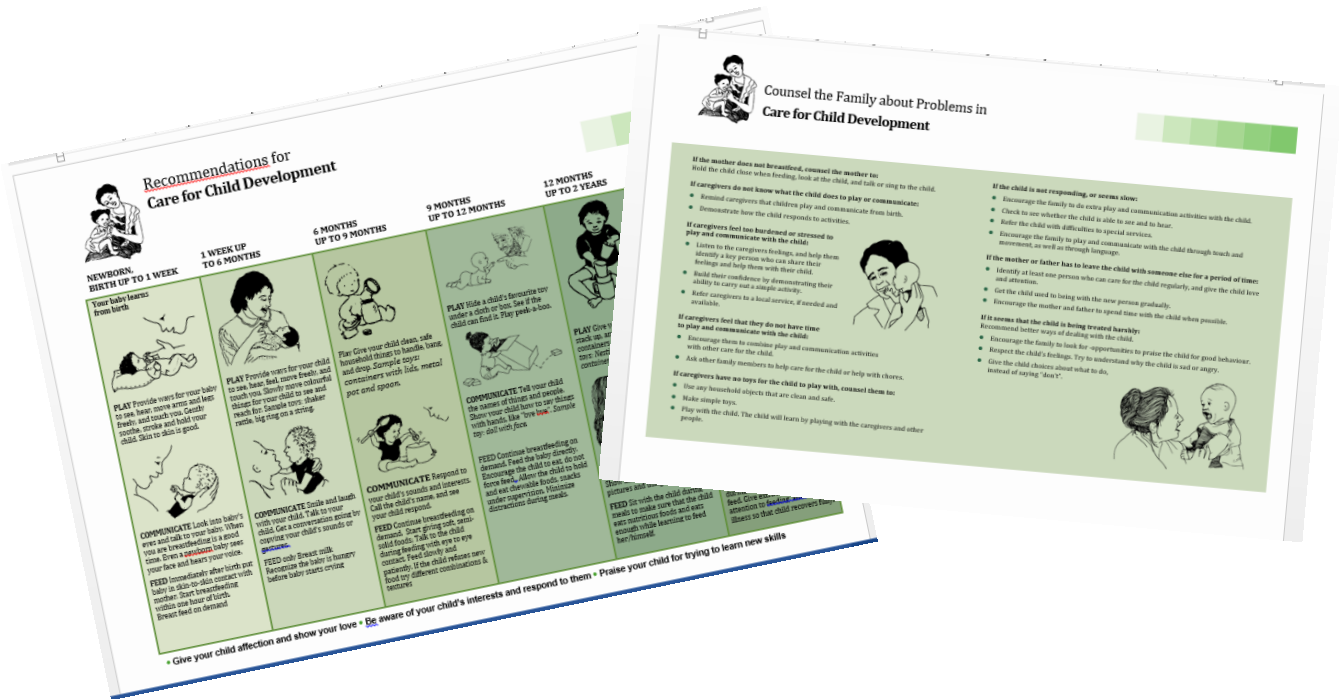
The course provides these materials:

Manual

You are now reading the **Health Worker's Manual** and exercises the course.



for



Counselling cards

The **Counselling Cards** recommend activities to do with the child to improve the child's development. With the counselling cards as a job aid, you will be able to give caregivers advice on new play and communication activities as the child grows. You do not need to memorize the recommendations. You will be able to refer to the card whenever you counsel a caregiver.

Checklist

Name: _____ Address: _____ Phone: _____

Age: _____ Sex: _____

Identify problem to support the child's development and counsel the caregiver:

Problem	Signs and symptoms	Checklist
Not responding or seems slow	Does not respond to name or voice, does not look at you when you speak, does not respond to simple instructions.	1. Encourage the family to do more play and communication activities with the child. 2. Check to see whether the child is able to see and to hear. 3. Refer the child with difficulties to special services. 4. Encourage the family to play and communicate with the child through touch and movement, as well as through language.
Not playing or communicating	Does not play with toys, does not communicate with caregivers.	1. Remind caregivers that children play and communicate from birth. 2. Demonstrate how the child responds to activities. 3. If caregivers feel too hardened or stressed to play and communicate with the child: - Listen to the caregivers' feelings, and help them identify a key person who can share their feelings and help them with their child. - Build their confidence by demonstrating their ability to carry out a simple activity. - Refer caregivers to a local service, if needed and available.
Not feeding	Does not breastfeed, does not eat, does not drink.	1. If the mother does not breastfeed, counsel the mother to: - Hold the child close when feeding, look at the child, and talk or sing to the child. 2. If caregivers do not know what the child does to play or communicate: - Remind caregivers that children play and communicate from birth. - Demonstrate how the child responds to activities. 3. If caregivers feel too hardened or stressed to play and communicate with the child: - Listen to the caregivers' feelings, and help them identify a key person who can share their feelings and help them with their child. - Build their confidence by demonstrating their ability to carry out a simple activity. - Refer caregivers to a local service, if needed and available.
Not communicating	Does not use words, does not use gestures.	1. If the mother or father has to leave the child with someone else for a period of time, and attention: - Identify at least one person who can care for the child regularly, and give the child love and attention. - Encourage the mother and father to spend time with the child when possible. 2. If it seems that the child is being treated harshly: - Encourage the family to look for opportunities to praise the child for good behaviour. - Repeat the child's feelings. Try to understand why the child is sad or angry. - Give the child choices about what to do, instead of saying "don't".

Checklist

The checklist guides you as you assess the child's care. It helps the family solve problems while caregivers learn how to play and communicate with the child.

Other materials

The facilitator will use videotapes and other materials to introduce and review the counselling tasks.

You will have several opportunities to practise what you are learning: in discussion, exercises, games, and role plays in the classroom; and skill practise with caregivers and their children.

Using the checklist and the counselling cards, you will counsel care-givers at home, in clinics, or in other settings:

- **Look, ask and listen:** find out how the caregivers and children interact, and how caregivers play and communicate with their children.
- **Praise:** encourage caregivers and build their confidence to continue doing specific activities with their children and, in general, their good efforts.
- **Advise:** suggest ways to improve what caregivers do with their children, if necessary.
- **Solve problems:** identify any difficulties the caregivers might have, and help them solve problems.
- **Check understanding:** find out what the caregivers understand and remember, in order to be sure that they will be able to improve the child's care at home.

- ***The MCH clinics which take care of mothers and children will be the home for the Care for Child Development (C4CD) intervention.***
- ***The guidelines in this course will be applicable to children from birth till five years the same group that is targeted for the MCH intervention.***
- ***The intervention will have a special focus on the first 1000 days extending till the child is three years old.***
- ***Counselling on C4CD will be targeted towards both parents mother and father and will begin during the ante natal period itself.***
- ***Records and reports for C4CD will be linked with MCH records and will have the same unique child code.***
- ***Basic Health Workers and Health Assistants may use these guidelines with families of all children, sick or well, in a wide variety of settings.***
- ***The success of the intervention will be measured in terms of number of families with children 0-5years reached with quality C4CD advise and improved family level practices for C4CD.***

Who is the caregiver?

The caregiver is the most important person to the young child. The caregiver feeds and watches over the child, gives the child affection, communicates with the child, and responds to the child's needs. If the child is sick, the caregiver is usually the person who takes the child to a health-care provider.

Who are caregivers in your community? Often the caregiver is the child's mother. The mother is the primary – most important – caregiver to a young infant who is breastfeeding.



The primary caregiver may also be the father or another family member. When both parents are sick or absent, the child's caregiver may be a relative or neighbour.

In some communities, children have several caregivers. A grandmother, an aunt, an older sibling, baby sitter and a neighbour may share the tasks of caring for a child. In this training, the primary caregivers are considered the child's *family*.

You may meet these caregivers in different settings. You may be working for example, in a Basic Health Unit (BHU), at the Outreach Clinic (ORC) or in a hospital. Wherever you are called on to counsel families, your efforts will help them raise healthier and more capable children.

Caring for the child's development

TIP

Greet care-givers in a friendly way whenever and wherever you see them.

By building good relationships with caregivers, you will be able to improve the lives of children in your community.

Children become more capable as they grow older. They learn to talk, walk, and run. They learn to think and solve problems.

This learning helps them to do well in school and, when they grow up, to contribute to their families and communities. These changes are examples of the development of the child.

The recommendations on **Care for Child Development** are for all children. They describe what mothers and fathers, and others who care for the young child,

can do.

The recommendations provide ideas for play and communication activities to help children learn. *Feeding, dressing, and other daily tasks provide many opportunities for adults to play and communicate with their children.*

The recommendations also *help children grow*. For this reason, the recommendations are especially important for low-weight newborns, pre-term infants and malnourished children. Studies have found that extra attention through play and communication, as well as through responsive feeding, *stimulates the growth of low-weight babies and poorly nourished children.*

Low-weight babies and children who are poorly nourished also have difficulty learning. They may be timid and easily upset, harder to feed, and less likely to play and communicate.

Since these children are less active, they may be less able to get the attention of the adults who care for them. As a result, over time mothers and other caregivers are less likely to feed, play with, or communicate frequently with them.

Poorly nourished, sick, and disabled children all have special needs for care. Their families may also need help to understand how their children communicate their hunger, discomfort, and needs.

The recommendations for play and communication can also *help caregivers/ mothers*. After giving birth, for example, some mothers find it difficult to become active and involved in caring for their newborn babies. They may be sick or overwhelmed with their responsibilities. They appear sad and tired. They are uninterested in other people and do not join other family activities.

Paying close attention to their babies, playing with them, and seeing how their babies respond to



the attention helps these caregivers become more active and happier. The activities help both the child and the caregiver.

All children will grow healthier with the extra attention during play and communication activities, and they will be better able to learn. Their families will be happy to see how their children grow and learn new skills.

What is care for child development?

Each child is unique at birth, and the differences among children affect how they learn. Their early care also affects their learning. Experiences during the first years with their families and other caregivers greatly affect the kind of adults children will become.

Families give their children special care for development by giving them love, attention, and many opportunities to learn. By playing and communicating with their children, families help their children grow healthier and stronger. Children learn to communicate their needs, solve problems, and help others. From a very young age, children learn important skills that will prepare them for life.

- **Much of what children learn, they learn when they are very young**

The brain develops most rapidly before birth and during the first two years of life. Good nutrition and good health are especially important during this time. Breast milk plays a special role in the development of the brain. Breast milk also helps young children stay free from illness so that they are strong and can explore and learn.

Children can see and hear at birth. Starting when they are very young, children need opportunities to use their eyes and ears, in addition to good nutrition. For their brains to develop, children also need to move, to have things to touch and explore, and to play with others. Children also need love and affection. All these experiences help the brain to develop.

Video film breast crawl.



From birth, babies can see and hear.

The mother's face is the favourite thing the young baby wants to look at. The baby sees the mother's face and loves to respond to her smiles and sounds.

A mother should begin to talk to her child from birth – and even before birth.

NOTE: Health workers may face resistance from families regarding talking to infants. They can try to overcome this barrier by explaining the benefits of early stimulation and showing film clips available with them

- **Children need a safe environment as they learn**

Children are always exploring new things and learning new skills. They need a clean, safe, and protected physical environment to be safe from injuries and accidents while they are playing and learning.

Children also should be protected from violence and strong anger aimed at them and around them. Adults need to protect young children from physical harm and harsh criticism, in order to help children gain confidence to explore and learn.

When children are young, they often explore by putting things into their sensitive mouths. With their mouths, as well as with their hands, children learn what is soft and hard, hot and cold, dry and moist, and rough and smooth. Children also put things in nose and eyes and the caregivers must be cautioned to be observant about this and try to prevent this and thus avoid injury to the baby.

Families must be sure that the things that young children put into their mouths are large enough so that they cannot swallow them. Also, they should not let children put long, thin, or sharp objects into their mouths.

Any object a child plays with should be clean. Putting the child on a clean blanket or mat helps to keep playthings clean.

When a child wants to play with something that is not safe or not clean, the caregiver may have to gently say “no”. While the child is learning, it is helpful to exchange the object for something that is safe and clean. Children can be easily distracted from things they should not do by drawing their interest towards other activities.



- **Children need consistent loving attention**

The sense that they belong to a family will help them get along well with others. It will also give them confidence to learn. To feel safe, young children need to have a special relationship with at least one person who can give them love and attention. The mother and father can fulfil this role jointly or individually.

Children naturally want to communicate with another person from birth. They become especially close to the caregivers who feed them, spend time communicating with them, and give them love and affection.

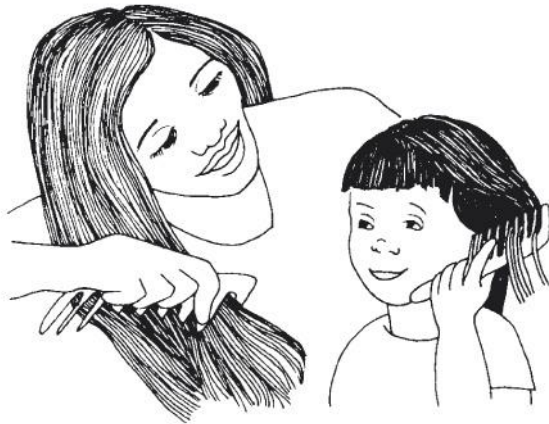
During breastfeeding, a baby and mother are very close. They communicate by responding to the slightest movement and sound, even smell, of the other person. The baby becomes “attached” to the person who consistently holds her, loves her, and helps her feel safe. This connection or bond lasts a lifetime.

Sometimes the mother and baby have difficulty developing this special connection. You can help mothers and other caregivers understand what their babies are trying to do as they begin to communicate, and help the caregiver respond appropriately. You can help caregivers learn what they can do to encourage the efforts of their children to play and communicate.

Adults can encourage their children by responding to their children's words, actions, and interests with sounds, gestures, gentle touches, and words. Adults can help their children develop into happy, healthy people by looking at and talking about the attempts of young children to do new things, to make sounds and to talk, even when the children are not yet able to speak.

- **Children learn by playing and trying things out, and by observing and copying what others do**

Children are curious. They want to find out how they can change and affect people and things around them, even from the first months of age.



Play is like children's "work". Play gives children many opportunities to think and solve problems. Children are the first scientists.

Children can learn by playing with pots and pans, cups and spoons, and other clean household items. They learn by banging, dropping, and putting things in and taking things out of containers. Children learn by stacking things up and watching things fall, and testing the sounds of different objects by hitting them together.

Children learn a lot from doing things themselves. Learning to use an eating tool without spilling, for example, helps to develop physical skills.

Children also learn by copying what others do. For example, if a mother wants her child to eat a different food, she needs to show the child by eating the food herself. For a child to learn to be polite and respectful, a father needs to be polite and respectful to his child.





Exercise - Discussion: Care for Child Development

Decide whether each of the statements below is true or false. Your facilitator may lead the group discussion using a card for each statement.

1.	A mother does a better job when she feels confident about her abilities to provide care.	True	False
2.	The brain develops more rapidly when the child first enters school than at any other age.	True	False
3.	Young children learn more by trying things out and copying others than by being told what to do.	True	False
4.	A father should talk to his child, even before the child can speak.	True	False
5.	Before a child speaks, the only way she communicates is by crying.	True	False
6.	A baby can hear at birth.	True	False
7.	A baby cannot see at birth.	True	False
8.	A child should be scolded when he puts something into his mouth.	True	False
9.	A child drops things just to annoy his father and mother.	True	False
10.	A child begins to play when he is old enough to play with other children.	True	False
11.	Children can learn by playing with pots and pans, cups, and spoons.	True	False
12.	Talk to your child, but do not talk to a child while breastfeeding. It will distract the child from eating.	True	False

Recommendations for Care for Child Development

The **Counselling Card** recommends play and communication activities to encourage and stimulate the child's physical, social, emotional, and intellectual development.

Some examples of new skills the young child is developing are, for example:

- Physical (or motor) – learning to reach and grab for an object, and to stand and walk.
- Social – learning to communicate what is needed and use words to talk to another person.
- Cognitive – learning to think and solve problems, to compare sizes and shapes, and to recognize people and things.
- Emotional – learning to calm oneself when upset, be patient when learning a new skill, be happy, and make others happy.

Discuss with the facilitator:

A caregiver helps a child learn to stack cups of different sizes.

What are some skills that the child is learning?

- **Physical (or motor) skills**
- **Social skills**
- **Cognitive skills**
- **Emotional skills**

Some approaches to promoting child development focus on what the child does or should be able to do at a particular age.

The recommendations on the counselling card, instead, focus on the care the child receives. They suggest play and communication activities to help families stimulate the development of the child's skills. At different ages, a child needs opportunities to learn new skills. The recommendations for play and communication change and become more complex as the child grows older. (See the six age groups on the **Counselling Cards** with **Recommendations for Care for Child Development.**)

The activities also help the family learn how to care for the child. Through play and communication with the child from birth, the caregiver learns to be sensitive to the child's needs and to respond appropriately to the child's attempts to communicate.

The **basic caregiving skills – sensitivity and responsiveness** – help the mother, father, and other caregivers provide better care for the child. They contribute to the child's survival, as well as to the child's healthy growth and development.

A **sensitive** caregiver is aware of the child and recognizes what a child is trying to communicate, for example, hunger, pain and discomfort, interest in something, or affection. A **responsive** caregiver then acts immediately and appropriately to what the child is trying to communicate.

A sensitive and responsive caregiver would, for example, have the skills to be able to see the child's signs of discomfort, recognize that the child is hungry, and feed her. The skills help the caregiver be

aware when the child may be in danger and then move quickly to protect him. The skills help the caregiver feel when the child is in distress, and respond appropriately to give comfort. The skills help caregivers recognize when a child is sick and needs medical care.

As a counsellor, you need to **understand** all the care recommendations for children from birth up to age five years. But you do not need to memorize them. Instead, you will refer to the **CounsellingCards** when you meet with caregivers.

Also, you will not need to explain **all** the recommendations to care-givers. During this course you will learn to select the recommendations that are appropriate for the child's **age** and for the **problems with care** that you identify. But first we will discuss recommendations on play and communication for all children according to their age group.

- **Select recommended activities appropriate for the child's age**

There are play and communication recommendations for children in six age groups. If the child is almost at the end of an age group, however, you might discuss the recommendations for the next age group. For example, a child who is almost 12 months old could learn activities recommended for children age 12 months up to 2 years.

- **Select recommended activities appropriate for the child's skill**

If a child is able to do an activity recommended for his or her age, then introduce an activity for the next older age group.

- **Select recommended activities appropriate for the problems in caregiver-child interactions that you identify**

For example, a caregiver might have difficulty responding to a child. Recommend an activity to help the caregiver pay close attention to what the child does and respond to it. A game to copy what the child does can help the caregiver learn to pay attention and respond more closely to what the child is doing.

The discussion on recommendations for play, communication and responsive feeding for each age group follows.



For the newborn, from birth up to 1 week

Newborn, birth up to 1 week

Your baby learns from birth



PLAY Provide ways for your baby to see, hear, move arms and legs freely, and touch you. Gently soothe, stroke and hold your child. Skin to skin is good.



COMMUNICATE Look into baby's eyes and talk to your baby. When you are breastfeeding is a good time. Even a newborn baby sees your face and hears your voice.

FEED Immediately after birth put baby in skin-to-skin contact with mother. Start breastfeeding within one hour of birth. Breast feed on demand

Play: Healthy babies can see, hear, and smell at birth. Right away they begin to recognize their mothers. They soon start to smile when people smile at them. Faces are particularly interesting.

At this age, learning is through seeing, hearing, feeling, and moving. The child's face should not be covered for long periods of time because children need to see in order for their eyesight to develop.

Wrapping the newborn tightly – swaddling – is common in some places. Newborns should not be tightly bound in clothing for long periods, however, because they need to be able to move and touch people and things.

Instead, encourage the mother and father to hold their child closely. They can gently stroke the child's skin. By gently soothing an upset child, they also help the child learn to soothe herself.

Communicate: Encourage families to talk to their children from birth – even before. When a mother looks at her child's eyes, and smiles in response to the child's smiles, the child learns to communicate. And the mother begins to see her child respond to her. Encourage the father also to communicate with the newborn.

Children communicate their needs. They learn to trust that someone will pay attention to their movements, sounds, and cries.

Feed: See the film clip Breast Crawl, note the skin to skin contact, child's alert state and instinct to breast feed at birth. Feed infant colostrum the first milk. Breastfeeding on demand strengthens this interaction and the growing trust.

By looking into his newborn's eyes, the father communicates with his child. He enjoys being involved in the child's life from the very beginning.



1 week up to 6 months



PLAY Provide ways for your child to see, hear, feel, move freely, and touch you. Slowly move colourful things for your child to see and reach for. Sample toys: shaker rattle, big ring on a string.

COMMUNICATE Smile and laugh with your child. Talk to your child. Get a conversation going

For the infant, from 1 w

Play: Infants at this age like to reach for and grab fingers and objects. They look at their hands and feet, as if they are just discovering them. They put things into

NOTE : Healthworkers must include this message in the ANC counseling.

FEED Only breastmilk
Recognize the baby is hungry before baby starts crying

their mouths because their mouths are sensitive. The mouth helps them learn warm and cool, and soft and hard, by taste and touch. Just make sure that what the child puts into his mouth is clean, and is large enough that the child won't choke on it.

Help the child follow an object. For example, ask the caregiver to show a colourful cup to the child, just out of reach. When she is sure the child sees the cup, ask her to move it slowly from one side to the other and up and down, in front of the child. Then, to move the cup closer. Encourage the child to reach for the cup and grab the handle.



Clean, safe, and colourful things from the household, such as a wooden spoon or plastic bowl, can be given to the child to reach for and touch. A simple, homemade toy, like a shaker rattle, can attract the child's interest by the sounds it makes.

Children this age also continue to love to see people and faces. Encourage family members to hold and carry the child.

Communicate: Children enjoy making new sounds, like squeals and laughs. They respond to someone's voice with more sounds, and they copy sounds they hear. They start to learn about how to make a conversation with another person before they can say words.

All family members can smile, laugh, and talk to the child. They can “coo” and copy the child's sounds. Copying the child's sounds and movements helps the people who care for the child pay close attention to the child. They learn to understand what the child is communicating, and respond to the interests and needs of the child.

Feed: Children show interest in breastfeeding by becoming fussy, sucking their hand, or moving their heads toward the breast. Using these clues, a mother can learn to recognize that a child is hungry before the child starts to cry. Breast feed baby demand, gently talk to the baby, maintain eye to eye contact.

These are important caregiving skills – being sensitive to the child's signs and responding appropriately to them. These caregiving skills help family members notice when the child is hungry, or sick, or unhappy, or at risk of getting hurt. They are better able to respond to the child's needs.

For the child, this practice in communicating helps the child prepare for talking later. The family will also enjoy the reactions they get from the child and the attempts at communicating.



Copying the child's sounds and gestures starts a good communication game.

It helps the mother learn to look closely at the child, be sensitive to the child's sounds and movements, and follow – respond to – the child's lead.

And even before the child is able to speak, he delights in being able to communicate through his sounds and movements.



For the child, from 6 months up to 9 months

Play: Children enjoy making noises by hitting or banging with a cup and other objects. They may pass things from hand to hand and to other family members, dropping them to see where they fall, what sounds they make, or if someone will pick them up.

This may be frustrating for busy mothers and fathers. Caregivers can be more patient if you help them understand that their child is learning through this play. "Your child is being a little scientist. She is experimenting with how objects fall, how to make a noise, how the force of her arm sends the object across the table."



Communicate: Even before children say words, they learn from what family members say to them, and can understand a lot. They notice when people express strong anger, and may be upset by it.

Children copy the sounds and actions of older brothers and sisters and adults. Children like other people to respond to the sounds they are making and to show an interest in the new things they notice.

A child can recognize his name before he can say it. Hearing his name helps him know that he is a special person in the family. When he hears his name, he will look to see who is saying it. He will reach out to the person who kindly calls his



name.

Feed: Feeding times are periods of learning and affection talk to the child with eye to eye contact.

6 months up to 9 months



PLAY Give your child clean, safe household things to handle, bang, and drop. *Sample toys:* containers with lids, metal pot and spoon.



COMMUNICATE

Respond to your child's sounds and interests. Call the child's name, and see your child respond.

FEED Continue breastfeeding on demand. Start giving soft, semi-solid foods; Talk to the child during feeding with eye to eye contact; feed slowly and patiently. If the child refuses new food try different combinations and textures

Complementary feeding is a new experience for a baby start slowly and feed patiently help the baby to learn to eat new foods. Encourage baby to eat but never force feed a child. If the child refuses new foods try different combinations, textures and methods of encouragement.

For the child, from 9 months up to 12 months

9 months up to 12 months



PLAY Hide a child's favourite toy under a cloth or box. See if the child can find it. Play peek-a-boo.



COMMUNICATE Tell your child the names of things and people. Show your child how to say things with hands, like "bye bye". *Sample toy: doll with face.*

FEED Continue breastfeeding on demand. Feed the baby directly. Encourage the child to eat, do not force feed. Allow the child to hold and eat chewable foods, snacks under supervision. Minimize distractions during meals.

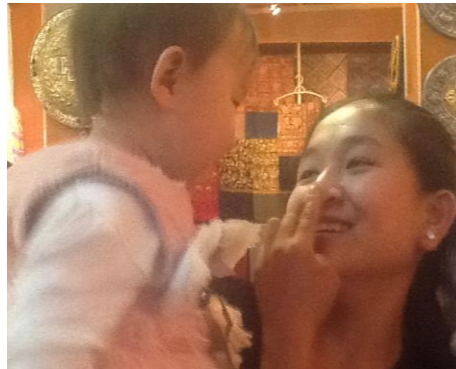
Play: Play continues to be a time for children to explore and learn about themselves, the people around them, and the world. As children discover their toes, they may find them as interesting to touch as a toy. When a box disappears under a cloth, where does it go? Is it still there? Can they find it?

Children also enjoy playing coo-coo. When the father disappears behind a tree, they laugh as father reappears. They enjoy hiding under a cloth and giggle when the father "finds" them.

Communicate: Even though children cannot yet speak, they show that they understand what the family members say. They hear the name of things, and delight in knowing what they are. They begin to connect the word bird to the bird in the tree, and the word nose to their nose.

Feed: Children need help to eat, they eat slowly and are easily distracted. They like to feed themselves. Give finger foods to baby to hold and eat. This must be done under supervision so that the baby does not start using the food as a toy or plaything.

Where is your nose? Pema does not yet speak – but she can



show you where her nose is. She is also learning the names of people and things.

All members of the family can enjoy sharing new things with the young child. They can play simple hand games together, like “bye-bye”, and clap to the beat of music.

A child may become afraid on losing sight of a familiar caregiver. The adult helps the child feel safe, responds when she cries or is hungry, and calms her by his presence and the sound of his voice. Encourage the caregiver to tell his child when he is leaving and to reassure his child that he will soon return. He can leave a safe, comfortable object with the child – one that reminds the child of the caregiver and assures the child that he will return.



“Bye bye”

12 months up to 2 years



PLAY Give your child things to stack up, and to put into containers and take out. *Sample toys: Nesting and stacking objects, container and clothes clips.*



COMMUNICATE Ask your child simple questions. Respond to your child's attempts to talk. Show and talk about nature, pictures and things.

FEED Sit with the child during meals to make sure that the child eats nutritious foods and eats enough while learning to feed her/himself.

For the child, from 12 months up to 2 years

Play: If children this age are healthy and well nourished, they become more active. They move around and want to explore.

They enjoy playing with simple things from the household or from nature, and do not need store-bought toys. They like to put things into cans and boxes, and then take them out. Children like to stack things up until they fall down. Families can use safe household items to play with their children.

Children need encouragement as they try to walk, play new games, and learn new skills.

Families can encourage their children to learn by watching what they do and naming it: "You are filling the boxes." Adults should play with the children and offer help: "Let's do it together. Here are more stones to put into your box."

When children learn a new game or skill, they repeat it over and over again. These discoveries make them happy and more confident. They are especially happy when they see that they are making the adults around them happy, too. Encourage family members to notice and praise their young children for what they are learning to do.



Chophel has learned a new game from his father. He picks up walnuts on a spoon and puts them in the bottle, dumps them out, and puts them in again – over and over again.

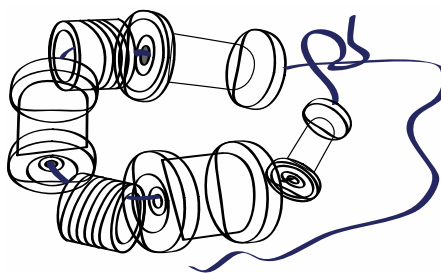
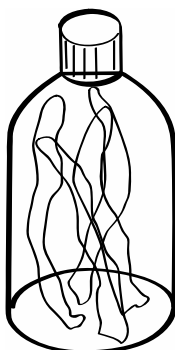
Communicate: At this age, children learn to understand words and begin to speak. Mothers and fathers should use every opportunity to have conversations with the child, when feeding and bathing the child, and when working near the child.

Children are beginning to understand what others are saying and can follow simple directions. They often can say some words, such as “water” or “ball”. Family members should try to understand the child's words and check to see whether they understand what the child says: “Would you like some water?” “Do you want to play with the ball?”

Families can play simple word games, and ask simple questions: “Where is your toe?” or “Where is the bird?” Together they can look at pictures and talk about what they see.

Adults should use kind words to soothe a hurt child and praise the child's efforts.

Feed: As children begin to use spoons and other utensils it is difficult to get enough food. Help child to feed her/him self. It is important for an adult to be present at mealtimes to ensure that the child eats nutritious foods and eats enough.



A child enjoys playing with homemade toys, and will learn by grabbing, shaking, banging, and stacking them.

2 years and older



PLAY Help your child count, name and compare things. Make simple toys for your child. *Sample toys: Objects of different colours and shapes to sort, stick or chalk board, puzzle.*



COMMUNICATE Encourage your child to talk and answer your child's questions. Teach your child stories, songs and games. Talk about pictures or books. *Sample toy: book with pictures.*

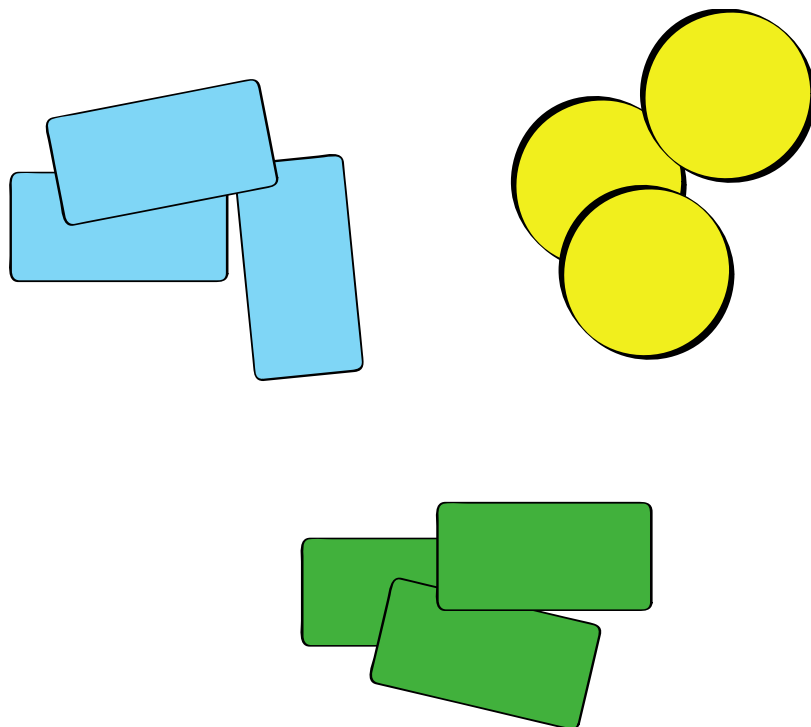
FEED Continue responsive complementary feeding. Even during illness continue to feed the child. Give extra food and attention to feeding after an illness so that child recovers fully.

For the child, 2 years and older

Play: Children 2 years and older learn to name things and to count.

A caregiver can help her child to learn to count by asking "how many" and counting things together. Children make mistakes at first, but learn from repeating the games many times.

Children still enjoy playing with simple, homemade toys. They do not need store-bought toys. They can learn to draw with chalk on a stone or with a stick in the sand. Picture puzzles can be made by cutting magazine pictures or simple drawings into large pieces.



Children can learn to match colours, shapes, and sizes with simple objects, such as bottle caps. They can compare and sort circles and other shapes cut from coloured paper.

Communicate: By age 2 years, children can listen and understand. Asking simple questions and listening to the answers encourages children to talk: “What is this?” “Where is your brother?” “Which ball is bigger?” “Would you like the red cup?”

Looking at picture books and reading stories to children prepares them for reading. Stories, songs, and games also help children improve how they speak.

Answering a child's questions encourages the child to explore the world. Family members should try – with patience – to answer a young child's many questions.

Children who are learning to talk make many mistakes. Correcting them, however, will discourage talking. They will learn to speak correctly by copying – by listening to others who speak correctly.

Children this age can understand what is right and wrong. Traditional stories, songs, and games help teach children how to behave. Children also copy their older brothers and sisters and other family members as they learn what is right and wrong.

Children learn better when they are taught how to behave well instead of being scolded for behaving badly. They should be corrected gently so that they do not feel ashamed.

Throughout the activity, encourage care-givers to help their children learn. Some good advice for the caregiver, no matter what the child's age:

- **Give your child affection and show your love.**
- **Be aware of your child's interests and respond to them.**
- **Praise your child for trying to learn new skills.**

Feed: As children grow their need for food increases. Continue responsive feeding. Remind families to continue breastfeeding even during illness. A child needs extra food after an illness to recover completely



With his mother's guidance, Wangyel puts together a homemade picture puzzle.



Exercise -Discussion: Using the Counselling Card

*This exercise will help you use the **Counselling Card** to identify a recommended play and communication activity for a child.*

*Your facilitator will give a different child to each participant. Use the recommendations on the **Counselling Cards** to suggest **one play and one communication activity** for the caregiver to do with the child.*

1. A newborn baby, 1 day old.
2. A 4-week-old baby.
3. A 5-month-old child.
4. A 6-month-old child.
5. A 13-month-old child.
8. A 28-month-old child.
9. A 10-month-old child who does not yet speak.
10. A 3-year-old child who cannot see.
11. An 8-month-old child who drops all her toys.
12. A 4-year-old child who knows how to count.



**Video Exercise:
Recommendations for play
and communication**

In this video exercise, you will review the recommendations for care for the child's development.

During the video, list the play and communication activities you see in the spaces below.

After the video, be prepared to discuss the recommended age group for each activity.

1. What examples of **play activities** did you see? For which age group?
(Refer to the recommendations on the **Counselling Cards**.)

Play activities	Recommended for which age group?

2. What examples of **communication activities** did you see? For which age group?
(Refer to the recommendations on the **Counselling Cards**.)

Communication activities	Recommended for which age group?

3. Discussion: What **“toys”** did you see?

Counsel the family on Care for Child Development

Now we are ready to use these recommendations for play and communication to counsel a caregiver. We will also learn to observe the caregivers with their children in order to observe patterns of sensitive and responsive caregiving. The **Checklist** will guide us as we counsel the family.

Greet the caregiver and child

You will see caregivers at the BHU, in ORCs or in a hospital. Greet the caregiver. Invite the caregiver to sit with the child in a comfortable place while you ask some questions. Sit close, talk softly, and look directly at the caregiver and child. Communicate clearly and warmly throughout the meeting.

Ask questions to gather information on the child and the caregiver. Listen carefully to the caregiver's answers. The answers will help you counsel the caregiver about how to encourage the child's development.

You will focus the counselling on what the child needs. To identify the child's needs, observe how the caregiver and child interact. Ask the caregiver questions about the child's care.

The **Checklist for Counselling on Care for Child Development** guides you as you learn this information and counsel the family. It helps you understand how the caregiver responds to the child. It helps you provide appropriate advice, focused on the child's age and specific developmental needs.

To begin, look at the top of the checklist on the next page. What do you know about the child in the sample?

Discuss with the facilitator:

When did the counsellor see the child and the caregiver?

What is the name of the counsellor?

What is the child's name?

How old is the child?

Is the child a boy or a girl?

What is the caregiver's name?

What is the relationship of the caregiver to the child?

Where do they live?

Checklist for Counselling on Care for Child Development

Date: 06 / 09 / 20 13 Facility: BHU / ORC / Hospital BUM BHW / HA / Nurse Rinzin W
 (Day / Month / Year) MCH ref. no: BT-BUM- 13-0004-1

Child's name: Dema Age: ___ Years / 2 Months / ___ days Boy/Girl

Caregiver's name: Sonam Choden Relationship: Mother / Father / Other: _____

Address, Village: Shengana Mobile No. 17634215

The **Checklist** is for you. It is to help you identify and remember the child and the child's needs. Provide only the information you need on the caregiver and the address in order to locate the child.

How to fill the checklist :

Date: Fill in today's date in the format day/month/ year

MCH Ref. No: Fill in the child's unique code as it appears in the MCH card –

DZ-HHC-YR-0004-1

Facility: Circle BHU/ORC/Hospital and then fill in the 3 letter code given to each facility as in MCH guideline

BHW/HA/Nurse: Circle the counsellor's designation and then fill in the name in the blank space; in case designation is different just write it with hand and fill in name in blank space

Child's name: Fill in child's first name

Age: Fill in the age in completed years and /or months. E.g. a child is 2 months and 6 days, fill in 2 months

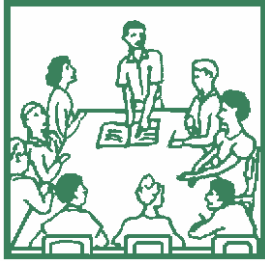
Boy/Girl: Circle boy or girl

Caregiver's name: Fill the full name of the caregiver

Relationship: Circle the response, if the caregiver is father/ mother or other in case it is other then fill the blank space to indicate the relationship. E.g. child is accompanied by an aunt then circle "other" and write aunt.

Address, Village: write the name of the village or locality in case the child comes from a town

Mobile number: Note the mobile number of the caregiver (if this is not the mother it may be different from the one on the MCH card.)



Exercise: Identify the child and caregiver

Child 1. Dorji

Complete the top of the **Checklist** below for a child you are seeing today. Fill in today's date and your name as the person who is counselling the caregiver.

The child's name is Dorji, he is a 2-year-old boy. His aunt Dechen Wangmo takes care of Dorji, and you are seeing them at the ORC. They live in the village of Pemathang.

Checklist for Counselling on Care for Child Development

Date: ___/___/20___ Facility: BHU / ORC / Hospital _____ BHW / HA / Nurse _____
 (Day / Month / Year) MCH ref. no _____
 Child's name: _____ Age: ___ Years/___/Months___/Days Boy/Girl
 Caregiver's name: _____ Relationship: Mother / Father / Other: _____
 Address, Village: _____ Mobile No. _____

Child 2.

Your facilitator will now ask one of the participants to provide information on their child, or on a child they know. Complete the top of the **Checklist** below with the information.

Checklist for Counselling on Care for Child Development

Date: ___/___/20___ Facility: BHU / ORC / Hospital _____ BHW / HA / Nurse _____
 (Day / Month / Year) MCH ref. no _____
 Child's name: _____ Age: ___ Years/___/Months___/Days Boy/Girl
 Caregiver's name: _____ Relationship: Mother / Father / Other: _____
 Address, Village: _____ Mobile No. _____

Look, ask, and listen: Identify care practices

The next section of the **Checklist** provides questions to find out how the caregiver and child interact, and how the caregiver stimulates the child's development through play and communication activities.

The questions are in three sections from the top of the table to the bottom.

- Top: For all children
- Middle: For the **child age less than 6 months**
- Bottom: For the **child age 6 months and older**

(IMPORTANT: If the child appears to be very weak and sick, then refer the child immediately to the closest health facility – hospital or clinic. Do not take time now to counsel the caregiver on **Care for Child Development**.)

Listen carefully for the caregiver's answers to the questions. You may look at the **Recommendations for Caring for Your Child's Development** for the child's age, as you listen. If an answer is unclear, ask another question.

Record the answer where there is a blank. Write a brief answer, for example:

- How does the caregiver show he or she is aware of the child's movements?
Looks at child, shifts and holds child closer
- How does caregiver comfort the child?
Puts child's head on shoulder and pats back

For all children

First, look at the caregiver and child. You can observe them from the moment you first see them. *Before starting the interview / interaction with the caregiver, spend a few minutes observing the caregiver and child interactions. Observe the following.*

- **Look: How does the caregiver show he or she is aware of the child's movements?**

Many caregivers are unaware that they are reacting to the child, her moods, and her movements. But, as the child moves, the caregiver's hand feels the child turn. The caregiver might look at a child who walks away to be reassured that the child is okay.

If the child fusses, a gentle hand taps the child's back to soothe her. You are often able to see this strong connection between a caregiver and child. It usually develops when the child is very young, even in the first days of life.

Sometimes, however, you do not see this connection. There may be many reasons. The mother may be sick. She and her infant may have been separated at birth, at an important time for forming this connection. Fathers who have not had a chance to play with and care for their newborn may have difficulty developing this connection.

• **Look: How does the caregiver comfort the child and show love?**



A young child expresses his discomfort by fussing, crying, and wiggling. Observe whether the child who is awake follows his mother or other caregiver's sounds and movements. Also notice how the caregiver responds when the child reaches for her or looks to her for comfort.

The caregiver comforts her child by gently talking to him. A child who hurts his knee wants to know that his mother feels it too. The caregiver might draw the child more closely to comfort and protect him.

Children who are afraid of new people, places, and sounds may need to be held until they know that their mother and father feel safe too. Children learn how to calm themselves by the reaction they get from others. A loud or threatening noise further upsets them. A calm voice helps to calm them.

• **Look: How does the caregiver correct the child?**

While young children explore the world and try new things, they make mistakes. They grab an object that is breakable or dirty. They move too close to a danger like a fire or street. They reach for things that are not theirs to play with. They also fall and get hurt, or become frightened.

When children are young, they are easily distracted. Their parent can substitute a safe object for one that they should not touch. They can be distracted by interesting objects to play with in a safe place. Later they will be able to better understand the reasons for what they should or should not do. There is no need to harshly scold or punish the child. Instead, the caregiver can help the child learn what can be played with and where.

Look	
All children	How does caregiver show he or she is aware of child's movements? <i>Touches child, pulls child closer</i>
	How does caregiver comfort the child and show love? <i>Holds child, rocks child, breastfeeds</i>
	How does caregiver correct the child? <i>Distracts child with her scarf</i>

Discuss with the facilitator the notes the counsellor wrote on the Checklist:

Child 1. Age 2 years and 6 months

What did the counsellor see in the interaction between the caregiver and the child?

How would these interactions affect the child's survival? Why?

How would these interactions affect the child's learning? Why?

Look	
All children	How does caregiver show he or she is aware of child's movements? <i>Looks at child</i>
	How does caregiver comfort the child and show love? <i>Tells child to stop crying</i>
	How does caregiver correct the child? <i>Grabs objects, scolds child</i>

Child 2. Age 3 years and 1 month

What did the counsellor see in the interaction between the caregiver and the child?

How would these interactions affect the child's survival? Why?

How would these interactions affect the child's learning? Why?

For children by age (less than 6 months or 6 months and older)

- **Ask and listen: How do you play with your child?**

It might be difficult for a caregiver to understand this question. Some think that the child is too young to play. Or that children only play with other children. You will need to ask about play by using words that the caregiver can understand.

- **Ask and listen: How do you talk with your child?**

It might also be difficult for a caregiver to understand what you mean by talking with the child. Some think that the child is too young to talk to, especially before the child knows how to speak. If you see the caregiver cooing or talking softly to calm the child, point out that the caregiver is talking to the child.

- **Ask and listen: How do you get your child to smile?**

Many caregivers have been making faces and funny sounds to get their child to smile, almost from the child's birth. They have seen that the child responds to big movements, funny faces, and repetitive sounds. The child's responses encourage the caregiver to continue to find ways to get the child to smile.

Other caregivers do not know how to gently encourage the child to smile. Instead, they may try to force a smile, even by pressing the child's cheeks to form a smile. A caregiver who does not attempt to draw out a child's smile probably has difficulty responding easily, naturally, and with delight to the child's attempts to communicate.

It is helpful to give the caregiver an activity that is appropriate for the child's age. See how the child enjoys it and will smile naturally from the pleasure of playing with the caregiver.

• **Ask and listen: How do you think your child is learning?**

Most caregivers are aware if their child is having difficulty learning. They recognize when the child appears slow compared to other children in the family or community. They might be relieved that someone asked and is willing to help. If there are services for children who have difficulty learning, refer the child to a centre where the child can be further assessed and the family can receive help.

Ask and listen	
Child age less than 6 months	How do you play with your baby? <i>Does not play - too young</i>
	How do you talk to your baby? <i>Does not talk to baby</i>
	How do you get your baby to smile? <i>Uses fingers to press mouth to a smile</i>

Discuss with the facilitator the notes the counsellor wrote on the checklist:

Child 1. Age 2 months

What did the counsellor learn about the interaction between the caregiver and the child?

How would these interactions affect the child's survival? Why?

How would these interactions affect the child's learning? Why?

Child age 6 months and older	How do you play with your child? <i>Does not - child too young to play</i>
	How do you talk to your child? <i>Tells child about things</i>
	How do you get your child to smile? <i>Looks at child. "coos" tickles gently</i>
	How do you think your child is learning? <i>Well, "he knows how do do lots of things"</i>

Child 2. Age 2 years and 6 months

What did the counsellor learn about the interaction between the caregiver and the child?

How would these interactions affect the child's survival? Why?

How would these interactions affect the child's learning? Why?

Praise and advise: Improve care practices

With the information you learn from the caregiver, you are able to give specific praise to encourage the family to play and communicate with the child, and to strengthen their basic caregiving skills. You also can identify possible problems. With the recommendations on the **Counselling Cards**, you can focus your advice on how to improve the child's care.

Praise the caregiver

Most families try to do their best for their children. Praise recognizes the effort. Praise for the effort to play and communicate with children from birth encourages families to continue doing what is best for their children. Praise also builds confidence. Confidence will help the family learn new activities to try with their child.

The **Checklist** identifies some behaviours to praise. You might praise the caregiver for holding her child closely, and talking and playing with her child.

Praise shows the caregiver that you see the good effort. Praise can also show how the child praises the caregiver's good effort.

For example, when caregivers look at their children and talk softly to them, help them notice the good reaction they get from their children. For example: "Notice how your baby responds when he hears his name. He turns to you. He recognizes and loves your voice."

Discuss with the facilitator:

A mother gently massages her newborn. She stretches out her baby's arms and legs, and pushes them back again.

How would you praise the mother?

Advise the caregiver

When you counsel a family you have an opportunity to strengthen the skills of the people who care for young children.

They may not know why their child does not respond to them as they wish. They may not know that you should talk to a small child, even before he or she can speak. Sometimes families think that play is only for children. When the child is old enough, she will play with her bigger brothers and sisters. They do not know that adults who play with their young infants and children are helping them to learn, and they do not know what kind of play is appropriate for the child.

The **Checklist** identifies some common problems and what you can suggest to help families in caring for their children. You will guide the caregiver and child in practising the play and communication activities with you. For example:

- **To help a caregiver respond to the child**



You might find that a caregiver does not move easily with her child and does not know how to comfort her child. You do not see the close connection between what the child does and how the caregiver responds.

This connection is the basis for sensitive and responsive caregiving. Where it is missing, you can help the caregiver learn to look closely at what a young child is doing and to respond directly to it. Ask the caregiver to:

1. Look into the child's face until their eyes meet.
2. Notice the child's every movement and sound.
3. Copy the child's movements and sounds.

It is important that the counsellor not do the activities directly with the child. Connecting with you, the counsellor, will interfere with the child making the connection with the caregiver.

Instead, teach or coach the caregiver through the activity with the child.

Soon, most young children also begin to copy the caregiver.

One time is not enough. Encourage the caregiver and child to play this communication game every day. Help the caregiver see how the child enjoys it. Notice how satisfied the caregiver is with the attention the child gives her.

- **To help a caregiver speak less harshly to a child**

Sometimes children annoy adults as they try new skills. Adults may think that children should be able to act better than they are able to act at their age. They may think the child is acting against the adult's rules on purpose.

For example, a father might think his child is misbehaving when he drops things again and again. He scolds his child and perhaps spansks him.

You can help the father see what the child might be thinking in a more positive way: "See what I can do. I can make it fall, and it makes a noise. The harder I push, the farther it goes. I am strong. When I drop it near Daddy, I am asking him to play with me, and we laugh and have fun together. He loves me very much."

- **To introduce a new play or communication activity**

In general, introduce a play or communication activity on the **Counselling Cards** by following these steps:

1. Get the child's attention

Before you start, help the caregiver get the child's attention. She can look into the child's eyes, smile, and make sounds until the child begins to respond to her. She can also move a container or other object in front of the child until the child reaches for it.

2. Respond to the child

Help the caregiver follow the child's lead. She can copy the child's sounds, or respond to the child's hand or leg movements. Often the child will then repeat the activity, in order to get the caregiver to respond again. This increases the child's attempts to make sounds and move, and the caregiver's pleasure. Both are important to help the child learn.

3. Introduce a play or communication activity recommended on the **Counselling Cards**

When the caregiver and child are responding together, it is now easier to introduce a new activity.

For example, give stones (large enough not to swallow) and a plastic jar to a caregiver who takes care of her 14-month-old grandson. Ask her to try to teach her grandchild to put the stones into the jar. Help her get started, if necessary. Point out any success, and help her find ways to show her grandchild that she is pleased.

Also, help her see how much her grandchild seems to enjoy playing with her. Often children want to repeat this activity many times, once they have learned it.

Note again that it is important that, as the counsellor, you do not do this activity directly with the child. Instead help – or coach – the caregiver to do the activity with the child.



4. Then, state the recommendations on play or communication for the child

Recommend that the caregiver continue this activity at home to help her child learn: “Give your child things to put into containers and take out, and to stack up. This will help your child learn new skills. This will help him grow and be ready for school.”

If the child is almost at the end of an age group – or the child already knows how to do the activities for her age group – you may introduce the recommendations for the next, older age group.

5. Check understanding

Before the caregiver and child leave, be sure you have seen them do the recommended play or communication activities. This will show you that the caregiver is able to do the activity. Encourage the caregiver to continue the activities at home.

Also, ask the caregiver questions about how he will do the activity at home. For example, “What do you have at home to use to teach your boy how to stack things?” “What would you like your child to learn to name?” “When is a good time to read or talk about pictures and things with your child?”

Finally, explain to the caregiver the importance of stimulating the child's development. One of the following reasons might be important to the child's family:

- Play and communication, as well as good feeding, will help your child grow healthy and learn. These activities are especially important in the first years of life.
- Play and communication activities help the brain to grow and make your child smart and happy.
- Good care for the child's development will help your child be ready to go to school and to contribute one day to the family and community.
- Playing and communicating with your child will help build a strong relationship with your child for life.



Help the caregiver understand how important it is to help her young child learn. Build the caregiver's confidence to care for her child at home by helping her practise playing and communicating with her child.



Role play exercise: Advise the caregiver

The facilitator will divide the participants into groups of four participants each. Participants should set up a space with four chairs, in order to do a role play.

In the small group, decide who will be the caregiver (mother or father), the child, the counsellor, and the observer. The roles to play are:

Caregiver (mother or father):

You have a 3-year-old child. You want your child to be smart and able to do many things. You are very interested in what the counsellor is saying about how to help your child.

Child:

You will act as though you are a 3-year-old child. You are a bit shy. But do not act silly (we want the counsellor to have a good practice). You enjoy your mother and father's attention.

Counsellor:

Welcome the caregiver and child. Select a play or communication activity appropriate for the child's age.

1. Help the caregiver get the child's attention.
2. Help the caregiver respond to the child.
3. Introduce a play or communication activity recommended on the **Counselling Cards** for the child's age. Help the caregiver practise the activity with the child.
4. Then, state the recommendations on play or communication for the child. Identify the benefits for the child and for the family.
5. Check the caregiver's understanding. For example, what items could she use to play with her child at home? How will she use them?

Observer:

Observe the discussion between the counsellor and the caregiver. At the end of the role play, provide feedback:

1. How welcoming was the counsellor?
2. How appropriate for the child's age was the activity the counsellor recommended?
3. How well did the counsellor introduce the caregiver to the activity?
4. Did the counsellor do the activity with the child, or help the caregiver do the activity?
5. How well did the counsellor praise the caregiver? Was the praise specific? Did the praise provide information on the benefit to the child?
6. How did the counsellor help the caregiver see how the child responded?

When you finish, change roles. Ask the child to be a child from a different age group.

Continue to change roles until each participant has played each role.

Help solve problems

After you introduce a caregiver to recommended play and communication activities for the child, you need to ask: "What difficulties might you have doing these activities at home with your child?". Then you can help the caregiver identify solutions that are appropriate for the family.

Refer to the section of the **Counselling Cards on Counsel the Family about Problems in Caring for the Child's Development**. This section lists common problems families face in caring for their children.

If the mother cannot breastfeed, counsel the mother to:

- Hold the child close when feeding, look at the child, and talk or sing to the child.
- If the mother cannot breastfeed, help her understand the importance of responding when the child shows she is hungry. Hold the child during feeding. For the child to feel safe and secure, it is important to feed the child with a cup in a loving way, keeping the child close to the body, and looking into the child's eyes.

If the caregiver does not know what the child does to play or communicate:

- Remind the caregiver that children play and communicate from birth.
- Demonstrate how the child responds to the caregiver's activities and effort.

To encourage learning, caregivers need to recognize play and communication, and understand that they are important for learning.

If a child looks or smiles at the caregiver, remind him that this is how the child communicates. If the child makes a sound or gesture, encourage the caregiver to imitate it. Often the child will repeat it with delight. Help the caregiver guess what the child might be trying to communicate. "My Apa heard me!", "I can make my Apa laugh!" or "Apa makes such a funny face with me!"

Finally, select another activity for the child's age from the **Recommendations for Care for Child Development**. Then help the caregiver try the activity with the child and see how the child responds.

If the caregiver feels that she is too burdened or stressed to play and communicate with the child:

- Listen to her feelings.
- Help her identify a key person who can share her feelings and help her with her child.
- Build her confidence by demonstrating her ability to carry out a simple activity. Offer praise and encourage her to practise the activity with her child.

If caregivers feel that they do not have time to play and communicate with the child:

- Encourage them to combine play and communication activities with other care for the child (for example, feeding, bathing, and dressing).
- Ask other family members to help care for the child or help with the parents' chores.

Caregivers may feel that they do not have additional time to actively feed, play, or communicate with their children. Ask the caregiver what she thinks she could do to get more time. If she needs help to find time, discuss some of these ideas:

- Do play and communication activities while doing household chores or caring for the child.
- She could talk, sing, and play while bathing, feeding, and dressing the child, or while cleaning the house.
- Identify others in the family who might help her do some of her work, to give her more time with the young child.
- Identify others, including the father and older brothers and sisters, who can spend time playing and talking with the child.

If the caregiver has no toys for her child to play with, counsel her to:

- Use any household objects that are clean and safe.
- Make simple toys.
- Play with her child. The child will learn by playing with her and other people.

Young children do not need bought toys. Often children find their own toys in the house or outside. Help the caregiver identify safe items at home.

For example, for the caregiver of a child age 7 months, ask: "What do you have at home that your child could safely handle, bang and drop?" For a child age 12 months up to 2 years, ask, "What kinds of empty containers do you have at home that your child could put small things into?". Or ask the caregiver what her child plays with now. Check to make sure that she understands what is safe for her child to play with.

Families can also make simple, inexpensive toys. A block of wood with painted wheels becomes a cart. A child can sort circles cut from coloured cardboard to match colours. A picture can be pasted onto cardboard and cut into three pieces to make a simple picture puzzle. Children can also play with natural objects, such as large stones that are clean and are not sharp.

Children also need people to play with. They learn from playing with fathers, brothers and sisters, and friends. Identify ways that others can talk to the child, and play counting, naming, or other games recommended for the child's age.

If the child is not responding, or seems "slow":

- Encourage the family to do extra play and communication activities with the child.
- Check to see whether the child is able to see and to hear.



- Refer the child with difficulties seeing or hearing to special services, if available.
- Encourage the mother and other family members to play and communicate with the child through touch and movement.

Most children learn to walk, say a few words, and feed themselves by the end of their second year. Children, however, are very different from each other in how shy or active they are, and in how fast they learn. A child who is poorly nourished, for example, may be slow to learn new skills.

It is sometimes helpful to ask the caregiver: "How do you think your child is learning?" or "Do you have any concerns about how your child is growing or learning?" A parent may be concerned that her child is slow, compared to other children.

For the child age 6 months and older who may be having difficulty learning

Ask the caregiver these questions:

Hearing

- Does your child turn his head to see someone behind him when the person speaks?
- Does your child show any reactions to strong or loud sounds?
- Does your child make a lot of different sounds (mama, papa, tata, dada)?

Seeing

- Does your child look at your eyes?
- Does your child follow a moving object with the head and eyes?
- Does your child recognize familiar people (like mother, father, brother, or sister)?
- Is your child able to grab an object?

If the caregiver does not know an answer, ask to find out. For example, she can make a noise behind the child's head. She can see if the child's head and eyes will follow a moving pencil. For the caregiver to check the child's hearing and seeing, the child should be calm and not very sick.

If any of the answers to these questions is "no," the child may have difficulties hearing or seeing. If special services for children are available in your area, refer the child for further assessment.

You can help the caregiver give the special attention her child may need. Demonstrate how she could respond more to her child's attempts to communicate. If the child smiles or makes a sound, have her smile or repeat the sound to see if her child responds. Ask what the child plays with, and help the mother identify other safe and clean household objects for the child to use.

The caregiver needs to spend more time and patience feeding the child who is developing slowly. She needs to provide more attention to the child through play and communication. With special attention, most children can learn, even if slowly.

A child who is slow to learn, however, may have special difficulties hearing or seeing. If you think this might be the case, and the child is six months or older, ask the caregiver the questions in the box.

If there are special educational services for the child, refer the child to them for assessment and care.

Whether or not the child can be referred, encourage the family to play and communicate often with the child. Children can learn from many sources: touch, taste, smell, and body movements. Discuss who in the family and community could help the child.

If the mother or father has to leave the child with someone else for a period of time:

- Identify at least one person who can care for the child regularly, and give the child love and attention.
- Get the child used to being with the new person gradually.
- Encourage the mother and father to spend time with the child when possible.

A child may also lose a parent from illness or another reason. Expect that, with good care, the child can recover from the loss of a parent. Children often go through a period of sadness if they lose or rarely see their mothers or fathers. However, with time they learn to love other people, and most can recover from their sadness. Help identify one special person who will give the child love and extra attention as soon as possible after a loss.

If it seems that the child is being treated harshly:

Recommend better ways of dealing with the child.

- Encourage the family to always look for opportunities to praise the child for good behaviour.
- Respect the child's feelings. Try to understand why the child is sad or angry.
- Give the child choices about what to do, instead of saying "don't".

Children make mistakes as they explore and try new things to do. They may look like they are misbehaving or are trying to annoy the busy adults around them. Their caregivers may believe punishing children is the best way to help them learn what is right and wrong. They may treat their children harshly.

While a caregiver plays and communicates with his child is a good time to demonstrate better ways of dealing with the child. Encourage the caregiver to see and praise his child for his good efforts. Help him interpret what the child might be seeing, thinking, and trying to do. If the child becomes upset, help the caregiver try to find out what is making the child upset. If the child takes something that is not his or in other ways misbehaves, help the caregiver find another, appropriate object to play with. Help distract the child with another activity.

When you are done counselling the caregiver, complete the **Checklist**. Tick [✓] the boxes to – indicate the advice you gave and the problems you discussed with the caregiver. See the example on the next page.

Discuss with your facilitator:

What do you know about Dawa and his caregiver, Miss Yangchen?

See the top of the checklist.

For what did the counsellor praise Miss Yangchen?

What advice did the counsellor give Miss Yangchen?

Checklist for Counselling on Care for Child Development

Date: 06 / 09 /2013 Facility: BHU / ORC / Hospital LIT ; BHW / HA / Nurse: Laxman Guring
 (Day / Month / Year)

Child's name: Dawa Age: 2 Years/ _____ Months / _____ Days Boy Girl

Caregiver's name: Rinzen Yangchen Relationship: Mother / Father / Other: _____

Address, Village: Shengana Mobile No. 17643214

1. Identify practices to support the child's development and counsel the caregiver

Look		Praise the caregiver if caregiver:	Advise the caregiver and solve problems if caregiver:
All children	1a. How does caregiver show her or she is aware of child's movements? <i>Looks at child</i>	<input checked="" type="checkbox"/> Moves towards and with child, and talks to or makes sounds with child.	<input type="checkbox"/> Does not move with child, or controls child's movements: Ask caregiver to copy child's movements, to follow child's lead
	1b. How does caregiver comfort the child and show love? <i>Tells child to stop crying (does not work)</i>	<input type="checkbox"/> Looks into child's eyes and talks softly to child, gently touches child or holds child closely.	<input checked="" type="checkbox"/> Is not able to comfort child, and child does not look to caregiver for comfort: Help caregiver look into child's eyes, gently talk to child and hold child.
	1c. How does caregiver correct the child? <i>Grabs object away from child scolds</i>	<input type="checkbox"/> Distracts child from unwanted actions with appropriate toy or activity.	<input checked="" type="checkbox"/> Scolds child: Help caregiver distract child from unwanted actions by giving alternative toy or activity.
Ask and listen		Praise the caregiver if caregiver:	And advise the caregiver and solve problems if caregiver:
Child age less than 6 months	2a. How do you play with your baby?	<input type="checkbox"/> Moves the baby's arms and legs, or gently strokes the baby. <input type="checkbox"/> Gets baby's attention with a shaker toy or other object.	<input type="checkbox"/> Does not play with baby: Discuss ways to help baby see, hear, feel, and move, appropriate for baby's age.
	2b. How do you talk to your baby?	<input type="checkbox"/> Looks into baby's eyes and talks softly to baby.	<input type="checkbox"/> Does not talk to baby: Ask caregiver to look into baby's eyes and talk to baby.
	2c. How do you get your baby to smile?	<input type="checkbox"/> Responds to baby's sounds and gestures to get baby to smile.	<input type="checkbox"/> Tries to force smile or is not responsive to baby: Ask caregiver make large gestures and cooing sounds; copy baby's sounds and gestures, and see baby's response.
Child age 6 months and older	3a. How do you play with your child? <i>She does not play with Dawa His Sister (5yrs) does</i>	<input type="checkbox"/> Plays word games or with toy objects, appropriate for age.	<input checked="" type="checkbox"/> Does not play with child: Ask caregiver to do play or communication activity, appropriate for age.
	3b. How do you talk to your child? <i>Talks about what to do / not do</i>	<input type="checkbox"/> Looks into child's eyes and talks softly to child, asks questions.	<input checked="" type="checkbox"/> Does not talk to child, or talks harshly to child: Give caregiver and child an activity to do together. Help caregiver interpret what child is doing and thinking, and see child respond and smile.
	3c. How do you get your child to smile? <i>Does not child smiles on his own</i>	<input type="checkbox"/> Draws smile out from child.	
	3d. How do you think your child is learning? <i>Misbehaves a lot but does not seem slow</i>	<input checked="" type="checkbox"/> Says the child is learning well.	<input type="checkbox"/> Says the child is slow to learn: Encourage more activity with the child, check hearing and seeing. Refer child with difficulties.

Date of next visit: _____

Purpose of visit: Immunization / Vitamin A / Deworming / Growth monitoring / sick



Role play exercise: Help to solve problems

The facilitator will divide the group into groups of three participants each. Set up a space with three chairs each, in order to do a role play. In the group, decide who will be the counsellor, the caregiver (mother or father), and the observer. For the child, give a doll or other object (e.g. folded towel) to the caregiver. The roles to play are:

Counsellor:

Welcome the caregiver and child. Ask the caregiver if she or he will have any problems playing and communicating with their child at home. Help the caregiver solve any problems that he or she might have.

Caregiver (mother or father):

The counsellor has recommended activities for you do with your child. However, it will be difficult for you to follow the advice for one of the reasons below. Select one of the problems to discuss with the counsellor.

1. I don't have time. I have to walk a long distance – one hour to the river and one hour back – to get water in the morning. By the time I return I have many household chores to do.
2. We don't have any toys at home. We need the cups and plates and other items for ourselves.
3. My child does not like to play. He just throws his things on the ground and is very annoying.
4. My child is very slow. She does not seem to be learning like the other children.

Observer:

Observe the discussion between the counsellor and the caregiver. At the end of the role play, provide feedback:

1. How welcoming was the counsellor?
2. How well did the counsellor show concern for the caregiver's problem? What else could the counsellor have done?
3. How well did the counsellor help the caregiver find a solution? Was it a good solution for the family?

Change roles three times, so that each participant performs each role once. The caregiver should select a different problem from the list of four problems.

Caregiver and child follow-up

You can help caregivers try new activities by asking to see them again. Knowing that they will see you again helps them start the new activities right away. When they return, they will be proud to show you what they have learned to do and how their children enjoy the activities with them.

Ask the caregiver to bring the child back for follow-up in one week, if you think that they need this additional support. The follow-up visit is most important when caregivers are just learning to interact well with their children.

On the bottom of the checklist, write the date of the planned follow-up visit as a reminder (See the sample **Checklist** for Dawa, on page 42.) Fill out the follow up checklist.sample page 43 as for example of Dawa.

Section 1 Problem areas fill in the problems as observed in asking the questions on the checklist. The problems related to interactions between caregiver and child refer to sections 1a, 1b, 1c of the checklist for counselling. After mentioning the problem number write in brief the problem. Fill in advise given if space is less this maybe written in the remarks column.

In the next visit once again use the counselling checklist and ask questions to assess the status of caregiver child's interactions. During the follow-up visit, ask the caregiver to show you what they have been doing with their child at home. Praise them for their efforts. Advise them on additional activities to encourage their interest. Make short notes in the advise and follow up columns

Finally, help the caregiver see how the child enjoys doing the activities with him or her.

CARE FOR CHILD DEVELOPMENT – FOLLOW UP CHECKLIST

Date	06.09.13					
Problems						
Caregiver child interaction 1a; 1b; 1c; 2c; 3c;	1b, 1c, 3c					
Learning opportunities 2a; 2b; 3a; 3b;	3a, 3b					
S=Slow learner; 3d						
Caregiver Baby sitter a. Child (<18y) / b. Elder						
From MCH H=Height for age; W=weight for age; I = Ill child						
Other (please explain briefly)						
Advise						
Play a. Play activity b. Home- made toys c. Other	a b					
Communicate Talk / Stories /Songs Other	talk					
Other (explain)						
Follow up						
Homemade Toys at home Yes/No						
Parents increase time Talking, stories, songs Yes/ No						
Parents do play activities with child- draw, count, name, read, draw Yes/No						
Baby sitter Adult Yes / No						
Oriented on C4CD Yes / No						
Improved Height for age/ weight for age / illness (Yes / No)						
Remarks						



***Video exercise:
Identify and help solve problems***

This video shows a mother and her child. Together the group will complete the **Checklist for Counselling on Care for Child Development** for the caregiver and child after the video.

For discussion after the video:

1. What praise could you give the mother?
2. What advice could you give? Select a play and communication activity for the caregiver to give to the child.
3. How could you help the mother solve problems in caring for her child?
4. When would you see the caregiver and child for follow-up?
5. What would you look for during follow-up?

For additional discussion: This caregiver and child have a very common difficulty in connecting.

1. What did you notice about how the caregiver and child interact with each other?
2. How does the child respond to the caregiver's movements?
3. How does the caregiver respond to the child's movements?
4. What difficulties might this create for the survival of a child?
5. What difficulties might this create for helping the child learn?
6. How might the recommended play and communication activities help this child?

SAMPLES OF HOME MADE TOYS FOR DIFFERENT AGE GROUPS



Thesetoyswereprepared for the Training of “Trainers on C4CD” held in Paro on October 7 to 10, 2013The participants led by Ms DekiPem ,Lecturer, Royal Institute of Health Sciences , Thimphu, Bhutan

ADAPTED from the original

WHO-UNICEF Care for Child Development Package 2013

UNICEF Bhutan and Ministry of Health, Government of Bhutan