

ACTION PLAN Infant and Young Child Feeding

Promoting appropriate IYCF practices through the health network

KEY INTERVENTIONS AT THE HEALTH FACILITY LEVEL

Delivery points (Medical College, District Hospitals, and CHC level):

1. Encourage institutional deliveries under JSSK and JSK.
2. Counselling for Breast feeding during Antenatal check up; Role of:
 - a. Gynaecologists/ Medical Officers
 - b. Staff nurses/ AWW
 - c. Health educators and counsellors
3. Initiate Breast feeding soon after birth, encourage feeding of colostrum; Role of:
 - a. Medical Officers
 - b. Staff nurses, FHW/ AWW
 - c. Health educators and counsellors
4. Establish lactation corners and IYCF feeding counselling centres in Child OPD of every hospital; Role of:
 - a. Lactation counsellors/ Nutritional Counsellors / MEIO/ Health educators for counselling and communication on breast feeding and complementary feeding
 - b. FHW/ MCH worker for growth monitoring and growth charting on MCP cards available with every mother
 - c. Immunisation services
 - d. IFA and Vit A supplementation for children older than 6 months
5. Have written Breast feeding policy in local vernacular displayed in:
 - a. Gynae OPDs/ Child OPDs waiting areas
 - b. Labour Rooms
 - c. Maternity and post natal wards
 - d. Nursery
 - e. Immunisation Area
6. IMS Act (discouraging Top feeds and commercial milk products) Poster displayed in:
 - a. Gynae OPD s and Child OPDs as well as wards
7. Display IEC material in local language encouraging breast feeding, complementary feeding:
 - a. Gynae OPDs/ Child OPDs waiting areas
 - b. Labour Rooms
 - c. Maternity and post natal wards
 - d. Nursery

- e. Immunisation Area
- 8. All delivery registers should have a column on whether early breast feeding has been initiated. Discharge policy should include establishment of successful breast feeding prior to discharge of mother and child from the hospital.
- 9. Anthropometry (weight, height, MUAC) of every child seen in OPD/ immunisation/ sick child admitted in ward should be must. Identify under nutrition and give appropriate nutrition counselling. WHO growth charts which are provided should be used as reference for anthropometry. Role of:
 - a. Paediatricians/ Medical officers
 - b. Staff nurses/ ANM/ ASHA
 - c. Lactation counsellors/ Nutritional Counsellors / MCH staff for counselling and communication on breast feeding and complementary feeding
- 10. Nutritional Rehabilitation Centres to be set up in all District Hospitals. Currently 2 are functioning in Medical College Shimla and Tanda.
- 11. SNCUs to be set up in all District hospitals for care of newborns.

KEY INTERVENTIONS AT COMMUNITY LEVEL

- 12. Adequate supply of equipments and training to Front line workers on lactation problems, growth monitoring and growth plotting during VHND, immunisation days, or during home visits:
 - a. MCP cards
 - b. Weighing scales
 - c. MUAC tape
- 13. **Encourage special campaigns:**
 - a. **Breast Feeding week:** 1-7 August
 - b. **National Nutrition week:** 1-7 September
 - c. World Food Day: 16 October
 - d. Children`s Day: 14 November
- 14. **Trainings:**
 - a. Facility based management of Severe Acute Malnutrition to MOs and Staff nurses(SNs)
 - b. ASHA module 6 and 7 to FHW/ ASHA
 - c. SBA training to FHW/ SNs
 - d. IMNCI/ F-IMNCI to MOs/ SNs/ FHW
 - e. IYCF counselling 4 in 1 course
 - f. IYCF counselling training to MOs/ Nutritional counsellors
- 15. **Incentives to Front line workers** if weight of child remains in green zone at end of 6 months and 1 year respectively
- 16. Data collection:
 - a. Monthly data collection from all districts
 - b. Monitoring and piling of data from all districts at state level.

17. IEC material

- a. Flip charts for AWW through WCD
- b. Posters on breast feeding and complementary feeding
- c. Print leaflets to give away at SC, AWW, VHND, Home visits
- d. Wall painting at AWW/ SC/PHC/ CHC/ Local markets

18. HBNC:

- a. Every child to be visited by FHW/ AWW/ ASHA 6-7 times during first 42 days of life.
- b. Birth weight to be recorded within 24 hours for home deliveries
- c. Support early initiation of breastfeeding, colostrum feeding and establishment Of exclusive breastfeeding; resolve any problems
- d. Identification of low birth weight babies and appropriate feeding advice
- e. Monthly visit after 42 days till 6 months, at 9 months and at 1 year.
- f. Incentives to every worker for home visit @ 250 Rs/ per child at the end of 42 days with documentation that mother and child are both healthy.