



CARING FOR CHILD DEVELOPMENT

PARTICIPANTS' MANUAL





CARING FOR CHILD DEVELOPMENT

— PARTICIPANTS' MANUAL —

In Partnership with:



ACKNOWLEDGEMENT

The content of this manual has been adapted from WHO/UNICEF Care for Child Development participants' material, presently undergoing adaptation by the Ministry of Health to the Ugandan context through the Nurturing Care Framework Working Group. We extend our appreciation to WHO and UNICEF for making this content available for use. Sincere appreciations are extended to the line Ministries; particularly the Ministry of Health (MoH), Ministry of Gender Labour Social Development (MoGLSD), Ministry of Local Government (MoLG), Ministry of Education and Sports (MoES), Ministry of Agriculture Animal Industry and Fisheries (MAAIF) for their invaluable contributions in reviewing and adapting this material to the needs of Kulea Watoto Project. The commitment to excellence and collaboration from these entities has guided the onward use of this resource by the Kulea Watoto Project for the benefit of the project clients/beneficiaries.

A sincere thank you is extended to the individuals who devoted their time, knowledge, and expertise particularly to make adaptations to the illustrations and graphic designs in the manual. Their insights and collaborative efforts have significantly enriched its content. Special appreciation is given to the International Rescue Committee (IRC), the partners, Literacy and Adult basic Education (LAGE), Madrasa Early Childhood Program (MECP), Kabarole Resource and Research Centre (KRC), and AfriChild Centre for their invaluable contributions to the adaptation of this manual.

Thanks to individuals or groups who tested the manual and provided valuable feedback, contributing to its refinement and improvement and hope the content contributes to the caregivers' responsiveness while nurturing young children to develop holistically.

Our heartfelt thanks go to the graphic designers, reviewers, and editors for their valuable feedback and tremendous work during the process of reviewing and designing the manual. Their attention to detail and constructive input have significantly improved the overall quality of this manual. Overall, we extend our thanks and appreciation to everyone involved in the adaptation and success of this manual. Their dedication, expertise, and committed support have been invaluable throughout the entire process.

International Rescue Committee, Inc.
Plot 7 Lower Naguru East Road,
P.O. Box 24672, Kampala
Uganda.

Tel: +256 (0) 200 963 673
Web: rescue.org

Contents

Introduction	iv
Course Objectives	v
Session 1 Who is the Caregiver?	8
Visioning, Activity - 9	
Session 2 Early Stimulation	10
Importance of early stimulation - 11	
Development of senses from pregnancy to 5 years - 11	
Session 3 Caring for The Child's Development	16
What is care for child development? - 18	
Session 4 Recommendations for Care for Child Development	23
For the newborn, from birth up to 1 week - 26	
For the infant, from 1 week up to 6 months - 27	
For the child, from 6 up to 9 months - 29	
For the child, from 9 months up to 12 months - 30	
For the child, from 12 months up to 2 years - 31	
For the child, 2 years up to 5 years - 34	
Session 5 Toy-making Workshop and Celebrations	38
Criteria for toy-making - 39	
Rationalise use of materials - 39	
Session 6-9 22 Key Family Care Practices (KFCP)	44
Growth promotion and development - 44	
Disease/illness prevention - 45	
Appropriate home care - 45	
Care-seeking and compliance - 46	
Praise and advise the caregiver - 51	
Session 10 Help Solve Problems	57
For a child aged between 6 months and 5 years who may be having difficulty learning - 60	
Role play exercise: Help to solve problems - 64	
Caregiver and child follow-up - 65	
Video exercise: Identify and help solve problems - 65	



Introduction




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

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

This course on Counsel the Family on Care for Child Development supports the efforts of families and others in your community who are trying to raise healthy, happy children.

They may live in poverty and face many other challenges. The children they raise may be their own. Or they may have accepted the task of raising other children in their family or community. You can help them be better able to care for their children, even under difficult conditions.



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

Help families feel confident and good about giving care.





Course Objectives

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

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

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

Using good communication skills, you will counsel the family.

Course methods and materials:

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

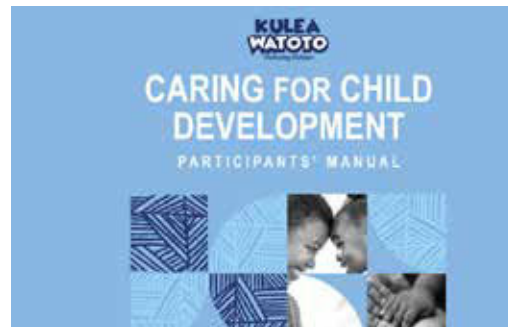


The course provides these materials:



Manual

You are now reading the Participant Manual. It contains the content, discussions, and exercises for the course.



Counselling Cards

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



Checklist

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

Copyright © 2014, All rights reserved.

CHECKLIST for Counselling on Care for Child Development

Date _____ Completed by _____

Child's name: First _____ Family _____ Age _____ Years _____ / Months _____ Boy / Girl _____

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

Address: Community _____

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

	Look	Praise the caregiver if the caregiver:	Advise the caregiver and solve problems if the caregiver:
All children	<p>How does the caregiver show he or she is aware of the child's movements?</p> <p>How does the caregiver control the child and direct him?</p> <p>How does the caregiver control the child?</p>	<p><input type="checkbox"/> Moves towards and calls child, and talks to or makes sounds with child.</p> <p><input type="checkbox"/> Looks into child's eyes and talks softly to child, gently touches child or holds child closely.</p> <p><input type="checkbox"/> Clearly avoid from unwanted actions with equipment toy or activity.</p>	<p><input type="checkbox"/> Does not assess with child, or controls child's movements. Ask caregiver to stop child's movements, to follow child's lead.</p> <p><input type="checkbox"/> Is not able to comfort child, and child does not look to caregiver for comfort. Ask caregiver to stop child's movements, to talk to child and hold child.</p> <p><input type="checkbox"/> Avoids child's eyes. Ask caregiver to look into child's eyes and talk to child.</p>
	<p>How do you play with your baby?</p> <p>How do you talk to your baby?</p>	<p><input type="checkbox"/> Shows the baby's arms and legs or gently strokes the baby.</p> <p><input type="checkbox"/> Looks for baby's attention with a neutral face or other object.</p> <p><input type="checkbox"/> Looks into baby's eyes and talks softly to baby.</p>	<p><input type="checkbox"/> Does not play with baby! (Describe ways in which baby was, head, feet and hands, appropriate for baby's age.)</p> <p><input type="checkbox"/> Does not talk to baby! Ask caregiver to look into baby's eyes and talk to baby.</p>


Other materials

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

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

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

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



Some participants may have taken a course in **Integrated Management of Childhood Illness (IMCI)**. IMCI-trained health workers work in acute-care centres.

They may counsel caregivers of children on care for child development, only if the children are low-weight or have anaemia. Their time working with sick children in the health facility may not permit counselling caregivers of all children under five years old.

Other counsellors may use these guidelines with families of all children, sick or well, in a wide variety of settings.



Session 1 / ⌚ 2 hrs.

Who is the Caregiver?

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

Who are caregivers in your community?

The child's caregivers play the most important role in the child's health and development. Often the mother is the primary caregiver, and the most important caregiver to a young infant who is breastfeeding.

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



In some communities, children have several caregivers. A grandmother, an aunt, an older sister, and a neighbour may share the tasks of caring for a child. Also, a child-care centre may have several caregivers who take care of children a few hours each day. In this training, the primary caregivers are considered the child's family.

You may meet these caregivers in different settings. You may be working or volunteering, for example, in a child-care centre, at a feeding programme, in a health centre or hospital, or at a community health fair. Wherever you are called on to counsel families, your efforts will help them raise healthier and more capable children.



TIP

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

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

Visioning activity / (Jointly done with ERD team)



An activity for households to sit together and work on their household improvement plan indicating short-, mid-term, and long-term goals or plans.

- Let the caregivers and their families come with a list of plans or goals.
- Let the facilitator help the caregivers to sort what will be achieved first, after, and later





Session 2 / ⌚ 2 hrs.

Early Stimulation

The architecture of the brain is built before birth and the experiences of the first few years of life determine the connections needed to develop its capacity to think, reason and solve problems.

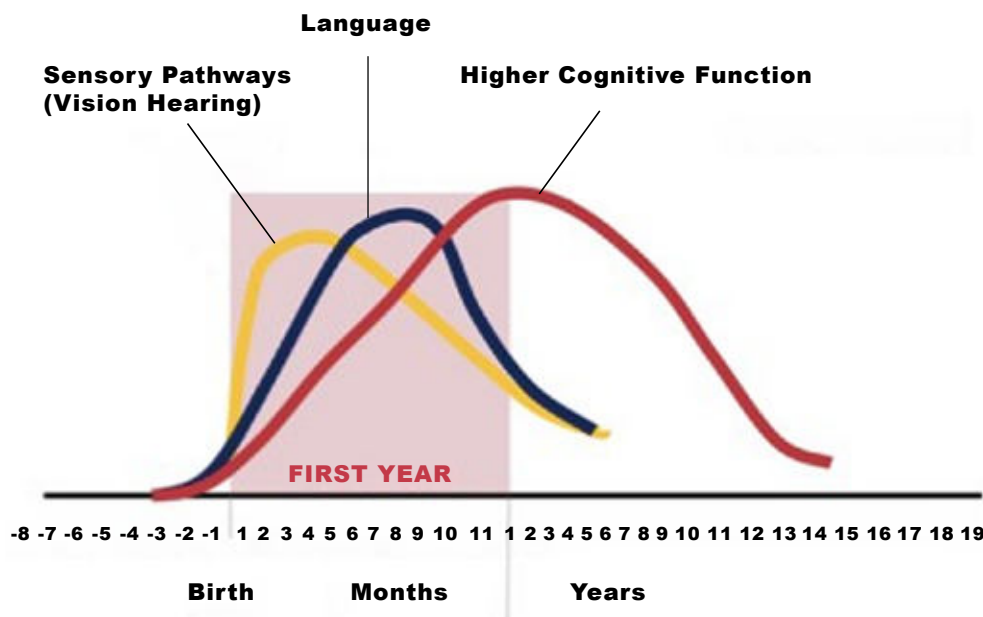


The child's biggest brain percentage develops within the 1,000 days, and up to 90% of the brain's foundational wiring happens before the baby turns five years. How a baby learns in school is influenced greatly by their experiences from pregnancy to three years.

Empowering a parent or other primary caregiver to take that first step towards helping their baby reach optimal growth and development, by providing a rich, safe and stimulating environment is crucial.



Graph on brain development

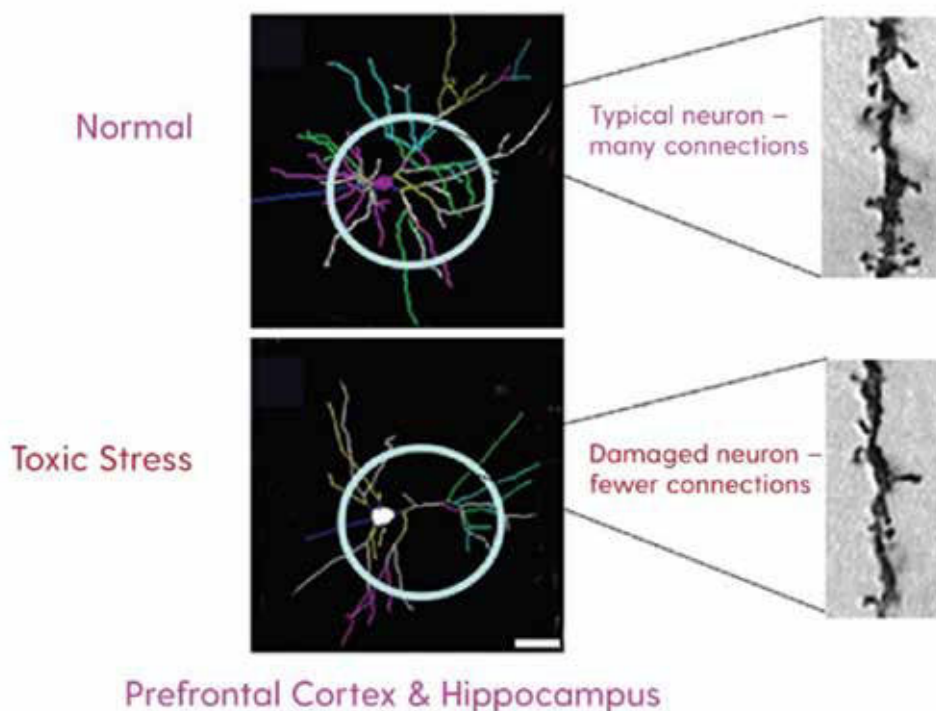


Core Concepts of Brain Development

- *Brain development occurs over time from shortly after conception to adulthood.*
- *Experiences shape development (Serve and Return)*
- *Neural circuits are wired in a bottom-up hierarchical sequence.*
- *The capacity for change decreases with age*

Besides food, a baby needs stimulation to grow, develop and thrive. The environment a baby grows up in literally molds lasting impressions on the brain. For example, when a caregiver pays close attention to what a baby is signaling and then responds to its needs in a warm and loving way, the caregiver is being responsive, and this makes the baby feel secure and loved. When a mother or father sings and talks to the baby, even when they are still in the womb, the baby learns to communicate in a reciprocal manner. This is called stimulation, through out a lifetime children should be nurtured through play and communication to enable early stimulation.

Persistent stress changes brain architecture



Brains subjected to toxic stress have underdeveloped neural connections in areas of the brain most popular for successful learning and behavior in school and at the workplace.

Importance of early stimulation

- It boosts brain development.
- Early childhood experiences shape the baby's brain and determine who they become in future.
- It helps babies learn to interact with other people besides their family members.
- It helps babies gain self-esteem.
- It builds a foundation for later learning and achievement.

Development of senses from pregnancy to 5 years

The foetus (unborn baby) first begins to experience the world through touch. Then, later in pregnancy, come taste, sound, smell and sight.'

After birth, it is these senses that enable the developing child to learn from their surroundings and to adapt, physiologically and psychologically.¹

Touch

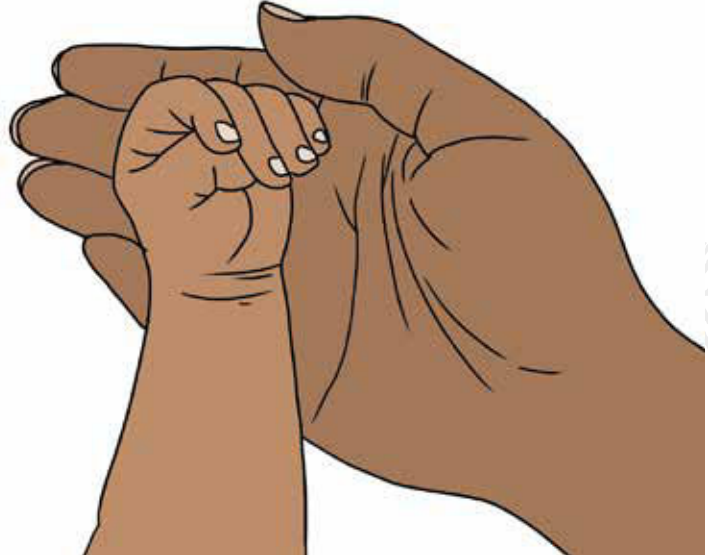
The unborn baby begins to develop sensory senses the moment conception/ pregnancy starts. The first sense to develop is the sense of touch at three weeks of pregnancy. By the twelfth week, the baby can feel and respond to touch on almost his/ her entire body.

Baby is born with a fully developed sense of touch.

Parental love for their babies can be shown through close, loving, physical contact

Babies need close physical contact with their parents to thrive

It is important that parents hold and cuddle their babies. It builds close bonds



Use soft materials for wrapping baby and for her/his beddings. Stimulation of the sense of touch can be done through routine activities like:

- Breast feeding
- Massage
- Changing nappies / diaper or cleaning/bathing the baby
- Gentle tickle under the feet
- Gentle caress

Taste and Smell

The unborn baby begins to develop the sense of taste at eight weeks of pregnancy when taste buds emerge. By thirteen to fifteen weeks of pregnancy, the baby has taste buds similar to adults.

Anything the pregnant mother eats can flavor the amniotic fluid which the baby takes.²

Smell develops alongside the sense taste.



Smell are essentially chemicals that are found to be present in amniotic fluid. The baby can smell while still in the womb as the chemicals pass from the amniotic fluid onto the smell receptors in the baby's nasal cavity.

The baby's nasal cavity is protected by a plug of tissue until twenty eight weeks of pregnancy. Thereafter the baby starts smelling and responding to scents.²



Sound

The baby starts hearing while still in the womb. The system responsible for hearing is complete at twenty weeks of pregnancy. At twenty weeks of pregnancy, the baby can respond to loud noises and may move.²

The sense of movement and balance in the ears develops very early and begins to function at five months of pregnancy. Like the sense of hearing and touch, the sense of movement is developed at birth.

- During the first month after birth, babies will begin to turn their heads towards the direction of the sounds they hear.
- When stimulating babies' sense of hearing remember that they prefer the sound of a human voice more than any other sound.
- Repeated and pleasant sound helps in future learning.
- It is through hearing that infants learn about language.
- By the time babies reach one month, they will be able to physically respond to sounds in some way, e.g. by startling, crying, or calming down.





Sight

The baby's eye lids open at twenty six weeks of pregnancy and at six months of pregnancy they can begin to see blurred light in the womb, because of the darkness caused by the amniotic fluid. Eye sight fully develops when the child is born and the sense of sight is stimulated with lights.²

- By the end of the first month, infants will be able to see faces and distinct patterns
- During the first month, most babies learn to focus on objects at a distance of 8-10 inches.
- At one month, they can follow objects with their eyes.

Babies at this age will:

- Like sharp contrasts of colours
- Spend a lot of time looking around them
- Follow moving objects with their eyes
- Love looking at people's faces up close



Child development norms and sample activities

Developmental Norms	Examples of activities from Play and Communication Guide
<p>Birth to 6 months</p> <ul style="list-style-type: none"> • Track people and objects with their eyes. • Respond to bright colours and faces. • Reach out to touch an object hanging near or above them. • Be able to grasp objects. • Discover their hands and feet. • Be able to lift their heads toward sound. • Begin to smile. • Listen intently. • Respond when spoken to • Laugh, gurgle, and imitate sounds. • Put objects in their mouth. <ul style="list-style-type: none"> • Dangle bright objects for your child to look at and follow with eyes. • Provide safe, clean, and colourful objects for your child to reach and grasp. • Provide your child a rattle to play with. • Imitate the sounds the child makes. 	



6 to 12 months

- Remember simple events.
- Identify themselves, body parts, and familiar voices.
- Understand his/her own name.
- Say first meaningful words.
- Explore, bang, and shake objects.
- Find hidden objects and put objects in containers.
- Sit alone.
- Creep, pull themselves up to stand, and walk.
- Make actions for your child to copy.
- Play ball games.
- Tell your child names of objects.
- Play the mirror game.

1 to 2 years

- Imitate adult actions.
- Speak and understand ideas.
- Enjoy stories and experimenting with objects.
- Walk steadily, climb stairs, and run.
- Solve problems.
- Show pride in accomplishments.
- Let the child enjoy scribbling.
- Encourage child to crawl toward favourite objects or people
- Provide push and pull toys.
- Tell the child simple stories everyday.

2 to 5 years

- Joins familiar words into phrases.
- Points to common objects when they are named.
- Names objects based on their description.
- Walks and runs with skill, changing speed and direction.
- Kicks and throws a ball, but with little control of direction or speed.
- Climbs up climbers and ladders.
- Responds to simple directions.
- Groups objects by category.
- Chooses a picture book, names pictured objects, and identifies several objects within one picture.
- Can play pretend and imitate adults.
- Can experience fear and show empathy.
- Tell stories to your child.
- Read picture books with your child.
- Take your child outside to run, climb, and kick a ball.
- Ask your child to tell you how they are feeling. them if they feel scared.
- Play pretend with your child.
- You can pretend drive a car, roar like a lion, etc.
- Ask your child to and name things in the environment. You can describe clothes, flowers, items, etc.
- Play the guessing game with your child.

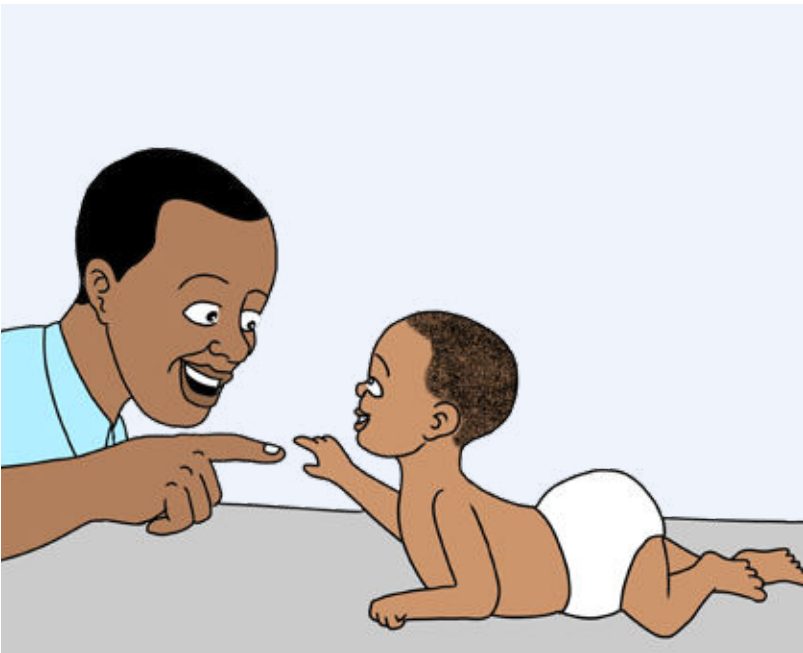


Session 3 / ⌚ 2 hrs.

Caring for the Child's Development

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

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



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

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

The recommendations also help children grow. For this reason, the recommendations are especially important for low-weight newborns and malnourished children.

Studies have found that extra attention through play and communication, as well as through responsive feeding, stimulates the growth of low-weight babies and poorly-nourished children.

Low-weight babies and children who are poorly nourished also have difficulty in learning;

- They may be timid and easily upset, harder to feed, and less likely to play and communicate.
- Since these children are less active, they may be less able to get the attention of the adults who care for them. As a result, over time mothers and other caregivers are less likely to feed, play with, or communicate frequently with them.
- Poorly nourished, sick, and disabled children all have special needs for care. Their families may also need help to understand how their children communicate their hunger, discomfort, and needs.



The recommendations for play and communication can also help caregivers.

- After giving birth, for example, some mothers find it difficult to become active and involved in caring for their newborn babies.
- They may be sick or overwhelmed with their responsibilities. They appear sad and tired. They are uninterested in other people and do not join other family activities.
- Paying close attention to their babies, playing with them, and seeing how their babies respond to the attention helps these caregivers become more active and happier.

The recommended play and communication activities help caregivers feel more important in the lives of their young children. The activities help both the child and the caregiver.

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

What is care for child development?

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

Families give their children special care for development by giving them love, attention, and many opportunities to learn.

By playing and communicating with their children, families help their children grow healthier and stronger. Children learn to communicate their needs, solve problems, and help others. From a very young age, children learn important skills that will prepare them for life.

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

The brain develops most rapidly before birth and during the first two years of life (0 - 2years).

Good nutrition and good health are especially important during this time. **Breast milk plays a special role in the development of the brain.** Breast milk also helps young children stay free from illness so that they are strong and can explore and learn.

Children can see and hear at birth. Starting when they are very young, children need opportunities to use their eyes and ears, in addition to good nutrition.

For their brains to develop, children also need to move, to have things to touch and explore, and to play with others. Children also need love and affection. All these experiences help the brain to develop.





From birth, babies can see and hear.

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

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

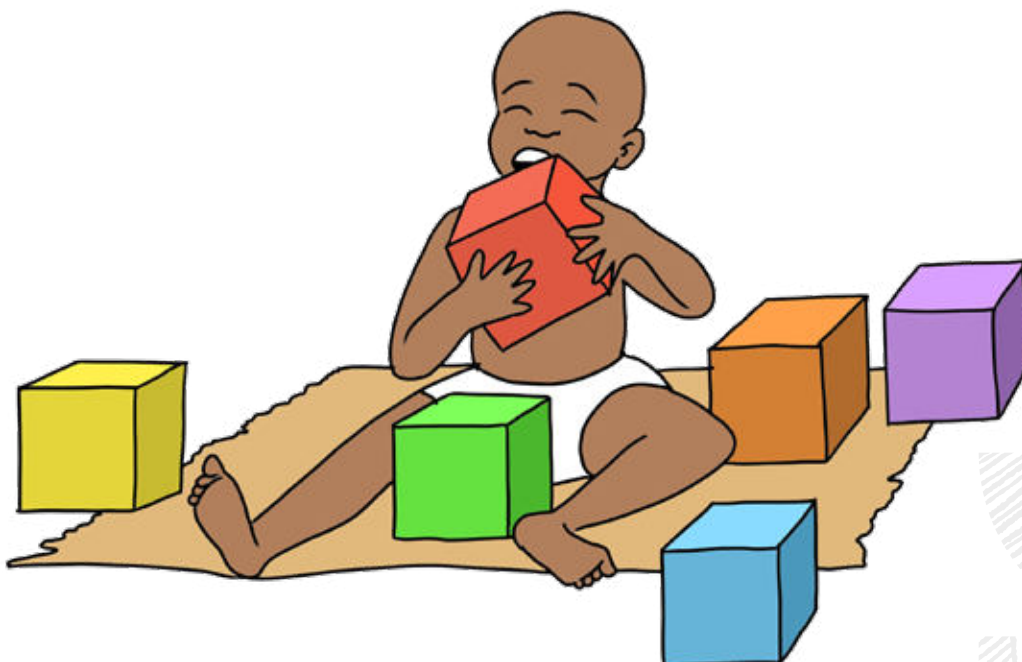
Breast milk plays a special role in the development of the brain. Breast milk also helps young children stay free from illness so that they are strong and can explore and learn.

Children need a safe environment as they learn

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

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

When children are young, they often explore by putting things into their sensitive mouths. With their mouths, as well as with their hands, children learn what is soft and hard, hot and cold, dry and moist, and rough and smooth.



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

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

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

Children need consistent loving attention from at least one person

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

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

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

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



➔ Adults can encourage their children by responding to their children's words, actions, and interests with sounds, gestures, gentle touches, and words.

Adults can help their children develop into happy, healthy people by looking at and talking about the attempts of young children to do new things, to make sounds and to talk, even when the children are not yet able to speak.

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

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

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

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

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



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

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





Discussion:

Care for Child Development

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

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

Session 4 / 🕒 2 hrs.

Recommendations for Care for Child Development

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

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

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



Discuss with the facilitator:

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

What are some skills that the child is learning?

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

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

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

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

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

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



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

A responsive caregiver then **acts immediately** and appropriately to what the child is trying to communicate.

A sensitive and responsive caregiver would, for example, have the skills to be able to see the child's signs of discomfort, recognize that the child is hungry, and feed her. The skills help the caregiver be aware when the child may be in danger and then move quickly to protect him. The skills help the caregiver feel when the child is in distress, and respond appropriately to give comfort. The skills help caregivers recognize when a child is sick and needs medical care.

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

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

Select recommended activities appropriate for the child's age

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

Select recommended activities appropriate for the child's skill

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



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

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

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

1 For the newborn, from birth up to 1 week

NEWBORN, BIRTH - 1 WEEK
Your baby learns from birth;

Play:

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

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

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

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

Communicate:

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

Children communicate their needs. They learn to trust that someone will pay attention to their movements, sounds, and cries. Breastfeeding on demand strengthens this interaction and the growing trust.

Children show interest in breastfeeding by becoming fussy, sucking their hand, or moving their heads toward the breast. Using these clues, a mother can learn to recognize that a child is hungry before the child starts to cry.

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



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



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



2 For the infant, from 1 week up to 6 months

1 WEEK - 6 MONTHS

Play:

Infants at this age like to reach for and grab fingers and objects. They look at their hands and feet, as if they are just discovering them. They put things into their mouths because their mouths are sensitive. The mouth helps them learn warm and cool, and soft and hard, by taste and touch. Just make sure that what the child puts into his mouth is clean, and is large enough that the child won't choke on it.

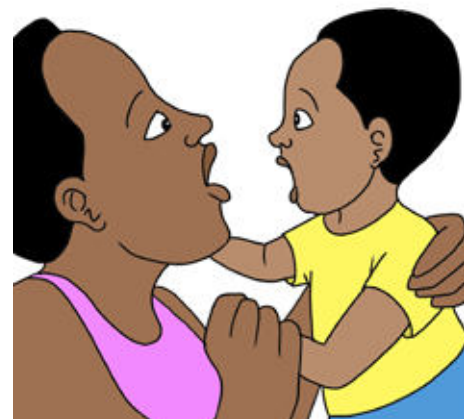


Help the child follow an object. For example, ask the caregiver to show a colourful cup to the child, just out of reach. When she is sure the child sees the cup, ask her to move it slowly from one side to the other and up and down, in front of the child. Then, to move the cup closer. Encourage the child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

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



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



COMMUNICATE: Smile and laugh with your child. Talk to your child. Get a conversation going by copying your child's sounds or gestures.

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

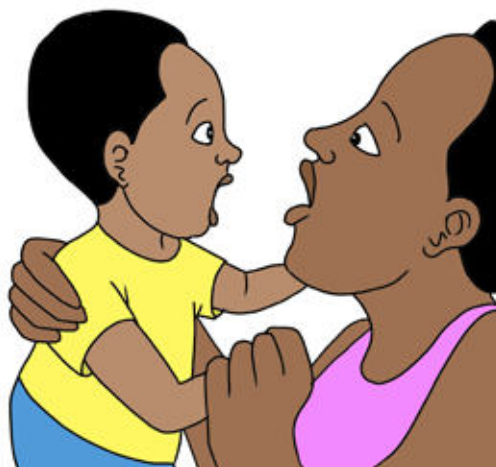
Communicate:

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

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

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

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



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

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

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



3 For the child, from 6 months up to 9 months

6 MONTHS - 9 MONTHS

Play:

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

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



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



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

Communicate:

Even before children say words, they learn from what family members say to them, and can understand a lot. They notice when people express strong anger, and may be upset by it. Children copy the sounds and actions of older brothers and sisters and adults. Children like other people to respond to the sounds they are making and to show an interest in the new things they notice.

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



4 For the child, from 9 months up to 12 months

9 MONTHS - 12 MONTHS

Play:

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

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



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

Communicate:

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

“Where is your nose?” Nora does not speak yet – but she can show you where her nose is. She is also learning the names of people and things.

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



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



A child may become afraid on losing sight of a familiar caregiver. The adult helps the child feel safe, responds when she cries or is hungry, and calms her by his presence and the sound of his voice.

Encourage the caregiver to tell his child when he is leaving and to reassure his child that he will soon return. He can leave a safe, comfortable object with the child – one that reminds the child of the caregiver and assures the child that he will return.



“Bye bye!”

5 For the child, from 12 months up to 2 years

12 MONTHS - 2 YEARS

Play:

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

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

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

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

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



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

Paul has learned a new game from his grandmother. He puts clothes clips into bottles, dumps them out, and puts them in again – over and over again. ➡



Communicate:

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

Children are beginning to understand what others are saying and can follow simple directions. They often can say some words, such as “water” or “ball”.

Family members should try to understand the child’s words and check to see whether they understand what the child says:

- “Would you like some water?”
- “Do you want to play with the ball?”

Families can play simple word games, and ask simple questions:

- “Where is your toe?” or
- “Where is the bird?”

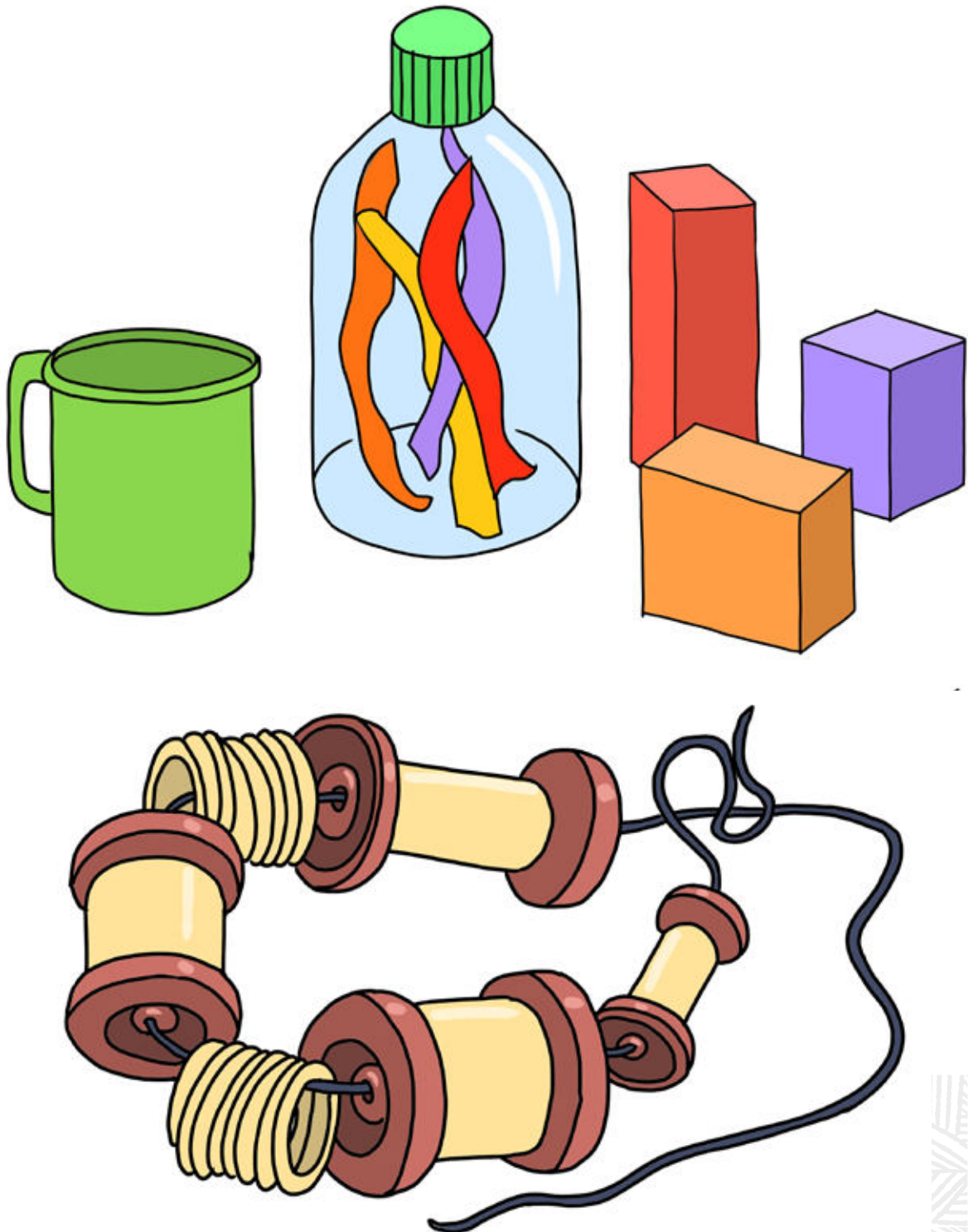
Together they can look at pictures and talk about what they see.

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



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

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



6 For the child, 2 years up to 5 years

2 YEARS - 5 YEARS



Throughout the activity, encourage care-givers to help their children learn.

Some good advice for the caregiver, no matter what the child's age:

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

Play:

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

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

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

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

Communicate:

By age 2 years, children can listen and understand. Asking simple questions and listening to the answers encourages children to talk:

- “What is this?”
- “Where is your brother?”
- “Which ball is bigger?”
- “Would you like the red cup?”



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



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

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

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

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

Children this age can understand and copy what is right and wrong. Traditional stories, songs, and games help teach children how to behave. They learn from siblings and other family members. Children learn better when they are taught how to behave well instead of being scolded for behaving badly. They should be corrected gently so that they do not feel ashamed.



With his father's guidance, John puts together a homemade picture puzzle.

Discussion:

Using the Counselling Card



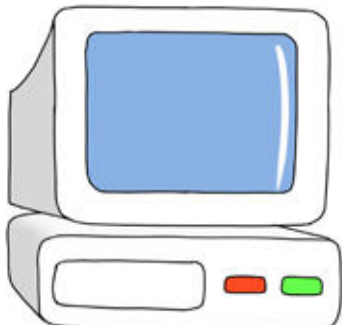
This exercise will help you use the **Counselling Card** to identify a recommended play and communication activity for a child.

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

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

Video / Role play Exercise:

Recommendations for play and communication



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

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

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

1. What examples of play activities did you see? For which age group?

(Refer to the recommendations on the Counselling Cards.)

Play activities	Recommended for which age group?

2. What examples of communication activities did you see? For which age group?

(Refer to the recommendations on the Counselling Cards.)

Communication activities	Recommended for which age group?

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



Session 5 / ⌚ 2½ hrs

Toy-Making Workshop and Celebrations

It is important that children have a lot of opportunity to play.

Play is young children's work. They learn skills and develop confidence and imagination through playing. They also improve their language especially when their mothers and fathers play with them.

Children need to have things to fit together, play pretend games with, build or manipulate. They also like to look at books and draw



Criteria for toy-making

When making new toys for home visiting with children under four years it is important they meet the following criteria:

- Safe to use. (Should not cause injuries to the child)
- Made from materials readily available in the local area.
- Quick and easy to make - (not more than 10 – 15 minutes).
- Robust – able to stand up to repeated handling by young children.
- If possible washable or at least possible to wipe with wet cloth.
- Attractive (make sound or is colourful) - use non-toxic paint or permanent markers to make attractive but only as much as necessary.
- Versatile – the more versatile the toy (i.e. ones you can teach many different things with through a wide age range) the better. For example, blocks.
- Easy to carry some distance.
- Attractive to children to keep their interest.
- Easy to store.
- Durable materials

Rationalise use of materials

- Consider what materials you need for each toy and how scarce or plentiful they are.
- Only use scarce materials when they are essential, i.e. small plastic bottles are difficult to find but valuable for making shakers for small babies, so do not use them for other things.
- When painting plastic bottles, it is not necessary to paint all over, but rather a few coloured stripes can be painted on them. This will save paint and the toy will still look attractive.

Material and tools to use

Some materials used to make toys include:

- Plastic bottles, plastic containers, banana fibres, cardboard, boxes, pieces of wood for blocks, scraps of cloth, match boxes, tins with fitted lids, old socks, polythene papers, newspapers, sisal, banana leaves, metal and plastic bottle caps of different sizes and colours, cassava flour, sticks, leaves, brick dust, seeds, etc

Some of the tools needed to make toys include:

- Permanent marker, wire (flexible but firm), cutters, scissors, non-toxic glue, nail and hammer, non-toxic paint, paint brush, sharp knife, sandpaper, masking tape, needle and thread etc.



Safety hints:

1. Keep toys clean, wash them often. Wash with clean water and detergent and air dry.
2. Use non-toxic materials (paint, glue, etc.).
3. Do not use small parts (small stones or buttons) because babies may put them into their mouths and choke on them. For toys with parts like bottle caps, use non-toxic glue to keep the bottle caps in place.
4. No sharp edges.
5. Do not use materials that can break (e.g. glass).
6. For younger infants no strings longer than 7 inches or 18 cm.
7. Before every visit check toys for signs of damage or breaks and discard if damaged.



Demonstration

Your facilitator will show you some homemade toys and other household objects that children might play with. For each item, consider:

1. How attractive is it (colour, size, and sound) for a young child?
2. How easily could the young child hold it?
3. How does the size, and whether it is sharp or dull, or edible, affect its safety? How safe is it for children in different age groups? Refer to the age groups on the **Counselling Cards**.
4. What age child would most like it?
Note that the same toys may be attractive to children of different ages. A young child might enjoy dropping stones in a plastic bottle. An older child might use the same stones to count as she drops the stones in the plastic bottle.
5. What might the child learn by using it? Consider physical, social, emotional, and intellectual skills the child might learn.
6. How could playing with the toy affect the interaction between the caregiver and child?

Optional exercise

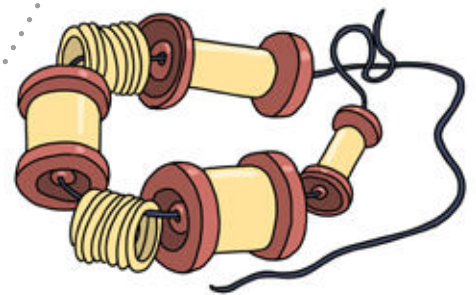
Use the materials on the table to make appropriate toys for different age groups. Here are some examples of simple toys made from items around the household.



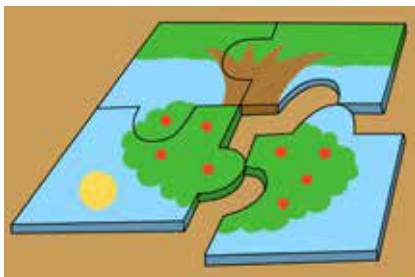
Plastic jar with stones
(to put in and take out, and to count)



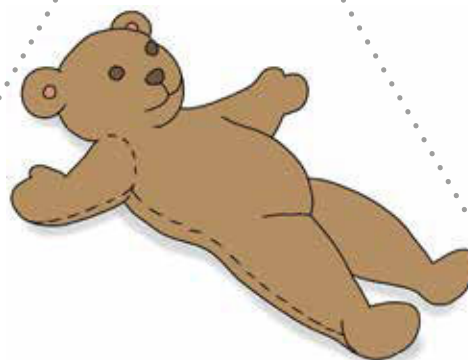
Plastic strips in plastic bottle
(to grab and hold, to shake)



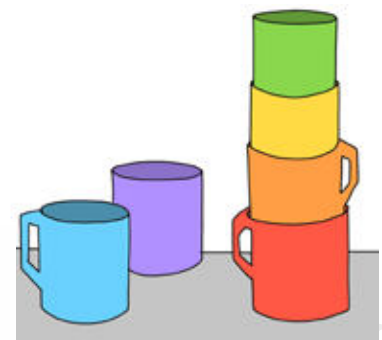
Thread spools and other objects on a string
(to grab and hold, to shake)



Picture drawn or pasted on cardboard
(to put together a puzzle)



Stuffed doll with sewn or painted face
(to learn about eyes and nose, to tell stories, to hold)



Colourful cups
(to grab and hold, to bang and drop, to stack)

Counsel the family on care for child development

(an illustrator to develop the counselling cards referring to PATHS KENYA and Ivory coast copies shared) a category of 3-5 years to be included

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

The **Checklist** will guide us as we counsel the family.

Greet the caregiver and child

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

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



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

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

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



Discuss with the facilitator:

- When did the counsellor see the child and the caregiver?
- What is the name of the counsellor?
- What is the child's name?
- How old is the child?
- Is the child a boy or a girl?
- What is the caregiver's name?
- What is the relationship of the caregiver to the child?
- Where do they live?
- Is the child a refugee or host ?
- Is the child with a disability or any chronic illness (refer to the WHO generic Manual on CWD)





Session 6-9

22 Key Family Care Practices

NB. The KFCP can better be delivered through a facilitator's guide for caregivers/ volunteers.

22 KFCPs impact on child survival, growth, and development or on the causes of morbidity and mortality in children.

They are grouped into 4 categories:

1. **Growth Promotion and Development**
2. **Disease / Illness Prevention**
3. **Appropriate Home Care**
4. **Care Seeking and Compliance**

Growth Promotion and Development (2hrs)

1. Exclusive breastfeeding

Breastfeed all babies exclusively until the age of six months. (Mothers found to be HIV positive require counselling about possible alternative feeding options to breastfeeding according to the Ministry of Health policies).

2. Complimentary feeding

Starting at six months of age, feed babies freshly prepared energy and nutrient rich complementary foods, while continuing to breastfeed the baby up to two years of age and longer.

3. Micronutrient supplementation

Give children, adolescents and women adequate amounts of micro-nutrients (vitamin A, iodine and iron in particular) either in diet or through supplementation and de-worm them.



4. **Psycho-social development**

Promote mental and social development of a child during early childhood (0-8 years) through responsive and stimulating care by talking, playing, showing affection and providing a nurturing, stimulating learning and safe environment.

5. **Growth monitoring**

Monitor growth and recognize children's developmental challenges and disabilities for timely intervention and management.

Disease / Illness Prevention (2 hrs)

6. **Water sanitation and hygiene**

Always wash your hands with clean water and soap before preparing/serving/ eating meals, before feeding children and after proper disposal of faeces, including children's, and after using the toilet/ latrine.

7. **Malaria prevention**

Ensure that pregnant women and children sleep under insecticide treated nets (ITNs) every night and accept to have their houses sprayed by authorities.



8. **STI/STD prevention**

Practice appropriate behaviors regarding HIV/AIDS prevention and ensure wellness and proper psychosocial development of adolescents by supporting and encouraging menstrual hygiene and use of youth friendly services including information about Sexually Transmitted Infections, HIV/AIDS and contraception.

9. **Teenage pregnancy and risky behavior prevention**

Protect adolescents from early pregnancy (including abortions) and other risk behaviors by supporting and talking to them to delay sexual relations, avoid smoking, drinking alcohol and taking illicit drugs.

Appropriate Home Care (2 hrs)

10. **Newborn care**

Keep the newborn warm, umbilical cord and skin clean and dry. Recognize and seek appropriate care for low birth weight (small), sick babies and those at risk of HIV infection.

11. **Giving fluids**

Continue to feed and offer more fluids, including breast milk, to children when they are sick and during recovery.



12. Home treatment

Give newborns, children, adolescents and pregnant women appropriate home treatment during sickness and care after discharge from hospital/ health facility during the vulnerable recovery period.

13. Prevention of child injuries

Take appropriate actions to prevent and manage child injuries and accidents at home and in the community.

Care-Seeking and Compliance (2 hrs)

14. Immunization

Take children 5 times before their 1st birthday to complete a full course of immunization (BCG, DPT, OPV/IPV, PCV, Rota, Pneumonia, Measles Mumps and Rubella) and adolescent girls to receive the HPV vaccine against cancer of the cervix at the age of 10 years.



15. Response to illness

Recognize when a sick child, adolescent and pregnant woman need medical and related support and seek timely and appropriate care.

16. Compliance to health advice

Follow the health worker's advice about taking medications and treatment, completing referrals, and providing care after hospital discharge, including completing all recommended follow-up visits.

17. Antenatal care

Ensure that every pregnant woman goes for eight (8) antenatal care (ANC) visits from an appropriate health care provider and receiving the recommended doses of the tetanus diphtheria vaccination. The mother also needs support from her family and community in seeking care during pregnancy, at the time of delivery, after delivery and during the lactation period.

18. Male involvement

Ensure that men actively participate in the process of offering care to women during pregnancy, childbirth, after birth, childcare and are involved in the reproductive health of the family including child spacing.

19. Birth registration

Notify the birth of your child for registration as soon as possible after birth and obtain a national birth certificate which will help your child get a national Identification Card and access social services.

20. Child spacing

Avoid unplanned pregnancies and ensure appropriate interval/spacing of your children by using appropriate child spacing methods.

21. Child protection

Protect and promote timely recognition, prevention, appropriate action and respond to violence against children and women such as maltreatment, neglect, abuse, rape, defilement and harmful practices such as Female Genital Mutilation/Cutting, child marriage.



22. Early learning & education

Enroll and keep your and keep your children in school until they complete all levels of education i.e. (pre-primary, primary, secondary and post-secondary).

CHECKLIST for Counselling on Care for Child Development

Date: 06 / 06 / 20 08
(Day / Month / Year)

Completed by JT

Child's name: First Assumpta Family Litai Age: _____ Years / 2 Months Boy / Girl

Caregiver's name: Assumpta Lekuru Relationship: Mother / Father / Other: _____

Address, Community: Kampala

The Checklist is for you. It is to help you identify and remember the child and the child's needs. Provide only the information you need on the caregiver and the address in order to locate the child. (If the completed checklist is used for record keeping, it can be adapted to meet additional requirements.)

Exercise: Making toys

Child 1. Comfort

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

The child's name is Comfort Nantu. Comfort is a 2-year-old boy. His aunt Maggie Nantu takes care of Comfort, and you are seeing them at their home. They are your neighbours on Paper Mill Road, in the village of Tanga.

Child 2.

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

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

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

- **Top:** For all children
- **Middle:** For the child **age less than 6 months**
- **Bottom:** For the child **aged 6 months and 5 years**



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

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

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

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

For all children

First, look at the caregiver and child. You can observe them from the moment you first see them.

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

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

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

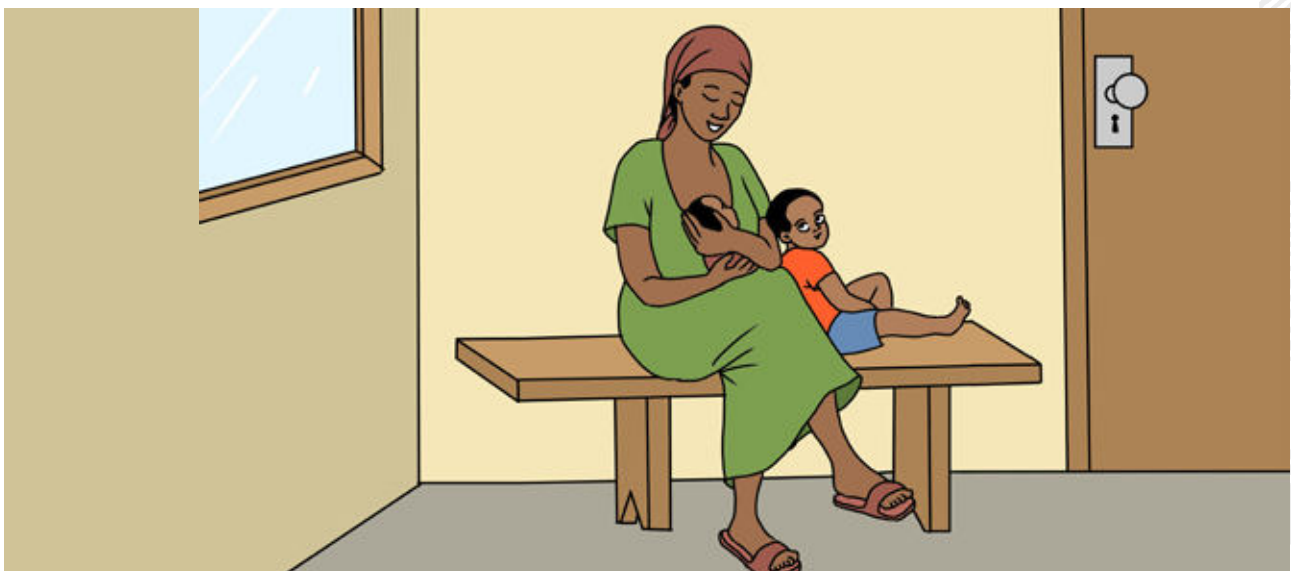
A young child expresses his discomfort by fussing, crying, and wiggling. Observe whether the child who is awake follows his mother or other caregiver's sounds and movements. Notice also how the caregiver responds when the child reaches for her or looks to her for comfort. The caregiver comforts her child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

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

Look:
How does the caregiver correct the child?

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

When children are young, they are easily distracted. Their parent can substitute a safe object for one that they should not touch. There is no need to harshly scold or punish the child. Instead, the caregiver can help the child learn what can be played with and where.



For Children by Age

(6 months or less and 5 years old)

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

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

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

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

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

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

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

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

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

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



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

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

Praise and Advise:

Improve care practices

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

Praise the caregiver

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

The **Checklist** identifies some behaviours to praise.

- You might praise the caregiver for holding her child closely, and talking and playing with her child.
- Praise shows the caregiver that you see the good effort. Praise can also show how the child praises the caregiver's good effort.

For example, when caregivers look at their children and talk softly to them, help them notice the good reaction they get from their children. For example:

- “Notice how your baby responds when he hears his name. He turns to you. He recognizes and loves your voice.”



Discuss with the facilitator:

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

How would you praise the mother?

Advise the caregiver

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

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

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

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

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

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

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

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

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

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

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



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

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

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

You can help the father see what the child might be thinking in a more positive way:



“See what I can do. I can make it fall, and it makes a noise. The harder I push, the farther it goes. I am strong. When I drop it near Daddy, I am asking him to play with me, and we laugh and have fun together. He loves me very much.”

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

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

- 1. Get the child's attention**

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

- 2. Respond to the child**

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

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

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

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

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

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

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

Recommend that the caregiver continue this activity at home to help her child learn:

- “Give your child things to put into containers and take out, and to stack up. This will help your child learn new skills. This will help him grow and be ready for school.”

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



5. Check understanding

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

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

Finally, explain to the caregiver the importance of stimulating the child's development.

One of the following reasons might be important to the child's family:

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

Help the caregiver understand how important it is to help her young child learn.

Build the caregiver's confidence to care for her child at home by helping her practise playing and communicating with her child.





Role-Play Exercise: Advise the Caregiver

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

In the small group, decide who will be the caregiver (mother or father), the child, the counsellor, and the observer.

The roles to play are:

Caregiver (mother or father):

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

Child:

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

Counsellor:

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

1. Help the caregiver get the child's attention.
2. Help the caregiver respond to the child.
3. Introduce a play or communication activity recommended on the Counselling Cards for the child's age. Help the caregiver practise the activity with the child.
4. Then, state the recommendations on play or communication for the child. Identify the benefits for the child and for the family.

5. Check the caregiver's understanding. For example, what items could she use to play with her child at home? How will she use them?

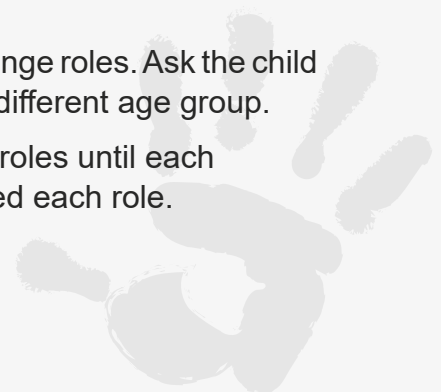
Observer:

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

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

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

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



Session 10 / ⌚ 2 hrs.

Help Solve Problems

After you introduce a caregiver to recommended play and communication activities for the child, you need to ask:

“What difficulties might you have doing these activities at home with your child?”.

Help the caregiver identify solutions that are appropriate for the family.



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

If the mother cannot breastfeed, counsel the mother to:



- Hold the child close when feeding, look at the child, and talk or sing to the child.
- Even though breastfeeding is best for children, many children have grown and done well without breast milk. If the mother cannot breastfeed, help her understand the importance of responding when the child shows she is hungry.
- Hold the child during feeding. For the child to feel safe and secure, it is important to feed the child with a cup in a loving way, keeping the child close to the body, and looking into the child's eyes.

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



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

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

If a child looks or smiles at the caregiver, remind him that this is how the child communicates. If the child makes a sound or gesture, encourage the caregiver to imitate it. Often the child will repeat it with delight. Help the caregiver guess what the child might be trying to communicate.

- “My daddy heard me!”
- “I can make my daddy laugh!” or
- “Daddy makes such a funny face with me!”

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

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



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

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



- Encourage them to combine play and communication activities with other care for the child (for example, feeding, bathing, and dressing).
- Ask other family members to help care for the child or help with the parents' chores.
- Caregivers may feel that they do not have additional time to actively feed, play, or communicate with their children. Ask the caregiver what she thinks she could do to get more time. If she needs help to find time, discuss some of these ideas:

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

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



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

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

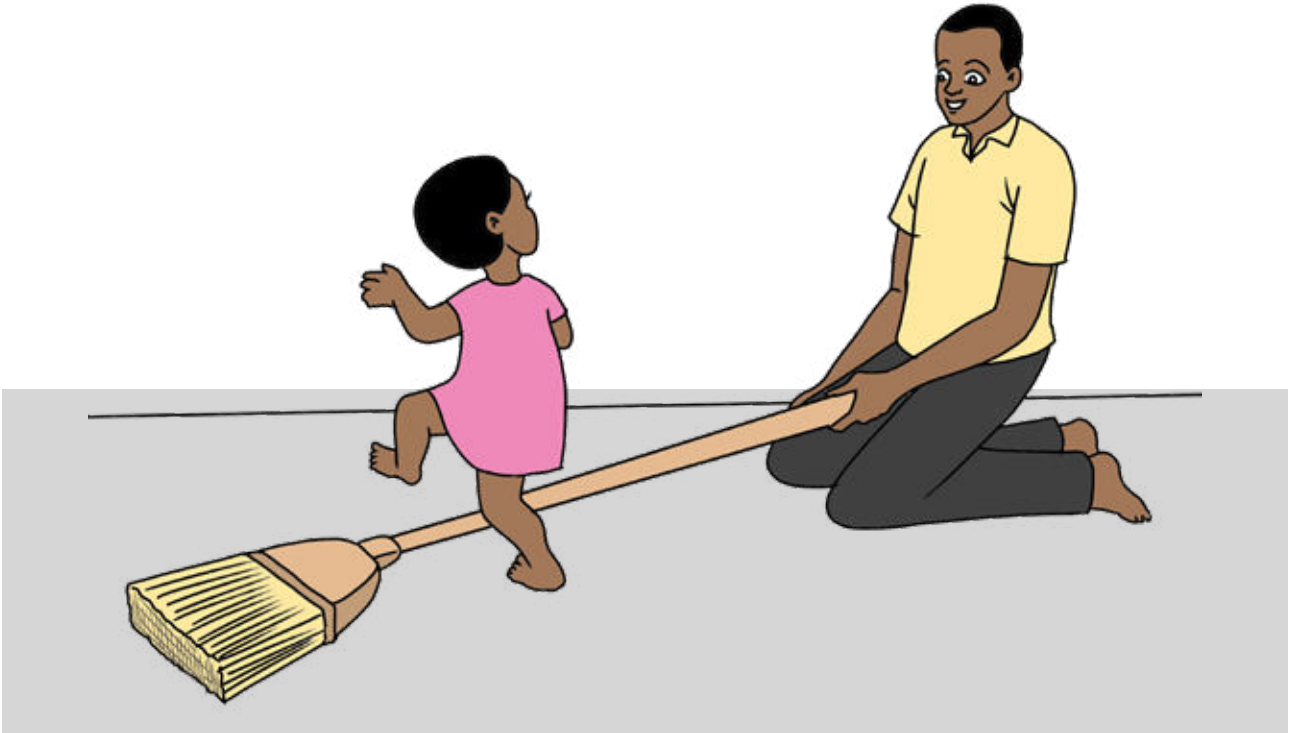
For example,

- For the caregiver of a child age 7 months, ask: “What do you have at home that your child could safely handle, bang and drop?”
- For a child age 12 months up to 2 years, ask, “What kinds of empty containers do you have at home that your child could put small things into?”. Or ask the caregiver what her child plays with now.

Check to make sure that she understands what is safe for her child to play with.

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

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



For a child aged between 6 months and five years who may be having difficulty learning:

Ask the caregiver these questions:

Hearing



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

Seeing



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

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

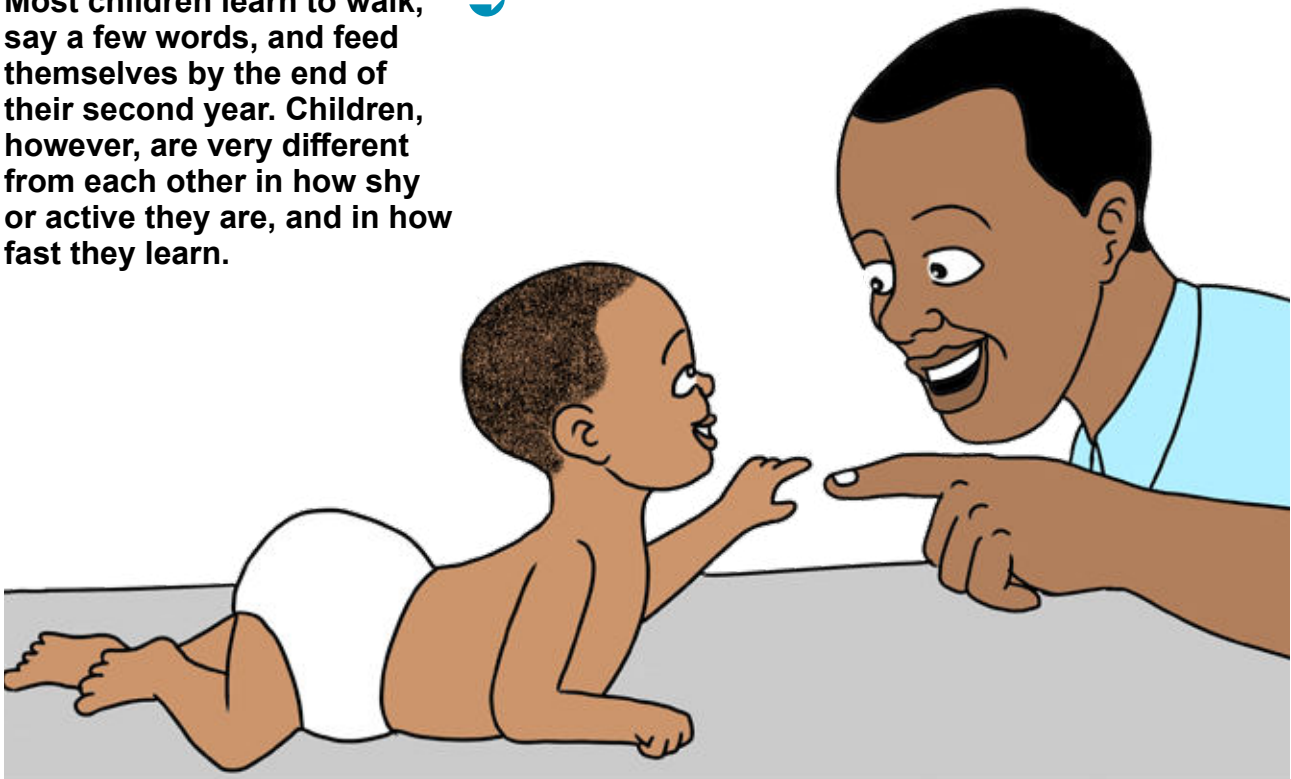
If any of the answers to these questions is “no,” the child may have difficulties hearing or seeing. If special services for children are available in your area, refer the child for further assessment.

If the child is not responding, or seems “slow”:



- Encourage the family to do extra play and communication activities with the child.
- Check to see whether the child is able to see and to hear.
- Refer the child with difficulties seeing or hearing to special services, if available.
- Encourage the mother and other family members to play and communicate with the child through touch and movement.

Most children learn to walk, say a few words, and feed themselves by the end of their second year. Children, however, are very different from each other in how shy or active they are, and in how fast they learn.



A child who is poorly nourished, for example, may be slow to learn new skills.

It is sometimes helpful to ask the caregiver:

- “How do you think your child is learning?” or
- “Do you have any concerns about how your child is growing or learning?”

A parent may be concerned that her child is slow, compared to other children.

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

The caregiver needs to spend more time and patience feeding the child who is developing slowly. She needs to provide more attention to the child through play and communication.

With special attention, most children can learn, even if slowly.

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

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

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

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



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

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

If it seems that the child is being treated harshly:

Recommend better ways of dealing with the child.



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

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

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

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



Discuss with your facilitator:

What do you know about Carlos and his caregiver, Miss Sanchez?

See the top of the checklist.

For what did the counsellor praise Miss Sanchez?

What advice did the counsellor give Miss Sanchez?

CHECKLIST for Counselling on Care for Child Development

Date: 06 / 06 / 2008
(Day / Month / Year)

Completed by JT

Child's name: First Bosco Family Owoko Age: 2 Years/ Months Boy / Girl

Caregiver's name: Sophie Chandiru Relationship: Mother Father / Other:

Address, Community: Kampala

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

	Look	Praise the caregiver if caregiver:	Advise the caregiver and solve problems if caregiver:
All children	How does caregiver show he or she is aware of child's movements? <u>Looks at child</u>	<input checked="" type="checkbox"/> Moves towards and with child, and talks to or makes sounds with child.	<input type="checkbox"/> Does not move with child, or control's child's movements: Ask caregiver to copy child's movements, to follow child's lead.
	How does caregiver comfort the child and show love? <u>Tells child to stop crying (does not work)</u>	<input type="checkbox"/> Looks into child's eyes and talks softly to child, gently touches child or holds child closely.	<input checked="" type="checkbox"/> Is not able to comfort child, and child does not look to caregiver for comfort: Help caregiver look into child's eyes, gently talk to child and hold child.
	How does caregiver correct the child? <u>Grabs object away from child, scolds</u>	<input type="checkbox"/> Distracts child from unwanted actions with appropriate toy or activity.	<input checked="" type="checkbox"/> Scolds child: Help caregiver distract child from unwanted actions by giving alternative toy or activity.
	Ask and listen	Praise the caregiver if caregiver:	And advise the caregiver and solve problems if caregiver:
age less than 5 months	How do you play with your baby?	<input type="checkbox"/> Moves the baby's arms and legs, or gently strokes the baby. <input type="checkbox"/> Gets baby's attention with a shaker toy or other object.	<input type="checkbox"/> Does not play with baby: Discuss ways to help baby see, hear, feel, and move, appropriate for baby's age.
	How do you talk to your baby?	<input type="checkbox"/> Looks into baby's eyes and talks softly to baby.	<input type="checkbox"/> Does not talk to baby: Ask caregiver to look into baby's eyes and talk to baby.



Role-Play Exercise: Help to Solve problems

The facilitator will divide the group into groups of three participants each. Set up a space with three chairs each, in order to do a role play. In the group, decide who will be the counsellor, the caregiver (mother or father), and the observer.

For the child, give a doll or other object (e.g. folded towel) to the caregiver.

The roles to play are:

Counsellor:

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

Caregiver (mother or father):

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

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

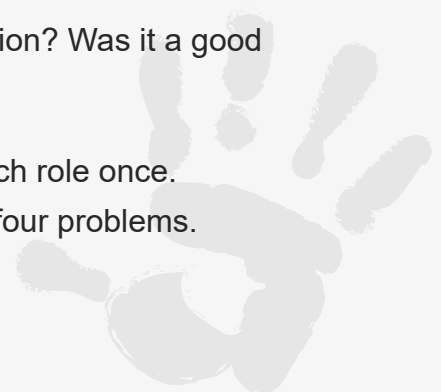
Observer:

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

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

Change roles three times, so that each participant performs each role once.

The caregiver should select a different problem from the list of four problems.



Caregiver and child follow-up

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

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

On the bottom of the checklist, circle the day of the planned follow-up visit as a reminder. (See the sample **Checklist** for Carlos Sanchez, on page 42.)

During the follow-up visit, ask the caregiver to show you what they have been doing with their child at home. Praise them for their efforts. Advise them on additional activities to encourage their interest.

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



Video Exercise: Identify and help solve problems

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

For discussion after the video:

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

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

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

Working document for key messages and illustrations

Focus	Key Areas	Recommendations
Key messages to the facilitator	Highlighted in dark blue/ green colour	Illustrator to design an eye catching message framed at the corner for the key highlights
Illustrations required	<ul style="list-style-type: none"> ● Counselling cards 	<ul style="list-style-type: none"> ● Referring to the PATHS Kenya, USAID and Ivory Coast
Picture cards	<ul style="list-style-type: none"> ● Interactive play ● Smiling/ happy child (3 years) ● Malnourished child ● School feeding ● Stressed Vs a happy caregiver ● Key Family Care practices ● Toys made from local materials. 	<ul style="list-style-type: none"> ● Caregiver playing with a child/children ● Results of responsive caregiving ● Poor caregiving practices ● A 4-year-old taking a snack/ porridge at the ECD Center ● 22 Key family Care practices ● Make illustrations for each practice under each session ● Common toys, e.g fibre dolls, balls, cars, models (cups, plates etc)

CHECKLIST for Counselling on Care for Child Development

Date: _____

Completed by: _____

Child's name: First _____ Family _____ Age _____ Years _____ / Months. Boy / Girl

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

Address Community: _____

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

	Look	Praise the caregiver if the caregiver:	Advise the caregiver and solve problems if the caregiver:
All Children	How does the caregiver show he or she is aware of the child's movements?	<input type="checkbox"/> Moves towards and with child, and talks to or makes sounds with child.	<input type="checkbox"/> Does not move with child, or controls child's movements: Ask caregiver to copy child's movements, to follow child's lead.
	How does the caregiver comfort the child and show love?	<input type="checkbox"/> Looks into child's eyes and talks softly to child, gently touches child or holds child closely.	<input type="checkbox"/> Is not able to comfort child, and child does not look to caregiver for comfort: Help caregiver look into child's eyes, gently talk to child and hold child.
	How does the caregiver correct the child?	<input type="checkbox"/> Distracts child from unwanted actions with appropriate toy or activity.	<input type="checkbox"/> Scolds child: Help caregiver distract child from unwanted actions by giving alternative toy or activity.
	Ask and Listen	Praise the caregiver if the caregiver:	And advise the caregiver and solve problems if the caregiver:
Child age less than 6 months	How do you play with your baby?	<input type="checkbox"/> Moves the baby's arms and legs, or gently strokes the baby. <input type="checkbox"/> Gets the baby's attention with a shaker toy or other object.	<input type="checkbox"/> Does not play with baby: Discuss ways to help baby see, hear, feel and move, appropriate for baby's age.
	How do you talk to your baby?	<input type="checkbox"/> Looks into baby's eyes and talks softly to baby.	<input type="checkbox"/> Does not talk to baby: Ask caregiver to look into baby's eyes and talk to baby.
	How do you get your baby to smile?	<input type="checkbox"/> Responds to baby's sounds and gestures to get baby to smile.	<input type="checkbox"/> Tries to force smile or is not responsive to baby: Ask caregiver to make large gestures and cooing sounds; copy baby's sounds and gestures, and see baby's response.
Child age 6 months and older	How do you play with your child?	<input type="checkbox"/> Plays word games or with toy objects, appropriate for age.	<input type="checkbox"/> Does not play with child: Ask caregiver to do play or communication activity, appropriate for age.
	How do you talk to your child?	<input type="checkbox"/> Looks into child's eyes and talks softly to child, asks questions.	<input type="checkbox"/> Does not talk to child, or talks harshly to child: Give caregiver and child an activity to do together. Help caregiver interpret what child is doing and thinking and see child respond and smile.
	How do you get your child to smile?	<input type="checkbox"/> Draws smile out from child.	
	How do you think your child is learning?	<input type="checkbox"/> Says the child is learning well.	<input type="checkbox"/> Says child is slow to learn: Encourage more activity with the child, check hearing and seeing. Refer child with difficulties.

2. Ask to see the child in one week, if needed (circle day):

Monday Tuesday Wednesday Thursday Friday Weekend



International Rescue Committee, Inc.
Plot 7 Lower Naguru East Road,
P.O. Box 24672, Kampala
Uganda.

Tel: +256 (0) 200 963 673
Web: rescue.org