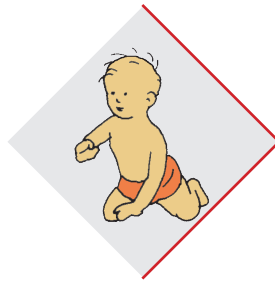
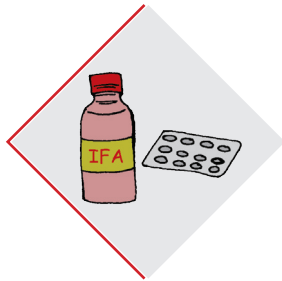




Training Capsule Handouts

for
Training Frontline Health and ICDS Workers in Uttar Pradesh



For the Participant

The training capsule captures the essence of the government program for ensuring that children are given the regular dose of iron supplementation.

The capsule also focuses on building health worker counseling skills to ensure compliance among care givers and family members.

The handouts given here will help the participant to keep the required information. Some exercises that the facilitator will use during the training are also given here. Please ensure that you read these handouts and in case of any queries, raise them with your facilitator.

Session Plan

Session	Time	Subject	Training Methodology	Facilitator Preparation
Day one				
I	15 mins	Welcome and introduction to the session	Presentation, exercise for introduction and ice-breaker	Copies and presentation of workshop objectives
II	15 mins	Review of basic concepts of child anemia	Presentation, discussion	Questions for participants, tape flip chart on the wall for the discussion. Distribute copies of Handout 1 for participants.
III	20 mins	Obstacles to compliance in giving IFA syrup	Brainstorming and open discussion	Distribute Handout 2, statistics on compliance, chart on what can be done by the service providers to support care givers.
IV	30 mins	Counseling skills and checklist	Role play and discussion	Distribute Handout 3, checklist for counseling
V	30 mins	Practice Counseling skills	Role play and feedback	Distribute Handout 4, checklist for counseling skills and counseling areas.
VI	10 mins	Wrap up	Discussion	

HANDOUT I

Why is it Necessary to Control Anemia in Children?

Anemia in children can lead to:

- Poor development of the brain.
- Reduced learning capacity.
- Poor physical coordination and lethargy.
- Loss of appetite and tiredness.
- Reduced ability of immune system to fight diseases.

For the child to be healthy, it is therefore necessary to control anemia.

Causes of Anemia in 6-59 Months old Children

- If the mother is anemic, the new baby will be born with low iron stores which will be used up in only 2 months. Even if the child is born with normal iron stores, their stores will be used up within 6 months and must be replenished. After the child is 6 months, he/she will require extra iron in amounts greater than available in the food a child is able to consume at that age.
- Inadequate intake of iron rich food. After 6 months, the child must be given extra nutrition and enough iron along with mother's milk. Foods like pulses and rice do not contain enough iron easily absorbed by the body.
- Occurrence of worms and malaria may further contribute to iron- deficiency, which causes anemia.

Actions to Prevent and Control Anemia in Children

In 6-59 months old children

1. Continue to breastfeed the child up to two years along with proper complementary nutrition.
2. Give IFA syrup twice weekly (RI days), one ml. (one dropper filled to the top) after at least one serving (*katori*) food. The intention is to administer 100 doses in one year.
3. The de-worming dose should be given for the first time at 12 months of age and every six months after until 59 months. (12-23 months 200 mg – ½ tablet of albendazole – 1 in 6 months; (if mebendazole 1 tab x 3 days). 24-59 months – 1 tablet – albendazole; (if mebendazole 1 tablet x twice daily x 3 days).
4. Nutrition counseling to be given to care givers.

- Continue to breastfeed. A nutritional meal (80 grams of protein – for children 36-59 months and 15 grams. of protein for children 6-59 months) is provided at the Anganwadi Centre every day.
- Half katori of semisolid food for children 6-8 months, three katori solid food for children 9-11 months and four katori solid food for children aged 12-23 months, daily.
- Give solid and semi-solid foods such as grains or dal and/or vegetables mixed with one spoon of ghee or oil, three or four times a day along with mother's milk.
- Avoid bottle feeding.
- Once the child is 24 months, increase the diet, include all vegetables in the diet in non-mashed form.

While feeding the child, remember:

- Wash hands with soap and water before feeding the child, after defecation. In addition, also make the child wash his/her hands with soap and water before feeding and after defecation.
 - Keep the child on your lap when you are feeding. Use a spoon, if possible, and continue talking to the your child or tell him stories while feeding.
5. Protect the child from malaria. Advise caregiver to get any fever investigated, while ensuring that mosquito breeding does not take place by keeping surrounding area clean and free of any standing water. Sleep with bed nets to prevent mosquito bites.

Handout 2

Anemia: Deficiency of Iron

Deficiency of iron is a primary cause of anemia. Iron is found in almost all foods. Dietary iron intake is therefore related to energy intake. Iron requirements are particularly high during pregnancy, adolescence and childhood.

Iron requirements are highest in the second and third trimesters of pregnancy. This need is met by utilizing the maternal stores accumulated prior to conception and during the first trimester owing to the cessation of menstruation, as well as a marked increase in absorption during the second and third trimesters.

Requirements are high in young children, particularly in those aged 6-23 months. Once birth iron reserves are exhausted at about six months, infants depend on weaning foods for iron because the iron content of human milk is not adequate to meet the increased requirements during the period of accelerated growth below two years.

State	Parameter	Total	Urban	Rural
Uttar Pradesh				
	Anemia in children (6-35 months)	85%	82.5%	85.7%
	Pregnant women (15-49 years)	51%	51.3%	51.7%

Unfortunately, traditional complementary foods in UP are poor sources of bio-available iron. Children aged 6-23 months are therefore frequently iron deficient.

The objective of the Maternal and Child Anemia Control Strategy is to reduce anemia in pregnant mothers and young children up to 59 months. The health and ICDS sectors will participate in the implementation of the project with defined roles and responsibilities of the two sectors.

Tasks to be performed by ANM – For Pregnant Mothers

- Register all pregnant women for antenatal check-up (ANC) according to the list provided by ICDS and ASHA. She will distribute Mother-Child-Card to the pregnant women and keep the counter foil for her own record.
- She will provide ANC and other services such as immunization and health check ups to pregnant women and would make the stock of IFA tablets available to AWW/ASHA. The AWW and ASHA will ensure distribution of IFA tablets to all pregnant women.
- She will provide one dose of de-worming medicine to pregnant women after 4 months of pregnancy (one tablet of albendazole once and 6 tablets of mebendazole - one tablet to be taken twice a day for 3 days), and will enter the same in the register.

- She will follow up on the distribution and consumption of IFA tablets and will address any complains/problems regarding the side effects after consumption.
- It will be the responsibility of the ANM to enter the total stock and distribution details of IFA tablets and Melbendazole in the store register.
- She will provide information about distribution and consumption of IFA tablets In her monthly report, based on the information she receives from AWWs and ASHAs.
- During Sector Meetings the work of collating distributed IFA tablets will be done with the help of AWWs and ASHAs.

Tasks to be performed by ANM – For Children

- ANM will register all children 6-59 months according to the list provided by ICDS. She will issue them Mother-Child cards and keep the counter foil for her own record.
- She will provide health services to all children (regular immunization, vitamin-A, IFA, de-worming medicines, etc), and make IFA syrup bottles available to AWW. AWW and ASHA will ensure distribution and consumption of IFA syrup at their own level.
- ANM will give de-worming medicine to the eligible children every six months from when they are aged 12 months to 59 months. To ensure continuity, the state government has made a provision to provide it with vitamin-A on Child Health and Nutrition Day.
- ANM will follow up on distribution and consumption of IFA syrup. She will also discuss and resolve the problems relating to the side effects of taking IFA syrup.
- It will be the responsibility of the ANM to enter the total stock of IFA syrup, received from the Primary Health Centre, in the store register.
- After 50% stock of the IFA syrup bottles are distributed, the ANM will prepare a report and send it to the Medical Officer in charge in order to ensure continuity in supply of these items.
- The ANM, in her monthly report, will provide information about distribution and consumption of IFA syrup. This will be done by analyzing the information received from AWW and ASHA.
- During the Sector Meeting, the work of collating distributed IFA Syrup bottles will be done with the help of AWW.

Tasks to be performed by ASHA - For Pregnant Mothers

- ASHA will fill all relevant information in Village Health Register and make sure all information is current by updating the register regularly.
- She will enter the names of all pregnant women in this register and will help them in getting ANC services through ANM.
- She will keep the counter foils of Mother-Child cards issued by the ANM to ensure continuous monitoring of ANC services.
- ASHA will ensure two home visits within one week of delivery and will see to it that breastfeeding is initiated within two hours of delivery.
- She will provide counseling to mothers on correct methods of taking IFA tablets, eating an iron-rich diet and the possible side effects of consuming IFA tablets.
- She will help the AWW provide food supplements and counseling on gaining at least 10 – 12 kg. of weight during pregnancy.
- AWW will help ASHA to prepare a list of pregnant women who have missed ANC appointments.

In the sector meeting, the data of this register will be tallied with the data from AWW register in order to monitor the distribution and consumption of IFA tablets.

Handout 3

Script for Role Play

For ANM/ASHA at the PHC, Sub-Center or home visit by the ASHA

Topic: Counseling mothers for IFA syrup, breastfeeding, nutritious food, malaria and de-worming

Characters: ANM/ ASHA

Setting: PHC or Sub-Center where the ANM and/or ASHA are present when Rani (mother/ caregiver) enters

ANM/ASHA (Greet)	Welcome Rani! How nice to see you! And you have brought Sonu along with you? Do please sit down here. Welcome the mother and make her comfortable ‘How are you?’ Ask about family and general family matters etc. Ah! and this is your child? His name is Sonu, is it not? How old is he now?
Rani:	“Yes Nurse behenji, this is my son Sonu. He is 18 months now”
ANM/ASHA: (praise, ask, listen)	Good. Sonu looks like a healthy child, You are still breastfeeding him?
Rani:	Yes. I still breastfeed him. But, do you think Sonu is weak? I came to show him because I thought he was feeling quite restless and not as energetic in playing as he was earlier
ANM/ASHA: (praise, ask and listen)	Firstly Rani, it is good that you are still breastfeeding him. Mother’s milk is the best food for a child. But, at this age, it may not be sufficient for all his requirements. How many times in a day do you breastfeed him?
Rani:	Can’t say exactly. But mostly four or five times a day.
ANM/ASHA (praise)	It is good. Whenever Sonu asks, you should give him your milk.
ANM/ASHA (ask and listen)	Now tell me, do you give Sonu the IFA drops?
Rani:	No. I do not. Should I be giving him? And why?
ANM/ASHA: (Advice)	Sonu needs iron for physical and mental growth. Till Sonu was six months, he was getting iron from the body, but now he needs IFA syrup since his diet is not enough to give him iron as much as he needs.
Rani:	Oh! Why is that? And what will happen if I do not give him iron?
ANM/ASHA (ask, listen)	Rani, you said that Sonu is looking weak because he does not play as actively as he did earlier?
Rani	Yes, yes, I did say that.

ANM/ASHA (Advice)	When the body does not get enough iron, it will not make blood properly and so the child will feel tired and not be able to play as he will not have energy. Iron also helps in developing a child's brain so that he/she can perform better in studies.
Rani:	Please tell me what I can do?
ANM/ASHA (Advice, check)	It is very simple Rani. Every year you need to give him 100 doses of one ml. iron syrup. Here is a bottle of 100 ml. iron syrup. You need to give him one dropper of one ml. after food. Do not give it on an empty stomach. What do you think? Can you do it?
Rani:	If it is really good for Sonu's physical and mental health, then I will certainly do it. But, in case he vomits and is not able to digest it, what should I do?
ANM/ASHA: (Advice)	The child may vomit if you have given the syrup on an empty stomach. Always ensure that you are giving the IFA syrup measuring one ml. with the dropper here, only after his meals.
Rani:	OK. I will give him the syrup with the dropper after his food everyday.
ANM/ASHA (Advice)	Very good. Rani, you will give him the syrup only two days in a week. These two days should be fixed by you and easy to remember. For example, you can give it on Wednesdays and Saturdays.
Rani:	Oh! OK. I will remember and give him on those two days. But what should I feed him now?
ANM/ASHA (Counsel and repeat message)	Give him four <i>katori</i> solid foods in the entire day like panjeeri, dal/vegetables. And remember what I have said, give him one ml. iron syrup after he has taken his food.
ANM/ASHA (Counsel)	Usually you would find that his stool has turned black after taking iron syrup. But, this is normal and only shows that the syrup is effective. Continue giving him nutritious food every day.
Rani:	Yes, I will give Sonu the syrup only after he has had a full meal. But will it affect his health if his stools turn black?
ANM/ASHA (Explain, reassure and check understanding)	No Rani, It will not and this is only a sign that the iron is being absorbed in the body as required and remaining iron is given out. What else will you take care of when you give him the syrup?
Rani	Behenji, you said that he should have his syrup only after having solid food, and on a full stomach.
ANM/ASHA: (Praise, advice)	That is very good. You must also remember that when you have started feeding Sonu, it is possible that he may have worms. If that happens, worms may also contribute to taking away blood from his body.
Rani:	Oh!! What should I do then?
ANM/ASHA: (Advice, ask, listen)	You must give Sonu a de-worming dose every six months. Has he been given one already?
Rani:	Yes, he was given one half tablet when he became one year old.
ANM/ASHA: (Praise, advise)	That is good. He must have another tablet, now that he is 18 months. Remember to ask ASHA behenji for the de-worming dose after every six months.

ANM/ASHA (Advice)	Now I will show you a picture card which shows the types of food Sonu should take (Tell her about locally available foods).
Rani:	Should he be given this food when he is sick?
ANM/ASHA: (Advice)	Yes You must continue feeding Sonu while he is sick. You can also add sugar or salt to make the food tastier. Along with this, you should also continue breastfeeding. And remember, you must always wash your hands before feeding the child or serving food.
ANM/ASHA: (Advice, ask, listen)	If Sonu has fever at any time, it may be malaria. So you must consult a doctor immediately when he has fever. I am sure you take good care of Sonu's health. Do you want to ask me anything else?
Rani:	During fever, should I give food and iron syrup?.
ANM/ASHA (Advice, ask, listen)	You should continue feeding, but, while Sonu has fever, do not give IFA syrup. Start again when his fever is gone. Can you tell me what you would give when Sonu has fever?
Rani:	Yes, I will continue feeding and breastfeeding but will stop IFA syrup for that period. Can I contact you when Sonu has problems?
ANM/ASHA (Praise)	You are taking good care of your child Rani. Of course you can contact me or Behenji. That is a part of our job.

Counseling Mothers

- Ask and listen.
- Praise her.
- Give advice.
- Ensure that mother has developed understanding of the actions she can take to protect her child from anemia

Ask and Listen

- Ask your questions in clear and simple language. Ensure that the mother understands what you are saying.
- Try to gain a clear understanding of how she is taking care of her child.
- Through this you will know about a mother's optimal health behavior and also about behaviors/methods that need to be changed.

Praise Her

- It is possible that the mother is following some good practices, such as breastfeeding.
- Praise the mother for her good practices.
- Your praise should be genuine only for good practices that she is following.

Advise Her

- Advice should be given on a case-by-case basis.
- Language should be clear and simple.
- Illustrations and other media should be used appropriately.
- While giving advice regarding inappropriate practices, ensure that you do not use words or language that may hurt the mother's feelings.

Confirm the Mother Understands the Information Given to Her

- Ask the mother what she has understood and what more needs to be explained.
- Ask questions that require detailed responses and not 'yes' or 'no' answers.
- Praise the mother for her good understanding.

Assessment of Understanding

- Ask the mother what she understands of the information given and ask what more needs to be explained.
- Ask questions that require detailed responses and not just 'yes' or 'no' answers.
- Ask questions that start with words like why, what, where, when, how many, how much and how.
- Pause after asking the question, giving the mother time to think and formulate her answer.
- Praise the mother for her good understanding.

Assessment of understanding

Good Questions	Bad Questions
<ul style="list-style-type: none">● How will you prepare ORS solution?● How many times do you breastfeed your child?● How many <i>katoris</i> (bowls) of food do you give your child?● Why is it necessary to wash hands before feeding the child?	<ul style="list-style-type: none">● Do you remember how to make the ORS solution?● Do you breastfeed your child?● Do you know the method of feeding the child?● Do you remember to wash your hands before feeding your child?

Information and Messages for Children 6-59 Months

Children 6 months and older are most vulnerable to malnutrition and require a package of services to prevent malnutrition.

1. Continue Breastfeeding: Mothers must continue breastfeeding the child as often as the child wants. Mothers should not discontinue breastfeeding if she is sick or the child is sick.

Up to 6 Months of Age

- Breastfeed as often as the child wants, day and night, at least 8 times in 24 hours.
- Do not give any other food or fluids not even water.

Remember:

- Continue breastfeeding if the child is sick.

2. Complementary Feeding: A child needs energy much more than the proportion to its weight as compared to adults. So besides breast milk, after six months, a child will need extra food. Also, ghee or oil can be used to make this food rich in energy. Small children require extra meals because they have smaller stomachs than adults, letting them eat less. For this reason children should increased meals with higher nutrition content.

A mother should actively feed her child to ensure that the child consumes all the food offered. It is going to take some extra efforts by the mother to make sure that the child consumes all of its food. Before feeding the child, the mother must wash hands with soap and water. Quantity and foods are depicted in the boxes:

Children aged 6-8 months must have at least three half katori of semi-solid food during the day.

6 Months up to 8 Months

(BF+3 half katori full semisolid food)

Breastfeed as often as the child wants.

- Give at least one katori serving* at a time
 - Mashed roti/rice/bread/biscuit mixed in sweetened undiluted milk OR
 - Mashed roti/rice/bread mixed in thick dal with added ghee/oil or khichri with added oil/ghee. Add cooked vegetables also in the serving
- OR
 - Sevian/dalia/halwa/kheer prepared in milk or any cereal porridge cooked in milk OR
 - Mashed boiled/fried potatoes

* 3 times per day if breastfed; 4 times if not breastfed

Remember:

- Wash your own and child's hands with soap and water every time before feeding
- Keep the child in you lap and feed with your own hands/ spoon

9 Months up to 11 Months

(BF+3 full katori full semisolid food)

Breastfeed as often as the child wants.

- Give at least one katori serving* at a time
 - Mashed roti/rice/bread/biscuit mixed in sweetened undiluted milk OR
 - Mashed roti/rice/bread mixed in thick dal with added ghee/oil or kichri with added oil/ghee. Add cooked vegetables also in the servings
- OR
 - Serian/dal/halwa/kheer prepared in milk or any cereal porridge cooked in milk OR
 - Mashed boiled/fried potatoes

* 3 times per day if breastfed; 5 times if not breastfed

Remember:

- Wash your own and child's hands with soap and water every time before feeding
- Keep the child in you lap and feed with your own hands/ spoon

Up to 6 Months of Age

- Breastfeed as often as the child wants, day and night, at least 8 times in 24 hours
- Do not give any other food or fluids not even water

Remember:

- Continue breastfeeding if the child is sick

Children 9-11 months should have at least three katori of energy rich food during the day. For children above one year the mother or caregiver should ensure that the child finishes all of its food, which should be at least four full katori of energy rich food daily.

3. Iron Syrup: Child should get one ml. of IFA syrup (to be taken from bottle using attached one ml. dropper). The syrup should only be given to the child after it has been fed. The IFA supplement must be given on two fixed days of the week (Wednesday and Saturday preferably or as suitable to mother/family). One member of the family should be responsible for IFA syrup administration. Overdose should be avoided. IFA syrup should be stored at a cool and dry place and away from the reach of children.

4. De-worming Medicine: Given after their first birthday. One course consists of three tablets (one tablet daily for three days) of mebendazole. This should be given every six months until the child turns five.

5. Protection from Fever/Malaria: Children should be protected from malaria by advising them to sleep under mosquito netting and seeing a doctor when they have fever. Surrounding areas must be kept clean and free of standing water to avoid mosquito breeding.

12 Months up to 2 Years

(BF+4 full katori full solid food)

- Breastfeed as often as the child wants,
- Offer food from the family pot,
- Give at least 1 1/2 katori serving* at a time of:
 - Mashed roti/rice/bread mixed in thick dal with added ghee/oil or khichri with added oil/ghee. Add cooked vegetables also in the servings OR
 - Mashed roti/rice /bread/biscuit mixed in sweetened undiluted milk OR
 - Sevian/dalia/halwa/kheer prepared in milk or any cereal porridge cooked in milk OR
 - Mashed boiled/fried potatoes

* 4-5 times per day.

Remember:

- Wash your child's hands with soap and water every time before feeding.
- Sit by the side of child and help him to finish the serving.

Handout 4

Script for Role Play (A)

For ANM/ASHA at the PHC, Sub-Center or home visit by the ASHA

Topic: Counseling mothers on IFA syrup, breastfeeding, nutritious food, malaria and deworming

Characters: ANM/ASHA, mother-in-law, mother, (Saroj), Nita (6 month old baby girl of Saroj)

Setting: PHC or Sub-Center where the ANM and/or ASHA are present when Saroj and her mother-in-law enter with the baby.

ANM/ASHA (Greet)	Namaskar Ammaji, Saroj! Welcome the mother and her family members and make them comfortable 'How are you?' Ask about family and general family matters etc. Ah and this is your child?
Saroj:	"Yes Nurse behenji, this is my daughter Nita. She is now 6 months old."
ANM/ASHA: (praise, ask, listen)	"Very pretty daughter you have". Take her pulse, look for signs of health. "Good, Nita looks like a healthy child, are you breastfeeding her?"
Mother-in-law	"Yes Behenji, but I have told her that she now needs to start giving the baby food."
Saroj:	"Behenji, you had told me that I should give only breast milk, so I wanted to ask your advice"
ANM/ASHA: (praise, advice)	"Firstly Saroj, it is good that you are breastfeeding her. Mother's milk is the best food for a child. Ammaji is right though and now Nita needs to be given soft food." Show her the chart of the foods that the child must be started with, explain the foods that must be given.
Saroj:	OK, I will remember this.
ANM/ASHA (advice)	Saroj, you must now also start giving Nita iron syrup.
Ammaji	Nita is not sick Behenji
ANM/ASHA: (praise, advice)	God forbid, Saroj and you have been looking after her well Ammaji, but this syrup is to be given to all children for 100 days every year till they turn 5 years.
Saroj	But why do I need to give it if Nita is not sick?
ANM/ASHA: (advice)	Explain why the syrup is given
Saroj	Oh in that case please tell me how I should give it
ANM/ASHA: (advice)	It is very simple. Here is the bottle that you can use for the 100 days. Explain to her how the dose is to be given.
ANM/ASHA: (ask, listen)	Have you understood Saroj, will you repeat for me?

Saroj	I will give her the iron syrup after her food, twice a week. I will give only one dropper full of the syrup.
ANM/ASHA: (praise, advice)	That is good. And if her stools turn black, you must not worry. It is a normal sign and shows that her body is taking in the iron that we are giving the baby. If you have any other problems, you can always ask me.
Saroj	OK Behenji
ANM/ASHA: (advice)	And remember Saroj, you must always wash your hands before preparing food, serving and feeding the baby. Show her the chart on feeding the young child and explain.
Ammaji	I will make sure that she does that Behenji, but Saroj is careful always about washing her hands.
ANM/ASHA: (praise, advice)	That is very good Ammaji, I am sure you have been giving her good advise. Have you also told Saroj about how she must take care for fever?
Saroj:	What is that Behenji?
ANM/ASHA: (advice)	Saroj, if you feel that Nita has fever, at any time and you have mosquitoes around your house, you must get her tested for malaria.
Saroj:	I will do that Behenji but during fever also should I give food and iron syrup?.
ANM/ASHA (advise, ask, listen)	You should continue feeding but while Nita has fever do not give IFA syrup. Start again when her fever is gone. Can you tell me what would you give when Nita has fever
Saroj:	Yes, I will continue feeding and breastfeeding but will stop IFA syrup for that period. Can I ask you more when Nita develops problems?
ANM/ASHA (Praise)	You are taking good care Nita Saroj and Ammaji is helping you well. Of course you can ask me, that is my job.

Script for Role Play (B)

For ANM/ASHA at the PHC, Sub-Center or home visit by the ASHA

Topic: Counselling mothers for IFA syrup, breastfeeding, nutritious food, malaria and de-worming

Characters: ANM/ ASHA, Mother (Rekha), 14 month old baby

Setting: Rekha's home

ANM/ASHA (Greet)	Hello Rekha! Can we come in?
Rekha :	Yes , yes Behenji, please come in.
ANM/ASHA (Ask, listen)	Rekha, you are looking worried, is everything all right?
Rekha	Yes Behenji, everything is all right.
ANM/ASHA (ask, listen)	Where is your baby Rekha, I don't see him around? Is he sleeping

Rekha	Yes, Behenji, but he will get up any time now. What can I do? He is looking so tired all the time. I think he plays so much that he gets tired.
ANM/ASHA (ask)	Can I look at him Rekha?
Rekha	Yes Behenji, come in, he is sleeping in this room.
ANM/ASHA (Check, ask, listen)	Let me also look at the iron syrup bottle that I have given you Rekha. Are you giving the iron syrup to him regularly?
Rekha	No Behenji, he has been vomiting every time I give him the medicine.
ANM/ASHA (Check, listen)	Is that so Rekha? Tell me how you give it to him?
Rekha	Oh, I give him as soon as I finish my morning work, otherwise I will forget.
ANM/ASHA (Check, listen)	And how many times are you giving it Rekha?
Rekha	I told you Behenji, sometimes I forget, so I give him the dose that I have forgotten with the one he is supposed to have.
ANM/ASHA (Ask, listen)	And what are you feeding him?
Rekha	I am breastfeeding him as you have told me Behenji. Sometimes I give him sooji halwa with badam as he will then get the energy he needs
ANM/ASHA (Ask, advice, listen)	Rekha, did you not come for the film that we had shown at the Anganwadi about how to feed a young child? Remember Rekha, Rahul is still small and needs to have food that his system can digest easily. (Show the chart with the foods that the child should be given and explain)
Rekha	Oh my God! I have been so wrong. Is that why he is so restless?
ANM/ASHA (advice, check)	Rekha, you must also remember that you must give the IFA syrup to Rahul, only after he has had a full meal. One dropper which is one ml. and twice a week without fail. If you forget, do not give two doses, but give the regular dose and continue as you have scheduled. Now tell me how you will give the Iron syrup?
Rekha	I will give him one dropper full on Wednesdays and Saturdays after he has had a full meal. And if I forget, I will not give him two dropper full, but give him the next dose on the day that I have set. Will he become all right Behenji?
ANM/ASHA (advice)	He will Rekha, but remember before cooking food, serving it or feeding Rahul, you must wash your hands with soap and water.
Rekha	I will do that Behenji
ANM/ASHA (Ask, listen)	Have you given him his de-worming dose when he became 12 months Rekha?
Rekha	Yes Behenji, I had taken him to the Sub-Center then.

ANM/ASHA (Praise, advice, check)	Very good Rekha. When children start eating, there is a possibility of worms getting in their system. When this happens, it may cause anemia in children. So you must remember to give him his de-worming dose now after every six months till he is five years old. Will you do that?
Rekha	Yes Behenji, so now I must give it to him when he is 18 months, that is after another four months.
ANM/ASHA (Praise, advice)	You are a good mother Rekha. That is right, you now need to give him when he is 18 months. Also remember that if he has fever at any time, you must take him to the doctor and get him checked for Malaria. What precautions do you take for Malaria?
Rekha	I ensure that we do not have any water collecting around the house and in the evenings, I put full sleeves clothes for him. I also use neem smoke in the evening so that we do not get mosquitoes
ANM/ASHA (Praise, advice)	Very good Rekha. You seem to know everything. Now take care and do not be irregular in giving him his IFA syrup. You will see that he becomes very active soon.
Rekha	Thank you Behenji, I will take care.