Health, Safety, and Nutrition
TRAINING FOR EARLY CHILDHOOD CAREGIVERS AND TEACHERS
MODULE 6 RESOURCE GUIDE

Health, Safety, and Nutrition
TRAINING FOR EARLY CHILDHOOD CAREGIVERS AND TEACHERS
This guide is part of a series of manuals that focuses on six topics in Early Childhood Development (ECD): different programming approaches, basic concepts, assessments, early childhood environments, children with special needs and child protection, and the health, safety and nutrition of young children. The series was prepared within a three-year CRS-led project called “Strengthening the Capacity of Women Religious in Early Childhood Development,” or “SCORE ECD.” Funded by the Conrad N. Hilton Foundation, the project helps Catholic sisters in Kenya, Malawi, and Zambia in their work with children aged 0-5 years and their families. The project is being implemented from January 2014 to December 2016.

CRS referred to a wide range of documents in preparing this curriculum. Please see “Reference Documents” section in Module 1 facilitator or resource guide for the full list.

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Cover photo: Pilarini James, 8 months, is fed by his mother in Chinganga Village near Zomba, Malawi. His mother participates in a CRS project funded by the Hilton Foundation that trains new and expectant mothers in nutrition and hygiene. Sara A. Fajardo/CRS

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RESOURCE GUIDE 6: HEALTH, SAFETY, AND NUTRITION

Resource Guide 6 is one of six ECD Resource Guides from the CRS SCORE ECD curriculum. The six series are:

1. Approaches to Early Childhood Programs
2. Introduction to Early Childhood Development
3. Assessing Young Children’s Development
4. Quality Early Childhood Environments for Young Children
5. Children with Special Needs and Child Protection
6. Health, Safety, and Nutrition

SAMPLE REVIEW

“We have been helped in this training to know how to care for the health and safety of children. Sisters will be taking appropriate precautions in treating injuries, sickness, and giving good nutrition to children, counseling parents on the importance of exclusive breastfeeding, and preparing nutritional food using what they grow in their backyards.” (Reviewer: Master Trainer, SCORE ECD project, Zambia, August, 2015)

“The curriculum was helpful because I have learned more about nutrition and how to give good food to children according to their different developmental stage.” (Reviewer: Master Trainer, SCORE ECD project, Zambia, August, 2015)

“Sisters were empowered to make use of what we have in the environment and be creative to help families and children keep their health in good condition; we created a tippy-tap to provide families with clean running water for handwashing; we learned how to practically monitor growth of children using graphs; we learned how to counsel mothers in breastfeeding and preparing locally grown nutritious food for children of different ages.” (Reviewer: Master Trainer, SCORE ECD project, Zambia, August, 2015)
Resource Guide 6: Health, Safety, and Nutrition of Young Children

PURPOSE
The purpose of this guide is to increase the participants’ understanding of childhood illnesses and injuries, their influence on children’s development, and what caregivers can do to prevent and/or treat illnesses and injuries in children. The participants are also expected to learn about nutrition and its importance in Early Childhood Development (ECD) and what caregivers can do to promote good nutrition for young children, including children living with HIV. This guide is divided into two sessions:

1. **Session one** describes the importance of sanitation, safety, and prevention of childhood illnesses for young children. Topics include universal precautions, personal hygiene; food safety; safe drinking water; preventing injuries; and intervention with Integrated Management of Childhood Illnesses (IMCI) with a focus on children living with HIV.

2. **Session two** describes the importance of nutrition for young children’s development and nutrition strategies by age for optimum health and development of all children. Topics include responsive feeding and care practices for young children, supporting families to improve infant and young child feeding practices, growth monitoring, and reinforcing healthy eating habits in young children.
Session 1: Health and Safety of Young Children

LEARNING OBJECTIVES
By the end of this session, the participants will be able to:

• Describe the effects of germs on health.
• Identify ways to prevent germs from spreading among children and adults.
• Define “Universal Precautions” and the need to use universal precautions all the time when dealing with blood and bodily fluids.
• Put measures in place to prevent accidents in and around the home and school.
• Respond quickly and appropriately to accidents.
• Describe common childhood illnesses and the danger signs of childhood illnesses that require urgent medical attention.
• Identify steps that are helpful to prevent or treat childhood illnesses.

HEALTH AND SAFETY OF YOUNG CHILDREN

Important: This session needs to be conducted by or with the assistance of a local health and nutrition professional. Also, have the national or district health and safety protocol guidelines on hand for reference throughout the session.

1 This session is adopted from CRS, Lesotho (2012), Nqoana Eo Ke Qa Mang? Parent and family caregiver manual.
GERMS AND THEIR EFFECT ON HEALTH

Children can get sick through germs. Germs are very small living things that make people sick if they get inside their bodies. They are spread in many ways. For example:

- Through the air when we sneeze
- Though contact with human feces or urine
- By touching something that has germs on it
- Through contact with blood and their body fluids

Sanitation or cleanliness is the best way to stop germs from spreading, so practice it in the home and the community at all times.

ELEMENTS OF SANITATION AND SAFETY

UNIVERSAL PRECAUTIONS

We cannot tell by looking if someone is infected with HIV. This means we need to treat all blood (and body fluids containing blood) as if it is infected with HIV.

- Teach children not to touch other people’s blood and body fluids.
- A child who is hurt and bleeding needs immediate attention.
- Use latex/rubber gloves or plastic bags to protect your hands when dealing with cuts, bleeding or opens sores, and when cleaning up blood spills.
- Keep the child in one place until you have controlled the bleeding.
- Wash hands immediately after any contact with blood.
- Cover grazes, cuts, and open sores with a clean piece of cloth or bandage.
- Place bloody clothes or paper in double plastic bags before you put them in the rubbish bin.
- Wash the blood stained area with a disinfectant solution. Soak any mops or cleaning cloths in the disinfectant solution and let them dry in the sun.

BODY AND HAND WASHING AND ITS IMPORTANCE

- Appropriate hand washing can minimize germs on the hands that come from contact with bodily fluids and contaminated surfaces, or touching dead animals.
- Body/hand washing breaks the chain of infection transmission and reduces the spread of infection from one person to another.
- All caregivers and staff who provide care for children and adults must practice effective body/hand washing.
- Children and adults also need to be instructed in proper techniques and situations for body/hand washing.
- Washing with soap and water kills many germs and allows them to be removed by rinsing.

DO NOT USE COMMON TOWELS BECAUSE THEY SPREAD INFECTION.
FACILITIES AND MATERIALS REQUIRED FOR BODY/HAND WASHING

- Access to clean water is essential. Running water is best.
- As many homes do not have running water, it is best to pour a small amount of water from either a bucket with a tap, which can be turned on and off, or a bucket and pitcher to pour water for rinsing.
- Facilities for drying hands: Disposable towels or reusable single use towels or roller towels, which are regularly washed, should be available. If there is no clean dry towel, it is best to air-dry hands.

TIPPY-TAP

The **tippy-tap** is a simple device that allows people to wash their hands with very little water. It also allows the user to rub his/her hands together while water runs over them. It is made of materials that are available at no cost in most places and can be put wherever people need to wash their hands, for example, near the cooking stove, at the toilet, or in rural food stores.

**HOW TO MAKE A PLASTIC TIPPY-TAP**

To make this tippy-tap you need: 1) a plastic bottle with a screw-on cap of the sort that cool drinks come in, and 2) the inside tube from a ball-point pen, or some other small, stiff, hollow tube.

**CLEAN THE TUBE**

- Using a heated piece of wire, make a small hole in the lower part of the bottle.
- Remove and clean the inside tube from a ball-point pen. Cut it off at an angle, and push it through the hole in the bottle. The tube should fit tightly.
- Fill the bottle with water and replace the cap. When the cap is tight, no water should flow through the tube. When the cap is loose, water should flow out in a steady stream. When you are sure that it works, hang it or place it on a shelf where people can use it for hand-washing. Keep soap nearby, or thread a bar of soap with string and tie it to the bottle.
- To use the tippy-tap, loosen the cap just enough to let the water flow; wet your hands, apply soap, and rub your hands together under the water until they are clean.

Tippy-taps can also be made with different designs and from different materials. Another that is common is made from a dried calabash gourd.

**BRUSHING TEETH**

Children need to learn to care for their teeth and gums to keep them healthy.

- Never put a baby down to sleep with a bottle filled with formula, milk, juice, or sweetened drinks. The sugar in these liquids can cause tooth decay. If the baby needs his/her bottle, fill it with water.
- Do not give children too many sweets, cakes, or bubbly cold drinks because it rots their teeth.
- Teach children to brush their teeth every day with a toothbrush and with salt and
bicarbonate of soda. If there is no toothbrush or toothpaste, they can rub their teeth with salt and bicarbonate of soda.

**TOILETS AND LATRINES**
- Teach children to use the latrine or toilet and to wash their hands with soap properly afterwards.
- If there is no latrine or pit, children should go far from the house, and then cover it with sand.
- An adult must always inspect the child when he/she comes from toileting to ensure they have not messed themselves and have cleaned themselves properly and washed their hands.
- Keep toilets and latrines clean with disinfectant mixed with water to stop germs from spreading.

**KEEPING FOOD SAFE**
Germs can spread when we do not wash our hands properly, and they can also be passed on by eating food that is not clean or is old. When food is not prepared, cooked, or stored properly, germs grow in the food and it goes bad.

**PREPARING FOOD**
- Wash hands thoroughly with soap and water before preparing and serving food.
- If you have to change the baby’s diaper while working with food make sure you wash your hands thoroughly with soap when you are through.
- Cover the food as it is prepared to keep the flies away.
- Wash or peel all fruit and vegetables that are eaten raw.
- Do not cough or sneeze near food or into your bra, especially if you are breastfeeding.
- Throw food out when it has a bad smell or taste, changes color, or has bubbles or slime on the top.
- It is better to let dishes air dry or dry in the sun than to dry them with a dishcloth.
- Keep the cooking area clean.
- Cover bins to keep out the flies and cockroaches, and bury or burn the rubbish. Make sure the rubbish is buried deep enough to keep animals and rodents away.

**CUP FEEDING**
It is not always possible to properly clean and sterilize baby bottles. When this is the case, cup feeding is recommended as a safe alternative to bottle feeding. Cups can be easily washed with soap and water and babies are less likely to carry them around and get them dirty.
**COOKING FOOD**
- Cook meat and fish well to kill germs.
- Do not reheat food more than once.
- Do not give babies or young children leftover food.

**STORING FOOD**
- Keep food covered to protect it from cockroaches, flies, and other insects.
- Keep food in a cool, dry place in sealed containers.
- Store the food containers on a shelf above the floor.
- Make sure meat juices do not leak onto other food.
- Throw away rusted, dented, or bulging tinned stuff.
- Cook only the food the child is going to eat each day.

**CLEAN WATER**
Water that does not appear to be dirty may still contain germs or chemicals that can make people very sick. Water that comes from taps has usually been cleaned with chlorination. We need to make sure that water that comes from other places such as springs or wells or community taps is safe for drinking, even if it looks clean.

To purify water, first clean the containers well with soap and water and then use one of the following methods:
- Pour water into clean glass or plastic containers and leave them in bright sunlight from morning until evening, for at least eight hours. This will kill most of the germs.
- Boil water for ten minutes to ensure the water is clean to drink. Start counting the ten minutes once the water starts boiling. Only do this if there is no other way to purify water because it uses a lot of fuel.

**KEEPING CHILDREN SAFE**
Young children should be protected from possible hazards such as burns, choking, falls or injuries, drowning, poisons, and childhood illnesses.

**SAFETY PRECAUTIONS**
- Always check the temperature of water before bathing an infant.
- Do not bring hot beverages or appliances near the infant; protect the child from touching hot objects; check the temperature of bottles before offering them to an infant.
- Always hold the infant in an upright position while feeding; do not prop bottles.
- Always check for the infant becoming squeezed in open cracks; do not over-dress the baby for sleep, and place the baby in the crib on his/her back. These can prevent suffocation.
- Always put infants to sleep on their backs to avoid suffocation and remove all soft and small items from baby cribs.
- Do not let young children play with or put small things in their mouths that they can swallow and choke on; keep pins, buttons, small beads, nuts, seeds, coins, whole grapes and other sharp objects out of the child’s reach.
- Attend to an infant at all times because the baby may turn or roll over unexpectedly.
- Never leave a young child alone near water sources; they can drown in very shallow water in a matter of minutes. Make sure children do not play near springs or water wells. Cover buckets of water with lids.
- Cut food into small pieces and insist that the child sit down to eat.
• Regularly check indoor and outdoor environments and remove dangerous things that can hurt children, e.g., pieces of glass, tins, plastic bags, poisonous plants, rotten foods, or any other harmful things.
• Keep children away from rubbish dumps. They can get ill from breathing in poisoned air from dangerous waste products or from diseases carried by flies, rats, and mice.
• Teach children about safety, particularly safety in the road, safety around fire, safety around water-filled dams and rivers, and safety around deep pits and hanging cliffs.

**STRANGER DANGER!**

It is important for young children to feel safe and secure in their world among people that they can trust. Sadly it is a fact that children of all ages are at risk of being taken away, raped, or killed.

Children should not be allowed to wander off alone. Parents and family caregivers need to watch their young children and know where they are at all times. It is important to teach children the rules that:

• They are not allowed to play where adults cannot see them.
• They should never go off with anyone without a parent or caregiver knowing where they are or who they are with.

**GOOD TOUCHES AND BAD TOUCHES!**

Parents and family caregivers should explain the difference between good touches and bad touches and encourage their children to refuse boldly when they do not want to be touched, particularly being touched on their private parts by other people.

Parents and family caregivers can work together to make sure their children are safe. If one parent needs to go to the shop she can ask her neighbor to care of the child. In exchange she will do the shopping for her neighbor.

**HELPING YOUNG CHILDREN WHO ARE HURT**

When a child is hurt, seek emergency professional help from the local health or social services in the community. You can help the child with some first aid measures while waiting for professional help.

Always make sure you have local emergency contact information. It is helpful to write the details. For example:

• Police emergency
• Local health clinic
• Hospital
• Child protection service in the locality
• Others as relevant
SERIOUS FALL OR INJURY

If the child is bleeding, place a clean cloth and make pressure until the bleeding stops. Remember to use universal precautions (protect your hands from contact with blood).

If the child is not breathing, first put the child on a hard surface and then carry out the following steps:

1. Lift her jaw, tilt her head back and hold her nostrils closed.
2. Breathe into the child’s mouth hard enough to make her chest rise.
3. Count to three and repeat the action.
4. Do this until the child starts to breathe.

BURNS

- Immediately apply cold water to the burn for about ten minutes. If it is a large burn put the child in a bath or container of cold water for 20 minutes or longer. Then, get the child to a clinic or health center.
- If the child catches alight, wrap him in a blanket or roll him on the ground to put out the fire.
- Do not try to remove the clothing or anything else sticking to the skin or break the blisters.
- Do not put anything on the burn except water!

CHOKING

<table>
<thead>
<tr>
<th>IF IT IS A BABY</th>
<th>IF IT IS A CHILD OLDER THAN ONE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Carefully turn him so that his head is lower than his feet.</td>
<td>• First try to remove the object with your finger.</td>
</tr>
<tr>
<td>• Hit him five times on the back between the shoulder blades.</td>
<td>• Hit the child five times on the back between the shoulder blades.</td>
</tr>
<tr>
<td>• Turn him face up and place two fingertips in the center of the breastbone just below the nipple line.</td>
<td>• If this doesn’t work, stand behind the child and wrap your arms around his waist. Put your fist against his belly above the navel and below the ribs.</td>
</tr>
<tr>
<td>• Push inwards and upwards towards the head to try to dislodge the object.</td>
<td>• Give quick sharp upward thrusts into the child’s abdomen until the object is removed.</td>
</tr>
<tr>
<td>• Check the baby’s mouth after each thrust</td>
<td>• If this doesn’t work after several attempts, get emergency help immediately. Keep giving thrusts until help arrives.</td>
</tr>
<tr>
<td>• If this doesn’t work after several attempts, get emergency help immediately. Keep giving thrusts until help arrives.</td>
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</tr>
</tbody>
</table>

POISONING

- Do not give the child anything to eat or drink or try to make her vomit.
- If there is poison on the child’s skin or clothing remove all contaminated clothing and rinse the skin with water for at least ten minutes.
- If there is poison in the child’s eyes, splash water in the eyes for at least ten minutes.
- Get the child to the clinic or health center as soon as possible.
CHILDHOOD ILLNESSES: INTEGRATED MANAGEMENT OF CHILDHOOD ILLNESSES (IMCI) AND IDEAS FOR WORKING WITH CAREGIVERS

The World Health Organization (WHO) and UNICEF have developed a way to improve child health and ensure that young children do not die from preventable illnesses such as pneumonia, diarrhea, malaria, measles, and malnutrition.

Because many children often suffer from concurrent illnesses, the focus is on the child as a whole rather than on one particular illness.

Many child deaths could have been prevented but parents and family caregivers and other caregivers often do not know that their child is seriously ill and do not take him/her to get treatment before it is too late.

WHO has identified a number of danger signs that parents and family caregivers need to learn so they will know when a child needs to receive immediate and urgent medical help.

URGENT WARNING SIGNS
- The child is unable to drink or breastfeed.
- The child vomits everything.
- The child has had convulsions with his/her illness.
- The child is lethargic.
- The child’s chest is indrawn.
- The child is convulsing now.

OTHER SIGNS THAT A CHILD IS VERY ILL ARE:
- Rapid breathing, diarrhea, or vomiting
- Fever
- Ear problems

CHILDREN AT HIGH RISK OF HIV INFECTION
IMCI also provides guidelines for identifying children at high risk of HIV infection and/or tuberculosis (Pediatric TB):
- The child has pneumonia.
- The child has had an ear discharge.
- The child is underweight for his/her age.
- The child is failing to gain weight or has lost weight.
- The child has had diarrhea lasting for 24 days or more (now or in the past three months).
- The child has enlarged lymph glands in two different places (neck, armpit, or groin).
- The child has thrush in his/her mouth.
- The child has an enlarged parotid gland.

Note: When a child has three of the above conditions the health worker will recommend to the mother that the child be tested for HIV infection and tuberculosis.
TREATING DIARRHEA

Diarrhea is a common problem for young children when safe hygienic measures are not taken. Babies and young children lose fluids from their bodies (dehydrate) very quickly. This is very dangerous because a child can die if he/she loses too much water. To make sure children with diarrhea do not dehydrate, give them plenty of liquids to drink, e.g., water, breast milk, thin soups.

ORAL REHYDRATION SOLUTION

There is a special drink that caregivers can give to the child when he/she has diarrhea. It is made of sugar, water, and salt:

WHO and IMCI recommend mixing a package of Oral Rehydration Salts (ORS) in one liter of boiled water.

- Wash your hands with soap and water before preparing the solution.
- Mix until the sugar and salt are dissolved.
- Give the ORS with a spoon to the child until he/she is rehydrated (e.g., is able to urinate or cries with tears).
- Once hydrated, give ORS after each defecation until the diarrhea stops.
- Give more food and breastfeeding to the child.
- Seek care at the nearest point of care.

Note: Encourage the child to keep eating. If the mother is breastfeeding she should continue to do so.

TREATING A FEVER

When a child is sick his/her body temperature can rise above or below normal. A fever is a rise in body temperature and high fever can be especially dangerous in a young child. He/she may look flushed, be sweaty, or feel hot.

Treat a fever by:

- Give Paracetamol for high fever (>38.5 C). For children between two months and up to three years, give one tablet of 100 mg.
- Dressing the child in cooler clothing (warm clothing can cause the fever to go higher)
- Giving cool clean water or other fluids to drink
- Putting the child where there is fresh air in a cool place
- Wiping or sponging him/her with a cool, damp cloth
- Making sure the child passes urine regularly

TRADITIONAL MEDICINES

Sometimes traditional ways of treating sicknesses work well. For example, herbs and herbal remedies are used to prevent and treat colds, headaches, sleep problems, burns, toothaches, stomachache, and many more.

Some serious diseases are treated better with modern medicines. It is important for health workers and educators to respect family tradition, but at the same time know when such treatments could do more harm than good and even put a child’s life at risk.
IMMUNIZATIONS

From birth, it is important to protect children against dangerous childhood illnesses that can cause death. Immunizations fight off diseases such as the ones shown in the table and bullet points below:

- Whooping cough
- Tetanus
- Diphtheria
- Hib infection, which causes meningitis
- Hepatitis B, which causes liver damage
- Measles
- Tuberculosis
- Polio
- Pneumococo, which causes pneumonia
- Rota virus, which causes diarrhea

It is important that every child is immunized and completes the full immunization schedule according to each country policy or the vaccines may not work. The schedule for immunization is as follows:

- At birth: BCG and polio
- 6 weeks: DPT, polio, Hib, and Hepatitis B (these schemes vary by country)
- 10 weeks: DPT, polio, Hib, and Hepatitis B
- 14 weeks: DPT, polio, Hib, and Hepatitis B
- 9 months: Measles
- 18 months: DPT, polio, and measles
IDEAS FOR WORKING WITH PARENTS AND FAMILY CAREGIVERS

HOME VISITS

• During many of the home visits related to this chapter you will want to speak directly to the parent. Collect a few playthings for the child beforehand or at the home where you are visiting.

• Use the following flip book message for discussion or make one yourself based on the information in this chapter.

PREVENTING THE SPREAD OF DISEASES

Task:

• Include the father, mother, and other members of the family in your home visit session with them.

• Discuss the picture above and ask the parents or caregivers when they think it’s important to wash hands.

• Ask what types of water and washing facilities the families are using.

• Talk about how important it is to use running water when washing hands and discuss how family members can do this when they do not have taps. Also explain that washing the body is part of personal hygiene.

• You can bring a tippy-tap along and demonstrate how it can be used or ask the caregivers if they have similar ones. If they don’t have one and there is a suitable bottle or container and tube available, show the caregivers how to make a tippy-tap.

• If this is not possible, demonstrate how the child can wash hands using running water by pouring a small amount of water into the container, washing hands, and then pouring some water over the hands to rinse.
A SICK CHILD

Task:

- Discuss how the parent knows when his/her child is sick and what steps are taken.
- Find out whether the parent knows when their child is dangerously sick and needs to get medical help.
- Explain that there are signs that the child needs urgent attention. At this time you should explain the danger signs.
- Demonstrate how to make ORS to stop dehydration when a child has diarrhea. Talk about how important it is to make sure the child does not dehydrate, as he/she can die in as little as six hours from loss of water and salts.
Take your Bukana to the health centre to have your child weighed and immunised.

Task:

- Ask to see the child’s immunization card and check that the immunizations are up to date. If they are not, explain how important these are in preventing childhood illnesses and that if the child does not receive all the immunizations they may not work. Praise the family if they have already followed up the child’s immunizations as needed.
- Help the parents/cargivers make a plan for taking the child to the clinic.
Session 2: Growth and Nutrition of Young Children

LEARNING OBJECTIVES

• Describe the proper procedure of breastfeeding, exclusive breastfeeding, and providing nutritious complementary foods to children.
• Describe ways to strengthen the caregiver-child relationship during child care activities such as breastfeeding and engaging children in play, learning, and communication.
• Identify nutritious complementary foods for a young child by age.
• Describe when to introduce complementary foods to young children by age, how to prepare the food, how much and how often to offer food, and encourage children to eat them.
• Use a growth chart to counsel a family on the progress of child development.

CARING FOR THE CHILD’S HEALTHY GROWTH AND DEVELOPMENT: WHO-UNICEF TRAINING MANUAL

This session will be provided using the WHO-UNICEF Zambia training manual below. Electronic or hard copies of this training manual must accompany this guide. The organizer of the training can access the training manual from UNICEF Zambia office or CRS.

Integrated Management of Childhood Illness
Caring for the child’s healthy growth and development

A training course for community health workers
Participant Manual 12 September 2012
SESSION 1: HEALTH AND SAFETY OF YOUNG CHILDREN
Catholic Relief Services, India (n.d.). Teaching guide for early child development interventions for the Missionaries of Charity. Baltimore, USA: CRS.
Catholic Relief Services (CRS), Lesotho (2012). Ngoana Eo Ke Oa Mang? Parent and family caregiver manual, Baltimore, USA: CRS.

SESSION 2: GROWTH AND NUTRITION OF YOUNG CHILDREN