



TRAINING GUIDE

FOR TRAINING
COMMUNITY-BASED CHILD
GROWTH PROMOTERS

December 2005

Acknowledgements:

This set of training materials (the training of trainer's guide and the training curriculum for the growth promoters) is the product of many people's work. The set has been field tested, used in program training and modified to its current content. The Ministry of Health, USAID's BASICS II and UPHOLD Projects and The Manoff Group have been the principal developers and authors of the materials and the program focused on helping families and communities keep their young children growing and healthy.

The team that has written the training materials thanks the many health workers, consultants and trainers who provided comments and helped refine the materials to make them easier to use and more effective.

It is expected the materials will contribute to the set of tools needed to move forward the implementation of the MOH's *Village Health Team* concept

Funds for printing of these materials are provided by USAID through UPHOLD.

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INTRODUCTION

This guide has been prepared for the training team who will be responsible for training Growth Promoters to promote child growth and health in their communities.

The guide offers a training methodology that will facilitate your work in preparing the Promoters for the work they will carry out. This methodology will help them develop the skills required for their very important mission. The training should be carefully planned, because the task of preparing the promoters to carry out their work is very delicate and requires talent and creativity; in addition, it must be original and adjusted to the needs of the participants.

GENERAL GUIDELINES

The following are general guidelines that will assist you in ensuring maximum training effectiveness:

- Keep in mind that you should apply all the guidelines in a group environment using discussion as a learning tool.
- Avoid giving long speeches with too much theory and too few learning activities.
- Discuss the training content with your work colleagues before implementing the training with the Promoters. This practice of previous consultation will allow you to make better decisions.
- Differences of opinion that arise during the training should be taken as an opportunity to dig further into the issue and not as a way to create differences among persons. In the discussion process, the questions that are put forward may allow seeing the situation under review from new angles.
- Answers to the questions raised can stimulate fresh discussion and lead to new conclusions. You as facilitator can raise other questions to dig deeper into the subject.

The guide includes exercises for the development of each topic, which are structured as follows:

- ✓ Subject
- ✓ Objectives
- ✓ Duration
- ✓ Methodology
- ✓ Materials
- ✓ Content

DESIGN AND PREPARATION OF THE TRAINING PLAN

You and your colleagues can design and prepare the training activities for the Promoters. It is suggested that you organize these activities in a training plan in which you specify dates, persons in charge, places, resources and the preparations for the Promoters' training events. The training plan should contain the different TRAINING ACTIVITIES, including the INITIAL TRAINING PROGRAM.

TRAINING ACTIVITIES

There are three types of training activities to be planned:

1. Initial training
2. Training during monthly meetings with the Promoters in the early months and then quarterly
3. Training during supervision visits to the Promoters

1. INITIAL TRAINING (Exercises start on page 11)

Duration:	Five and a half to six days (approximately 44-48 working hours)
Purpose:	To help Promoters develop the basic skills and attitudes for the implementation of growth promotion in the community.
Contents:	What is growth promotion in the community? Responsibilities of the Promoter Creating and Updating the Community Map Carrying out the Community Census Preparing the Register of Children Under Two Years of Age Organizing the Monthly Session Filling in a Child's Health Card Weighing Children Under 2 Years of Age Identifying a Child's Next Expected Minimum Weight Determining Whether Each Child Has Gained an Adequate Amount of Weight Using the Expected Minimum Weight Recording a child's weight in the register Drawing a child's growth curve Using a child's growth curve to determine whether a child has gained an adequate amount of weight Checking whether a child is due or overdue for immunization Choosing Which Counseling Card to Use Using the Counseling Cards Making a Referral Conducting the Monthly Session Making a home visit Meeting Monthly with the Health Center Staff/Supervisors Conducting Community Meetings
Description:	This five-and-a-half to six day course will help Promoters master the information and skills needed to carry out the daily responsibilities of Promoting Child Growth and Health in their communities.

2. TRAINING DURING MEETINGS WITH THE PROMOTERS

Duration:	Half a day to one day
Purposes:	- Evaluate the development of the growth promotion in each community

- Offer support to the Promoters
- Help Promoters solve technical and logistical problems
- Strengthen the skills and the attitudes developed in the initial training
- Discuss further the subject of monthly growth promotion meetings with mothers/caregivers and children
- Strengthen skills in how to follow-up on the agreements made by the mothers of children with growth problems

- Possible topics:
- How to weigh a child
 - How to do home visits
 - How to conduct a community meeting
 - How to draw the growth curve
 - How to interpret the growth trend
 - How to solve problems in the program
 - How to use the growth promotion counseling cards
 - How to make a referral-
 - Breastfeeding, e.g. positioning and attachment during breastfeeding
 - Complementary feeding

Health workers/supervisors should hold a meeting with Promoters at least once every 3 months, more frequently if possible. The first meeting should be held after Growth Promoters have conducted the first ‘Grow Healthy’ session. The meeting will last half a day to one day and may take place in the community. The health workers/supervisors should adjust the agenda for this meeting according to the needs they have identified during the supervision visits that they have made to the Promoters during the month. They may also use feedback from the mothers who have been referred by the Promoters to the Health Center to help them design the meeting. The agenda should include issues surrounding the supervision, monitoring, and training of Promoters and should ensure that they are exposed to new learning experiences, which have been previously structured by the trainers (local health team). Health workers/supervisors should give the Promoters the chance to air any doubts arising from their practice of growth promotion in the community.

3. TRAINING DURING SUPERVISION VISITS TO THE PROMOTERS

At least once in every thirty-day period, particularly in the first few months, the Promoters should receive a supervision visit from one or more supervisors. The visitors will not only supervise the technical aspects related to growth promotion, but will also offer information and will develop learning experiences for the group of Promoters in each community.

Duration: One to three hours.

- Purposes:
- To verify, at the site itself, the conditions and circumstances under which growth promotion is being carried out;
 - To identify problems and seek solutions with the Promoters themselves;
 - To evaluate the application of skills learned in the initial training and at the monthly meetings;
 - To explore further into the subjects deserving greater attention from the health workers, such as how the Promoters are carrying out meetings with the community, with the authorities, and with mothers and children, and how the Promoters are monitoring/following up on agreements made by the mothers.

- Possible topics:
- Up-dating the community map
 - Filling in the Growth Promotion Register correctly
 - Weighing a child correctly
 - Recording the child’s weight
 - Drawing the growth curve

- Interpreting the growth pattern correctly
- Using the Counseling Cards
- Holding community meetings to discuss how the children are growing
- Referral of a sick child
- Issues arising from the monthly sessions

INITIAL TRAINING PROGRAM FOR GROWTH PROMOTERS

FIRST DAY

Introduction, methodology, expectations	1.5
Introduction of participants (ice-breakers)	
EXERCISE 1 What is growth promotion in the community? Responsibilities of the promoter	2
EXERCISE 2 Creating and updating the community map	2
EXERCISE 3 Carrying out the community census	2

SECOND DAY

EXERCISE 4 Preparing the Register of children under 2 years of age	3
EXERCISE 5 Organizing the monthly Grow Healthy sessions	2
EXERCISE 6 Filling in a child's health card	2

THIRD DAY

EXERCISE 7 Weighing children under 2 years of age	3
EXERCISE 8 Identifying a child's next expected minimum weight	2
EXERCISE 9 Recording a child's weight in the Register	1
EXERCISE 10 Using expected weight gain to determine whether a child has gained an adequate amount of weight	2

FOURTH DAY

EXERCISE 11 Drawing a child's growth curve	2
EXERCISE 12 Using a child's growth curve to determine whether the child has gained an adequate amount of weight	1
EXERCISE 13 Checking whether immunization is due or overdue	2
EXERCISE 14 Choosing which counseling card to use	2

FIFTH DAY

EXERCISE 15 Using the counseling cards	6
EXERCISE 16 Making a referral	1

SIXTH DAY

EXERCISE 17 Conducting the monthly growth promotion session	3
EXERCISE 18 Meeting monthly with health workers/supervisors	2

EXERCISE 19	Making a home visit	1
EXERCISE 20	Conducting community feedback meetings	1
EVALUATION		

DEVELOPMENT OF EACH TRAINING ACTIVITY

It is suggested that the trainers carry out one or more of the following activities in preparation for undertaking a training event, whether it be a course, a monthly meeting or a visit to the community. Trainers may wish to use the following steps to design and prepare for each training activity:

1. Meet with colleagues, fellow health workers, other partners such as NGOs.

Talk with them in general terms about the training that you have decided to carry out. Find out other CBGP trainers available to help carry out the training and their degree of enthusiasm, and try to define the following with them:

- Possible dates
- Time required for preparation
- Necessary materials
- Place
- Funds

2. Prepare the list of participants.

It is expected that by this time the selection of Promoters has already taken place in the communities where growth promotion will take place. Therefore, you and your colleagues will have a good idea of who the participants will be and what is the general situation in the community.

3. Review the learning objectives.

For this purpose, use this Guide and the Promoter's *Handbook*. Remember that the objectives should be measurable, observable, and realistic. The objectives have to be adjusted according to the following: time available for training, assignments and tasks to be assigned to the *Promoters*, the degree of enthusiasm of participants.

4. Discuss with other trainers the methodology to be used.

It is very important to decide ahead of time how you are going to train the Promoters and how many trainers there will be, because this helps ensure that the event will be consistent. By agreeing beforehand on the methodology, you can be sure that each intervention from the different trainers is consistent with the other interventions.

5. Decide on the training process.

The training process will consist of a series of training events. The initial training will be somewhat longer than the rest, because it will lay the foundation for the learning activities that will follow. The initial training will be followed up by continuous training during the review meetings and the support supervision visits.

6. Decide what learning experiences and exercises will be carried out during each training.

For the initial training you will follow this Guide. For continuous training activities you may also consult this Guide or add other materials addressing the areas that have been identified as needing further support.

7. Write a summary of the most important aspects: objectives, methodology, course activities, how to evaluate results.

This small document is the Training Plan, which contains the decisions taken by the local health team, and which will be in force for a year. The Plan should be flexible and subject to modifications and has the components mentioned in the following section.

PREPARATION OF THE ANNUAL TRAINING PLAN

Content

Once the health workers from the District Health Office/Health Sub District/Sub County or Health Units have received their training on growth promotion implementation, they should proceed with the development of a training plan establishing the events, the times, the persons that will be in charge and the resources that will be used to train the Promoters throughout a one-year period.

Goal

The goal of the plan for the first year of growth promotion in the community will usually be to start with selected Sub Counties and villages selected according to the criteria of access, need, or interest, and plan for a roll-out over the next few years. The District, Sub County or Health Center personnel and the communities themselves will usually determine which those communities are.

Training Objectives

The training objectives of this plan will focus on the development of the knowledge and skills necessary to start and maintain the operation of growth promotion in each community.

Plan Development

In addition to the previous factors, you should consider the following questions when developing the Plan:

- ✓ What is to be done (including supervision)?
- ✓ Who is going to do it?
- ✓ When is he/she going to do it?
- ✓ How is he/she going to do it?
- ✓ Where is he/she going to do it?
- ✓ How is he/she going to know that it has been done?

EXERCISE 1: WHAT IS GROWTH PROMOTION IN THE COMMUNITY? RESPONSIBILITIES OF THE PROMOTER

Objectives: At the end of this exercise, the participants will be able to:

1. Explain what growth promotion is.
2. Explain why growth promotion focuses upon children under 2.
3. State who should take part in promoting child growth and health.
4. Name the main responsibilities they will have as Growth Promoters.

Duration: 2 hours

Methodology: Brainstorming, reading, group discussion.

Materials: *Handbook for Community Growth Promoters*
A seed from any fruit
Masking tape

Prepare in advance:

Drawing of a tree on paperboard (if a real, fruit-bearing tree is not available)
Drawing of fruits corresponding to the drawn tree (or real fruits on the tree)
Drawings of water, sun, on paperboard pieces
Drawing of a pregnant woman
Write the words air, land, love, on paperboard pieces.
Write each of the following questions on a separate piece of flipchart paper:

1. What is growth promotion?
2. Why does growth promotion focus upon children under 2?
3. Who should take part in promoting child growth and health?
4. What responsibilities will you have as growth promoters?

Contents:

1. Introduction
2. Reflection
3. Reading
4. Group Work
5. Plenary Session
6. Small group work
7. Summary

1. INTRODUCTION

EXPLAIN: that the purpose of this activity is to explore what growth promotion is, and also to learn what are the responsibilities of a Child Growth Promoter in the community.

2. REFLECTION

SHOW: a seed from any fruit

ASK: if we plant this seed, what do we expect to happen?

- LISTEN:** to all the opinions of the group.
- POINT TO:** a nearby fruit-bearing tree or bush (papaya, banana, etc.)
- (PLACE:** the drawing of the tree on the wall, if no fruit-bearing tree or bush is nearby).
- EXPLAIN:** that everybody’s wish is that from the seed planted, there will grow a healthy and sound plant like this one (pointing to the tree/bush), large, leafy, and bearing fruit of good quality (point to or paste on the drawings of the fruits). But for this to occur, we need to do several things both before and after planting the seed.
- ASK:** what do you think these things are?
- LISTEN TO:** all the opinions and repeat each one, making sure that the following are mentioned:
- Select the seed
 - Prepare the soil
 - Ensure that there is water for irrigation or that you are planting at the right time for rain
 - Weed around the tree
 - Prune the tree
 - Devote time and care to it
- EXPLAIN:** that with all these actions we will be making sure that this tree will grow well and that it will bear healthy fruit.
- SHOW:** the drawing of a pregnant woman.
- EXPLAIN:** that the same happens when a baby is conceived.
- ASK:** “What do you think this mother expects from her pregnancy?”
- LISTEN TO:** all the opinions.
- SUMMARIZE:** what participants have said. You may wish to say something like the following: “This mother hopes that her child will grow and develop healthy and fit. To help ensure that this happens, the mother will need to do certain things from the time of conception on.”
- ASK:** participants what some of the health problems are that children face once they are born.
- LISTEN:** to all their opinions. Make sure the following are mentioned and write them down on a flip chart:
Malaria
Diarrhea
Pneumonia
Measles
Malnutrition
- ASK:** participants if they know some of the actions that can be taken to prevent some of these illnesses?

- LISTEN TO:** All the answers from the group and make sure the following are mentioned:
 Sleeping under insecticide treated nets
 Treating fever/malaria within 24 hours of onset
 Immunization
 Adequate feeding
 Referral of sick children for adequate health care
- EXPLAIN:** that in Uganda many children die before they turn five years of age. Most of these children die of diseases that could have been prevented. Even children that do not die but are frequently ill and are malnourished are less strong and less healthy as they could be.
- ASK** who, apart from the mother, has a role to play in ensuring that the child grows and develops well.
- LISTEN:** to all their opinions and probe for the roles of the following if not mentioned:
 Father, grandparents, other community members, health workers.
- EXPLAIN** to the participants that the reason they are here is to learn together some ways some of these problems can be prevented or treated in the community and they, the promoters, are going to be the major resource for the effort. The work they are going to do through monthly Grow Healthy sessions and home visits will help prevent illness, keep the children alive and healthy. Their work will be very important in helping mothers and caregivers feed their children better, care for them better in health and illness so that they may grow and develop the way we all want.
- ASK:** whether there are any questions.
- ANSWER:** any questions that participants have.
- [**NOTE:** At any time during the training, if you do not know the answer to a question, explain that you will do your best to find the answer and tell the participants as soon as you are able. Be sure to do so.]

3. GROUP WORK

- EXPLAIN:** that they will now break into small groups of 3-4 people each, and they will take turns reading out loud Chapter 1 (pages 1 - 3) in their *Handbook* from “Growth Promotion” to the end of “What are your activities as a Promoter”. They will try to answer each of the four questions on the flipchart papers in their own words. Each group should choose one member to present their answers to the other groups.
- PLACE:** on the wall the four flipchart pages with the following questions:
 1. What is growth promotion?
 2. Why does growth promotion focus upon children under 2?
 3. Who should take part in promoting child growth and health?
 4. What are the responsibilities of Growth Promoters?
- DIVIDE:** them into small groups (3 – 4 participants each, preferably by community) and ask them to begin reading. Ask them to look up when they have finished answering the questions.

(If many participants have difficulty reading, you may want to have those individuals who can read better take turns reading aloud to the rest of the class and then discuss what has been read.)

CIRCULATE: among all groups, providing assistance as needed.

4. PLENARY SESSION

ASK: one of the groups to state their answer to the **first question**. One of the facilitators (or a member of the group) should write it down on the first flipchart page.

ASK: whether the other groups agree with what the first group has said, or do they have different ideas from those that have been mentioned. If they do, write (or have them write) them on the paper also.

ENSURE: that the following points are made:

- Growth promotion is the process of regularly measuring the weight of a child to find out how the child is growing.
- Growth promotion helps identify problems early.
- Growth promotion helps caregivers know about the best foods and best ways to feed their children.
- Growth promotion helps caregivers know the best care to give to help a child grow well and healthy.

ASK: another of the groups to give their answer to the **second question**. One of the facilitators (or a member of the group) should write it down on the second flipchart sheet.

ASK: whether the other groups agree with what the first group has said, or do they have different ideas from those that have been mentioned. If they do, write (or have them write) them on the paper also.

LISTEN: actively and encourage everyone's participation.

ENSURE: that the following points are made:

- Very young children grow rapidly.
- Their specific needs for feeding and care change as they grow.
- Children are more likely to become malnourished during the first 2 years of life.
- Weighing all children will be too much work. When we focus on a smaller number of children we can make sure we take time to counsel the caregiver properly.

ASK: another of the groups to give their answer to the **third question**. One of the facilitators (or a member of the group) should write it down on the third flipchart page.

ASK: whether the other groups had any different ideas from those that have been mentioned. If so, write them down.

ENSURE: that the following people are mentioned:

- X The children
- X The caregivers
- X The family
- X The community
- X The growth promoter
- X The health workers
- X The local authorities

ASK: one of the groups to give their answer to the **fourth question**. One of the facilitators (or a member of the group) should write it down on the fourth flipchart page.

ASK: whether the other groups agree with what the group has said, or do they have different ideas from those that have been mentioned. If they do, write (or have them write) them on the paper also.

LISTEN: actively and encourage everyone's participation.

ENSURE: that they mention the following responsibilities:

- X Get to know the community well so you can work well together.
- X Conduct monthly growth promotion sessions.
- X Follow up on agreements you reach with caregivers during growth promotion sessions.
- X Inform the community about the children's health so that its members can solve problems.
- X Work together with the health workers.

5. SMALL GROUP WORK

DIVIDE: participants into groups of two.

ASK: that each group of two participants does the following:

1. One *Promoter* explains to the other what growth promotion is. The two should discuss the explanation until they agree on it.
2. The other *Promoter* in each pair then explains why growth promotion focuses upon children under 2. The two should discuss the explanation until they agree on it.
3. The first *Promoter* states who should take part in promoting child growth and health. The two should discuss the explanation until they agree on it.
4. The second *Promoter* names the main responsibilities they will have as *Growth Promoters*.

CIRCULATE: among all groups, providing assistance as needed.

6. SUMMARY (in plenary session)

ASK: that participants come together and summarize the main points of the exercise, including the explanation of what is community growth promotion and the list of responsibilities of the Promoters.

EXERCISE 2: CREATING AND UPDATING THE COMMUNITY MAP

Objectives:	At the end of this exercise, each community group of Promoters will be able to: <ol style="list-style-type: none">1. Create a community map.2. Update their community map.
Duration:	2 hours
Methodology:	Reading, demonstration, and practice.
Materials:	<i>Handbook</i> for Community Child Growth Promoters Markers Pencils Rubbers Masking tape If available, community maps of each of the villages for which Promoters are being trained (in case some communities already have community maps) Large sheets of flipchart paper
Content:	<ol style="list-style-type: none">1. Introduction2. Reading3. Reflection4. Demonstration5. Practice6. Discussion7. Demonstration8. Practice9. Summary

1. INTRODUCTION

EXPLAIN: Promoters already know their communities, especially if they have lived there for a long time or if they have done volunteer activities. However, to carry out growth promotion activities, they will need to get to know the community in a slightly different way. For example, they will need to know how many children under 2 are in the community and where all of those children live.

To help you learn how many children under two live in the community and where they live, you can draw a map of the community. A simple map of the community is very useful to have when you are helping ensure the health of a community's children. As a Promoter, for example, you can use the community map to identify where children live and to plan home visits.

2. READING

ASK: that participants break into small groups and take turns reading out loud page 4 of Chapter 2 to each other -- "Getting to know your community" from "Find all

the children” to the end of “Draw a map of your community” in the Promoter’s *Handbook*.

3. REFLECTION

ASK: “What is a community map?”

LISTEN TO: all opinions.

ENSURE: that the participants make in their own words the following points about a community map:

It is a drawing that includes all of the houses, as well as the important buildings and landmarks that are in that community.

ASK: From what you read, what is the purpose of the community map for community Growth Promotion?

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

1. To identify the houses with children under 2 years of age.
2. To divide up the number of houses for which each Promoter is responsible.
3. To identify the houses of the children who have special needs, such as orphans.
4. Identify homes of other resource persons, such as drug distributors.

EXPLAIN: that if in the community or Health Center there is already a community map, then that community map will be updated. If there is no community map, one will need to be created before the program begins.

4. DEMONSTRATION

POST: A large sheet of paper on the wall or blackboard.

EXPLAIN: That you would like the participants to help you draw a map of an IMAGINARY community. Add that this does NOT need to be a real community, but that it should include many of the same things that their own communities have, such as houses, trees, and roads. Participants will name what is in the community and you will draw each thing they name.

NOTE to Facilitators: It is easier to use an IMAGINARY town for this demonstration. You will waste a lot of time arguing about where things are located if you try to draw a real community that some participants may know well and others not so well.

ASK: Participants to give a name to the community. (Write the name on the paper so that all can see.)

ASK: Participants to name some of the things that make up a community. As they name each thing, ask them to state where each new addition should be drawn on

the map. (For example: Next to the last house? Behind the group of three houses? Across from the market? Over the hill?). Draw what they suggest on the paper to create a map of this imaginary community.

ENSURE: That the following things are mentioned:

- ✓ Houses
- ✓ Road(s)
- ✓ Footpaths
- ✓ School
- ✓ Church/temple/mosque
- ✓ Water source (river, stream, well, tap)
- ✓ Market/store
- ✓ Health centre
- ✓ Fields/forests
- ✓ Rubbish dumping sites
- ✓ Bars

CONTINUE: Adding elements to the map until there are at least 18 houses and you and the participants are satisfied that you have created a realistic community (one that is similar to those in which the participants themselves live).

ASK: Participants to state why it is useful for Promoters to have a community map when doing growth promotion.

ENSURE: That participants mention the following two reasons:

- ✓ They can divide up responsibility for home visits according to where the children under two live.
- ✓ They can mark the houses where the children under two live.
- ✓ It can help them decide where in the village they can conduct the monthly meetings so that the location is convenient for most of the people in the community.

ASK: Participants to come up, one by one, and to mark on the map the following places (in pencil so they can be erased later when the map has to be updated):

- ✓ Three houses where they think that the Promoters live (Note: they should draw a SQUARE around each of these houses.)
- ✓ Ten houses where there are children under two (Note: they should draw a CIRCLE around each of these houses.)
- ✓ Two houses where the Community Drug Distributors live (Note: they should draw a TRIANGLE around each of these houses)

EXPLAIN: That if participants have trouble remembering how to label their community maps when they return home, they can remind themselves by checking the sample map that is in their *Handbook*.

5. PRACTICE

[NOTE: If community maps have already been done for these communities, and the maps are available, you may skip this step and go directly to #7 below: **Demonstration of how to update the community map.]**

ASK: Participants to group themselves by community.

- GIVE:** Each group a large sheet of paper and markers.
- ASK:** The Promoters of each community to draw and label a map of their community.
- EXPLAIN:** That Promoters should not worry about drawing the map with perfect accuracy at this time. They will be able to make corrections once they return to the community. The important thing now is to practice. Tell them they have 35 minutes to draw the map.
- CIRCULATE:** To provide assistance, as needed, until all groups have completed their maps.
- ASK:** Each group to present its map to the other groups by coming to the front and explaining what is represented in the map.

6. DISCUSSION

- ASK:** How are you going to keep and use this map after you have drawn it?
- ENSURE:** That they mention the following in their own words:
- X They will keep the map safe and clean.
 - X They will share it with the community members.
 - X They will UPDATE the map as needed.

7. DEMONSTRATION

- ASK:** Participants to state some reasons why Promoters may need to UPDATE their community maps.
- ENSURE:** That the following reasons are mentioned;
- ✓ A child is born in the community.
 - ✓ A child passes the age of 2.
 - ✓ A child dies.
 - ✓ A new house is built in the community.
 - ✓ A new Promoter is added or a Promoter leaves the community.
- SHOW:** how to update the community map in the following way:
- X One facilitator reads the description provided in the box below, while another demonstrates how to update the map.
 - X The facilitator who is reading should pause and look at the other facilitator after every instruction to signal that a change should be made to the map.
 - X The facilitator who is updating the community map should explain what s/he is doing with every change s/he makes in the map.
 - X Use the same key as is provided on page 4 of the Handbook, e.g. a circle for houses with children under 2, a square around the houses of growth promoters, a triangle around the houses of community drug distributors.
 - X Make sure you use pencil so that changes can be erased! Invite participants to come closer if they cannot see what you are doing.
 - X Both facilitators should refer to their training guides, which should be open to this page.

Here is the community of (please supply a locally appropriate name here).

(1) Two houses were built in front of the school.

(2) Five days ago a child was born at the home of Peter, who lives across the street from the school.

(3) The son of Geoffrey, the Promoter, celebrated his second birthday last Sunday.

(4) Henry's child got pneumonia and died on the way to the hospital.

(5) In this community there is a new Promoter named Margaret.

DRAW: (1) on the community map the two new houses that were built, explaining that each time a new house is built, they have to include it in the community map.

DRAW: (2) a circle around the house where a child was born.

ERASE: (3) the circle around the house of the Promoter whose son just turned 2, because that child has now "graduated" from the growth promotion program.

DRAW: (4) a cross (x) on the house of the child that died, indicating that a child died there.

DRAW: (5) a square around the house where the new Promoter lives.

8. PRACTICE

EXPLAIN: that each community group will now have a chance to practice updating the map for their community.

ASK: one participant to say a reason why a group of Promoters should make a change to their community map.

ASK: other participants to say how they would change their community maps if that happened.

LISTEN: to all answers.

ENSURE: that everyone agrees on the change(s) to be made.

EXPLAIN: that the members of each community group should now explain to each other how and where they would change their map if the change mentioned above happened in their community. (If they wish, they may draw the change on scrap paper or in their notebooks, just for practice; however, they should not make the actual changes to their community maps.) When they have finished, they should look at you.

ASK: another participant to state another reason why a group of Promoters should make a change to their community map.

ASK: the members of each community group to explain to each other how and where they would change their map if this happened. (If they wish, they may draw the change on scrap paper or in their notebooks, just for practice; however, they should not make changes to their community maps.) When they have finished, they should look at you.

REPEAT: this process until the Promoters have explained to each other how they would change their maps for the following reasons:

- ✓ A child is born in the community.
- ✓ A child passes the age of 2.
- ✓ A child dies.
- ✓ A new house is built.
- ✓ A new Promoter is added or a Promoter leaves the community.

9. SUMMARY (in plenary session)

EXPLAIN: that the community map is a drawing of your community. On it are drawn the houses of all the families living there, as well as the roads, church, mosque, school, health center, community center, rivers, gorges, etc., and they serve to help identify where the children under two years of age live.

EXERCISE 3: CARRYING OUT THE COMMUNITY CENSUS

Objectives:	At the end of this exercise, the participants will be able to: Carry out Community Census of the children under 2, and fill in the community census form
Duration:	2 hours
Methodology:	Reading, group discussion, group work
Materials:	<i>Handbook</i> for Promoters Community Census forms – blank , one for each growth promoter team
Prepare in advance:	Large versions of the Census form –blank List of examples for practice of children’s names, ages, birth weight, and weight at baseline (see example at end of this exercise) A large sheet with the following list written on it: community census forms, weighing scale, weighing pants, rope, ruler, pencil, sharpener, rubber, community map
Contents:	<ol style="list-style-type: none">1. Introduction2. Reading3. Review4. Demonstration5. Practice6. Presentation7. Summary

1. INTRODUCTION

EXPLAIN: that many communities may have Birth and Death Registration ongoing, which may be a very useful source of information about the number of children under 2 in the community and who they are. It may however not always be up-to-date – or may not exist at all. The community census is an assessment that is done in every community that begins community growth promotion activities. It helps find all the children under two in the community and provides their weights at the start of the program. Comparing the condition of the children in the community, say after one year of program activities, with this census information can help determine whether the children’s condition has improved.

2. READING

ASK: participants to open their *Handbooks* to Page 5. Read aloud to them “Carry out a census of your community” at the top of page 5.

EXPLAIN: that the drawing of the page shows a mother being interviewed for the community census as the interviewers go to *every* house in the village to find *all* the children under two years of age.

POST: the list of supplies needed to carry out the Community Census.

- ASK:** one or more participants to read the items on the list out loud.
- ASK:** participants to explain the purpose of each of the items on the list.
- ENSURE:** that the answers are as follows (in the participants' own words):
- Scales and weighing pants (to weigh each child)
 - Rope (to hang the scale)
 - A Community Census form (for recording information)
 - A map of the community (to know where all of the houses are)
 - Pencils (to record information)
 - Sharpener (to sharpen the pencils)
 - Rubber (in case of errors)
 - Ruler (to help follow one child's information across a wide page or even across two pages)

3. REVIEW OF THE COMMUNITY CENSUS FORM

- GIVE:** each participant a blank Community Census form.
- ASK:** participants to gather in their community groups and take turns reading over the parts of the Community Census form. Tell them they have 10 minutes.
- CIRCULATE:** and provide assistance as needed.

4. DEMONSTRATION

- EXPLAIN:** that you are going to demonstrate how to fill in the Community Census form.

[NOTE: that two facilitators should demonstrate how to fill in the Community Census form— one playing the part of the Promoter who is collecting the information, and the other playing the part of the mother. FOCUS ON FILLING IN THE CENSUS FORM on the wall as you ask the mother the information on the form. Do not spend time in a lengthy role play making up stories. See the example of a filled form at the end of this exercise]

- USE:** the large-size Community Census form on the wall as the form on which information is recorded so that participants may all see.

5. PRACTICE

- ASK:** participants to gather in their community groups. Each group should choose a representative who will present the group's work to the larger group.
- PASS OUT:** the list of children included at the end of this exercise.
- ASK:** each group to fill in their Community Census form using the information included in the list that you have passed out.
- CIRCULATE:** to provide assistance to groups as needed.

6. PRESENTATION

- ASK:** a representative of one of the groups to fill in the first line of the Community Census form on the wall with the information from the first child on the list.
- ASK:** the other participants whether they agree with what has been written or do they have comments or suggestions.
- ENSURE:** that the information has been correctly recorded.
- ASK:** a representative from another group to fill in the second line with information from the list they have been given.
- ASK:** the other participants whether they agree with what has been written or do they have comments or suggestions.
- REPEAT:** these steps until each group has filled out at least one line of the Community Census form on the wall.

7. SUMMARY

- ASK:** participants to explain why a Census is carried out in each community that begins to do growth promotion.
- ENSURE:** that they answer (in their own words) that:
- It helps find all the children under two in the community
 - Census information can help determine whether the activities have helped improve the condition of the young children when compared with program information after e.g. a year of implementation.

EXAMPLE:**CENSUS INFORMATION FOR COMMUNITY GROWTH PROMOTION**

Name of sub county _____ Name of village: _____

Date of census: 6 March 2005

HH #	NAME OF CHILD	NAME OF MOTHER	NAME OF FATHER	ADDRESS	SEX OF CHILD (F/M)	DATE OF BIRTH	BIRTH WEIGHT	AGE TODAY	WEIGHT at BASELINE
1	Grace Balundemu	Christine O.	Robert B.	(supply appropriate address)	F	4-8-04	2.7 kg	7 m.	8.1 kg
2	Rose Babire.	(supply appropriate name)	(supply appropriate name)	"	F	3-3-04	3.0 kg	12 m.	10.3 kg
3	Betty Merida	"	(supply appropriate name)	"	F.	22-04-03	-	22 m.	11.5 kg
3	Henry Maganda	"	"	"	M	31-05-04	2.8	9 m.	6.6 kg
4	Robert Balidawa	"	"		M	05-11-04	-	4 m.	5.3 kg

Sample information from census for practice

Child's Name: Eunice T.
Date of birth: 26/01/04
Birth weight: 3kg
Father's name: Robert K
Mother's name: Josephine M
Weight today: 11.2 kg
Address: A10

Child's name: Beatrice K.
DOB: 12-08-04
Birth weight 2.6kg
Father's name: Joseph P
Mother's name: Catherine N
Weight today: 7.4 kg
Address: F92 (next to the school)

Child's Name: Margaret S.
DOB: 01-03-05
Birth weight: not available
Father's name: Freddie M
Mother's name: Grace N
Weight today: 2.9 kg
Address: B55 (behind the market)

Child's name: George A.
DOB: 20-09-04
Birth weight: 2.9kg
Father's name: Ward W
Mother's name: Patrick F
Weight today: 6.9 kg
Address: K12

Child's Name: Robert L.
DOB: 30-11-04
Birth weight: not available
Father's Name: ?
Mother's name: Lucy K.
Weight today: 4.5 kg
Address: B23

Child's Name: John K.
DOB: 19-08-03
Birth weight: 3.3kg
Father's name: Alex B.
Mother's name: Margaret L.
Weight today: 10.8 kg
Address: A22

Child's Name: Peter S.
DOB: 02-02-05
Birth weight: 2.6kg
Father's name: Alex B
Mother's name: Margaret L.
Weight today: 3.3 kg
Address: A22

Child's Name: Harriet P.
DOB: 03-01-04
Birth weight: 3.1kg
Father's name: Joseph P.
Mother's name: Betty L.
Weight today: 12.2 kg

EXERCISE 4: PREPARING THE GROWTH PROMOTION REGISTER OF CHILDREN UNDER 2 YEARS OF AGE

Objectives:	At the end of this exercise, participants will be able to: <ol style="list-style-type: none">1. Prepare the Growth promotion Register of children under two years of age, using the information obtained during the Community Census or other existing information.
Duration:	2 hours
Methodology:	Reading, demonstration, and practice.
Materials:	Promoter's <i>Handbook</i> Large size Growth Promotion Register page, BLANK showing all the columns in a register (see example in <i>Handbook</i> on page 6 – use two flipchart sheets so all can see the writing) Large size Community Census (form previous exercise) Markers Photocopies of a blank growth promotion register page (one for each participant) Pencils Ink pen Masking tape Copies of the actual Register
Prepare in advance:	Complete the large size Community Census form from the previous exercise till you have the information of all 15 children (use Annex 1)
Content:	<ol style="list-style-type: none">1. Introduction2. Reading3. Reflection4. Preparing the Register5. Reading6. Demonstration7. Practice8. Presentations9. Summary

1. INTRODUCTION

EXPLAIN: The Community Census gives you the information you need to prepare the Register of children under 2 in the community.

2. REFLECTION

ASK: “What is the Community Census?”

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

- The Community Census is a door-to-door identification of all children under 2 in the community.
- It helps us obtain the information about the name, age, sex of the child, birth weight, and the weight of all children under 2 at the beginning of program implementation.

3. PREPARING THE REGISTER

EXPLAIN: that one of the activities that they will carry out as *Promoters* is preparing the Register of Children under 2 Years of Age who live in the community. The Promoter uses the information from the Community Census, which includes name, age, and weight. This Register is of great importance to the *Promoter* as it is the guide for all growth promotion activities. It helps keep track of how children are growing in the community on a monthly basis.

4. READING

ASK: that participants open their *Handbooks* again to page 5.

ASK: for a volunteer to read the bullet “Prepare the growth promotion register of children under two years old”. Other participants should read along silently.

ASK: all participants to turn to page 6 in their *Handbooks* showing a page of the Growth Promotion Register.

ASK: “So where do we get the information we use to prepare the Growth Promotion Register?”

LISTEN TO: all opinions

ENSURE that the answer is the Community Census

ASK: participants how we use the information from the census

LISTEN TO: all the opinions.

ENSURE: that the following points are made about how we can use the Community Census results:

- Find out all the children under 2
- We use the information to fill in the community Register of children under 2 years of age

EXPLAIN: that next they will learn how to fill in the Register of Children under 2

POST: the large size blank Growth Promotion Register on the wall.

EXPLAIN: that each community will keep a Growth Promotion Register like the one drawn on this page.

READ: through the sample page from a Growth Promotion Register, pointing out the headings along the top of the register page.

5. DEMONSTRATION

POST: the large size Community Census form, with the information of about 15 children filled in (Annex 1) next to the blank Growth Promotion Register on the wall.

SHOW: how to fill in the Register, using the information of the three oldest children listed in the large size Census form. Be sure to include the following steps as you explain aloud to the participants:

- Identify children under 2 years of age
- List all of the children under 2 in a descending order by age (in other words, the oldest child first, the next youngest second, etc.)
- Fill in the Register with the birth-weight of each of the children, where available
- Fill in the age and weight of each child from the Community Census results.

6. PRACTICE

ASK: that they form groups by community

GIVE: each participant a blank Register page.

ASK: that they fill in the Register page using the information found in the large size Census form that is on the wall. They should include the information that you recorded in the demonstration, but also add the rest of the children.

- Identify children under 2 years of age.
- List all of the children under 2 in a descending order by age (in other words, the oldest child first, the next youngest second, etc.)
- Fill in the Register with the birth-weight of each of the children, where available.
- Fill in the age and weight of each child as of the Census.

EXPLAIN: that the members of each community group may help each other fill in the Register page, but the facilitators will also be available to help.

CIRCULATE: Among all groups to give support and help, as needed.

7. PRESENTATION (plenary session)

ASK: all participants to come together again.

ASK: that a volunteer come forward to record in the Register on the wall the information about the next child from the Community Census who should be entered in the Register.

ENSURE: that the volunteer does the following:

- X He/she records the information about the *next oldest* child that is listed in the Community Census.
- X He/she records the information correctly.

- ASK:** another volunteer to come forward and record in the Register on the wall the information about the next child from the Community Census who should be entered in the Register.
- REPEAT:** the above steps until all of the children listed in the Community Census have been entered in the Register.
- EXPLAIN:** that listing all children in descending order by age helps you to find a particular child quickly during the monthly Grow Healthy sessions. Newborn children in the community should be added at the bottom of the list as soon as possible after birth. **Other children that come to live in the community should also be added at the bottom of the list in the register, as long as they are under 2 years of age.**
- ASK:** each community group to keep the register page they have filled in for future exercises.
- PASS OUT:** to the participants copies of the actual register and show how the monthly sessions are organized in the register

8. SUMMARY

- ASK:** one participant to explain in his or her own words what a Community Census is.
- ENSURE:** that the participants mention that the Community Census is a door-to-door identification of all children under 2 living in the community and finding out the details required for the Growth Promotion Register.
- ASK:** another participant to explain in his or her own words how a community's Promoters will fill in the Register of children under 2 for their community from the information collected in the community census.
- ENSURE:** that the participant mentions the following:
- The Promoter uses the information from the Community Census to fill in the Register
 - The Promoter identifies children under 2 years of age.
 - The Promoter lists all of the children under 2 in a descending order by age (in other words, the oldest child first, the next youngest second, etc.)
 - The Promoter fills in the Register with the birth-weight of each of the children when the birth-weight is available.
 - The Promoter fills in the age and weight of each child from the community census.

EXERCISE 5: ORGANIZING THE MONTHLY 'GROW HEALTHY' SESSION

Objectives: At the end of this exercise the participants will be able to:

1. State the activities that they should perform during the monthly Grow Healthy session.
2. Explain how to organize the monthly grow healthy session

Duration: 1.5 hours

Methodology: Demonstration, Practice

Materials: *Handbook* for community growth promoters
Register of children under 2 years of age
Flipchart paper
Markers

Prepare in advance:

Each of the following questions separately on flipchart paper:

1. What are Grow Healthy sessions and why do we hold them?
2. What activities should a Promoter carry out during monthly Grow Healthy sessions?
3. What things should be considered when organizing a monthly Grow Healthy session?

Content:

1. Introduction
2. Reading
3. Small group work
4. Plenary
5. Summary

1. INTRODUCTION

EXPLAIN: that once they have prepared their Village Growth Promotion Register of children under 2, they know how many children will participate in growth promotion sessions. Then they can proceed to organize those sessions.

2. READING

ASK: that participants break into their community groups, open their *Handbooks* to page 7 –Carrying out monthly ‘Grow Healthy’ sessions in the communities and take turns reading aloud to each other pages 7 and 8. They should look up when they have finished.

3. SMALL GROUP WORK

POST: on the wall the questions that you have written on the flipchart paper.

- ASK:** that the Promoters in each group work together to prepare answers for the following questions:
1. What is a monthly Grow Healthy session and why do we hold it?
 2. What activities should *Promoters* carry out during the monthly Grow Healthy session?
 3. What things should be considered when organizing a monthly Grow Healthy session?
- EXPLAIN:** that each group should first reach agreement about their answers to the questions and then write them on a sheet of notebook paper.
- ADD:** that they should select a different person to present each answer to the rest of the large group.
- GIVE:** the participants 15 minutes in which to do the exercise. After 15 minutes, call the groups together again.

4. PLENARY

- ASK:** one group to answer the first question: “What is a monthly Grow Healthy session and why do we hold it?”
- LISTEN TO:** all the opinions and write them down in the flipchart next to/under this question.
- ASK:** if the other participants have something different to add. If so, write it down.
- ENSURE:** that they mention the following:
- The monthly ‘Grow Healthy’ sessions are meetings held by the *Promoters* each month with all the mothers, fathers or the persons in charge of taking care of the community’s under 2 children.
 - The purposes of the monthly ‘Grow Healthy’ session are to weigh every child under 2 years of age, record his or her weight in the monthly Register, and counsel the child’s caregiver about actions that she may take to maintain or improve the child’s health.
- ASK:** Another group the second question: “What activities should *Promoters* carry out during the monthly Grow Healthy session?”
- LISTEN TO:** all the opinions of the group and write them down on the flipchart paper.
- ENSURE:** that they mention all of the following:
- X One Promoter weighs the children.
 - X A second Promoter writes the information in the child’s health card and the Village Growth Promotion register, determines whether the child grew well or not and finds out about the child’s health.
 - X The third Promoter counsels the mother or caregiver.
- ASK:** another group the third question: “What things should be considered when organizing a monthly Grow Healthy session?”
- LISTEN TO:** all the opinions of the group and write them down on the flipchart paper.

ENSURE: that they mention all of the following:

- Organize 25-30 children per group of 3 or 4 promoters per site
- Make sure that the meeting site is easily accessible for all, has enough space and light, and has a place where the caregivers can wait out of the sun and rain until their turn comes.
- Decide with the community the day and time when the session will take place each month.
- Promote this monthly session among the local authorities and community leaders.
- Encourage mothers/caregivers to regularly attend the monthly growth promotion sessions.
- Prepare all the following necessary materials:
 - Table and chairs for the promoters to sit and write
 - Mats or benches for caregivers and their children to sit on
 - This *Promoter's Handbook*
 - A weighing scale with a rope to hang it
 - Weighing pants
 - Table of Expected Minimum Weight Gain
 - Blank child health cards
 - Village Growth Promotion Register of children under 2 years of age
 - Pencils and ruler
 - Counseling cards
 - Clean water and soap to wash your hands
 - Referral sheets
 - Clean drinking water.
 - Notebook

5. SUMMARY

ASK: each participant to pair up with another participant who is not from his or her community.

EXPLAIN: that each pair is going to work together to review what they have learned in this exercise. They should do the following:

- X First, one member of the pair will briefly state to the other the activities that Promoters will carry out during the monthly Grow Healthy session.
- X Second, the other member of the pair will explain how to organize the monthly growth promotion session.
- X The two will then switch roles, so that the Promoter who stated the activities of the growth promotion session will now explain how to organize the session; and the Promoter who explained how to organize the session will now briefly state the activities of the monthly growth promotion session.

CIRCULATE: to provide support and assistance, as needed.

EXERCISE 6: FILLING IN A CHILD HEALTH CARD

Objectives: At the end of this exercise the participants will be able to:

1. Fill in a child health card for a child who does not have one

Duration: 2 hours

Methodology: Demonstration, Practice

Materials: *Handbook for Community Growth Promoters*
 Photocopies of blank child health cards (one for each participants)
 Large size front part of the child health card on one sheet
 Large size of at least the first two years of the growth chart - making sure to show the bottom parts.
 Pencils

Content:

1. Introduction
2. Reading
3. Demonstration
4. Practice
5. Summary

1. INTRODUCTION

EXPLAIN: that although many children will arrive at the monthly Grow Healthy sessions with child health cards, some will not because they are newborns, or attending for the first time or have lost their cards. Promoters will be given blank child health cards that they will be able to fill in for the children who do not have them.

2. READING

ASK: participants to open their *Handbooks* to page 9, “Tasks you will carry out during the growth promotion session.”

EXPLAIN: that you would like one of them to read aloud as the rest follow silently about Task 1 -- “Fill in a Child Health Card for a child who does not have one”.

3. DEMONSTRATION

PLACE: the large-size of the front of the child health card on the wall where all can see.

EXPLAIN: that you are going to show them how to fill in the front of a child’s health card, and then you will ask a few volunteers to come up and repeat the demonstration.

DEMONSTRATE: how the card should be filled in. You may wish to use the following general guidelines and specific steps to help you do the demonstration:

General guidelines

- X Ask participants to come forward and observe the demonstration “close-up.”
- X Use pencil to fill in the information (so that you can erase it and use the poster again).
- X Use information supplied by the participants as much as possible. For example, one participant might suggest a name for the child, while another might say the child’s age, and a third might say the birth month, etc.

Specific steps

1. Fill in all of the blanks on the front of the card (child’s name, date of birth, etc.) Do not fill in the Child’s Registration number. The health center staff will fill that in.
2. Write the child’s number from the Growth Promotion Register in the top corner of the card.
3. Write the child’s birth month AND YEAR in the first box at the bottom of the growth chart.
4. Write the following 11 months of the child’s first year in the boxes for “1st year”
5. When you reach January write in the next correct Year
6. Write the child’s BIRTH month in the first box of the “2nd year” boxes.
7. Write the following 11 months of the child’s second year in the boxes for “2nd year”
8. Repeat this step for the child’s third year.

- POINT:** out the illustration on page 9 of the *Handbook* on filling in the months on the child health card.
- ASK:** a volunteer to come forward and repeat the demonstration.
- ERASE:** what you have written and hand the pencil to the volunteer.
- HELP:** the volunteer, if necessary.
- ASK:** the other participants, when the volunteer has finished the demonstration, whether they agree with what he/she has done or do they have any suggestions.
- LISTEN:** to all suggestions and help participants reach agreement on any changes or corrections to be made.
- ASK:** another volunteer to come forward and repeat the demonstration.
- ERASE:** what has been written and hand the pencil to the new volunteer.
- HELP:** the new volunteer, if necessary.
- ASK:** the other participants, when the volunteer has finished the demonstration, whether they agree with what he/she has done or do they have any suggestions.
- LISTEN:** to all suggestions and help participants reach agreement on any changes or corrections to be made.
- ASK:** all participants to sit down again.

4. PRACTICE

- GIVE:** each participant at least one blank child health card.
- EXPLAIN:** that they are now going to work in pairs to practice filling out these child health cards.
- EXPLAIN:** that one participant will pretend to be a mother who has brought her child to the monthly Grow Healthy session. She does not have a health card for the child. The other participant will play the part of the Promoter, and will fill in a new health card for the child, based upon the information given by the “mother.” When the card has been filled out, the two participants should switch roles – the participant who played the mother should take a turn playing the Promoter and fill in the other child card, and the participant who played the Promoter should pretend to be the mother.
- CIRCULATE:** and provide assistance, as needed.

5. SUMMARY

- ASK:** participants to explain in their own words when they will need to *fill in* new child health cards.
- ENSURE:** that they answer that although many children will arrive at the monthly growth promotion sessions with child health cards, some will not. Promoters will fill in a child health card for each child who does not have one
- ASK:** participants to describe how to fill in a child health card.
- ENSURE:** that the following steps are included in the explanation:

Specific steps

1. Fill in all of the blanks on the front of the card (child’s name, child’s number, date of birth, etc., except the Child’s Registration number)
2. Write the child’s birth month AND YEAR in the first box (of the first year) at the bottom of the growth chart.
3. Write the following 11 months of the child’s first year in the boxes for “1st year”
4. Write in the new year when you reach January
5. Write the child’s birth month in the first box of the “2nd year” boxes.
6. Write the following 11 months of the child’s second year in the boxes for “2nd year”
7. Repeat this step for the child’s third year.

EXERCISE 7: WEIGHING CHILDREN UNDER 2 YEARS OF AGE

Objectives:	At the end of this exercise, participants will be able to: <ol style="list-style-type: none">1. Correctly weigh a child under 2 years of age.
Duration:	3 hours
Methodology:	Explanation, demonstration, and practice
Materials:	<i>Handbook</i> for community growth promoters A weighing scale, weighing pants, and rope for every community group of Promoters Pencils
Prepare ahead of time:	<ul style="list-style-type: none">• Blank weight comparison table of objects on flipchart paper (see example within this exercise)• Blank weight comparison table of children on flipchart paper (see example in the exercise)• Five objects, such as bricks, stones, or wood, wrapped in paper and marked with symbols, or numbers or letters. Weigh these objects and record their weights in your notebook.• For practice in weighing children, arrange to have at least six mothers bring their children under 2 years of age. (Ideally, two would be < 6 months, 2 would be 6 – 12 months of age, and two would be 12 – 24 months of age.)• A large drawing of the circular face of the weighing scale with the pointer and the weight markings drawn in to show the 9 small markings between at least two numbers so you can point out the markings for 100 gram divisions.• Prepare a place (could be outdoors) where each group of 3 or 4 participants can hang a scale and practice weighing
Contents:	<ol style="list-style-type: none">1. Introduction2. Reading3. Demonstration4. Practice5. Discussion6. Demonstration7. Practice weighing objects8. Comparison of results9. Practice weighing children10. Comparison of results11. Summary

1. INTRODUCTION

EXPLAIN: to the group that growth promotion requires regular weighing of children under 2 years of age to monitor how each child is growing. This weight will need to be

accurate, because the child's mother/caregiver will be counseled about how to care for the child based upon whether the child has gained an adequate amount of weight that month.

2. READING

ASK: participants to gather in their community groups and take turns reading out loud to each other "Weigh each child using a hanging scale," pages 10 - 12 of Chapter 2 of their Promoter's *Handbook*. When they have finished, they should look up.

3. DEMONSTRATION

ASK: participants to watch and listen while you show them a scale and demonstrate how to use it.

HOLD UP: a hanging scale.

ASK: "Which are the main parts of the scale?"

ENSURE: that the following parts are mentioned, and point to each as it is mentioned:

- X face
- X numbers
- X upper hook of the scale
- X lower hook of the scale
- X needle
- X screw or knob

SHOW: how each part is used as participants name that part. You may wish to use the following descriptions:

- X The **face** of the scale includes numbers and an arrow that points to a child's weight as he/she is weighed. You may wish to follow these steps to explain how to read the scale:
 - Point to the drawing you made of the face of a scale
 - Point out the numbers around the "face" and the lines that appear between the numbers.
 - Show how the arrow can move to point to the numbers or the **lines between the numbers**.
 - Explain that each number tells how many kilos the child weighs, and each line represents 100 grams. For example, if the arrow points to the first line after 3 kilos, this means that the child weighs 3 kilos and 100 grams, and this is written as 3.1 kilograms. The second line after 3 kilos is written as 3.2 kilograms. And so on.
- X The **upper hook of the scale** is used to hang the scale from a beam, tree, or another safe place. (Hang the scale. Be sure to position the face of the scale so that it hangs at your eye level!)
- X The **hook on the lower side** is used to attach the **weighing pants** to the scale. (Hang the weighing pants from the hook.)

- X The **needle** marks the weight in kilograms of each child. (Point to the needle.)
- X The **screw or knob** on the back of the scale is used to **adjust** the scale.

4. PRACTICE

- ASK:** participants to gather in their community groups.
- DISTRIBUTE:** a scale with weighing pants and a rope to each group.
- ASK:** participants to hang the scales and to take turns naming the parts of the scale for each other and demonstrating for each other how to use it.
- CIRCULATE:** to provide assistance to groups and individuals, as needed.

5. DISCUSSION

- ASK:** all participants to come together again
- ASK:** “How should the scale be taken care of?”
- LISTEN TO:** all the answers. Be sure that they mention the following ways to take care of the scale:
- Clean it well.
 - Store it in its bag.
 - If it gets wet, dry it immediately.
 - Do not hit it or let it fall.
 - Keep it in a dry place and out of the reach of children.
 - Do **NOT** use to weigh anything other than children under 2 years. (If you do it could spoil the scale and make it no longer accurate).

6. DEMONSTRATION

- SHOW:** how to take a child’s weight (or in its absence, an object’s weight) carrying out the following steps:
- a. **Hang the scale** from a strong tree branch, a ceiling beam, or some safe place, using a rope, in such a way that the scale hangs at your eye level. Make sure the child may hang freely without touching tree, walls or floor.
 - b. **Place the weighing pants** on the hook of the scale, **adjust the scale to zero**, and remove the weighing pants. Point out that the scale is adjusted before weighing each child to ensure that the weight is as accurate as possible.
 - c. **Place the child in the weighing pants**, with the assistance of the mother.
 - d. **Hang the weighing pants with the child in them from the scale**, with the assistance of the mother. Place the child with one arm in front of a strap and the other behind to help maintain the child’s balance.

- e. **Hold the *body* of the scale without touching the hook** and proceed with the reading. Explain that no matter how restless a child may be, there will always be a moment when he/she remains calm, and that is the moment to take advantage of to take the reading. **WAIT UNTIL THE NEEDLE STOPS MOVING.** Ask the mother to place her hands behind the child without touching him/her to keep him/her from falling.
- f. **Read the child's weight out loud.** The person who will record the weight in the Register should repeat the weight out loud, record it in the Register, and show it to you, so that you can verify that the figure recorded is correct.
- g. **Remove the child from the scale.** Hold the child with one arm and raise the child and the weighing pants smoothly with the free arm to free them from the hook. **NEVER RAISE THE CHILD BY THE STRAP, BECAUSE HE/SHE MAY FALL DOWN.**
- h. **Deliver the child to the mother.**

7. PRACTICE WEIGHING OBJECTS

PLACE: before you the five objects that you have selected for the participants to weigh. (Be sure that you have previously weighed these objects and recorded their weights to serve as a reference in validating the weights that will be recorded by participants. Note for yourself the weighing scale you used in case the different scales are not all recording perfectly.)

ASK: that participants work in their community groups to take turns weighing each of the five objects that you have brought, and that they write down the results on a sheet of paper.

EXPLAIN: that one person will weigh each object and the other one will write down the weight. Then the roles will be reversed, so that the person that weighed the objects will write down the weights, and the person that wrote down the weights will weigh the objects. If their results are more than 100 grams apart, they should both weigh the object until they get the same result.

CIRCULATE: to provide assistance to groups and individuals, as needed.

8. COMPARISON OF RESULTS

ASK: all participants to come together.

POST: the following chart, which you have prepared ahead of time on flipchart paper, on the wall where all can see.

PARTICIPANTS	OBJECT 1	OBJECT 2	OBJECT 3	OBJECT 4	OBJECT 5
A					
B					
C					
D					
Facilitator					

- ASK:** a participant from one of the community groups to come forward and write the weight of each of the objects that they have weighed in the appropriate space on the chart.
- ASK:** participants from the other community groups to come forward, one by one, and write the weight of each of the objects that they have weighed in the appropriate space on the chart.
- WRITE:** the weight that you obtained when you weighed each of the objects before the session in the appropriate spaces on the chart (the row labeled “Facilitator”).
- COMPARE:** the weights obtained by different people weighing the same object. If there are differences of more than 100 grams, ...
- ASK:** the participants who got the different weight(s) to demonstrate how they obtained them.
- ASK:** the other participants to give positive and supportive feedback to those who are carrying out the demonstration to help them identify and correct any errors.
- THANK:** participants for their active participation.
- MENTION:** that at the end of each weighing session, it is always necessary **to clean and put away the scale and the weighing pants in a safe place.**

Note: Participants are considered ready to weigh children when the results of their weighing of the five objects are the same or with minimum variation (less than 100 grams) of readings as the weights obtained by the facilitator(s).

9. PRACTICE WEIGHING CHILDREN

The facilitator should have previously weighed these children so that their weights may serve as a “gold standard” against which the weights recorded by the participants may be judged. You may consider that participants are ready to weigh children in the community when the weights they record for five children are the same or with minimum variation (less than 100 grams) from the weights recorded by the facilitator(s).

- ASK:** the participants to work in their community groups, and assign a number to each group.
- EXPLAIN:** that each person in the group should weigh at least three children. If possible, one child should be under 6 months, another should be between 6 and 12 months of age, and the third should be between 1 and 2 years of age.
- ASK:** that the members of each group compare the weight that they have recorded for each child with that of the other members of the group, and that they discuss any differences found. If there are differences of more than 100 grams, they should weigh the child again. When they reach agreement on the weight of the child, they should write it down on a sheet of paper. They should then record the weights in the comparative table of weights that you have prepared on flipchart paper.

10. COMPARISON OF RESULTS

PLACE: the poster “Comparative Table of the Results of Weighing Five Children” on the wall.

WRITE: your own results in the chart.

Comparative Table Of The Results Of Weighing Five Children

COMMUNITY GROUPS	NAME CHILD 1	NAME CHILD 2	NAME CHILD 3	NAME CHILD 4	NAME CHILD 5
1					
2					
3					
4					
5					
6					
Facilitator’s weights					

COMPARE: the weights recorded by the participants with those recorded by you, the facilitator, using the comparative table of weights.

EXPLAIN: that the margin of error is 100 grams, that is, 0.1 kilogram. (Explain that the “margin of error” is the amount by which an answer can be over or under the correct weight and yet still be considered a correct answer. Give examples.)

Note: Arrange extra practice for participants who need it.

11. SUMMARY (in plenary session)

ASK: one participant to state the steps to follow in weighing a child. Write the steps on flipchart paper as they are mentioned.

ASK: the rest of the participants if they agree, or if there is something missing. Continue asking for comments and suggestions until you and the participants are satisfied that the list is complete.

EXERCISE 8: IDENTIFYING A CHILD'S NEXT EXPECTED MINIMUM WEIGHT

Objectives: At the end of this exercise, the participants will be able to:

1. Identify the next expected minimum weight of a child under 2 using the Expected Minimum Weight Gain table.

Duration: 2 hours

Methodology: Demonstration, reading, practice.

Materials: *Handbook* for Community Growth Promoters
Large size page of the Register of Children under 2 Years of Age with the baseline information filled in (from Exercise 4 / see Annex 2)
Large size BLANK register page
Large size of a portion of the Table of Expected Minimum Weight Gain

Paper
Pencils
Masking tape

Prepare in advance: Three separate small sheets of paper, one with a "1" written on it, another with a "2", and the third with a "3" on it.

Content:

1. Introduction
2. Reading
3. Explanation
4. Demonstration
5. Practice
6. Plenary Session
7. Summary

1. INTRODUCTION

EXPLAIN: that to monitor the monthly growth of children under 2 years of age, a table of the minimum weight that a child should gain in one month and in 2 months has been established. The weights in one month and two months are calculated from the date of the last weighing.

ASK: For example, if a child was last weighed on 8/10/05, which will be the date for the next weighing and in two months?

ENSURE: that participants answer close to 8/11/05 in one month or close to 8/12/05 in 2 months.

[NOTE: As always, if the facilitator sees that a particular concept or step is very confusing for participants, he or she should pause to spend the time needed to help them understand the material.]

PLACE: on the wall the large size part of the Table of Expected Minimum Weight Gain you have prepared.

EXPLAIN: that these estimates have been organized in a table to make the Promoter's job easier. This table has been printed in the Handbook and also in the Register.

2. EXPLANATION

ASK: participants to open their *Handbooks* to page 41, where they will find the "Table of Expected Weight Gain for Children under 2 years."

EXPLAIN: that the table consists of three columns. (As you explain the following, also point this out on the large size portion of the Table of Expected Minimum Weight Gain you put on the wall) In the first column is the weight today of the child. In the second column is the expected minimum weight that the child should attain one month from now. In the third column is the weight expected to be the minimum that a child should reach 60 days from now.

EXPLAIN: that participants will now play a short game to practice using the table. The game is played in the following way:

1. You (the facilitator) read aloud one of the weights from the first column, "Weight today".
2. All participants look at the Table to see what the child's weight should be in one month.
3. As soon as a participant thinks he or she knows the weight that the child should reach in one month, he or she should stand up.
4. The facilitator will hand a piece of paper with the number "1" on it to that participant.
5. The facilitator will give the second participant to stand up a piece of paper with the number "2" on it.
6. The facilitator will give the third participant to stand up a piece of paper with the number "3" on it.
7. Then everyone will sit down.
8. The participant given the number "1" will read aloud his or her answer for the weight that the child should reach in one month.
9. The other participants offer their opinion as to whether the answer is correct or incorrect. If the answer is incorrect, the facilitator asks the participant who received the number "2" to read aloud his or her answer for the expected weight of the child after one month.
10. The other participants offer their opinion as to whether the answer is correct or incorrect. If the answer is incorrect, the facilitator asks the participant who received the number "3" to read aloud his or her answer for the expected weight of the child after one month.
11. The other participants offer their opinion as to whether this third answer is correct or incorrect. If the answer is incorrect, the facilitator reads aloud the correct expected weight gain.
12. The facilitator starts again by reading another weight from the middle "Weight Today" column. Steps 2-11 are then repeated.
13. The facilitator repeats this a third time by reading another weight from the last "Weight Today" column. Steps 2-11 are again repeated.

ASK: When a child 's weight at baseline was 5.6 kg, but this child does not come for the first growth promotion session one month later, what is the child's expected weight during the next growth promotion session two months since the baseline?

ENSURE: That participants look up 5.6 kg in the 'Weight Today' column and find the expected minimum weight in the 'Weight in 2 months' column, indicating 6.5 kg.

3. DEMONSTRATION

PLACE: the large size blank page of the Register of Children Under 2 Years of Age and the large size Table of Expected Minimum Weight Gain on the wall. Make sure you write in the name of the first child, Beatrice, in the table below, and her baseline weight, in the correct columns.

SHOW: how to find the expected weight in one month of Beatrice, in the table below (Use the large Table of Expected Minimum Weight Gain on the wall.)

Be sure to point out where the expected weight in one month should be recorded.

ASK: a participant how much the second child, Rose, should weigh in 1 month, according to the table. Ask the participant to write Rose's name, baseline weight, and the expected weight in the correct boxes in the Register.

LISTEN TO: the answer and ask the remaining participants whether they agree. (Verify the answer yourself by consulting the Table.)

ASK: another participant what is the expected weight for the following child under 2 year of age, and ask the other participants to confirm or correct the answer. Have the participant write the child's name, baseline weight and the expected weights in the correct boxes. Continue doing this until you have covered all the children in the table below.

Name	Weight at baseline	Expected Weight	Name	Weight at baseline	Expected Weight
Beatrice Kateme	3.5 Kg	4.2 Kg	Simon Megere	7.1 Kg	7.4 kg
Rose Nakamya	3.9 Kg	4.6 Kg	George Nyakuni	7.6 Kg	7.9 Kg
Eunice Kyakwa	4.7 Kg	5.3 Kg	David Okello	8.3 Kg	8.6 Kg
Henry Kakooza	5.4 Kg	5.9 Kg	Carol Ekochu	9.4 Kg	9.6 Kg
Robert Sentonga	6.2 Kg	6.6 Kg	Josephine Quinto	10.8 Kg	11.0 Kg

4. PRACTICE

ASK: that participants organize themselves by community.

ENSURE: that each group has its community register (from Exercise 4).

ASK: that each group use the Table of Expected Minimum Weight Gain to find the expected weights after one month of each of the children listed in their Register (from Exercise 4). They should write each expected weight in pencil in the appropriate box of the Register.

CIRCULATE: to provide assistance to groups and individuals, as needed.

5. PLENARY SESSION

PLACE: on the wall the large size of the Growth Promotion Register of Children Under 2 (from Exercise 4) with the baseline information of about 12 children already filled in

SELECT: a group to present its findings to the rest of the participants

ASK: one member of the group to fill in the expected weight for the first child from their Register in the large size page of the Register pasted on the wall.

INVITE: the other participants to state whether the expected weight has been calculated and recorded correctly. If not, ask what the correct answer should be. If any group recorded the wrong weight find out why and make sure they understand the concept, and have them correct the expected weight on their community register page.

ASK: another member of the selected group to fill in the expected weight of the second child in the Register.

INVITE: the other participants to state whether the expected weight has been calculated and recorded correctly. If not, ask what the correct answer should be.

SELECT: another participant from another group to present its findings to the rest of the participants.

CONTINUE: in this way until the expected weights of all the children in their register have been determined and recorded in the register on the wall. Make sure all participants understand the concept and all the groups have corrected any errors they made. On the register page.

EXPLAIN That the easiest way to calculate and write down the expected weights for all children weighed in your community is immediately after one 'Grow Healthy' session in preparation for the next. In that way you can concentrate on the table without the interruption of mothers with children while calculating minimum expected weight. This reduces the risk of making mistakes, and helps you determine whether the child gained adequate weight or not quickly during the next session.

6. SUMMARY (in plenary session)

ASK: a volunteer to explain the process to be followed in the use of the expected minimum weight table.

ASK: the remaining participants if they agree or if they want to add something else.

EXPLAIN: that all groups keep their filled in register pages for future exercise.

EXERCISE 9: RECORDING A CHILD'S WEIGHT IN THE REGISTER

Objectives: At the end of this exercise, participants will be able to:

1. Record a child's weight in the Growth Promotion Register.

Duration: 1 hour

Methodology: Explanation, demonstration, and practice

Materials: *Handbook* for community Growth Promoters
Large size Growth Promotion Register page with the names and information of the 15 children under 2 Years of Age that the class filled in together (from previous Exercise 8 / Annex 3)
The Register pages (on regular size paper that the community groups filled in (continued from the previous Exercise, 8).

Prepare ahead of time: On a separate large sheet of paper, write the "weight today" for each child on your register page as provided in the example at the end of this exercise or Annex 4: the weights allocated to the children ensure that we have a 8 children gaining adequate weight, 5 not gaining adequate weight and 2 with unknown growth pattern, which we will use again in the next exercises.

Contents:

1. Introduction
2. Small group work
3. Plenary session
4. Summary

1. INTRODUCTION

EXPLAIN: that each time a child is weighed, the child's weight should be recorded in the Growth Promotion Register.

PLACE: the large size of the Register page (from Ex. 8) on the wall. Next to it place the separate large sheet of paper on which you have already written the same names as in the Register, and their "weights today" that you prepared in advance.

POINT: to the first child on the sheet. Using that child as an example, demonstrate how and where to record a child's weight in the Register. You may wish to use the following steps:

- Find the child's name in the Register.
- Find the child's "weight today" on the sheet.
- Locate the "weight today" box for this child in the Register.
- Record the child's weight in that "weight today" box of the Register.

ASK: one participant to come up and record in the Register the weight of the next child listed in the Table.

ASK: another participant to come up and record in the Register the weight of the next child listed in the Table.

2. SMALL GROUP WORK

ASK: participants to divide into their community groups.

ASK: that they continue using the Register page from the previous exercise and that they take turns to have each member of the group record a “weight today” for the remaining children on the list. Make sure each member of the group has a chance to record a weight today by him or herself. Tell them they have 20 minutes for the exercise.

CIRCULATE: to provide assistance to groups and individuals, as needed.

3. PLENARY SESSION

ASK: a participant to fill in the next “weight today” in the Register on the wall.

ASK: the other participants if they agree with what has been recorded or do they have any other suggestions.

LISTEN: to any suggestions and ensure that the correct answer has been recorded in the Register on the wall.

ASK: another participant to fill in the next “weight today” in the Register on the wall.

ASK: the other participants if they agree with what has been recorded or do they have any suggestions.

CONTINUE: in this way until all of the “weights today” have been recorded in the Register on the wall. (NOTE: the completed portion of the register page should look like Annex 4).

4. SUMMARY

ASK: one participant to explain how a child’s weight today should be recorded in the Growth promotion Register.

ENSURE: that the answer given includes the following steps:

- Find the child’s name in the Register.
- Locate the “weight today” box for this child in the Register.
- Record the child’s weight in that “weight today” box of the Register.

List of children in the register with their ‘Weight Today’ as measured during the first Growth Promotion session held on 4 April 2005

NAME	WEIGHT TODAY
Betty Mpologoma	11.9 kg
Peter Sansa	4.2 kg
Patrick Semwogere	12.5 kg
George Walusimbi	did not come for the session
John Kakande	11.0 kg
Kennedy Matia	9.9 kg
Harriet Petua	did not come for the session
Robert Buyinza	5.7 kg
Eunice Tganyana	11.5 kg
Rose Kamya	10.3 kg
Robert Kasadha	5.2 kg
Margaret Sebagereka	3.6 kg
Henry Magoola	6.9 kg
Grace Basima	8.6 kg
Beatrice Wanyana	7.6 kg

EXERCISE 10: USING EXPECTED WEIGHT GAIN TO DETERMINE WHETHER A CHILD HAS GAINED AN ADEQUATE AMOUNT OF WEIGHT

Objectives: At the end of this exercise the participants will be able to:

1. Use expected weight gain to determine whether a child's weight gain is adequate or inadequate
2. Record whether a child's weight gain is adequate or inadequate in the Register

Duration: 2 hours

Methodology: Demonstration, reading, group practice.

Materials: *Handbook* for Community Growth Promoters
Large size Register page with 'expected weights' and 'weights today' filled in for all 15 children under 2 (from the previous exercise / annex 4)
Photocopies of the Individual Work Guide (at end of this exercise)- one for each participant
Flipchart paper
Markers
Pencils

Prepare in Advance: On a large sheet of paper, write the following list of steps:

1. Fill in Register.
 - Write weight today in the correct box in the Register
 - Identify expected weight gain of each child (already written in after the last weighing)
 - Compare expected weight with weight today for each child
 - Determine whether each child gained adequate weight or not.
2. Write in the Register (Y or N) whether each child gained adequate weight.

Content:

1. Introduction
2. Reading
3. Demonstration
4. Practice
5. Presentations
6. Summary

1. INTRODUCTION

EXPLAIN: that in this session participants will learn one way to determine whether a child has gained an adequate amount of weight between weighing sessions, as well as how to write that finding in the Register.

2. READING

ASK: that participants get organized in their community groups and take turns reading out loud to each other “Determine whether each child has gained an adequate amount of weight” from “compare the child’s weight with expected weight” to the end of the table on page 12 of their Promoter’s *Handbook*.

3. DEMONSTRATION

ASK: participants to explain from the reading how they can determine whether a child under 2 years of age has gained an adequate amount of weight since the last weighing session. (If nobody can tell you read the Promoter *Handbook* on page 12 again.)

LISTEN: to all responses.

ENSURE: that participants response include that:
They will compare the child’s “weight today” with the child’s expected weight based on the child’s weight a month (or two) ago to decide whether the child has gained an adequate amount of weight or has an inadequate weight.

PLACE the large size Register page from the previous exercise on the wall.

EXPLAIN: that in this exercise they will learn how to compare the child’s weight today with his/her expected weight to decide whether the child has gained an adequate amount of weight or not.

POST: on the flipchart stand the sheet you prepared in advance on the steps of comparing the expected weight to the weight today and read it aloud.

DEMONSTRATE: how to compare weight today with expected weight to determine whether has gained adequate weight or not, using the information recorded in the Register. **For example**, Betty, the first child in the register, had an expected weight of 11.7 kg. When Betty was weighed during the current weighing session, her weight was 11.9 kg. This means that the child weighed MORE than what the child was expected to weigh.

ASK: what should you write in the box marked “Adequate growth” in the Register for that child.

ENSURE: that participants answer that you should write “Y” (for “YES”), meaning the child has gained an adequate amount of weight.

ASK: a volunteer to compare weight today and expected weight for the second child in the Register on the wall and to determine whether that child’s weight gain is adequate or inadequate.

LISTEN: to the answer given.

ASK: other participants if it is correct. If not, explain why not.

ASK: what should you write in the box marked “Adequate growth” in the Register for that child.

ENSURE: that participants answer that you should write “N” (for “NO”) if the weight gain was inadequate and Y (for Yes) if child has gained an adequate amount of weight.

EXPLAIN: that growth is adequate or enough if;

- The child reaches the expected minimum weight for the month
- or weighs more than the expected weight

And that growth is **inadequate** or not enough when a child:

- gains some weight, but not enough (that is the child does not reach the expected weight).
- does not gain weight.
- loses weight.

ASK: participants to compare weight today and expected weight for the next child on the list to determine whether the child has gained an adequate or inadequate amount of weight.

LISTEN: to all answers.

ENSURE: that the conclusion reached is correct. (This will depend upon what you have recorded as “weight today” for that child.)

ASK: what you should write in the box marked “Adequate growth” in the Register.

ENSURE: that participants answer correctly, then mention that they will always write “Y” to record an adequate weight gain and “N” to record inadequate weight gain.

REPEAT: this process until participants have determined whether the “weight today” of all children in the Register represent an adequate or inadequate weight gain.

4. PRACTICE

DISTRIBUTE: a copy of the Individual Work Guide (found at the end of this chapter) to each participant.

ASK: that participants work individually and practice determining whether each child listed in the Individual Work Guide has gained an adequate amount of weight.

EXPLAIN: that participants should use the Individual Work Guide and the Table of Minimum Expected Weight Gain (in their Handbook) and carry out the following tasks:

Based upon the child’s weight at baseline, identify the expected weight at the first monthly weighing session one month later (14/06/05) and write it in the correct space.

Then determine whether each child gained adequate weight between the baseline and the first monthly weighing session.

Write “Y” in the space for “Adequate growth” when a child has gained an adequate amount of weight or “N” when a child has gained an inadequate amount of weight.

Repeat the process between the first and second monthly sessions and write “Y” or “N” in the Adequate weight box to indicate whether or not the child gained adequate weight.

EXPLAIN: that when all of a group’s members have finished these tasks, they should compare their work with each other. If they have doubts or cannot resolve differences, they should ask a facilitator for assistance.

CIRCULATE: to ensure that all participate and receive individual support as needed.

5. PRESENTATIONS

ASK: a representative from one group to compare the expected weight of the first child on the Individual Work Guide with the child’s weight today and to state whether growth has been adequate or not.

ASK: if all participants are in agreement, or if they have additional comments.

ASK: another participant to state whether the weight gain of the second child in the Individual Work Guide was adequate or inadequate.

ASK: If others are in agreement with the participant’s answer,

CONTINUE: in this way until you have discussed and agreed about the adequacy of growth for all the five children listed in the Individual Work Guide for both the first and the second Grow Healthy session.

6. SUMMARY

ASK: participants to explain how to use expected weight gain to determine whether a child has gained an adequate amount of weight in the past month.

ENSURE: that the following explanation is given (in the participant’s own words):
Compare the child’s weight today with the child’s expected weight to decide whether the child has gained an adequate amount of weight or has an inadequate weight.

EXPLAIN: that in the following exercise participants will learn how to use a child’s growth curve to determine whether growth has been adequate.

INDIVIDUAL WORK GUIDE

Practice in Determining whether Each Child Is Growing Adequately

Data of the _____ community of the _____ Health Center

Community census date -- 10/05/05

Name	Date of Birth	Age at baseline (in months or days)	Weight in at baseline (kg)	1 st Growth Promotion Session: 14/06/05			2 nd Growth Promotion Session: 12/07/05		
				Expected weight	Weight today (kg)	Adequate growth (Y/N)	Expected weight (kg)	Weight today (kg)	Adequate growth (Y/N)
Beatrice Kawumo	10/12/04	5 m	6.5		6.1			6.6	
Patrick Sendagire	15/02/05	2 m	5.5		6.0			6.1	
Peter Lugwile	03/03/05	2 m	5.0		-			6.0	
Lizzy Kalenzi	12/04/05	28 d	4.0		4.7			5.3	
David Manzi	20/04/05	20 d	3.8		4.5			5.2	

With the above information, you can do the following:

1. Using the Table of Minimum Expected Weight Gain, calculate the expected weights for the first growth promotion session and for the second growth promotion session.
2. Determine whether each child gained adequate weight or not for each session.

EXERCISE 11: DRAWING A CHILD'S GROWTH CURVE

Objectives:	At the end of this exercise, the participants will be able to: Use a child's weight today and previous weight to draw his or her growth curve on a growth chart.
Duration:	2 hours
Methodology:	Demonstration, reading, practice.
Materials:	Promoter's <i>Handbook</i> Large size Register page of Children Under 2 Years of Age (from the previous exercise) Large size portion of a growth chart from a child health card Paper Pencils Masking tape Each community's Register of Children Under 2 Years of Age (if available) Photocopies of growth chart (about 5 for each participant)
Prepare in advance:	On the large size growth chart, fill in the months only according to the example that is provided on page 13 or 14 of the Promoters <i>Handbook</i> . Plot in the first weight in April at 3kg.
Contents:	<ol style="list-style-type: none">1. Introduction2. Reading3. Demonstration4. Practice5. Presentation6. Summary

1. INTRODUCTION

EXPLAIN: that the Promoters will be able to monitor the monthly growth of any child under 2 years of age by plotting the child's weight on the child's growth card, drawing the child's growth curve and interpreting the growth curve.

2. READING

ASK: participants to gather in their community groups to read their Promoter's *Handbook*, pages 13 – 17, from "Draw the grow curve" to "What happens if a child misses one or more growth promotion sessions". (Remind them to look up when they have finished.)

CIRCULATE: to provide assistance to groups and individuals, as needed.

3. DEMONSTRATION

PLACE: the large-size version of the child's growth card on the wall.

DEMONSTRATE: how to plot a child's weight on the large growth card, explaining each step. You may wish to use the following steps (*supplying realistic information to fill in the blanks*):

1. Review the different parts of the growth chart with the participants.
2. Point out that the child was born in *March 2005 as in the Figure 2C on page 14 of the Handbook*. The child was brought to his first weighing session in April when he was one month old.
3. Point out that in April the child weighed 3.0 kilograms. Show where the 3.0kg was plotted in April on the chart
4. State that the child has just been weighed, during the monthly session of May 2005, and this month he weighs 3.8 kg.
5. Point to the present month in the appropriate box along the bottom of the chart.
6. Using a ruler, and starting in the middle of the box, lightly draw a broken line directly upwards until you have crossed all three of the guide lines printed on the chart (such as in *Figure 2A on page 13*).
7. Mention again that the child's weight this month is 3.8 kilograms and show where that number of kilograms falls along the horizontal axis of the chart.
8. With a ruler, lightly draw a broken line straight across the chart to the right until it meets the vertical broken line that you have already drawn (*example in Figure 2C on page 14*)
9. Where the two broken lines meet, draw a dark dot.
10. Erase both broken lines.
11. State that what you have just done is plot the child's "weight today".
12. Draw a line connecting the dot from last month's weighing session and the dot that you have just made for this month.
13. State that you have just drawn the child's growth curve.
14. Erase the dot that you have marked for this month and the curve that you have drawn.

ASK: for a volunteer to come forward and repeat the demonstration exactly as you have just done it, describing aloud what he/she is doing.

[**NOTE:** If the volunteer has questions or problems while carrying out the demonstration, you may wish to ask the other participants to make suggestions or provide help.]

4. PRACTICE

DISTRIBUTE: at least 5 photocopies of the growth chart to each participant.

ASK: that participants gather in their community groups and work individually to practice plotting children's weights and drawing their growth curves on the growth chart. Add that because they will be in their community groups, they may help one another.

EXPLAIN: that for this practice, they should use the weight and age information listed for the children in the Register posted on the wall, using the baseline weights and the "weight today" for the first weighing session to draw the growth curve.

CIRCULATE: to give individual support as needed.

NOTE TO FACILITATORS: As you circulate, check to see if participants fill in EACH growth chart correctly according to the birth date of the child.

5. PRESENTATION

ASK: one participant to demonstrate how to plot the weight and draw the growth curve of the first child listed in the Register on the wall.

[NOTE: If the volunteer has questions or problems while carrying out the demonstration, you may wish to ask the other participants to make suggestions or provide help.]

6. SUMMARY

EXPLAIN: that participants have now learned the following two skills:

1. how to identify the next expected weight of a child under 2 years of age, and
2. how to plot the weight and draw the growth curve of a child under 2 years of age on a growth chart.

[NOTE: Ask participants to save the growth charts they have drawn during this exercise, because they will use them in a later exercise.]

EXERCISE 12: USING A CHILD'S GROWTH CURVE TO DETERMINE WHETHER THE CHILD HAS GAINED AN ADEQUATE AMOUNT OF WEIGHT

Objectives: At the end of this exercise the participants will be able to:

Use a child's growth curve to determine whether the child's weight gain is adequate.

Duration: 2 hours

Methodology: Demonstration, reading, group practice.

Materials:

- Promoter's *Handbook*
- Large size growth chart with a child's growth curve drawn (*see, for example, Figure 3B on page 16 of Promoter Handbook*)
- Large size growth chart with a child's growth curve drawn (*see, for example, Figure 3D on page 16 of Promoter Handbook*)
- The growth curves participants drew in the previous Exercise 11
- Flipchart paper
- Markers
- Pencils

Content:

1. Introduction
2. Demonstration
3. Practice
4. Plenary session
5. Summary

1. INTRODUCTION

EXPLAIN: that in this session participants will learn another way to determine whether a child has gained an adequate amount of weight between weighing sessions.

2. DEMONSTRATION

ASK: participants to remind you about one way to determine whether a child under two years of age has gained an adequate amount of weight since the last weighing session.

ENSURE: that participants identify the following way to determine whether a child has gained an adequate amount of weight in the past month:

- For a child under two years of age, they can compare the child's weight today with his/her expected weight to decide whether the child has gained an adequate amount of weight.

EXPLAIN: that they are going to learn a second way for determining whether a child gained adequate weight or not. They already know how to plot the child's weight today on his/her growth chart and draw the child's growth curve. In this exercise they will learn

how to compare the child's growth curve to the reference lines on the growth chart to determine whether growth has been adequate.

PLACE: on the wall the large-size growth chart that shows the growth curve of a child who has **adequate** growth (such as Figure 3B on page 16) in the *Promoter Handbook*.

DEMONSTRATE: how to compare the child's growth curve to the reference lines to determine whether growth has been adequate. You may wish to use the following steps:

1. Point out that lines have been drawn to connect the points that show the child's weight for each month.
2. Trace the line with your finger to show that it curves upward.
3. Trace the closer reference line with your finger to show that it also curves upward.
4. Point out that both lines curve upward in the same way or the child's growth curve is even going up more steeply than the reference curve.
5. Explain that this means that the child is growing well.
6. Point out that this is done for every monthly segment when the growth curve is drawn in after weighing for that month.

PLACE: on the wall the poster-size growth chart that shows the growth curve of a child who has **inadequate** growth.

DEMONSTRATE: how to compare the child's growth curve to the reference lines to determine whether growth has been adequate. You may wish to use the following steps:

1. Point out that lines have been drawn to connect the points that show the child's weight for each month.
2. Trace the line with your finger to show that although the line began curving upward, in the last month the line is becoming flatter and not going up as steeply as the reference curve.
3. Trace the closer reference line with your finger to show that it curves upward.
4. Point out that the child's growth curve does not follow the slope of the reference curve.
5. Explain that this means that the child is NOT growing well.

3. PRACTICE

EXPLAIN: that participants will now have an opportunity to practice determining whether a child's growth curve shows that the child has gained an adequate amount of weight.

ASK: participants to take the growth charts that they drew during Exercise 11 and do the following:

1. Compare the growth curve for the child with the closest reference line.
2. Determine whether the child's growth for the past month has been adequate.
3. Write below the chart "YES" if growth has been adequate or "NO" if it has not.

4. PLENARY SESSION

- ASK:** one participant to hold up one of the growth curves, state whether growth had been adequate or not, and explain why it has or has not been adequate.
- ASK:** if the other participants are in agreement or if they want to add something else.
- ENSURE:** that the correct interpretation and explanation are given for the child's curve.
- REPEAT:** this process with other participants until all of the growth curves have been shared with the group.
- ASK:** if all the participants are in agreement or if they want to add something else. (Make sure to explain any changes that will be made.)

5. SUMMARY

- EXPLAIN:** that participants have just learned how to determine whether a child is gaining weight using the growth curve that is drawn every month.
. We also learned previously how to determine whether a child grew well or not using another method.
- ASK:** one participant to remind everyone how to determine whether a child is gaining weight adequately or inadequately using the first method we learned.
- ENSURE:** that the participant answers that in order to know whether a child is gaining weight adequately or inadequately, it is necessary to:
- Compare the child's weight today with his/her expected weight.
 - Record the child's weight on the child's health card
 - Record the weight today on the Register
 - If the growth is adequate, write "Y" for "Yes" in the adequate weight gain box.
 - If the growth is inadequate, write "N" for "No" in the "Adequate weight" gain box.
- .

EXERCISE 13: CHECKING WHETHER A CHILD IS DUE OR OVERDUE FOR A IMMUNIZATION

Objectives:	At the end of this exercise, each participant will be able to: Determine whether a child is due or overdue for immunizations when given the child's date of birth and immunization schedule.
Duration:	2 hours
Methodology:	Demonstration, practice
Materials:	Promoter's <i>Handbook</i> Monthly calendar (printed in the Promoter's Handbook) Photocopies of sample immunization records (included at end of exercise)
Prepare in advance:	A large version of the immunization schedule
Content:	<ol style="list-style-type: none">1. Introduction2. Explanation3. Example3. Discussion4. Demonstration5. Small group work6. Discussion7. Summary

1. INTRODUCTION

EXPLAIN: that another very important way in which parents protect the health and growth of their children is by making sure that they get all of the immunizations that they need. This means that each child should receive his or her immunizations according to the schedule that has been established for young children. An important way in which Promoters can serve their communities is helping parents determine whether their young children are due or overdue for immunizations and encourage them to go for immunization.

2. EXPLANATION

PLACE: on the wall the large version of the immunization schedule that you have prepared.

REVIEW: the schedule with participants. You may wish to use the following steps:

1. Point out that the first column of the schedule lists the AGES at which a child should be given immunizations. Ask a Promoter to read the ages out loud.
2. Point out that the second column lists the names of the immunizations that the child should receive, the third column shows against what diseases each

immunization will protect the child, and the fourth column tells how the immunization should be given. Explain that these three columns help the health worker remember and keep track of the immunizations that are given. Neither the Promoter nor the mother/parents of the child need to focus on the information in these columns to ensure that the child gets the protection he/she needs.

3. Point to the last (fifth) column. Explain that in this column the health worker records when a child has received an immunization. Add that Promoters and parents should pay careful attention to this column, as well as to the first column. (Point to the first column with one hand and the fifth column with the other.)

COVER: columns two, three and four (“VACCINE,” “PROTECTS AGAINST” AND “HOW GIVEN”) with paper – so that only columns one and five are visible.

ASK: participants why they think that you have stated that Promoters and parents should pay special attention to the first and the last (fifth) columns.

LISTEN: to all responses.

ENSURE: that the following points are made:

- The first column lists the ages at which a child should receive immunizations.
- In the fifth column the health worker records the date when each immunization is received.
- Promoters and parents can know whether a child is due or overdue for an immunization by comparing the information in these two columns.

EXPLAIN: that a child should receive two immunizations at birth or very shortly after birth. Point out that in the “At Birth” row of the schedule, there are two boxes. A health worker will write the date on which those two immunizations are given in the two boxes. The promoters will not write the dates in the corresponding boxes. The promoters will use the information written by health workers to determine whether a child is due or overdue for immunization.

3. EXAMPLE

GIVE: the following example:

- William is born on 15 March 2005.
- His birth takes place in the health center.
- One of the health workers there gives him two immunizations – his BCG and oral Polio.
- That health worker writes the date in each of the two spaces for the “At Birth” row of the schedule. (WRITE 15/03/05 IN EACH OF THE BOXES FOR THE AT BIRTH ROW.)

ASK: participants at what age William should receive his next immunizations.

LISTEN: to all responses.

ENSURE: that the response is “at 6 weeks” (or one-and-a-half month)

- ASK:** on what date William will be 6 weeks old.
- LISTEN:** to all responses.
- ENSURE:** that the response is “on 30 April.” (If participants have trouble identifying when he will be 6 weeks old, refer to the calendar on page 48 of the Handbook and help them count the weeks.)
- ASK:** What will you tell the mother of William if she comes with William to your Grow Healthy session on 26th of April?
- LISTEN:** to all responses.
- ENSURE:** that they will remind William’s mother to take William for his immunization on 30 April or within the next few days.
- CONTINUE:** the example begun above:
- William’s mother takes him to the health center on 30 April.
 - The health worker looks at William’s child health card, reads the immunization schedule and explains to William’s mother that the child needs two immunizations.
 - The health worker gives William the two immunizations.
 - The health worker writes the date in each of the two boxes of the “At 6 weeks” row. (WRITE 30/04/05 IN EACH OF THE BOXES FOR THE AT 6 WEEKS ROW.)
- EXPLAIN:** that normally, the health worker should then tell the mother on what date she should bring William back for his next immunizations. But the health worker forgets to do so.
- ASK:** participants at what age William should receive his next immunizations.
- LISTEN:** to all responses.
- ENSURE:** that the response is “at 10 weeks.”
- ASK:** how many weeks should pass between William’s 6 weeks immunizations and his 10 weeks immunizations.
- LISTEN:** to all responses.
- ENSURE:** that the response is that 4 weeks (or one month) should pass between his 6 weeks immunizations and his 10 weeks immunizations.
- EXPLAIN:** That even when William would have received his 6-weeks immunizations when he was 8 weeks old, the next immunizations should be 4 weeks later, so not when he is 10 weeks old but when he is 12 weeks old.
- ASK:** on what date William will be 10 weeks old.
- LISTEN:** to all responses.

- ENSURE:** that the response is “on 30 May.” (If participants have trouble identifying when he will be 10 weeks old, hold up the monthly calendar for all to see. Point out that William was 6 weeks old on 30 April and help them count up to 10 weeks.)
- ASK:** What will you tell the mother of William if she comes with William to your Grow Healthy session on the 1st of June and you see William received his immunizations yesterday?
- LISTEN:** to all responses.
- ENSURE:** that they will praise William’s mother for taking William for his immunization at the right time.
- CONTINUE:** the example from above:
- William’s mother takes him to the health center on 30 May.
 - The health worker looks at William’s child health card, reads the immunization schedule and explains to William’s mother that the child needs two immunizations.
 - The health worker gives William the two immunizations.
 - The health worker writes the date in each of the two boxes of the “At 10 weeks” row. (WRITE 30/05/05 IN EACH OF THE BOXES FOR THE “AT 10 WEEKS” ROW.)
- EXPLAIN:** that again the health worker forgets to tell the mother on what date she should bring William back for his next immunizations.
- ASK:** participants at what age William should receive his next immunizations.
- LISTEN:** to all responses.
- ENSURE:** that the response is “at 14 weeks.”
- ASK:** how many weeks should pass between William’s 10 weeks immunizations and his 14 weeks immunizations.
- LISTEN:** to all responses.
- ENSURE:** that the response is that 4 weeks (or one month) should pass between his 10 weeks immunizations and his 14 weeks immunizations.
- EXPLAIN:** That even when William would have received his 10-weeks immunizations when he was 12 weeks old, the next immunizations should be 4 weeks later, so not when he is 14 weeks old but when he is 16 weeks old.
- ASK:** on what date William will be 14 weeks old.
- LISTEN:** to all responses.
- ENSURE:** that the response is “on 30 June.” (If participants have trouble identifying when he will be 14 weeks old, hold up the monthly calendar for all to see. Point out that William was 10 weeks old on 30 May and help them count up to 14 weeks.)

- ASK:** What will you tell the mother of William if she comes with William to your Grow Healthy session on the 5th of July and you see William did not yet receive his ‘at 14 weeks immunization’?
- LISTEN:** to all responses.
- ENSURE:** that they will remind William’s mother to take William for his immunization as soon as possible.
- CONTINUE:** the example begun above:
- William’s mother takes him to the health center on 30 June.
 - The health worker looks at William’s child health card, reads the immunization schedule and explains to William’s mother that the child needs two immunizations.
 - The health worker gives William the two immunizations.
 - The health worker writes the date in each of the two boxes of the “At 14 weeks” row. (WRITE 30/06/05 IN EACH OF THE BOXES FOR THE “AT 14 WEEKS” ROW.)
- EXPLAIN:** that again the health worker forgets to tell the mother on what date she should bring William back for his next immunizations.
- ASK:** participants at what age William should receive his next immunizations.
- LISTEN:** to all responses.
- ENSURE:** that the response is “at 9 months.”
- ASK:** on what date William will be 9 months old.
- LISTEN:** to all responses.
- ENSURE:** that the response is “on 15 December.” (If participants have trouble identifying when he will be 9 months old, point out that because William was born on 15 March, he was 1 month old on 15 April, 2 months old on 15 May, 3 months old on 15 June, etc. and help them count up to 9 months.)
- ASK:** In case William had received his ‘At 14 weeks’ Immunization not when he was 14 weeks old but when he was 5 months old, when should William go for his ‘At 9 months’ immunization”
- LISTEN:** To all responses
- ENSURE:** That the answer is that it does not matter when William received his last immunization. Immunization against Measles should be given when a child is 9 months old no matter what other immunizations the child had or has not had.
- CONTINUE:** the example begun above:
- William’s mother takes him to the health center on 15 December.
 - The health worker looks at William’s child health card, reads the immunization schedule and explains to William’s mother that the child needs one immunization.

- The health worker gives William the immunization.
- The health worker writes the date in the box of the “9 months” row.
(WRITE 15/12/05 IN THE BOX FOR THE “9 MONTHS” ROW.)

4. DISCUSSION

ASK: participants to explain how the mother knew when she should bring William for each of his immunizations.

LISTEN: to all responses.

ENSURE: that the response (in the participants’ own words) is that the mother brought William to be vaccinated at each of the ages listed in the FIRST COLUMN of the immunization schedule.

ASK: participants how many weeks should pass between the first time William is given immunizations and the second time. (Point to the “At birth” boxes and then to the “At 6 weeks” boxes.)

LISTEN: to all responses.

ENSURE: that the response is that 6 weeks should pass between the first time William is given immunizations and the second time.

ASK: participants how many weeks should pass between the second time William is given immunizations and the third time. (Point to the “At 6 weeks” boxes and then to the “At 10 weeks” boxes.)

LISTEN: to all responses.

ENSURE: that the response is that 4 weeks should pass between the second time William is given immunizations and the third time.

ASK: participants how many weeks should pass between the third time William is given immunizations and the fourth time. (Point to the “At 10 weeks” boxes and then to the “At 14 weeks” boxes.)

LISTEN: to all responses.

ENSURE: that the response is that 4 weeks should pass between the third time William is given immunizations and the fourth time.

ASK: participants how old William should be before he receives his next immunization.

LISTEN: to all responses.

ENSURE: that the response is that William should be 9 months old when he receives his next immunization.

ASK: participants whether children always receive their immunizations exactly according to the schedule.

LISTEN: to all responses.

- ENSURE:** that participants respond that many children do not get their immunizations according to the schedule.
- ASK:** why some children may not get their immunizations according to the correct schedule.
- LISTEN:** to all responses.
- [NOTE:** answers may include the following:
- The mother may not have time to take the child on the day he/she should receive the next immunizations.
 - The health center may be very far, and the mother may need to wait until an outreach session is held nearby.
 - Some mothers do not bring the child for immunization when child is sick – even though they should.]
- EXPLAIN:** that an important service that Promoters can provide to the families of young children in their communities is helping them determine whether a child is due or overdue for immunizations and encourage them to go for immunizations when needed.

5. DEMONSTRATION

- EXPLAIN:** that once a person can identify when a child’s next immunizations should be given, that person can determine whether the child is due or overdue for those immunizations.
- GIVE:** the following example, using the large version of the Immunization Schedule:
- Sarah was born on 10/06/05
 - She was given her “At Birth” immunizations on 10/06/05. (WRITE THIS DATE IN THE TWO BOXES FOR THE “AT BIRTH” ROW.)
 - Her mother took her to the health center on 23/07/05, and the health worker gave Sarah her “At 6 weeks” immunizations. (WRITE THIS DATE IN THE TWO BOXES FOR THE “AT 6 WEEKS” ROW.)
 - Sarah’s mother was very busy during the next weeks. With all she had to do, she forgot about having to take Sarah for her next immunizations.
 - A community-based growth promotion program was begun in Sarah’s village. The Promoters did their community census on 08/09/05.
 - **When the Promoters reviewed Sarah’s Immunization record, they saw that she had not yet received her “At 10 weeks” immunizations. She should have received them when she was 10 weeks old, on 20/08/05. When the Promoters realized that Sarah was OVERDUE for her immunizations, they explained this to the mother and encouraged her to take Sarah to receive them as soon as possible.**
 - The mother took Sarah to the health center the next day, and Sarah received her “At 10 weeks” immunizations. (WRITE 09/09/05 IN THE TWO BOXES FOR THE “AT 10 WEEKS” ROW. BE SURE TO MENTION THAT EVEN THOUGH SARAH IS NOT 10 WEEKS OLD, THE IMMUNIZATIONS ARE RECORDED IN THOSE SPACES.)
 - The health worker reminded Sarah’s mother that the child would need to be brought back for more immunizations in 4 weeks, on 07/10/05.

NOTE for the facilitator: the portion in bold should be the major focus during this demonstration, emphasizing the role of the growth promoter.

6. SMALL GROUP WORK

- GIVE:** each participant copies of the “Sample Immunization schedules” that are included at the end of this exercise.
- EXPLAIN:** that you are going to ask participants to break into small groups. Within each group, the members should first work individually to determine whether each child is due or over due for immunizations. When each person has completed the task, the members should compare their results with each other and work together to clarify any questions that arise.
- ASK:** participants to get into small groups (3 – 4 members each), to begin work and to let the facilitators know when they have finished.

CIRCULATE: to provide assistance as needed.

7. DISCUSSION

- ASK:** participants to come together as a group again.
- ASK:** one of the small groups to state whether the first child, James, is due or overdue for a immunization and to explain their answer.
- LISTEN:** to their responses.
- ENSURE:** that they respond that yes -- the first child, James, is due for his next immunizations and should be referred to the nearest immunization post.
- ASK:** when he should receive his next immunizations.
- ENSURE:** that participants respond that he should get them as soon as possible.
- ASK:** the other participants whether they agree. If they do, continue with the next child/next group. If they do not, ask why.
- ASK:** another of the small groups to state whether the second child, Carol, is due or overdue for a immunization and to explain their answer.
- LISTEN:** to their responses.
- ENSURE:** that they respond that yes -- the second child, Carol, is due for her next immunizations and should be referred to the nearest immunization post.
- ASK:** when she should receive her next immunizations.
- ENSURE:** that participants respond that she should get them as soon as possible.
- ASK:** the other participants whether they agree. If they do, continue with the next child/next group. If they do not, ask why.

- ASK:** another of the small groups to state whether the third child, Mark, is due or overdue for immunizations and to explain their answer.
- LISTEN:** to their responses.
- ENSURE:** that they respond that yes -- the third child, Mark, is overdue for his measles immunization and should be referred to the nearest immunization post.
- ASK:** when he should receive his measles immunization.
- ENSURE:** that participants respond that he should get it as soon as possible.
- ASK:** the other participants whether they agree. If they do, continue with the next child/next group. If they do not, ask why.
- ASK:** another of the small groups to state whether the fourth child, Jennifer, is due or overdue for immunizations and to explain their answer.
- LISTEN:** to their responses.
- ENSURE:** that they respond that no, the fourth child, Jennifer, is not due for her next immunizations.
- ASK:** when Jennifer should receive her next immunizations.
- ENSURE:** that participants respond that she should get them on 16 April.
- ASK:** the other participants whether they agree. If they do not, ask why. If they do, continue on to the Summary.
- [NOTE:** Provide extra practice for participants who need it.]

8. SUMMARY

- ASK:** participants to summarize the main points of the exercise.
- ENSURE:** that the following points are made:
- Every child should receive his or her immunizations according to the schedule that has been established for young children.
 - An important way in which Promoters can serve their communities is helping parents determine whether their young children are due or overdue for immunizations.
 - To determine whether a child is due or overdue for a immunization, promoters and parents may do the following:
 1. Calculate the child's age.
 2. Compare that age with the ages listed in the first column of the child's Immunization schedule (in the Child Health Card).
 3. If the child's age is the same as one of the ages listed in the schedule, or falls between two of the ages listed, check to see whether dates have been entered in the two boxes for that age in the last column of the schedule.
 4. If dates have been entered there, then the child is up to date on his/her immunizations.

5. If dates have NOT been entered there, then the child is due/overdue for immunizations.
- When Promoters determine that a child is due/overdue for immunizations, he or she should encourage the child's parents to take the child to receive immunization as soon as possible.

SAMPLE IMMUNISATION RECORDS

The following 4 children are brought to your monthly 'Grow Healthy' session, held on 27th March 2005. Identify whether or not they are due/overdue for their next immunization.

Record for James, born 7/01/05.

Is he due/overdue for immunizations? YES _____ NO _____

	VACCINE	PROTECTS AGAINST	HOW GIVEN	DATE GIVEN
At Birth	BCG	Tuberculosis	Right Upper arm	8/01/05
	Polio o	Polio	Mouth Drops	8/01/05
At 6 Weeks	Polio 1	Polio	Mouth Drops	18/02/05
	DPT – HebB+Hib 1	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	18/02/05
At 10 Weeks	Polio 2	Polio	Mouth Drops	
	DPT – HebB+Hib 2	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	
At 14 Weeks	Polio 3	Polio	Mouth Drops	
	DPT – HebB+Hib 3	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	
9 Months	Measles	Measles	Left Upper arm	

Record for Carol, born 3/12/04.

Is she due/overdue for immunizations? YES _____ NO _____

	VACCINE	PROTECTS AGAINST	HOW GIVEN	DATE GIVEN
At Birth	BCG	Tuberculosis	Right Upper arm	10/12/04
	Polio o	Polio	Mouth Drops	10/12/04
At 6 Weeks	Polio 1	Polio	Mouth Drops	16/01/05
	DPT – HebB+Hib 1	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	16/01/05
At 10 Weeks	Polio 2	Polio	Mouth Drops	13/02/05
	DPT – HebB+Hib 2	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	13/02/05
At 14 Weeks	Polio 3	Polio	Mouth Drops	
	DPT – HebB+Hib 3	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	
9 Months	Measles	Measles	Left Upper arm	

Record for Mark, born 18/05/04

Is he due/overdue for immunizations? YES _____ NO _____

	VACCINE	PROTECTS AGAINST	HOW GIVEN	DATE GIVEN
At Birth	BCG	Tuberculosis	Right Upper arm	21/05/04
	Polio o	Polio	Mouth Drops	21/05/04
At 6 Weeks	Polio 1	Polio	Mouth Drops	3/07/04
	DPT – HebB+Hib 1	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	3/07/04
At 10 Weeks	Polio 2	Polio	Mouth Drops	1/08/04
	DPT – HebB+Hib 2	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	1/08/04
At 14 Weeks	Polio 3	Polio	Mouth Drops	3/09/04
	DPT – HebB+Hib 3	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	3/09/04
9 Months	Measles	Measles	Left Upper arm	

Record for Jennifer, born 4/12/04

Is she due/overdue for immunizations? YES _____ NO _____

	VACCINE	PROTECTS AGAINST	HOW GIVEN	DATE GIVEN
At Birth	BCG	Tuberculosis	Right Upper arm	5/02/05
	Polio o	Polio	Mouth Drops	5/02/05
At 6 Weeks	Polio 1	Polio	Mouth Drops	19/03/05
	DPT – HebB+Hib 1	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	19/03/05
At 10 Weeks	Polio 2	Polio	Mouth Drops	
	DPT – HebB+Hib 2	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	
At 14 Weeks	Polio 3	Polio	Mouth Drops	
	DPT – HebB+Hib 3	Diphtheria/Tetanus/Whooping Cough/Hepatitis B/H. Influenzae type B	Left Upper Thigh	
9 Months	Measles	Measles	Left Upper arm	

EXERCISE 14: CHOOSING WHICH COUNSELING CARD TO USE

Objective: At the end of this exercise, the participants will be able to:
1. Choose which counseling card to use according to the situation of each child.

Duration: 2 hours

Methodology: Demonstration, reading and practice.

Materials: Promoter's *Handbook*
Set of counseling cards
Photocopies of worksheets (at the end of this exercise) for participants
Flipchart Paper
Markers

Prepare in advance:
Table summarizing cases on flipchart paper

Content:

1. Introduction
2. Reading
3. Explanation
4. Demonstration
5. Practice
6. Plenary session
7. Summary

1. INTRODUCTION

EXPLAIN: that each child who comes to the Promoter is a unique case who has his/her own characteristics and his/her own needs. Counseling cards have been developed to help you identify and address these individual needs and come to an agreement with the mother/caregiver what she can do to take better care of the child.

2. READING

ASK: participants to open their *Handbooks* on page 18 and read along as you (or one or more participants) read aloud "4 - Counseling caregivers to promote growth", till the end of the list of counseling cards on page 19.

3. EXPLANATION

EXPLAIN: that there are 16 counseling cards, of which 11 focus directly on children. The first of these cards on newborn and postnatal care is for use during the postnatal home visitations you will carry out, the other cards are for use during the monthly 'Grow Healthy' session and/or home visitations.

ASK: participants to take out their counseling cards.

EXPLAIN: that as they can see by looking at their cards, they are grouped in the following way:

<p>PREGNANT WOMEN: CARD 1 Pregnancy Care CARD 2 Birth Preparedness</p> <p>CHILDREN: CARD 3 Newborn and After birth Care CARD 4 Feeding 0-6 months CARD 5 Feeding 0-6 months – not breastfed CARD 6 Feeding 6-12 months CARD 7 Feeding 12-24 months CARD 8 Immunization (immunisable disease prevention 0-5 years) CARD 9 Hygiene and Sanitation (Diarrhea prevention 0-5 years) CARD 10 Insecticide treated nets (Malaria prevention) 0-5 years CARD 11 Fever (Hot Body) CARD 12 Loose stools CARD 13 Fast breathing / cough</p> <p>ADULTS: CARD 14 Child spacing CARD 15 Conflict Resolution CARD 16 HIV Counseling and Testing (HCT)</p>

- Cards 1 and 2 are used with pregnant women during a home visit
- Card 3 is used during home visit of a newborn baby during a home visit
- Card 4, 5, 6 and 7 are used during Grow Healthy sessions to counsel caregivers on the feeding of their child according to their age
- Card 8, 9 and 10 are used to counsel on disease prevention during Grow Health sessions and at home
- Card 11, 12 and 13 are used for sick children to determine whether they need to be referred for medical care or can be treated in the community. They are used during Grow Healthy sessions or during home visits
- Card 14, 15 and 16 is for use with adults

EXPLAIN: to participants that sometimes they may need to use more than one card to counsel a mother, such as a feeding card to counsel about feeding and a card to counsel about hygiene.

4. DEMONSTRATION

DEMONSTRATE: how to choose the correct counseling card according to the situation of the child, using the following exercise:

Theresa is the mother of Robert, a 7-month old child who has gained an inadequate amount of weight this month because he has suffered from diarrhea. Robert has recovered.

EXPLAIN: that as they read in their Promoter's *Handbook*, they should think about how old the child is and whether the child is healthy or ill or has been ill in this month as they prepare to choose which counseling card to use. In the case of Robert, they would consider the following:

How old is the child? (7 months)
Is he or has he been sick? (yes, had diarrhea)
Counseling card to use (card 6 and 9)

- SHOW:** participants the card you have chosen.
- ASK:** one participant to explain why you have chosen that counseling card to use with Theresa and her 7-month-old child. If the participant needs help, invite other participants to help her/him.
- ASK:** Which card would you use with an 8-month old child whose caregiver says is not ill and has adequate growth?
- ENSURE:** that participants answer that you would use card 6.
- [NOTE:]** you may wish to give participants a little more practice by asking what cards would be used with the following children:

More examples for practice

- A 28 day old baby who is not breastfed (Answer: card 5 and card 8)
- A 17 month old baby who did not gain weight and also has loose stools (Card 12 to begin with; whether other cards should be used depends on his condition)
- A 12 month old who is growing well and is well now but had fever last month (Card 7 and 10 and 8)

- LISTEN TO:** the participants answers after presenting each case. If some of them have questions or difficulties, invite another participant who got it right to explain.

5. PRACTICE

- ASK:** participants to gather in their community groups.
- EXPLAIN:** that you are going to give each participant a list of children, including each child's age and health status. (Hold up the worksheet.) They should then do the following:
- Each participant should write in the space provided the number of the card that should be used to counsel the caregiver of that child.
 - When they have finished choosing the cards for all of the children, they should share their answers with the other Promoters in their group.
 - Each group should come to agreement about the cards to use.
- GIVE:** each participant a copy of the worksheet included at the end of this exercise.
- ASK:** that the members of each community look up when they have finished.
- CIRCULATE:** among the groups to ensure that everyone participates and to give support as needed.

6. PLENARY SESSION

- ASK:** a participant to state which card should be used for the first child and why.
- ASK:** other participants whether they agree or do they have something else to add.
- ENSURE:** that the correct card is chosen. You may wish to consult the “Answer Sheet” provided at the end of this exercise for your convenience.
- ASK:** another participant to state which card(s) should be used for the second child and why.
- ASK:** other participants whether they agree or have something else to add.
- CONTINUE:** in this way until participants have stated which card(s) to choose and why for each of the children listed in the worksheet.

7. SUMMARY

- ASK:** participants to explain how to choose which counseling card(s) to use with a mother and child who are in the growth promotion program.
- ENSURE:** that they explain that they must think of the following as they choose the card to use:
- The child’s age
 - Whether the child is healthy or sick or has been sick in that month

CHOOSING WHICH COUNSELING CARD TO USE

- WORKSHEET -

Name of child	Age	Health status	Counseling card
Andrew Mukisa	3 months	Healthy	
Betty Kalule	7 months	Healthy	
Florence Kikulwe	15 months	Suffering malaria	
Chris Mutalya	10 months	Suffered diarrhea	
Agnes Kakele	5 months	Weak, not breastfed	
Joshua Batabaire	9 months	Healthy, due for immunization	
Michael Luwire	18 months	Suffered malaria	
Dorothy Bukirwa	4 months	Healthy	
Samuel Sempijja	23 months	Suffering cough	

CHOOSING WHICH COUNSELING CARD TO USE

- ANSWER KEY -

Name of child	Age	Health status	Counseling card
Andrew	3 months	Healthy	4 8, 9 or 10 optional
Betty	7 months	Healthy	6 8, 9 or 10 optional
Florence	15 months	Suffering malaria	11, 7
Chris	10 months	Suffered diarrhea	6 and 9, 8
Agnes	5 months	Weak, not breastfed	5 8, 9 or 10 optional
Joshua	9 months	Healthy, due for immunization	8 and 6
Michael	18 months	Suffered malaria	7 and 10, 8
Dorothy	4 months	Healthy	4 8, 9 or 10 optional
Samuel	23 months	Suffering cough	13 and 7

Frequently asked questions:

1. How many cards can be used in one counseling session?

We can use more than one counseling card per session, though we should also not try to give too much information to a mother at one given time.

2. How do we prioritize with which card to start?

If a child is sick, the first focus of the conversation is on the sickness of the child using one of the three counseling cards for sick children (11, 12 or 13 depending what the child is suffering from).

As we focus on children 0-2 years, which is the most vulnerable age group for malnutrition (remember day one), the card on feeding which matches with the child's age should always be a priority.

If a child has been sick, e.g. suffered malaria during the past month, the past sickness should guide you to discuss prevention of that illness in the future, e.g. discussing the use of mosquito nets.

Always check and counsel on immunization, unless a child is sick and needs a referral.

EXERCISE 15: USING THE COUNSELING CARDS

Objectives: At the end of this exercise the participants will be able to:

Use a counseling card to help negotiate changes in a caregiver's child feeding and health care practices. Specifically, they will be able to:

1. Congratulate a caregiver when the growth of her child has been adequate.
2. Explain to a caregiver that her child is not growing well and that more attention will need to be paid to feeding and care of the child.
3. Ask a caregiver questions appropriate to her child's situation, as described in the counseling card chosen for that situation.
4. Praise the caregiver for something she is doing well.
5. Share recommendations with the caregiver in the form of a dialogue.
6. Help the caregiver understand what to do by showing her the drawings on the counseling cards.
7. Negotiate specific agreements with the caregiver.
8. Remind the caregiver about other necessary actions to be taken to keep the child healthy.

Duration: 6 hours

Methodology: Brainstorming, group discussion, role-playing, demonstration, practice.

Materials: Promoter's *Handbook*
Counseling Cards
Large size Counseling Card such as card 4 on a flipchart sheet
Flipchart paper
Markers

Prepare in advance:

Write each of these questions on a separate sheet of flipchart paper.

1. What does it mean to do exclusive breastfeeding?
2. Why do you think that some mothers have problems breast-feeding exclusively their children less than six months of age?
3. Which is the best age for children to start eating solid foods and drinking other fluids?
4. How often should a child between 12 and 24 months eat in a day in addition to breastmilk?
5. What are common childhood illnesses, and how do you know a child is seriously ill?
6. How can some of these diseases be prevented?
7. In what ways can couples space the births of their children if the wish to do so?

Contents:

1. Introduction
2. Reading
3. Discussion
4. Brain-storming
5. Review and comparison (Counseling Cards 4)
6. Demonstration
7. Practice (Card 4)
8. Review and comparison (Counseling Card 5)
9. Practice (Card 5)
10. Review and comparison (Counseling Cards 6 and 7)
11. Practice (Card 6 and 7)
12. Review and comparison (Counseling Cards 11, 12, 13)
13. Practice (Practice Car 11, 12 and 13)
14. Review and comparison (Counseling card 8)
15. Review and comparison (Counseling Card 9)
16. Review and comparison (Counseling card 10)
17. Practice (Counseling Cards 8, 9 and 10)
18. Review and comparison (Card 14)
19. Practice (Card 14)
20. Summary

1. INTRODUCTION

EXPLAIN: that now that participants know how to choose the best counseling card to use with a child who comes for the monthly weighing session, it is time for them to learn more about the counseling cards themselves and how to use them.

2. BRAIN-STORMING

[Note: try to be efficient and not spend more than 30 minutes on the brainstorming]

EXPLAIN: Before we talk about the cards, let's find out more about the ways that children under 2 years of age in their communities are fed and the problems concerning their growth, feeding, and diseases. Mention that you will lead the participants in brainstorming.

ASK: participants to remind you what brainstorming is.

LISTEN TO: all answers. Be sure that the following points about brainstorming are mentioned:

- All ideas, opinions are accepted and recorded.
- No one criticizes or discusses what has been said until the brainstorming has ended.
- Everyone has an opportunity to participate.
- One person speaks at a time.
- All the information and comments made will remain within the group, that is, they will be confidential.

ADD: that after the brainstorming session has ended there will be an opportunity to discuss what has been said.

EXPLAIN: that one of the facilitators will lead the brainstorming and another one will write down the ideas/opinions of the group on flipchart paper. You will use that list during a discussion later in the exercise.

NOTE TO THE FACILITATOR: You are going to lead a brainstorming exercise. Your task is to help participants talk as freely as possible about their ideas and opinions. You should not agree or disagree with their opinions or ideas, nor should you express your opinion. Be sure that all participants have opportunities to speak, and not only those that are more talkative. Use the questions and the topics under “Explore the following” listed below to stimulate the brainstorming.

QUESTION GUIDE:

1. What does it mean to do exclusive breastfeeding?

Explore the following:

- What about giving the child water?
- What about giving the child small tastes of food?
- How can a mother increase the supply of breastmilk?
- Reasons for a mother not breastfeeding at all

2. Why do you think some mothers have problems doing exclusive breastfeeding of their children under six months of age?

Explore the following:

- Reasons for not breastfeeding
- Reasons for introducing other foods and liquids before children reach six months of age
- How should the baby be held by the mother to breastfeed and how should the baby’s mouth be placed on the breast to receive the milk?

3. Which is the best age for children to start eating solid foods and drinking other fluids?

Explore the following:

- Age when the child should begin eating soft and solid foods
- Age when the child is given food several times a day
- How many times should infants between 6 and 12 months receive other food in addition to breastmilk?
- What consistency should the food be?

4. How often and how much should a child be eating between 12 months and 24 months?

Explore the following:

- Until what age should a child be breastfed?
- What kinds of food should a child 12 – 24 months old eat?
- How many times should a child between 12-24 months old eat?

5. What common diseases affect young children?

Explore:

- What are some of the signs that a child is seriously ill and needs immediate care from health workers?
- What should be done with seriously ill children?
- What kinds of care can be provided at home for a sick child?
- How should sick children be fed?
- What about the feeding of a child who is recovering from illness?
- What should you do for a child who has poor appetite?

6. How can some of the common illnesses be prevented?

Explore:

- Prevention of malaria, diarrhea, worms. How?
- Immunization - any illnesses?

7. Child spacing

Explore

- What methods are there for spacing the births of children
- Who makes the decision on child spacing

3. READING

EXPLAIN: that before they learn to use the cards they will learn about the cards themselves.

ASK: participants to open their *Handbooks* to page 19 and to read along as you (or some of the participants) read out loud beginning with “Sections of the counseling card.” Continue through page 21 (including the review of both sides of the sample counseling card on pages 20 and 21).

PLACE: the large size Counseling Card on the wall so that all may see it.

EXPLAIN: that all Counseling Cards have the same basic structure. Point out the parts on the poster-sized Counseling Card and describe them, using the following descriptions:

1. **Heading.** This includes the number of the Counseling Card, the title (topic), and the age of the child (depending on the card)
2. **Introductory message,** in which the you show the card to the caregiver and explains whether the child has gained adequate weight or not, and also asks about the health of the child
3. **Main conversation.** There are four columns to guide you to have a conversation with the caregiver. The first column gives you questions to ask the caregiver. The second column provides the likely answers the caregiver will give to your questions. The third column has recommendations to discuss and negotiate with the mother to find out what she can do to improve the child’s feeding and health. These recommendations should be a discussion with the caregiver to find out what she thinks about the recommendation, whether or not she can follow it or maybe do it in a different way, and if she cannot follow the recommendation, what her reasons are for not following them. At the end of your discussion, you and the caregiver should have reached an agreement on what she can do at home to improve the feeding or care of the child. In the fourth and last column you ask the caregiver to confirm what she has agreed to do as a result of your conversation.
4. **Give an appointment** for the next time you will see the child. If you will also make a home visit, arrange for that too.

The set of counseling cards are arranged in a flipchart form. For each card there are **drawings** to use to explain the recommendations discussed with the caregiver. In time and with practice, you may be able to use the drawings in your dialogue with the mother without needing to read all messages.

<p>Note to facilitator: pick up a set of counseling cards to show how they are organized, making sure that you show how the drawings are associated with the corresponding card.</p>

Always check whether the child needs immunization, has had vitamin A or has been dewormed within the past 6 months.

The agreement you reach with the mother can be written down for the mother if it will help the mother remember the agreement or discuss it with other members in her family.

4. DISCUSSION

ASK: participants why they think that in the main conversation the Promoter should start by asking questions.

ENSURE: that the participants' answers include the following reason: the Promoter needs to find out what the caregiver is already doing for the child and about the child's and the family's situation. Every child and his or her family have their own situation.

ASK: participants to explain why the third column tells the Promoter to "discuss this recommendation"?

ENSURE: that participants mention the following:

- The Promoter needs to listen to the child's caregiver to understand their situation.
- The better the Promoter understands the child's and family's situation, the better he or she can negotiate with the caregiver to find out what the caregiver can best do to feed and care for the child better.

5. REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARD 4 WITH THE BRAIN-STORMING RESULTS

[Note to facilitator: Participants may prefer having you or someone read the cards aloud while the rest follow along. Try to be efficient with your use of time, allocating about 10 minutes to read through a card and review the contents and 10-15 minutes to practice using one card].

ASK: participants to review Counseling Card 4

ASK: What information does this Counseling Card 4 give?

LISTEN TO: all the opinions.

ENSURE: that the following are mentioned:

- Feeding a child under 6 months
- Feeding of breastmilk only
- Problems and solutions associated with breastfeeding
- Feeding more often and emptying the breast to make more milk

PLACE: on the wall question number 1 and 2 with the brainstorming results for those questions.

ASK: participants how the information in the counseling cards compares to the results of the brainstorming they did earlier.

Examples: If the promoters gave different ways of increasing breastmilk, point out that the right way is to feed more frequently and empty the breasts to make more milk. Did participants say that the baby needs water? If so point out that the card explains that there is enough water in the breastmilk. What do participants think about the recommendation listed on the counseling card?

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card 4 and highlighted the appropriate practices.

6. DEMONSTRATION

NOTE TO THE FACILITATOR: For this exercise, one facilitator should play the role of Promoter, another facilitator should play that of the mother, and a third facilitator should act as the observer.

CASE:

Mary brings her four-month-old child Robert to the growth promotion session to be weighed. After weighing him, the Promoter tells her that Robert has not gained an adequate amount of weight. Mary says that he is almost never ill, and that she does breastfeed him.

DEMONSTRATE: how to go about the negotiation process with the mother, using the Counseling Card No. 4.

EXPLAIN: that you chose Card 4 for the 0 - 6 months because Robert is 4 months old and is not ill today. According to the information that Mary provided, the Counseling Card that we should use is No. 4.

PRESENT: the following scene, using the child's health card and Counseling Card #4:

Promoter: Mary, as you can see from Robert's weight today, he gained some weight but not as much as we had expected him to weigh based on his weight last month, and that is a sign of a problem. How has his health been?

Mary: He has been fine – he has not been ill.

Promoter: Okay, then it means you have to be a little more careful and pay more attention to his feeding to help him grow well again, so let's discuss how to get him back growing well.

Do you breast-feed him?

Mary: Yes.

Promoter: That is good. He is very young so he needs your breastmilk. How many times do you breastfeed him?

Mary: I don't know exactly, but I think that I breast-feed him 6 or 7 times a day.

Promoter: Do you breastfeed him at night too?

Mary: Yes.

Promoter: And that is included in the number of times you feed him?

Mary: Yes.

Promoter: How many times do you breastfeed him at night?

Mary: He wakes up once to breastfeed.

Promoter: Do you feed him anything else, such as water, other milk, or food?

Mary: No. We were told not to give anything other than breastmilk.

Promoter: Well done. At this age your breastmilk is the best food for him. However, as you can see on this card, a child Robert's age should really be fed 10 or 12 times a day. It is important for his health and growth that you try to breast-feed him more often.

Mary: Yes, I know that breast-feeding is good, but for me this is very difficult because I have to go out to sell in the market every day. In addition, I have too much work around the house, and I do not have time left to breastfeed him very often.

Promoter: Do you take him to the market?

Mary: Yes.

Promoter: I can see how breastfeeding more can be difficult, especially when you have so many things to do. But Robert is still quite small, and as we have seen, he is not growing well. Do you think you can breastfeed him more often, say three or more times a day?

Mary: It is difficult because often when I am breastfeeding him I have to stop to attend to a customer.

Promoter: I can understand your problem. What you can do is whenever possible keep him at the breast even as you attend to the customer. I think most people will understand that. And try to breastfeed him more often when there are no customers. Then when you are home try to sit down comfortably and breastfeed him very often, trying to empty the breasts each time. Also continue to breastfeed him as often as he wants at night. What do you think about these recommendations?

Mary: Well, it will be a little difficult but I am going to make sure that Robert gets my milk more often, especially now that he is not growing well. How did you tell me that I can do it?

Promoter: I said sit down comfortably, and as much as possible try to keep him at the breast until he empties it because that is how he will get more milk and you also will make more milk. You can try it to see how it goes. So how many more times will you try to breastfeed Robert?

Mary: I will try to breastfeed him at least two more times. It will be difficult but I do not like the fact that Robert is not growing well.

Promoter: Good. I will come to your house in two days to see how you and Robert are doing. Will you be home on Tuesday evening?

Mary: Yes.

Promoter: I will be there, but, Mary, before you go, do you have any question about treated mosquito nets? I remember that you and Robert have been sleeping under one for some time now.

Mary: No, we are doing fine. I am sleeping more comfortably now that I am not being bothered all night long by mosquitoes and other bugs.

Promoter: Very well, Mary, it has been a pleasure talking with you. I will come to your house to visit you and see how Robert is doing in about three days. See you then and also here again next month.

ASK: the observer, the mother, and the promoter to comment on the negotiation session. For example, what did the *Promoter* do well? What could the *Promoter* have done differently or better?

ASK: participants if they have anything to add.

LISTEN TO: all responses.

7. PRACTICE

ASK: that participants get into groups of 3 and practice the use of Counseling Cards 4 once. One plays the role of the mother, one the role of the *Promoter*, and one of observer. (After this practice they should stay in their groups as they will take turns playing the two key roles – *Promoter* and mother with the rest of the counseling cards so they will become familiar with the use of the cards.

ASK: that for this practice of Card 4 they use Cases 1 from the Case Exercises included at the end of this Exercise.

CIRCULATE: among the different groups, making sure that everybody participates and that they receive individual support, as needed.

CALL: all participants together when they have finished practicing the use of cards 4

8. REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARD 5 WITH THE BRAIN-STORMING RESULTS

ASK: participants to review Counseling Cards 5

ASK: What information does this Counseling Card 5 give?

LISTEN TO: all the opinions.

ENSURE: that the following are mentioned:

- Information on the different ways of feeding a child under 6 months who is not breastfed;
- The importance of avoiding mixed feeding (breastfeeding and other foods or liquids) if the mother is HIV-positive;
- Referral of HIV positive women to a trained counselor for counseling on all the ways she can feed her baby;
- The importance of family planning especially when not breastfeeding.

POINT: to the wall question number 1 and 2 and the brainstorming results.

ASK: participants how the information in the counseling cards compares to the results of the brainstorming they did earlier.

Examples: If the promoters said the child should receive porridge, point out that milk is best at that age and discuss the different kinds of milk mentioned on the card.

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card 4

9. PRACTICE

ASK: that participants get into their groups of 3 and have one participant in a group practice the use of Counseling Cards 5 once. One plays the role of the mother, one the role of the *Promoter*, and one of observer.

ASK: that for this practice of Card 5 they use Case 3 from the Case Exercises included at the end of this Exercise.

CIRCULATE: among the different groups, making sure that everybody participates and that they receive individual support, as needed.

CALL: all participants together when they have finished practicing the use of cards 5

10. REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARDS 6 AND 7 WITH THE BRAIN-STORMING RESULTS

ASK: that participants review Counseling Cards 6 and 7.

ASK: What information do Counseling Cards 6 and 7 give?

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

- Introduction of food starting at the age of 6 months
- The amount, the type of food, and the number of times babies 6 up to 12 months and those 12 up to 24 months should be fed.
- How to prepare porridge and other foods for a baby

PLACE: the flipchart on which you have written question 3 and 4 on the wall along with the results of the brainstorming.

ASK: participants how the information in these counseling cards compares to the results of the brainstorming they did earlier. (Point to the flipchart paper on the wall.)

11. PRACTICE

ASK: that they once again form the groups of 3 persons to practice using the two counseling cards 6 and 7, practicing each card once. Remind them that one plays the role of the mother, another the role of the *Promoter*, and the third the role of the observer. They should make sure that the two persons who did not get a chance the first time be the ones who take turns playing a promoter this time. They should take not more than 10 minutes for each card.

ASK: that for the practice they use Cases 4 - 8 from the Case Exercises at the end of this Exercise.

CIRCULATE: among the different groups, to ensure that everybody participates and receives individual support as needed.

CALL: all participants together when they have finished practicing the use of cards 6 and 7.

12. REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARDS 11, 12 and 13 WITH THE BRAINSTORMING RESULTS

ASK: that participants review Counseling Cards 11, 12 and 13

PLACE: on the wall the flipchart on which you have written question number 5 and the brainstorming results.

ASK: What information do these Counseling Cards give?

ENSURE: that the following points are made:

- The cards refer to children who are sick with fever, loose stools, and cough or difficult breathing and what to do for them
- If participants mentioned other common childhood illnesses, acknowledge them but point out that we have selected three of the most common that kill young children

ASK: What signs show that a child with fever, loose stools or cough is very seriously ill and should be sent immediately to the health center?

ENSURE: that the following points are made:

- A baby under 2 months with a fever
- A child who is not able to breastfeed, eat, or drink
- A child who is convulsing or has convulsed during this illness
- A child who is weak and not moving much
- A child who is breathing faster than usual, or is having difficulty breathing or whose breathing has changed in any way or is wheezing

- When there is blood or a lot of mucus in the stool
- A child with fever who has not responded to Homapak in 3 days
- The most important treatment for a child with loose stools is to give fluids

LISTEN TO: all the opinions. Help participants compare them with the responses to question 9 on the wall.

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card3

ASK: whether participants know who the community drug distributors are in their villages. Are some of the participants themselves community drug distributors?

PREPARE: a list of community drug distributors by name and by village for further reference during the next Exercise, 'Making a Referral'.

13. DEMONSTRATION

NOTE TO THE FACILITATOR: For this exercise, one facilitator should play the role of Promoter, another facilitator should play that of the mother, and a third facilitator should act as the observer.

CASE:
Jennipher brings her four-month-old child Patrick to the Grow Healthy session to be weighed. After he was weighed the mother tells the Promoter that Patrick has a fever. (For this exercise Patrick has not convulsed, is breastfeeding, and is still active)

14. PRACTICE

ASK: that participants get organized again in groups of 3 to practice using cards 11, 12 and 13 (one plays the role of the mother, another plays the role of the *Promoter*, and the third the role of the observer for each card.)

ASK: that for the practice they use cases 8, 9, 10 or 11 from the Case examples at the end of this exercise, making sure to choose children with fever, loose stools, or cough so they will have one example of each illness.

CIRCULATE: among the different groups, ensuring that everybody participates and receives individual support, as needed.

15 REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARD 8 WITH BRAINSTORMING RESULTS

ASK: that participants review Counseling Card 8

ASK: What information does this Counseling Card 8 give?

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

- immunization and when to immunize a child
- Vitamin A and the need for vitamin A every six months
- Deworming of children one year and older every 6 months.

PLACE: on the wall the flipchart on which you have written question number 6 and the brainstorming results.

ASK: participants how the information in this counseling card compares to the results of the brainstorming they did earlier. (Point to the flipchart paper on the wall.)

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card 4

16. PRACTICE

ASK: that participants get organized again in their groups of 3 and practice using cards 8 i.e., one plays the role of the mother, another, the role of the Promoter, and the third the role of the observer.) Make sure that each participant up to this point has had a chance to play a promoter and may even be repeating the role.

ASK: that for the practice they make up their own cases, using any child under two who may have or not received the needed immunizations, vitamin A or anti-worm medication. They should first agree among themselves the case they will discuss.

CIRCULATE: among the different groups, ensuring that everybody participates and receives individual support, as needed.

17. REVIEW AND COMPARISON OF THE CONTENTS OF COUNSELING CARD 9 WITH THE BRAIN-STORMING RESULTS

ASK: that participants review Counseling Card 9

PLACE: on the wall the flipchart on which you have written question number 6 and the brainstorming results.

ASK: What information does this Counseling Card give?

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

- The card refers to using latrines to prevent spreading diseases, such as diarrhea and intestinal worms through feces
- Washing hands of both adults and children after defecation and before eating in order to prevent illness
- Drinking only clean water also to prevent illness
- Ways of treating water that is not clean to make it safe for drinking.

ASK: participants how the information on the Counseling Card compares to the results of their brainstorming (point to the wall). Help them compare the information on the card to the brainstorming results.

For example: During the brainstorming did participants mention ways preventing diarrhea other than proper personal and environmental hygiene practices? If so point out the importance of appropriate hand-washing and proper disposal of feces

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card 9 and you have highlighted the effective ways of preventing diarrhea.

18. REVIEW OF COUNSELING CARD 10

ASK: that participants review Counseling Card 10

ASK: What information does this Counseling Card 10 give?

LISTEN TO: all the opinions.

ENSURE: that the following points are made:

- Sleeping inside insecticide mosquito nets guard against mosquitoes that cause malaria
- Mosquito nets should be treated every 6 months to make them most effective against mosquitoes

ASK: participants how the information in this Counseling Card compares to the results of the brainstorming they did earlier. Help participants compare them with the responses to question 6 related to malaria prevention.

For example: Did they mention treated mosquito nets as the best way to prevent malaria?

Did they mention that nets have to be re-treated every 6 months? If not, point these out to them as they appear on the card.

CONTINUE: in this way until participants have compared the results of the brainstorming to the information provided on counseling card 4 and the appropriate practices have been pointed out.

19. PRACTICE

ASK: that participants get organized again in groups of 3 to practice using cards 9 and 10 (one plays the role of the mother, another the role of the *Promoter*, and the third the role of the observer for one card, and then switch roles for the other card).

ASK: that for the practice they use case 12 from the Case examples at the end of this Exercise,

CIRCULATE: among the different groups, ensuring that everybody participates and receives individual support, as needed.

20. REVIEW OF THE CONTENTS OF COUNSELING CARD 14

ASK: that participants review Counseling Cards 14

- PLACE:** on the wall the flipchart on which you have written question number 11 and the brainstorming results.
- ASK:** What information does this Counseling Card 14 give?
- LISTEN TO:** all the opinions. Help participants compare them with the responses to question 7 on the wall.
- ENSURE:** that the following points are made:
- Ways of spacing children
 - Reasons why some may be unwilling to use these methods to space children and how to deal with the reasons
- ASK:** participants how the information on the Counseling Card compares to the results of their brainstorming. (Point to the flipchart paper on the wall.)
- For example:* During the brainstorming did participants mention effective ways of child spacing or mostly unproven methods? Did they know where to go for help?
- CONTINUE:** in this way until participants have compared the results of the brainstorming to the information provided on counseling card 4

21. PRACTICE

- :** that participants get organized again in groups of 3 to practice using card 14 (one plays the role of the mother, another the role of the *Promoter*, and the third the role of the observer)
- ASK:** that for the practice they use any of the case examples 1 to 7 at the end of this exercise and assume that they had already counseled the caregiver about feeding and immunization.
- CIRCULATE:** among the different groups, ensuring that everybody participates and receives individual support, as needed.

22. SUMMARY

- ASK:** one participant to name the steps to follow when using the Counseling Cards.
- ENSURE:** that the participant names the following six steps:
1. Give the introductory message.
 2. Ask about the health of the child.
 3. Ask caretaker about feeding of the child and discuss and negotiate recommendations.
 4. Reach agreements with the mother on what she will do.
 5. Remind the mother about other actions, such as immunizations.
 6. Make appointments for next growth promotion session and home visit, if also needed
- ASK:** the rest of participants if they agree or if they have any comments.
- ASK:** another participant to describe the first step.

- LISTEN:** to the answer, and ask the group if they agree or if they have something to add.
- ASK:** another participant to describe the second step.
- LISTEN:** to the answer, and ask the group if they agree or if they have something to add.
- CONTINUE:** these questions and answers until participants have described all six steps and have agreed upon the descriptions.

Case Exercises to Discuss In Groups:

CASES (PROVIDE LOCAL NAMES FOR THE CHILDREN, CAREGIVERS, AND THE COMMUNITIES)	COUNSELING CARD
1. A mother named (MOTHER) brings her one-month-old son, (CHILD), to the growth promotion session meeting to be weighed. The Promoter tells her that her child did not gain enough weight this month. (MOTHER) is afraid that she does not have enough milk.	4
2. (MOTHER) is an unmarried mother with three children, and she is one month pregnant. Her daughter, (CHILD), who is four months and 12 days old, is being weighed and attended to by the Promoter. Since she became pregnant, (MOTHER) no longer breastfeeds (CHILD), because (CHILD) might get sick. (MOTHER) says that (CHILD) eats well, but she has not gained weight this month.	4 and if unwilling to breastfeed 5
3. A three-month baby is brought to the Grow Healthy session by the grandmother because the child's mother has been very sick and is unable to breastfeed the child. The child's weight is low, but this is the first time she's being weighed. The grandmother says the child is not sick.	4 or 5
4. A mother named (MOTHER) brings her seven-month-old girl, (CHILD), to the growth promotion session. The baby's growth is not adequate but (MOTHER) says that the baby is not ill. (MOTHER) says that (CHILD) is eating well.	6
5. (MOTHER) takes her child, (CHILD), nine months old to the growth promotion session. These last two months (CHILD) has been losing weight, as registered in the growth curve. (MOTHER) works as a maid and is out of the house all day; hence, she breast-feeds him very little. At the time of the consultation, (CHILD) is not sick, but has lost his appetite.	6
6. (CHILD) is a ten-month-old child who arrives at the growth promotion session with his mother, (MOTHER). The mother tells the Promoter that (CHILD) eats well, has good appetite, but when they weigh him they observe that he has not gained weight this month.	6
7. (CHILD) is a 13-month-old girl who lives with her mother and siblings in the (NAME) community. On the 18th of each month their mother, (MOTHER), attends the growth promotion session. At the time of the visit, (MOTHER) tells the Promoter that (CHILD) is in good health. Her weight gain is adequate, but she does not want to eat the way she normally does.	7

8. Today, the growth promotion session is held in the (NAME) community. (MOTHER) takes her 19-month-old twin children, (CHILD) and (CHILD). The Promoter weighs them and sees that (CHILD #1) did not gain enough weight this month, but (CHILD #2) did. (MOTHER) tells the Promoter that the children have not been sick.	7
9. (CHILD) is 10 months old. Her mother says she has had fever for 2 days. She does not have a cough or loose stools	11
10. Robert was born 3 weeks ago. His mother says she started coughing about three days ago.	13
11. (CHILD) is 3 months old. The mother says she is passing loose stools since yesterday. When you ask if there is blood in the stool the mother says no. She also has fever.	12
12. Patrick who is 13 months old has been coughing for about a week.	13
13. Elizabeth, who is 11 months old was brought to the Grow Healthy session. She was found to have gained adequate weight and is well now. But two weeks ago she had a fever and needed treatment with Homapak.	6 and 10

EXERCISE 16: MAKING A REFERRAL

Objectives: At the end of this exercise, each participant will be able to:

1. Determine whether a child needs to be referred
2. Make a referral

Duration: 1 hour

Methodology: Demonstration, practice

Materials: Promoter's *Handbook*
Large size referral sheet
Referral sheet copies

Content:

1. Introduction
2. Reading
3. Discussion
4. Demonstration
5. Practice
6. Summary

1. INTRODUCTION

EXPLAIN: that although some of the time parents can solve problems that arise with the health and growth of their children, especially if they have help from Growth Promoters, there are times when families have to look elsewhere for help. In that case, a Promoter may need to REFER the child.

2. READING

ASK: participants to get into groups of 3 – 4 each and to take turns reading out loud to each other “Refer to the health center if the child cannot be helped by you or in the community” in Chapter 3, #7 on pages 29 and 30 of their Promoter's *Handbook*.

3. DISCUSSION

ASK: participants which children can be referred for help **within** the community.

ENSURE: that participants mention the following condition:

- A child who has fever and has not yet been given any treatment should be referred to the community drug distributor (or to the health unit if there are serious signs as listed on the counseling cards)

ASK: if there any drug distributors in their villages. If there are, explain that, as growth promoters, they should work collaboratively with them as they are all part of the village health team.

- ASK:** how we can ensure the best possible collaboration between them as growth promoters and the community drug distributors.
- ENSURE:** that participants mention the following ways to ensure collaboration:
1. - CDDs to be present with their drugs and registers at the monthly sessions, if possible;
 - If a growth promoter is also a CDD, he/she should have their drugs and registers with them during the monthly Grow Healthy sessions in case a child has a fever
 - CDDs and GPs to organize periodic meetings with the communities together to present and discuss their work, results and challenges;
- ASK:** participants to name a few reasons why a child may need to be referred for help outside of the community.
- ENSURE:** that participants mention the following possibilities:
The child is due or overdue for immunization
- The child is due or overdue for Vitamin A
 - The child has had inadequate growth for two or three months
 - The child is sick, has had convulsions
 - The child has fever and does not respond to Homapack in 3 days;
 - Child is unable to breastfeed, eat, or drink
 - Mother is interested in family planning
- ASK:** participants to explain how to do a referral.
- ENSURE:** that the following steps are mentioned:
- a. Explain to the mother why she should take her child to the health facility.
 - b. Fill in a referral form. If the condition for which you are referring the child is not already written on the form, write it in.
 - c. Give the form to the mother and ask her to carry it to the staff of the health facility.
 - d. Encourage the mother/parents to carry out the referral.
 - e. Follow up afterwards to see what has been done.

4. DEMONSTRATION

- POST:** The large size referral form on the wall. Point out all the features of the form, reading aloud the various sections as you read them out. Point out the lower portion that the health worker should fill out and tear for the mother to take back to the growth promoter. Point out that there is space to write in a condition, if that condition, such as “not breastfeeding” is not already written in a box on the form..
- ASK:** a participant to do the demonstration with you. She will play the role of the mother of a small child who has not gained adequate weight in three months.
- DEMONSTRATE:** how to do a referral, following steps “a – e” outlined above. (Note: for step “e”, perhaps it would be best to *describe* how you would follow up with her.)

5. PRACTICE

- ASK:** participants to break into groups of three each to practice.

EXPLAIN: that the members of each group should take turns playing the Promoter, the mother of a young child who needs to be referred, and an Observer until all three have had an opportunity to play the Promoter. The three may decide among themselves the reason why the child must be referred. **Encourage them in their role play to concentrate on learning the referral process and not to introduce complex social situations that may take long time to unravel during this class time. The important skill here is to learn how to make a referral not how to tell complex stories during role play.**

CIRCULATE: to provide assistance as needed.

6. SUMMARY

ASK: a participant to name the steps for referring a child.

ASK: whether other participants have something to add.

EXERCISE 17: CONDUCTING THE MONTHLY GROWTH PROMOTION SESSION

Objectives: At the end of this exercise, each group of community growth promoters will be able to:

1. Name the activities carried out during the growth promotion session
2. Carry out the activities of a growth promotion session.

Duration: 3 hours

Methodology: Demonstration, practice with mothers and children.

Materials: Promoter's *Handbook*
Counseling Cards
Growth promotion Register
Tables of minimum weight gain
Child Health Cards
Referral sheets
Weighing scale and weighing pants, rope, table and chairs for each community team of growth promoters
Pencils
Counseling Card large size you used in previous exercise

If possible, arrange beforehand to have 4 or 5 mothers come with their children under 2. If not possible, arrange to have suitable objects wrapped for weighing, each with a realistic weight to guide the counseling.

Prepare in advance: Large illustration of a 'Grow Healthy' session suggesting what will take place at each month – drawn by you, showing what will take place at each station
An area appropriate for the different teams of promoter participants to practice conducting a growth promotion session.

Content:

1. Introduction
2. Demonstration
3. Practice
4. Summary

1. INTRODUCTION

EXPLAIN: that meeting with members of the community regularly and continuously is one of the most important aspects of growth promotion. The motivation of the mothers, their participation at the monthly sessions, and how well they fulfill the commitments they enter into all during the monthly sessions are influenced by this. The growth promoter meets with the mothers of children under 2 years of age every month to weigh the children, assess their growth and health status, and reach an agreement with the mother on what she can do during the coming month to maintain or improve the growth and health of her child.

EXPLAIN: that in an earlier exercise they learned how to **organize** a growth promotion monthly session, and that in this exercise they will learn how to **conduct** the session.

2. DEMONSTRATION

NOTE TO THE FACILITATOR: Three facilitators should do this demonstration, as follows:

1. One will weigh the child.
2. Another will determine whether the child's weight gain has been adequate or not and will fill in the child's health card and register.
3. The third facilitator will discuss recommendations with the caregiver and negotiate with her and reach agreement on what she can do for the baby.

DEMONSTRATE: How to hold a growth promotion session, following the steps below. Be sure to say out loud what you are doing as you are doing it.

1. **Weigh** each child under two years of age.
 - Hang the scale
 - Hang the weighing pants on the scale and adjust the scale to 0.
 - Place the child in the weighing pants.
 - Read the weight and record it.
 - Take the child out of the weighing pants and deliver him/her to the mother/caregiver.
2. **Determine** whether each child has gained weight adequately.
 - Record the weight today in the growth promotion Register.
 - Compare the weight today with the expected weight to determine whether the child has gained an adequate amount of weight.
 - Plot the weight today on the child's growth card
 - Draw the growth curve.
3. **Select** the card(s) to use to counsel the mother according to:
 - The child's age, and
 - Whether or not the child is well or sick
 - If the child is sick choose the card for the illness and use that first
4. **Counsel** the mother or caregiver
 - Give the introductory message and tell mother whether the child gained adequate weight or not
 - Ask the mother about the health of the child
 - Ask the mother about feeding or health of the child and listen to her answers
 - Praise the mother for any beneficial actions she is taking for the health and nutrition of the child
 - Make recommendations based on what the mother says and discuss with her what she can do

- Establish an agreement with the mother about specific actions she will take
- Remind the mother about other necessary actions:
 - Immunizations
 - Supplementation with Vitamin A
 - Use of treated mosquito nets, hand-washing etc.

5. Refer cases of children whose condition cannot be resolved in the community

- Explain to the mother why she should take her child to the health facility.
- Fill in a referral form OR write a note explaining why you are making the referral, if you don't have a form.
- Give the form or note to the mother and ask her to carry it to the staff of the health facility.
- Encourage the mother/parents to carry out the referral.
- Follow up afterwards to see what has been done.

6. Make appointment for the next visit

7. After the session, fill in the Growth Promotion Register the expected weights for the next session for all the children who were weighed at the session.

3. PRACTICE

ASK: participants to group themselves by community.

ENSURE: that each group has at least one Promoter's *Handbook*, a scale, weighing pants and rope, children's health cards, counseling cards, a growth promotion Register page, referral sheets, and pencils.

ASK: the members of each group to take turns carrying out the activities of a monthly weighing session with the mothers and children who have come for the practice session.

CIRCULATE: to ensure that everybody participates, and to provide individual support, as needed.

4. SUMMARY

If possible, a facilitator will lead a separate summary session for each group.

ASK: participants to name the steps they will carry out at a growth promotion session.

ASK: them to explain how each step is carried out.

ASK: whether other participants have something to add.

EXERCISE 18: MEETING MONTHLY WITH THE HEALTH CENTER STAFF/SUPERVISORS

Objectives:	At the end of this exercise, the participants will be able to:
	<ol style="list-style-type: none"> 1. Explain the purpose of the monthly meetings with health center staff/supervisors 2. Prepare the Grow Healthy Monthly Summary Sheet
Duration:	2 hours
Methodology:	Group discussion, reading, practice.
Materials:	<p>Growth promotion <i>Handbook</i> Large size Register page of children under 2 years of age (e.g. from Exercise 4) Grow Healthy Monthly Summary sheet (bar graph) large size on flipchart Photocopies of the Grow Healthy Monthly Summary sheets (bar graph) Flipchart paper Markers</p>
Prepare in advance:	<ol style="list-style-type: none"> 1. Write each of the following questions on a separate flipchart sheet: <ul style="list-style-type: none"> • What is the purpose of the monthly meetings with the Health Center staff/supervisor? • What support do you expect from Health Center staff/your supervisor(s)? • What information will you share with the Health Center/your supervisors and why? • What report will you deliver monthly to the Health Center/your supervisors? 2. Complete the large size Register page of children under 2 from the previous exercises according to the example given in Annex 5: <ul style="list-style-type: none"> • 13 of the 15 children were weighed at the first session. • 13 of them had growth trends, i.e. those for whom you were able to determine whether they had adequate growth or not. • Ensure that 8 of the 15 gained an adequate amount of weight • Ensure that the remaining 5 gained an inadequate amount of weight. • 2 children were added during the second session • 2 of the children who did not gain adequate weight this month also gained an inadequate amount last month
Content:	<ol style="list-style-type: none"> 1. Introduction 2. Reading 3. Discussion 4. Plenary session 5. Demonstration 6. Practice 7. Demonstration 8. Practice 9. Summary

1. INTRODUCTION

EXPLAIN: That the relationship between Promoters and the Health Center staff/their supervisors is very important for the success of growth promotion in the community. [MENTION WHO THE HEALTH CENTER STAFF/SUPERVISORS ARE LIKELY TO BE]

2. READING

ASK: that they get organized in groups of three and that the members of each group take turns reading out loud Chapter 6: “Your relationship with the health center staff/your supervisors” in the Promoter’s *Handbook*, page 39 and 40.

3. DISCUSSION

DIVIDE: participants into two or three groups (depending upon the number of facilitators available). Ask each group to discuss the following questions and write their answers to each of the questions on newsprint.

1. What is the purpose of the monthly meetings with the Health Center staff/supervisors?
2. What support do you expect from the health workers/your supervisors?
3. What information will you share with the Health Center/your supervisors and why?
4. What report will you deliver monthly to the Health Center/your supervisors?

4. PLENARY SESSION

ASK: one representative from each group to present his/her group’s answer(s) to the first question: “What is the purpose of the monthly meetings with the Health Center staff/your supervisors?”

LISTEN TO: all the responses.

ASK: the rest of the participants if they have something else to add.

ENSURE: that the following purposes are mentioned:

- To discuss experiences
- To review initial training skills
- To acquire new knowledge and skills
- To share the data collected on children’s growth.
- To receive help and help for the work

ASK: one representative from each group to present his/her group’s answers to the second question: “What support do you expect from the health workers/your supervisors?”

LISTEN TO: all the responses.

- ASK:** the rest of the participants if they have something else to add.
- ENSURE:** that the following points are mentioned:
- Help in solving problems faced by the mothers and the families participating in growth promotion.
 - Help with strengthening coordination with other institutions in the community.
- ASK:** one representative from each group to present his/her group's answers to the third question: "What information will you share with the Health Center/your supervisors and why?"
- LISTEN TO:** all the answers.
- ASK:** the rest of participants if they have something else to add.
- ENSURE:** that the following are mentioned:
- The Grow Healthy Monthly Summary sheet

5. DEMONSTRATION

DEMONSTRATE: how to fill in the monthly Grow Healthy Monthly Summary Sheet. Be sure to include the following steps in the demonstration:

1. Place the large size Grow Healthy Monthly Summary sheet and the large size Register page with information from two GP Sessions on the wall. Cover the names of the last two children (Alice and Geoffrey) with a separate piece of paper. These children are not yet registered during the first session, but were registered before or during the second session.
2. Read over the blank Grow Healthy Monthly Summary form with the participants.
3. Ask participants how you can know what number to mark in first column: **"No. of children under 2 in the community" for the first session in April.**

Expected answer: Count the number of children under 2 listed in the Register.

4. Count the number of children under 2 registered for the first GP session in April (on the list posted on the wall), and announce that there are 15 children. Then write "15" on the large sheet under the first column and shade 15 boxes.
5. Ask participants how you can know what to mark in the second column, **"No. of children under 2 weighed this month"**

Expected answer: In the Register, count the number of children under 2 who were weighed and had weights recorded in the registered.

6. Invite a participant to come forward and count the number of children who were weighed this month in the Register that you have posted, and to write the number under the second column on the chart and shade the boxes (Those who have a "weight today" filled in (13)).

7. Ask participants how you can know what to put for the third column, **“No. of children under 2 years of age who had growth trends this month.”**

Expected answer: In the Register, count the number of children who were weighed this month and also weighed last month or two months ago and for whom promoters were able to determine whether or not they gained adequate weight. (They should have marks (Y or N) in the Adequate Weight box).

8. Invite a participant to come forward and count the number of children who were weighed this month in the Register that you have posted, and who have adequate weight “yes” or “no” marked against their names, and to write the number under the third column on the chart and shade the boxes (13).

9. Ask participants how you can know what to put for the fourth variable, **“No. of children under 2 years of age with adequate weight gain in the month.”**

Expected answer: In the Register, count the number of children who gained an adequate amount of weight this month.

10. Ask participants how you can recognize easily which **children gained an adequate growth** this month.

Expected answer: Count the number of Y (**yes**) answers that have been recorded in this month’s Adequate Growth column of the Register .

11. Invite a participant to point out the column for today’s session, count the “yes” answers (one for each child that gained an adequate amount of weight), and write that number (in this case, 8) under the third on the poster of the monthly summary sheet.

12. Ask participants how you can know what to put for the fifth variable, **“No. of children under 2 years of age with inadequate weight gain in the month.”**

Expected answer: In the Register, count the number of children who gained an inadequate amount of weight this month.

14. Ask participants how you can recognize easily which children gained an inadequate amount of weight this month.

Expected answer: Count the number of N (**no**) answers that have been recorded in this month’s Adequate Growth column of the Register

15. Invite a participant to count the N (no) answers (one for each child that gained an adequate amount of weight) that have been recorded for this month and write the number found (5) under the fifth column.

16. Ask participants how you can know what to put for the sixth variable, **“No. of the same children under 2 years of age who gained an inadequate amount of weight both this month and last month.”**

Expected answer: In the Register, count how many children under 2 who gained an inadequate amount of weight this month and are the *same* children who did not gain adequate weight last month.

17. Ask participants how you can tell easily which children had inadequate weight gain this month and were the same who also had inadequate weight gain last month.

Expected answer: For every child who received an N (no) because of an inadequate weight gain at this session, check to see whether the *same* child had one last month also.

18. Invite a participant to check whether the children who received N (no) answers for inadequate weight gain for this session also received them last month. The participant should then write the number of children who had an inadequate weight gain this month and last month on the Grow Healthy Monthly Summary sheet under the 6th column. (In this case, it will not be possible to determine since this is the first growth promotion session held. Leave the space therefore blank and shade no boxes)

6. PRACTICE

ASK: participants to organize themselves in groups of two.

GIVE: each pair a Grow Healthy Monthly Summary Sheet

ASK: each pair to prepare a bar-graph using the Grow Healthy Monthly Summary Sheet for the second session held in May that you have posted on the wall.

[Note to the facilitator: remove the piece of paper you had used to cover the last two names in the register]

CIRCULATE: to provide assistance, as needed.

7. DISCUSSION

ASK: ask participants to come together as a group again.

ASK: one volunteer to come forward and fill in the first column, clearly explaining how he or she knows the number of children under 2 in the community.

ASK: the rest of the group whether they agree with the answer given

ENSURE: that the number of children counted include the 2 children that were added in the Register at the second session (17 children).

ASK: a second volunteer to come forward and fill in the second column, clearly explaining how he or she knows the number of children under 2 weighed this month.

ASK: the rest of the group to whether they agree with the answer given

ENSURE: that the number of children counted is the number of children who had their weight recorded in the register in the 'Weight Today' column for the second session (15).

ASK: a third volunteer to come forward and fill in the third column, clearly explaining how he or she knows the number of children with a growth trend this month.

- ASK:** the rest of the group to whether they agree with the answer given
- ENSURE:** that the number of children counted is the number of children for whom the 'Adequate Growth' box is filled in with either a Yes or a No (13).
- ASK:** a fourth volunteer to come forward and fill in the fourth column, clearly explaining how he or she knows the number of children with adequate growth this month.
- ASK:** the rest of the group to whether they agree with the answer given
- ENSURE:** that the number of children counted is the number of children who have YES recorded in the 'Adequate Growth' column of the register (8).
- ASK:** a fifth volunteer to come forward and fill in the fifth column, clearly explaining how he or she knows the number of children who had inadequate growth this month.
- ASK:** the rest of the group to whether they agree with the answer given
- ENSURE:** that the number of children counted is the number of children who have NO recorded in the 'Adequate Growth' column of the register (5).
- ASK:** a sixth volunteer to come forward and fill in the sixth column, clearly explaining how he or she knows the number of children who had inadequate growth this month.
- ASK:** the rest of the group to whether they agree with the answer given
- ENSURE:** that the number of children counted is the number of children who have NO recorded in the 'Adequate Growth' column of the register for this month, who also had inadequate growth the previous month (2).
- ASK:** how, in an ideal situation with the program perfectly implemented, the bar graph would look like.
- ENSURE:** that participants mention that ALL children under 2 registered have their weight recorded and their adequacy of weight gain determined (column 1, 2 and 3 equally high), all children weighed have had adequate weight gain (column 4 same as column 1, 2 and 3) which means there are no children with inadequate weight gain (column 5 and 6 have 0 children).
- Even better is when column 3 is slightly lower than 1 and 2, indicating that newly registered children enroll the program as they are born or enter the community.

8. SUMMARY

- ASK:** participants to stay in their groups of two.
- EXPLAIN:** that you would like them to carry out the following two tasks:

- One member of the pair should explain to the other the purposes of the growth promotion monthly meeting with the health center staff. The two should discuss those purposes until they reach agreement on them.
- The second member of the pair should state the information to be shared with the health center staff. The two should discuss those purposes until they reach agreement on them.

EXERCISE 19: MAKING A HOME VISIT

Objectives: At the end of this exercise, each participant will be able to:

Describe when a child needs a home visit
Make a home visit

Duration: 1 hour

Methodology: Demonstration, practice

Materials: Promoter's Manual

Content:

1. Introduction
2. Reading
3. Demonstration
3. Practice
4. Summary

1. INTRODUCTION

EXPLAIN: that one of the most important activities they will carry out is a home visit to follow up on children who are not gaining weight well in spite of counseling, newborns or those who are sick or those who have family problems that might affect their health.

2. READING

ASK: participants to get into groups of 3 – 4 each and to take turns reading out loud to each other Chapter 4 “Following up on agreements reached with caregivers” which discusses the importance of home visits (pages 32-34 in the *Handbook*).

3. DISCUSSION

ASK: participants to name some reasons why a child may need to be visited at home.

ENSURE: that participants mention the following possibilities:

- The mother is having breastfeeding problems
- Newborn babies
- A child who misses a monthly growth promotion session
- A child younger than 6 months who is not breastfed
- A child who has lost weight
- Multiple births
- The child's mother or father is dead
- The child has had inadequate growth for two or three months
- A child under 6 months who gains inadequate weight
- Sick children whom the promoters referred to the clinic
- A child who has been discharged from hospital after treatment for malnutrition
- The mother is not getting support from the family to carry out what she agreed to do.

- ASK:** participants why they should make home visits in these cases?
- LISTEN TO:** all answers and write them down.
- ENSURE:** that the following points are made:
- To make sure that a newborn gets enrolled in the GP program
 - To make sure that all children under two in the community get weighed every month
 - To discuss calmly with the mother the agreements that have been agreed on during the monthly session
 - To give the caregiver support and encourage family members to support her if she is having difficulties practicing her agreements
 - To find out if a referral was carried out
 - To find out what a home situation is like
 - To make sure a sick child is not getting worse
- ASK:** participants when after a monthly Grow Healthy session should a home visit take place
- LISTEN TO:** the responses and write them down of the flip chart
- ENSURE:** that the following points are made:
- During the first week, preferably the three days after a monthly meeting.
 - When it is convenient for the caregiver
- ASK:** participants to explain which children to visit first.
- LISTEN TO:** all answers and write them down
- ENSURE:** that the following are named:
- Children whose conditions may get worse quickly
- Very young children, especially those younger than 2 months
 - Those who have more than one reason for a visit. For example, a very young child who is also sick.
- ASK:** participants to describe how a home visit is carried out.
- LISTEN TO:** all answers and write them down
- ENSURE:** that the following steps are named:
- Be pleasant
 - Be polite
 - Watch the home surroundings
 - Observe the feeding of the child
 - Weigh the child who missed the monthly meeting and has not been weighed this month
 - Ask the main person who takes care of the child (maybe when the mother is away) and include that person in the discussion of it is not the mother
 - Ask about any changes in the child's health or feeding
 - Ask about any agreements the caregiver made with you
 - Help prepare food for the child if the mother agrees to that
 - Agree with the mother what she is going to do and encourage her to do it.

- Use your counseling card to counsel if needed

4. DEMONSTRATION

ASK: a participant to do the demonstration with you. She will play the role of the mother of a small child you are visiting at home because the child was not brought to the weighing session.

DEMONSTRATE: how to enter the home, greet the people in the house, ask about the child's health. Say that you are coming to visit because you missed them at the weighing this month. Ask how the child has been. Say that you would like to weigh the child because you know it is important that every child under two years gets weighed every month. After weighing, determine if the child gained weight and use the appropriate counseling card to counsel the mother. Agree with her on what she will do in the coming month. Encourage her to come to the meeting next time.

5. PRACTICE

ASK: participants to break into groups of three each to practice.

EXPLAIN: that at least one member of each group should play the Promoter, another the mother of a young child who needs to be visited at home, and the third an Observer. In the beginning the three should decide the reason why the child is being visited at home. If there is time they should take turns playing the promoter.

CIRCULATE: to provide assistance as needed.

6. SUMMARY

ASK: a participant to describe how to make a home visit.

ASK: whether other participants have something to add.

EXERCISE 20: CONDUCTING COMMUNITY FEEDBACK MEETINGS

Objectives:	At the end of this exercise the participants will be able to: 1. Explain how to conduct a community meeting*
Duration:	2 hours
Methodology:	Reading, group discussion, demonstration, role-playing.
Materials:	growth promotion Promoter's <i>Handbook</i> Flipchart paper Markers Growth Healthy Monthly Summary Sheet large size of the bar graph you made in Exercise 11 (to show to the community)
Prepare in advance:	Three separate pieces of flipchart paper with the following questions: <ul style="list-style-type: none">▪ What should you do to prepare for a growth promotion community meeting?▪ What steps will you follow to conduct a growth promotion community meeting?▪ What information will you share with the community during the community meeting?
Content:	1. Introduction 2. Reading 3. Discussion 4. Demonstration 5. Role-playing 6. Summary

* Note: Although the Promoters will acquire and practice some of the skills they will need to conduct community meetings during the training session, they will need to be “apprenticed” to a more experienced group facilitator during the first two or more community meetings to be able to develop the skills needed to conduct the community meetings themselves. Ideally, the trainers/facilitators should conduct the first two or more community meetings with the Promoters. The Promoters may be expected to assume more responsibility for conducting the meetings as their skills and confidence grow.

1. INTRODUCTION

EXPLAIN: Individuals and families can make changes to help children grow and develop to their full potential and become healthy adults, useful to society; however, individuals as well as families need support as they try to make those changes. The collaboration between the family and the community with regard to childhood health problems should help provide that support.

This collaboration will be achieved through the community meetings. In growth promotion the intention is to maintain direct contact with the community. To this end, Promoters should meet with the community every 3 or 4 months.

2. READING

ASK: that they get organized by community to take turns reading the growth promotion Promoter's *Handbook* out loud to each other, pages 36 to 38.

3. DISCUSSION

PLACE: the first question that you prepared on flipchart paper on the wall.

ASK: one of the Promoters to describe what he/she should do to prepare for an growth promotion community meeting.

LISTEN TO: all answers and write them down on the flipchart paper under the question.

ASK: the remaining participants if they have something else to add.

ENSURE: that they mention all of the following:

- Rely on the community civil organizations, mayors, councils, etc.
- Establish the date and hour for the meetings.
- Invite the health center staff in advance.
- Select a desirable site with sufficient space.
- Secure the participation of a community leader.
- Invite the mothers, fathers and the community to the meeting in advance.
- Prepare the agenda for the meeting.
- Prepare the information to be presented to the community.

PLACE: the second question that you prepared on flipchart paper on the wall.

ASK: another participant what steps the Promoters should follow to hold a community meeting.

LISTEN TO: all answers, and write them down on the flipchart.

ASK: the remaining participants if they have something else to add.

ENSURE: that they mention all of the following steps:

1. Greeting
2. Review of the importance of child health and well being
3. Description of growth promotion activities and achievements during the past few months
4. Analysis of the growth and health situation of the children under-two in the community during that same period
5. Celebration of achievements/Search for solutions to problems and mobilization for action.
6. Agreement on the outcome of the meeting with all those attending, including the local leaders.

PLACE: the third question that you prepared on flipchart paper on the wall.

ASK: a participant to state what information should be shared with the community during the meeting.

- LISTEN TO:** all answers, and write them down on the flipchart paper.
- ASK:** the remaining participants if they have something else to add.
- ENSURE:** that they mention the following:
- Number of children under 2 years of age included on the Register
 - Number of children under 2 years of age that were weighed each of the growth promotion sessions
 - Number of children under 2 years of age that had growth trends
 - Number of children under 2 years of age with an adequate amount of weight gain
 - Number of children under 2 years of age with an inadequate amount of weight gain
 - Number of the same children under 2 years of ages with an inadequate amount of weight gain this month and also last month

4. DEMONSTRATION

DEMONSTRATE: how to hold a community meeting using the Grow Healthy Monthly Summary Sheet with the example on page 36 of the growth promotion Promoter's *Handbook* as an illustration. Be sure to include the following steps in the demonstration:

1. **Greet, welcome and thank all those who have come to the meeting.**
2. **Review briefly the importance of the well being of the community's children.** Invite a local authority to speak to the group and express his/her support of growth promotion.
3. **Present the information about the growth of the community's children during the past three or four months.**
Use the Indicators Bar Graphs to show the following:
 - How many children under-two there are in the community
 - How many have come to each of the past four weighing sessions
 - How many have been growing well
 - How many have not been growing well
 - How many have not grown well for the past two months
4. **Help community members analyze the situation of the children in their community.**
 - a. Ask questions such as the following to help members think about what the information means in terms of the children's health and well being:
 - ✓ "What do you think about the number of children that are attending the monthly weighing sessions?"
 - ✓ "What do you think about how the children are growing?"
 - ✓ "Why do you think that children grow well in certain months?"
 - ✓ "Why do you think that some children do not grow well in certain months?"
 - b. Ensure that the following three factors that affect children's growth are mentioned:
 - ✓ The quantity and quality of foods available to the family
 - ✓ The incidence and severity of illnesses

- ✓ The care that children receive, including feeding practices in the home
- c. Help community members explore each one of those factors to decide which should be priorities. (Use the sample questions attached to guide the discussion.)
 - ✓ The quantity and quality of foods available to the family
 - [Incidence and severity of illness
 - [Child care and feeding
- d. Help members select one or more problems that negatively affect the growth of children in their community.

5. Help members celebrate achievements, search for solutions, and identify actions to take

- a. Lead a discussion about how to take advantage of positive factors and minimize negative factors.
- b. If suggestions are needed, offer the following:
 - ✓ The quantity and quality of foods available to the family
*Form a cooperative group to get food at a lower cost.
Store food after the harvest to avoid shortages later.*
 - ✓ Incidence and severity of illness
Find or make a clean place where children can play.
 - ✓ Child care and feeding
Form a group of volunteer grandmothers to care for the young children during harvest times or when mothers must work outside the home.

6. Close the meeting

- a. Thank all members for their attendance and participation.
- b. Read the agreements that have been reached during the meeting.
- c. Announce the date, time, and location of the next meeting.

5. ROLE-PLAYING

REQUEST: that they organize by community and prepare a role-play simulating a community meeting.

INCLUDE: the following encouraging questions with the participants, as needed:

- “How do you see the situation of the growth of the children?”
- “What may be helping some children grow properly?”
- “Could you please identify and list the most important causes affecting the health and nutrition of the children?”
- “How can we establish agreements with the local authorities, councils, and others in order to solve these problems? Can we appoint persons in charge of each activity?”
- “Can we please decide the date, time, and place of the next meeting?”

6. SUMMARY

EXPLAIN: that the dynamic of the summary will be as follows:

1. Questions and answers

One of the groups will answer the first question and the remaining participants will enrich this with the result of their discussion.

Another group will answer the second question, and the remaining participants will enrich this with the result of their discussion. This will continue until all the questions have been completed.

Encourage everyone's participation.

2. Role-play presentation

ASK: one of the groups to present the role-play.

ASK: the remaining participants to pay attention and be ready to make comments.

ASK: all participants what they think about the role-play when it is over. For example:

- Did the Promoters present the situation of the growth of children in a way that community members could understand?
- Were the date, time, and place of the next meeting established?
- Were agreements reached with community members?

SAMPLE AGENDA FOR A COMMUNITY MEETING

1) Welcome (10 minutes)

- a) Greet people as they arrive
- b) When all have arrived and you are ready to start, welcome and thank everyone for coming.
- c) If appropriate, use an “ice-breaker.”

2) Review briefly the importance of the well being of the community’s children. (15 min.)

- a) The review may be carried out as a question and answer session, in the telling of a story, the description of an actual event, etc.
- b) Invite a local authority to speak to the group and express his/her support of growth promotion.

3) Present the information about the growth of the community’s children during the past four months. (10 min)

- a) Use the large size Grow Healthy Monthly Summary Bar Graphs to show the following:
 - how many children under-two there are in the community
 - how many have come to each of the past three or four weighing sessions
 - how many have been growing well
 - how many have not been growing well
 - how many have not grown well for two months in a row
- b) Ensure that community members understand the information that has been presented. (For example, ask questions , ask who can repeat some of the information, and answer questions about the information you have presented.)

4) Help community members analyze the situation of the children in their community. (15 min.)

- a) Ask questions such as the following to help members think about what the information means in terms of the children’s health and well being:
 - a. What do you think about the number of children that are attending the monthly weighing sessions?
 - b. What do you think about how the children are growing?
 - c. Why do you think that children grow well in certain months?
 - d. Why do you think that some children do not grow well in certain months?
- d. Ensure that the following three factors that affect children’s growth are mentioned:
 - ✓ The quantity and quality of foods available to the family
 - ✓ The incidence and severity of illnesses

- ✓ The care that children receive, including feeding practices in the home
- e. Help community members explore each one of those factors to decide which should be priorities. (Use the sample questions attached to guide the discussion.)
 - ✓ The quantity and quality of foods available to the family
 - [Incidence and severity of illness
 - [Child care and feeding
- e. Help members select one or more problems that negatively affect the growth of children in their community.

5) Help members search for solutions and identify actions to take (15 min)

- a) Lead a discussion about how to take advantage of positive factors and minimize negative factors.
- b) If suggestions are needed, offer the following:
 - ✓ The quantity and quality of foods available to the family
 - = Form a cooperative group to get food at a lower cost.
 - = Store food after the harvest to avoid shortages later.
 - [Incidence and severity of illness
 - = Find or make a clean place where children can play.
 - = Wash and disinfect with Clorox the water bins regularly.
 - [Child care and feeding
 - = Form a group of volunteer grandmothers to care for the young children during harvest times or when mothers must work outside the home.

6) Close the meeting (5 min)

- a) Thank all members for their attendance and participation.
- b) Read the agreements that have been reached during the meeting
- c) Announce the date, time and location of the next meeting.

SAMPLE QUESTIONS

TOPIC	QUESTIONS
The quantity and quality of foods available to the family	<ul style="list-style-type: none"> = Are there families that do not have food? = Why do some families not have enough food for their young children?
Incidence and severity of illness	<ul style="list-style-type: none"> = Is this the season for diarrhea or cough? = Do families quickly seek help for their children when they get sick? = How can we keep our children from getting sick? = Are children fed differently when they are sick?
Child care and feeding	<ul style="list-style-type: none"> = Who takes care of children in the home? = Are mothers exclusively breastfeeding their children until 6 months or are they giving them liquids or other foods before then? = After six months, are they giving children meals three or four times a day? = Are they giving the children enough food at each meal? = Are the porridges thickened or watery? = Do they use oil and grease to prepare the children's food? = Do they give green leafy vegetables, fruits and yellow vegetables to the children? = Do they give the children snacks, such as sweet bananas or avocado (mashed or cut up for young children), egg, bread, sweet potato etc.?

ANNEX 1: Community Census Data

(for use in Exercise 4)

SUB COUNTY:

VILLAGE: DATE OF CENSUS: **6 March 2005.**

HH No	NAME CHILD	SEX (m/f)	NAME MOTHER	NAME FATHER	ADDRESS	DATE OF BIRTH	BIRTH WEIGHT	AGE TODAY (months)	WEIGHT TODAY (kg)
01	<i>Grace Basima</i>	<i>F</i>				<i>04-08-04</i>	<i>2.7 kg</i>	<i>7</i>	<i>8.1 kg</i>
02	<i>Rose Kamy</i>	<i>F</i>				<i>03-03-04</i>	<i>3.0 kg</i>	<i>12</i>	<i>10.3 kg</i>
03	<i>Betty Mpologoma</i>	<i>F</i>				<i>22-04-03</i>	<i>-</i>	<i>22</i>	<i>11.5 kg</i>
03	<i>Henry Magoola</i>	<i>M</i>				<i>31-05-04</i>	<i>2.8 kg</i>	<i>9</i>	<i>6.6 kg</i>
04	<i>Robert Buyinza</i>	<i>M</i>				<i>05-11-04</i>	<i>-</i>	<i>4</i>	<i>5.3 kg</i>
05	<i>Eunice Tganyana</i>	<i>F</i>				<i>26-01-04</i>	<i>-</i>	<i>13</i>	<i>11.2 kg</i>
06	<i>Beatrice Wanyana</i>	<i>F</i>				<i>12-08-04</i>	<i>-</i>	<i>6</i>	<i>7.4 kg</i>
07	<i>Margaret Sebagereka</i>	<i>F</i>				<i>01-03-05</i>	<i>3.1 kg</i>	<i>5 days</i>	<i>2.9 kg</i>
08	<i>George Walusimbi</i>	<i>M</i>				<i>20-09-04</i>	<i>-</i>	<i>5</i>	<i>6.9 kg</i>
09	<i>Robert Kasadha</i>	<i>M</i>				<i>30-11-04</i>	<i>3.3 kg</i>	<i>3</i>	<i>4.5 kg</i>
10	<i>John Kakande</i>	<i>M</i>				<i>19-08-03</i>	<i>2.5 kg</i>	<i>18</i>	<i>10.8 kg</i>
10	<i>Peter Sansa</i>	<i>M</i>				<i>02-02-05</i>	<i>-</i>	<i>1</i>	<i>3.3 kg</i>
11	<i>Harriet Petua</i>	<i>F</i>				<i>03-01-04</i>	<i>-</i>	<i>14</i>	<i>12.2 kg</i>
12	<i>Patrick Semwogere.</i>	<i>M</i>				<i>17-06-03</i>	<i>3.0 kg</i>	<i>20</i>	<i>12.3 kg</i>
13	<i>Kennedy Matia</i>	<i>M</i>				<i>19-09-03</i>	<i>2.9 kg</i>	<i>17</i>	<i>9.8 kg</i>

Annex 3: Village Register with expected minimum weights for the first GP session filled in (for use in Exercise 9)

CHILDREN UNDER 2 YEARS

District _____ Sub County _____
 Parish _____ Village _____
 Nearest Health Unit _____ Date of Baseline **6 March 2005**
 Growth Promoters' Names _____

No	Name of Child	Date of Birth	Birth Weight (kg)	Sex (M/F)	Age at baseline (months)	Weight at Baseline (kg)
1	Betty Mpologoma.	22-04-03	-	F	22	11.5
2	Patrick Semwogere	17-06-03	3.0	M	20	12.3
3	John Kakande	19-08-03	2.5	M	18	10.8
4	Kennedy Matia	19-09-03	2.9	M	17	9.8
5	Harriet Petua	03-01-04	-	F	14	12.2
6	Eunice Tganyana	26-01-04	-	F	13	11.2
7	Rose Kamyia	03-03-04	3.0	F	12	10.3
8	Henry Magoola	31-05-04	2.8	M	9	6.6
9	Grace Basima	04-08-04	2.7	F	7	8.1
10	Beatrice Wanyana	12-08-04	-	F	6	7.4
11	George Walusimbi	20-09-04	-	M	5	6.9
12	Robert Buyinza	05-11-04	-	M	4	5.3
13	Robert Kasadha	30-11-04	3.3	M	3	4.5
14	Peter Sansa	02-02-05	-	M	1	3.3
15	Margaret Sebageureka	01-03-05	3.1	F	5 days	2.9
16						

SESSION 1 | **DATE: 4 April 2005**

Names of Promoters: _____

Age Today (Months)	Expected Weight (kg)	Weight Today (kg)	Adequate Growth (Yes or No)	Has Health Card (Yes or No)	Immunization up to date (Yes or No)	Vitamin A up to date (Yes or No)	Referred for sick child care
23	11.7						
21	12.4						
19	11.0						
18	10.0						
15	12.3						
14	11.4						
13	10.5						
10	7.0						
8	8.4						
7	7.7						
6	7.3						
5	5.8						
4	5.1						
2	4.0						
1	3.6						

Annex 4: Village Register with 'weights today' for the first Growth Promotion session filled in (for use in Exercise 10)

CHILDREN UNDER 2 YEARS

District _____ Sub County _____
 Parish _____ Village _____
 Nearest Health Unit _____ Date of Baseline **6 March 2005**
 Growth Promoters' Names _____

No	Name of Child	Date of Birth	Birth Weight (kg)	Sex (M/F)	Age at baseline (months)	Weight at Baseline (kg)
1	Betty Mpologoma.	22-04-03	-	F	22	11.5
2	Patrick Semwogere	17-06-03	3.0	M	20	12.3
3	John Kakande	19-08-03	2.5	M	18	10.8
4	Kennedy Matia	19-09-03	2.9	M	17	9.8
5	Harriet Petua	03-01-04	-	F	14	12.2
6	Eunice Tganyana	26-01-04	-	F	13	11.2
7	Rose Kamyia	03-03-04	3.0	F	12	10.3
8	Henry Magoola	31-05-04	2.8	M	9	6.6
9	Grace Basima	04-08-04	2.7	F	7	8.1
10	Beatrice Wanyana	12-08-04	-	F	6	7.4
11	George Walusimbi	20-09-04	-	M	5	6.9
12	Robert Buyinza	05-11-04	-	M	4	5.3
13	Robert Kasadha	30-11-04	3.3	M	3	4.5
14	Peter Sansa	02-02-05	-	M	1	3.3
15	Margaret Sebageureka	01-03-05	3.1	F	5 days	2.9
16						

SESSION 1 | **DATE: 4 April 2005**

Names of Promoters: _____

Age Today (Months)	Expected Weight (kg)	Weight Today (kg)	Adequate Growth (Yes or No)	Has Health Card (Yes or No)	Immunization up to date (Yes or No)	Vitamin A up to date (Yes or No)	Referred for sick child care
23	11.7	11.9					
21	12.4	12.5					
19	11.0	11.0					
18	10.0	9.9					
15	12.3	-					
14	11.4	11.5					
13	10.5	10.3					
10	7.0	6.9					
8	8.4	8.6					
7	7.7	7.6					
6	7.3	-					
5	5.8	5.7					
4	5.1	5.2					
2	4.0	4.2					
1	3.6	3.6					

Annex 5: Village Register with the information for two Growth Promotion sessions filled in (for use in Exercise 18)

CHILDREN UNDER 2 YEARS

District _____ Sub County _____

Parish _____ Village _____

Nearest Health Unit _____ Date of Baseline **6 March 2005**

Growth Promoters' Names _____

No	Name of Child	Date of Birth	Birth Weight (kg)	Sex (M/F)	Age at baseline (months)	Weight at Baseline (kg)
1	Betty Mpologoma.	22-04-03	-	F	22	11.5
2	Patrick Semwogere	17-06-03	3.0	M	20	12.3
3	John Kakande	19-08-03	2.5	M	18	10.8
4	Kennedy Matia	19-09-03	2.9	M	17	9.8
5	Harriet Petua	03-01-04	-	F	14	12.2
6	Eunice Tganyana	26-01-04	-	F	13	11.2
7	Rose Kamyia	03-03-04	3.0	F	12	10.3
8	Henry Magoola	31-05-04	2.8	M	9	6.6
9	Grace Basima	04-08-04	2.7	F	7	8.1
10	Beatrice Wanyana	12-08-04	-	F	6	7.4
11	George Walusimbi	20-09-04	-	M	5	6.9
12	Robert Buyinza	05-11-04	-	M	4	5.3
13	Robert Kasadha	30-11-04	3.3	M	3	4.5
14	Peter Sansa	02-02-05	-	M	1	3.3
15	Margaret Sebageka	01-03-05	3.1	F	5 days	2.9
16	Alice Mudhiri.	01-04-05	-	F	-	-
17	Geoffrey Edyegu.	12-04-05	-	M	-	-
18						

SESSION 1:
DATE: 4 April 2005

Age Today (Months)	Expected Weight (kg)	Weight Today (kg)	Adequate Growth (Yes or No)
23	11.7	11.9	YES
21	12.4	12.5	YES
19	11.0	11.0	YES
18	10.0	9.9	NO
15	12.3	-	
14	11.4	11.5	YES
13	10.5	10.3	NO
10	7.0	6.9	NO
8	8.4	8.6	YES
7	7.7	7.6	NO
6	7.3	-	
5	5.8	5.7	NO
4	5.1	5.2	YES
2	4.0	4.2	YES
1	3.6	3.6	YES
-	-	-	-
-	-	-	-

SESSION 2:
DATE: 2 May 2005

Age Today (Months)	Expected Weight (kg)	Weight Today (kg)	Adequate Growth (Yes or No)
24	12.0	12.1	YES
22	12.6	12.6	YES
20	11.2	-	
19	10.1	10.2	YES
16	12.4	12.3	NO
15	11.7	11.6	NO
14	10.5	10.7	YES
11	7.3	7.2	NO
9	8.9	9.0	YES
8	7.9	8.0	YES
7	7.6	-	
6	6.2	6.1	NO
5	5.7	5.8	YES
3	4.9	4.8	NO
2	4.3	4.4	YES
1	-	3.8	
20 d	-	3.0	

