Community and Home Based Postnatal Care of Newborn and Mothers

A Flip Chart to assist the ASHAs for counseling the mother and family members

National Institute of Health and Family Welfare

All India Institute of Medical Sciences

Norway India Partnership Initiative
Purpose of this Flip Chart

Behavior Change Communication is an effective tool for ensuring improved care of a newborn baby and recently delivered mother. Ideally care of a baby starts from pregnancy itself and care during pregnancy influences the outcome. So as a continuum, this flip chart attempts to address the key issues during pregnancy, delivery, care of the newborn baby and mother in the first month after delivery.

Care of the newborn includes keeping the baby warm, exclusive breastfeeding, special care of low birth weight babies, identification of illnesses and assistance for appropriate care. a recently delivered mother needs proper guidance about general care, diet, prevention of infection and identification of problems and proper attention.

All the babies and mothers don’t require special care. But most of the problems in them are not predictable and also need urgent action. So a regular contact with them is needed to support in preventing and tackling with the problems at the earliest.

A special home visit based care for the newborn babies and mothers is being implemented through ASHAs at village level under National Rural Health Mission (NRHM) with support from Norway India Partnership Initiative (NIPI). ASHAs at the village level will make home visits for all the newborn babies (hospital and home born) at scheduled times in the first month and support the mothers and family members for proper care of the baby and the mother.

This flip chart book is an attempt to assist the ASHAs as an aid for interpersonal communication with the mothers and family members during home visits. This Flip Chart Book will help the ASHAs in:

- Talking to the mothers, family members and community members effectively about care of the newborn and recently delivered mother at home.
- Helping mothers and family members to identify sick newborns and plan the appropriate management
- Inform the mother and family about the immunization, birth spacing options and the available support system within reach.
Instructions for ASHA

How to use this Flip Chart?

• Use this flip book to talk and discuss about issues related to care of the pregnant woman, newborn baby and recently delivered mother.

• Review the contents of the flip book in advance to familiarize yourself with the contents and messages.

• This Flip Chart contains seven sections and 26 counseling cards:
  A. Care during pregnancy;   B. Care at delivery;   C. Breastfeeding;
  D. Care of the newborn baby;   E. Care of the mother;   F. High risk babies; and
  G. Additional counseling.

• Use the appropriate section during the home visits. During home visit during pregnancy and before delivery use- Section A and B; and after delivery use- Sections C, D, E and G. If the baby is low birth weight, use Section F.

• Each picture is accompanied by discussion points and messages that need to be talked about. The visuals corresponding to the messages are given on the opposite page.

• Build rapport with the mother and family.

• Involve the mother, father and other family members and seat them in such a manner that they are able to see the flip book clearly. All the family members should be able to have a good view and hear you clearly.

• Face the family members and hold the flip book in such a way that the audience can see the picture and you can see the points that need to be discussed and messages that need to be given out.

• Speak clearly, loudly and slowly. Use simple and local language.

• Show the picture and ask what they see and understand from the picture. Use pencil to pint at the pictures.

• Explain each picture to them and allow enough time per picture to discuss the main points.

• Appreciate good practices and emphasize about the harmful practices.

• Summarize and reiterate the good practices at the end and thank them for cooperation.
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Care during pregnancy
Regular Antenatal Care is essential

Ask, what do they see in the picture?
- ANM didi giving a card to a pregnant woman
- A woman taking red tablet
- A woman getting injection
- A woman being weighed
- A woman being examined by ANM didi
- A woman is checked for blood pressure

Discuss
1. Why ANC is important during pregnancy?
2. How many ANCs are necessary and why?
3. What all things are checked and advised during ANC?

Messages
- Most of the problems during pregnancy are not predictable. For assessing growth of the baby and health of the mother, 3 ANCs are necessary for all pregnant women.
- The pregnant woman is commonly checked for weight gain, uterus size, blood pressure, urine and hemoglobin.
- 2 TT injections at one month interval prevents the baby from Tetanus.
- Regular intake of IFA tablets helps in growth of the baby and prevents anemia in mother. A pregnant woman have to take at least 100 iron/IFA tablets.
- ANC is done in your village or nearby sub-centre/hospital free of cost.
3 ANC during pregnancy are essential for a healthy baby and healthy mother
Ask, what do they see in the picture?

- A woman lying down
- A woman resting in a reclining chair
- A woman cooking food
- A woman cleaning house with broom
- A woman grinding
- A woman drawing water from well
- A woman carrying load on her head

Discuss

1. Why rest is necessary for pregnant woman?
2. What type of work a pregnant woman can do at home?
3. What type of work a pregnant woman must not do?

Messages

- Pregnant woman needs adequate rest for growth of the baby.
- She must take rest for at least 2 hours during day time and whenever she feels tired.
- Pregnant woman can do light household works like cooking, cleaning house etc.
- Pregnant woman must not do hard work or weight bearing activity like grinding, drawing or carrying water or carrying load, etc.
- Hard and weight bearing work may lead to pregnancy loss, small baby, and onset of labour before time.
Pregnant woman must take adequate rest and avoid hard work
Eat more and healthy foods

Ask, what do they see in the picture?

- A woman eating food
- Message for Iodized Salt
- Display of types of food—vegetables, fruits, milk, eggs, meat and fish
- A woman with pale tongue
- A woman with pink tongue
- A woman being counseled for taking IFA tablets

Discuss

1. What all types of foods are essential during pregnancy?
2. How much additional food is required by the pregnant woman?
3. Which foods are not to be taken by the pregnant woman?
4. What happens if a woman is anemic?
5. How can anemia be prevented?

Messages

- Pregnant woman needs more food for growth of the baby.
- Pregnant woman must have all types of food—white (rice/roti), yellow (dal), green (vegetables) red (fish/meat/eggs) and liquids (milk, juice and water). Use iodized salt only.
- She should eat one more serving in each meal.
- No food is prohibited during pregnancy.
- Anemia in mother leads to small baby and increases risk of death in mother.
- Good diet and regular intake of IFA tablets helps in growth of the baby and prevents anemia in mother.
Eat more and healthy foods to help the baby grow better and prevent anaemia
Remember the danger signs during pregnancy

Ask, what do they see in the picture?

- A woman having bleeding
- A woman having fever
- A woman having swelling of feet
- A woman having pain abdomen
- A woman with white discharge
- A woman with pale eyelids and pale tongue

Discuss

1. What are the common problems during pregnancy?
2. What should be done in case of any problem?
3. If the pregnant woman have any of the danger signs, where should she go for the delivery?

Messages

- Most of the pregnancies are smooth and uneventful. Some pregnant women may have any of these problems which indicate risk for the mother and the baby.

- The common problems during pregnancy are:
  - Bleeding before onset of labour pain
  - Convulsion/fits
  - High grade fever
  - Swelling of feet or hands
  - Pain abdomen before expected date of delivery
  - Severe pallor/anemia

- A pregnant woman with any of these problems must go to a hospital or contact the ANM if she has any of these features.

- She must go to a hospital with adequate facility (Block hospital or District hospital) for delivery.
Remember the danger signs during pregnancy. Go to the hospital urgently.
Ask, what do they see in the picture?

- Items required for the baby: clothes, dress, napkins, cap, socks etc.
- Saving money
- Hospital for delivery
- Vehicles for transport

Discuss

1. What all items are necessary for the baby and mother immediately after delivery?
2. Have you identified the place for delivery and why?
3. Do you know about Janani Suraksha Yojana (JSY)
4. How have you planned to go to the hospital, if planned or in emergency?
5. Who will support you during and after delivery?

Messages

- Baby and mother both need adequate clothes after delivery. Arrange things beforehand which are necessary for the baby and mother immediately after delivery.
- Delivering in a hospital is always safe for the baby and the mother. Government is promoting delivery at hospitals under Janani Suraksha Yojana (JSY) free of cost.
- The fastest possible modes of transport to hospital (either planned or in emergency) must be explored in advance.
- Save some money for ready use in emergency.
- Support from some relative/friends/neighbour during the delivery and immediately after the delivery may be very useful.
Arrange the items for the baby and mother; and transport for delivery
Breastfeeding
Start breastfeeding as soon as possible

Ask, what do they see in the picture?
- Mother being assisted by ASHA didi for breastfeeding the baby

Discuss
1. When do you start breastfeeding your baby and why?
2. Did you give colostrums to the baby? If not why?
3. Do you give any other feed/liquid to the baby before breastfeeding?
4. Do you give any other liquid/food along with breastfeeding?
5. What are the practices around initiating early breastfeeding in their family/community?

Messages
- Breastfeeding is to be started as soon as possible after delivery, preferably within 1 hour after birth. Suckling by the baby within the first hour helps in expulsion of the placenta and reduces bleeding.
- Starting early helps more breast milk formation and better continuation.
- Colostrum, the first milk from mother’s breast is like AMRIT. It has high energy for the baby. Colostrum is like first vaccine for the baby.
- Give breastfeeding whenever the baby demands. Give exclusive breastfeeding to the baby for six months.
- DONOT give any liquid (honey, sugar water, jaggery, ghutti, gripe water, etc) or feed before giving breastfeeding.
- DONOT give any liquid (honey, sugar water, jaggery, ghutti, gripe water, etc) or feed along with or after breastfeeding.
Start breastfeeding within the first one hour of delivery
Proper positioning while breastfeeding

Ask, what do they see in the picture?

- Mother holding the baby in different positions for breastfeeding
- Mother breastfeeding twin babies

Discuss

1. Which position are you adopting while breastfeeding?
2. How do you hold the baby while breastfeeding?
3. Do you know any other positions for breastfeeding the baby?
4. Do you know the outcomes of improper positioning?
5. Is there any linking or disliking about any specific position while breastfeeding by you or family or in your community?

Messages

- Any position which is comfortable for the mother and baby is the best position.
- Breastfeeding is best when:
  - The mother is comfortable and sitting well supported.
  - The baby is cuddled to mother and the whole body (head, back and buttock) is well supported and in straight line.
  - Baby's mouth is at nipple level and mother is not leaning too much.
  - Baby's face is not covered and mother is able to see and interact with the baby.
- Improper positioning while breast feeding could result in nipple biting and injury to breast and baby will remain hungry.
- No position has any special advantage over the others. Mothers who have undergone surgery can breast feed lying down or in a semi-inclined position till they recover.
- In the case of twin babies, both can be fed simultaneously or one after another.
- After feeding the baby, do burping by keeping the baby upright and rubbing or patting the back gently.
While breastfeeding, adopt comfortable position and support baby's head, body and buttock
Correct attachment and sucking while breastfeeding

Ask, what do they see in the picture?
- **Left side:** baby is attached to breast
- **Right side:** baby is not attached properly

Discuss
1. How do you put the baby onto breast?
2. Should the baby suckle only the nipple or areola?
3. How can you ensure that the baby is suckling properly?
4. Will there be a problem if the baby is not attached and not sucking properly?

Messages
- The nipple should be touched to the baby's lips or cheeks. When the baby opens mouth bring the baby onto the breast and guide the nipple into the baby's mouth.
- The baby is not to be forced on to breast or nipple is not to be forced into mouth of the baby.
- Baby must suck a good part of areola not only the nipple.
- The features of good attachment are: Baby held close to the mother with chin touching the breast, baby's mouth is wide open, the lower lip is turned outward and more of the areola above the mouth than below it.
- The features of good sucking are slow deep sucks with some pauses and mother feels the suck.
- If baby is not attached properly, baby does not get enough milk and bite the nipple which can cause injury.
To ensure good breastfeeding baby must be attached well to the breast.
Some problems related to breastfeeding

### Ask, what do they see in the picture?
- Inverted nipple/flat nipple
- Fullness of breast
- Baby unable to feed and crying
- Mother giving massage and hot fomentation to her breast
- Mother holding the breast with both hands for expression of milk
- Mother expressing breast milk by hand

### Discuss

1. What are the common problems faced by mothers while breastfeeding?
2. Is the flat nipple or an inverted nipple a serious problem and how can you manage?
3. What do you do for cracked nipple?
4. Why does the fullness of the breast occur and how can you manage that?
5. Do you know when expression of breast milk is needed and how to express?
6. Whom do you contact if you have problem in the breasts?

### Messages

- The common problems encountered by mothers during breastfeeding are due to flat nipples, crack nipples and breast engorgement. Most of these breast related problems are easy to manage with simple actions.
- Inverted or flat nipple can be improved with proper attachment and sucking of the breast by the baby or by syringe suction method.
- For cracked nipple attach the baby properly and apply hand milk over the nipple. Do not use soap to clean the breast/nipple since it can cause cracked nipples; wash with plain water.
- Fullness of breast occur when breastfeeding is not started early or breastfeeding not given regularly or baby is unable to suck. Engagement causes pain and makes sucking by baby different.
- In case of breast problems, if breastfeeding is not possible, expression of breast milk can be done with hands and the collected milk is to be given to baby by spoon.
- For expression of breast milk, hot fomentation, light massage before expression helps. Breast milk expressed is to be collected in a clean container.
- Expressed breast milk can be stored for some time if not used immediately.
- In your village ASHA or AWW can help you. If the problems persist, contact the ANM, nurse or doctor.
Do not stop breast-feeding in case of minor problems. Contact ASHA/AWW/ANM for assistance.
Continue exclusive breastfeeding for six months

Ask, what do they see in the picture?
- Mother breastfeeding newborn baby
- The thing not to be given to the baby: Feeding by bottle, water, honey, Ghutti, Gripe water, other liquid/feed

Discuss
1. How long the baby should be given exclusive or only breastfeeding and why?
2. Why the baby should not be given water or any other fluid like cow’s milk, baby formula or other fluids by bottle during the first six months?
3. What are the existing practices in their community about this issue?
4. What is your personal experience regarding this (if this baby is the second or third baby)?

Messages
- Exclusive breastfeeding means giving only breast milk to the baby and nothing else, even water.
- Exclusive breast feeding to be given to the baby till he/she is six months old.
- Breast milk is complete food and has everything that baby requires to grow healthy in first six months of age.
- Breast milk has enough water for the baby and water or any other liquid is not required even in summer.
- Feeding water or milk or any other fluid by bottle or spoon decreases the desire for breastfeeding and increase risk of infection and illness.
- Bottle feeding increases risk of diarrhea.
- Complementary feeding should begin after six months.
Breast milk is complete food for the baby in the first six months. Do not give anything else to the baby.
Continue breastfeeding during illness of the baby or mother

Ask, what do they see in the picture?
- Mother seems to be ill but breastfeeding the baby
- Baby is ill with fever
- Baby is having diarrhoea
- Baby seems to be ill but continues to be breastfed

Discuss
1. What changes in breastfeeding do you think are necessary when the baby is ill (fever or diarrhoea)? If not ask, why?
2. Should you (mother) breastfeed the baby when you are ill? If not ask, why?
3. What are the family and community perceptions around these issues?

Messages
- During illness, the baby requires energy and frequent breastfeeding is necessary.
- Breastfeeding does not worsen the diarrhoea or illness. Breast milk contains nutrients and several protective factors that help the baby to fight the illness and reduce the duration of the illness.
- Mother should continue breastfeeding the baby even when she is ill.
- Mother’s breast milk does not harm the baby in common circumstances.
- You must contact ASHA or AWW or ANM if you feel the baby is ill.
- If the mother is seriously ill, seek help from the doctor and follow advice.
Breastfeeding must continue even if the mother or the baby is ill
Care of the newborn baby
Ask, what do they see in the picture?
The baby is well covered and is lying very close to the mother.

Discuss
1. Why is it necessary to keep the baby warm?
2. How do you keep the newborn baby warm?
3. What are the common practices to keep the baby warm in their homes? Do you use Jhoola/Palna at home?
4. When do you bathe the baby?

Messages
- All newborn babies need adequate warmth for growth.
- The newborn can become very cold soon after birth and can fall sick quickly if not covered/wrapped properly.
- Simple steps can save the newborn from hypothermia and reduce risk of death.
- Wrap the newborn with blanket/sheet; ensure to cover the head as well.
- During winters, cover the bay with extra layers, socks and caps. Ensure that the room is warm.
- Keep the newborn close to the mother in a clean, dry and warm room.
- Avoid keeping the baby in a Jula/Palna. It keeps the baby far from the mother and increase risk of being cold.
- Avoid bathing the baby on the first day. Delay further in winter days. For small babies delay bathing till cord falls off.
Keep the baby well covered and close to the mother.
Ask, what do they see in the picture?

- Chest in drawing
- Jaundice
- Pus collection on skin
- Pus discharge from umbilicus
- Discharge from eyes

Discuss

1. When do you say that ‘the newborn baby is sick?’
2. Which babies are prone to illness?
3. What all you do if the baby is sick?
4. What all care will you take while taking the baby to hospital?

Messages

- The baby is sick if she/he has:
  - fast breathing or difficulty in breathing,
  - convulsion/fits,
  - low temperature or fever,
  - jaundice,
  - pus collection on skin (pustules or boil),
  - pus discharge from umbilicus,
  - pus discharge from eyes,
  - feeding problem,
  - lethargy or poor cry.

- All newborn babies are at risk of becoming sick. However, low birth weight babies are at higher risk for sickness.

- Sick newborn babies required immediate attention. Some illnesses require hospitalization and special care. DO NOT DELAY if you see, any of these symptoms.

- Do not stop breast feeding the baby during illness.

- Contact ASHA/AWW/ANM or any doctor for the sickness and guidance.

- While taking to hospital, ensure that the baby is well wrapped, kept warm and continue feeding during transport.
In case of any problem of the baby, contact ASHA/AWW/ANM or a doctor without delay
Ask, what do they see in the picture?

- Mother breastfeeding the baby
- Mother feeding the baby by spoon
- Mother and baby eating together

Discuss

1. How long the baby needs exclusive breastfeeding?
2. When can the baby be given additional food other than breast milk?
3. What kind of food can be given to the baby after sixth month?
4. What community ritual you have for initiating complementary food for the baby?

Messages

- Breast milk is complete food and has everything that baby requires to grow healthy till six months of age.
- Baby needs additional food after six months for adequate growth.
- You can give home made soft food prepared with locally available food (dal, dalia, rice, kheer, mashed vegetables, etc).
- Start with thinner consistency (not like water) and gradually increase the thickness.
- Start with 1–2 times a day and gradually increase it to 3–4 times a day.
- Introduce new items one by one. Do not start many new things in same day.
- Continue breast feeding along with other feeds till the baby is 2 years old or as long as you (mother) want.
- To monitor growth, check the weight of the baby regularly. Contact the ASHA/AWW for this.
After six months of exclusive breastfeeding, start giving soft, well cooked home made food, 2–4 times a day.
Care of the mother
Ask, what do they see in the picture?

- A woman is resting
- A woman taking bath
- A woman drawing water from the well
- A woman carrying load of firewood on head

Discuss

1. What all care should a mother take after delivery?
2. What kind of work a mother can do after delivery?
3. When do you allow the mother to work?
4. What problems she can face due to heavy work?
5. When can she have bath?
6. What are the social and cultural beliefs about care of the mother after delivery?

Messages

- Adequate rest is required for the mother to recover quickly. She has to lie down for 2 hours during day time.
- Walking and moving about soon after delivery is not harmful for the mother. Doing light household work is allowed.
- Avoid heavy or load bearing work in the first six weeks after delivery.
- Mother should bathe regularly and use clean clothes to prevent infection.
- Mothers who have delivered by Cesarean section need to follow advice of the doctor regarding rest, food, work etc.
Mother should not do heavy work till six weeks after delivery
Eat and drink more to have adequate milk

Ask, what do they see in the picture?
• It shows mother is eating four meals in the day
• The baby is being fed 8 times in a day

Discuss
1. What do you think about the diet of a mother who is breastfeeding?
2. Is it necessary for the mother to eat and drink more, why? What all she can eat?
3. In your experience, which foods are harmful to the mother?
4. Are there any special social and cultural practices about diet of the mother?

Messages
• Mother need to eat extra for herself and to make breast milk for the baby also. Healthy mother can produce better quality and quantity of milk.
• Mother requires two balanced big meals and two small meals in a day to meet her nutritional requirement. She has to take at least 8-10 glasses of water and milk in a day.
• Mother need to eat food prepared from locally available food. No special food is required for the mother.
• No food is harmful to the mother or for the baby. There is no specific hot/cold food, or any food that mother should or should not eat, during breastfeeding.
• Baby requires frequent feeding (every two–three hours and should be fed on demand) 8–10 times a day.
Mother should eat balanced meals to have adequate breast milk for the baby.
Ask, what do they see in the picture?

- The woman is bleeding
- The woman is having white discharge
- The woman is having fits
- The woman is having fever

Discuss

1. How does the colour of the discharge change usually after delivery?
2. What are the common problems faced by woman soon after delivery?
3. Do you know which are considered as danger signs after delivery?
4. What will you do in these conditions?

Messages

- Usually all women continue to have bleeding/discharge for 1-2 weeks after delivery. The colour of discharge change from Red-to-Brown-to-Yellowish. Some also experience slight pain in the abdomen and genital region/pain during urination.
- The danger signs in women after delivery:
  - heavy bleeding: needs to change pads every hour two hours or passing blood clots of the size of a fist,
  - high fever,
  - convulsion/fits,
  - foul smelling discharge, and
  - severe pain abdomen.
- In these situations contact ASHA/ANM or go to the nearest hospital urgently.
Remember danger signs. DO NOT DELAY—Take the mother to the hospital
General hygiene to prevent infections

Ask, what do they see in the picture?

- Washing hands
- Breastfeeding
- Woman cooking food
- Woman eating food
- Hand washing after using toilet
- Cleaning the baby after passing stool/urine.

Discuss

1. What all cleanliness practices do you follow?
2. Which practices can prevent infection?
3. When do you wash your hands and how?
4. What should you do to keep the baby's room clean?

Messages

- Many of the infections and diseases can be avoided by following some simple clean practices. Clean hands, clean bed, clean room can prevent many infections in the baby and mother.
- Hand washing with soap is one of the most effective ways of preventing infection like diarrhoea.
- Wash your hands before breastfeeding, cooking food, eating, after cleaning the urine/stool of the baby or changing nappies, after using toilet and additionally whenever you feel necessary.
- Keep the baby's room clean. Use clean clothes, blanket/sheets for the baby and yourself.
- Keep your nails clean and trimmed regularly.
- All family members must follow clean practices.
Hand washing is the simple most effective measure to prevent infection
Small (low birth weight) babies
Ask, what do they see in the picture?
- A newborn baby being weighed
- A baby unable to suck breast
- A well wrapped baby
- A baby being fed with a spoon with beak

Discuss
1. Do you know who is a small baby or low birth weight baby?
2. What are the problems faced by these low birth weight babies?
3. How to feed these small or low birth weight babies?
4. What additional care do you take for the low birth weight babies?

Messages
- Babies weighing less than 2500 gm are known as low birth weight babies. These babies look small compared to the normal weight babies.
- Such babies are at a higher rise of becoming cold, fall ill and remain weak later if not cared well. These babies are at higher risk of death also.
- These small babies (especially babies weighing less than 2000 gm) require special care and feeding for proper growth.
- Breast milk is the best feed for these small babies. These babies need frequent feeding and may have problem in sucking at breast. If they are unable to breastfed expressed breast milk can be given by spoon.
- These small babies are to be covered well and kept warm. Following clean practices is more important for these babies.
- Growth monitoring, vaccination is necessary for these babies.
Small (low birth weight) babies need extra care for warmth and feeding
**Skin-to-skin contact (Kangaroo mother care)**

**Ask, what do they see in the picture?**
- Kangaroo holding her baby
- A small baby is held close to the chest by a female family member
- A small baby is kept close to the mother’s chest in different position

**Discuss**
1. Why do the babies need to be kept close to the mother?
2. Which baby needs to be kept like the ways shown in the picture and why?
3. Do you know any other special way of holding the small babies? Ask them to see the picture again and answer.
4. What are the benefits of this practice?
5. Who all in the family can do this practice?
6. How long this practice can be continued?

**Messages**
- Low birth weight babies are prone to cold and illness very fast.
- Small babies need extra warmth which can be given by keeping them close to the body of mother. This satisfies the baby and mother both and promotes growth of the baby.
- A special skin-to-skin contact known as ‘Kangaroo Mother Care’ is practiced by placing the baby on the mother’s chest, between the breasts and well covered can keep the baby warm.
- This practice have several benefits:
  - This method is simple, cost effective and easy to follow.
  - Mothers can practice this while sitting, lying down and as long as possible.
  - Along with keeping the baby warm, baby can be breastfed whenever needed in the same position.
- Other family members can also do this and support mother whenever needed.
- The babies need this till they grow more than 2500 gms and can be continued as long as possible.
Keeping the baby in skin to skin contact and frequent feeding of the baby can save small (low birth weight) babies.
Additional counseling
Immunize the baby at scheduled time

Ask, what do they see in the picture?

- Baby is being given oral drop
- Baby is being given injection on the leg
- Immunization card with vaccine schedule

Discuss

1. How can you protect babies from illness?
2. Why should vaccines be given to newborn and children?
3. Do you know which vaccines are given to the babies and when?
4. Is it safe to give vaccine to a sick child?
5. Can the baby get vaccination, if she/he misses the schedule?
6. Are there any side effects of vaccination?
7. In your area, do you know where the vaccines are given?

Messages

- Breastfeeding, warmth, hygiene and vaccines can protect the baby from illness.
- It is safe to give the vaccines to the child. Vaccination to the child protect against some dangerous diseases.
- Vaccines are given at specific intervals and age of life. Most of the vaccines are injections. Only polio vaccine is oral drops.

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<td>18 months</td>
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- The baby needs to be given all the prescribed vaccinations in the first year of life.
- Vaccines are provided at village level on fixed days. Vaccines are also given at the government hospitals and sub-center in your area.
- If for any reason the child misses any vaccination, it should be given as soon as possible.
- After vaccination the child can have mild fever, rash or a small sore. You should not worry about these.
- Ask ASHA/ANM/AWW for information on immunization days.
Vaccines are necessary to protect babies from infections. All doses must be given to ensure protection of the babies.
Birth spacing options for the mother

Ask, what do they see in the picture?
- Male vasectomy
- Female tubectomy
- Copper T

Discuss
1. What are the risks of frequent pregnancies for the mother and the baby?
2. Do you know any method(s) to avoid/delay pregnancy?
3. Have you ever used any family planning methods? If yes, which one? What was your experience?
4. Which method you think to adopt this time and why?
5. Where do you plan to go for this or whom do you plan to consult?

Messages
- Frequent pregnancies are harmful for the mother and baby.
- There are several birth spacing choices available to avoid unwanted or frequent pregnancies.
  - Women can choose a long terms method like Copper T or pills and men can use condoms.
  - Women can choose a permanent method like tubectomy and men can choose vasectomy.
- Abortion is not an alternative to use of contraceptives and it has also risks.
- Exclusive breastfeeding is helpful in delaying pregnancy but not after 6 months or baby not given exclusive breastfeeding and a definite method must be adopted.
- Most of the birth spacing options are available free of cost at your nearest health center. You can seek information from ANM/ASHA from your village itself.
- Emergency contraception pills are also available. These pills are to be taken within 24 hours of unprotected sexual activity. Contact the ANM/ASHA for more information.
Delay next pregnancy for at least three years.
Whom to contact in case of need for your baby and mother

Ask, what do they see in the picture?

- Home – family members
- Village – ASHA/AWW
- Sub-Centre- ANM
- Hospital – Doctor, Nurse, others

Discuss

1. In case of any need for the baby or mother, whom do you contact?
2. Do you know the nearest hospital to go in case of need?
3. Do you know where the nearest Sub-center is?
4. Do you know any health worker (ASHA/AWW) available at the village level?
5. Do you know how the village level workers (ASHA/AWW) can help you in case of need?

Messages

- Tell the family about the nearest Sub-center and Hospital.
- You need to go to the hospital or contact any health worker when your baby or you are ill or you have any health problem.
- At village level ASHA/AWW are available to help you in need.
- ASHA/AWW are here to assist you in breastfeeding, care of the baby and during illness of the baby or yourself.
- Several health services for the mother and baby are available free of cost at the village level. These are the ANC, PNC, vaccinations, growth monitoring and nutritional support services.
- Services in the village are provided through the ASHA and AWW and supervised by the ANM.
Health Services are available in your village and nearby for routine check up and emergency
Care at delivery
Prepare for safe and clean delivery

Ask, what do they see in the picture?
- Hospital
- ANM/Nurse didi
- Clean room and clean bed
- Soap and hand washing
- Gloves and clean clothes
- Blade and thread
- Disposable Delivery Kit

Discuss
1. Do you know who usually conducts delivery in your area?
2. Do you know who is skilled to conduct a delivery in your area?
3. What all items are needed for delivery?
4. Do you know what all clean practices are to be followed during delivery?
5. Do you apply anything on the cord?

Messages
- Skilled persons can conduct deliveries safely. Deliveries at hospitals are conducted by skilled personnel and are safe and clean.
- Extra care must be taken to make the home deliveries safe and clean. Conduct the delivery by a skilled birth attendant (ANM/Nurse/Trained Birth Attendant).
- Clean delivery is necessary to prevent infection and tetanus in the baby and prevent infection in the mother.
- Clean practices during delivery.
  - clean hands (hand washing with soap and water)
  - clean surface (room & floor) and clean surrounding,
  - clean/new blade,
  - clean thread to tie the cord,
  - clean umbilical cord (keep cord clean) and
  - clean set of clothes for the baby and mother
- Keep the umbilical cord clean and dry. DO NOT apply anything on the cord.
Prepare for safe and clean delivery at hospital or attended by Skilled Birth Attendant
Ask, what do they see in the picture?

- A birth attendant delivering baby
- A baby lying close to the mother and breastfed immediately after delivery

Discuss

1. What all care to be taken for baby immediately after birth?
2. How to keep the baby warm after delivery?
3. What is first feed given to the baby and when?
4. What are the practices around initiating breastfeeding in your family/community?
   (When do you start? What liquids are given to the baby before starting the breast feeding? Any other practice?)
5. When is the baby given bath after delivery?
6. What is usually applied on the cord?

Messages

- Three important care for bath immediately after birth:
  - Keep dry and warm, well covered and close to the mother
  - Start breast feeding as soon as possible
  - Keep the cord clean
- Immediately after delivery keep the baby well covered and close to the mother, it keeps the baby warm.
- The baby has to be given breast feeding immediately after delivery. Breastfeeding can be given even before the placenta is out. Don’t give anything to the baby before giving breastfeeding.
- Keep the umbilical cord dry and clean; don’t apply anything to the umbilical cord.
- Delay bathing the baby- At least one day for a normal weight baby and till the cord falls for a small baby. Do not use soap while bathing the baby.
- Do not apply kajal on the eyes.
Keep the baby warm, keep the cord clean and start breastfeeding immediately after birth.
The Norway India Partnership Initiative (NIPI) is a unique support embedded within NRHM processes. The programmes provide strategic, flexible, catalytic, and innovative support to the NIPI focus states of Orissa, Madhya Pradesh, Rajasthan, Bihar and Uttar Pradesh to improve the child health and related maternal health service delivery.

To achieve the Millennium Development Goals (MDGs), NIPI aims at reaching every newborn at home and extend the support services for the mothers and family members for improving breastfeeding and newborn baby care practices. This Community and Home Based Postnatal Care of the Newborn and Mothers is being implemented through the ASHAs, who will follow the newborns during the critical first month of life. ASHAs also will assist in identifying the illnesses in the newborns and guide the mother and family about appropriate care.

This flip chart is part of the effort of NIPI to assist "ASHAs" to counsel and disseminate messages on good newborn care practices at home to the mother and the family members.