

MATERNAL, INFANT AND YOUNG CHILD NUTRITION COUNSELING



USAID
FROM THE AMERICAN PEOPLE

IYCN USAID's Infant
& Young Child
Nutrition Project

Counseling card topics

1. Antenatal care (ANC)
2. Care during pregnancy
3. HIV testing and counseling
4. Nutrition during pregnancy
5. Avoiding malaria during pregnancy
6. Protecting your baby from HIV
7. Delivery
8. Initiation of breastfeeding
9. How to put your baby on the breast
10. Exclusive breastfeeding
11. Postnatal care
12. Nutrition for lactating mothers
13. How to make enough milk
14. What to do when separated from your baby
15. Monitoring your child's growth
16. Immunization
17. The importance of vitamins A and D
18. Hygiene
19. Appropriate complementary foods
20. Give a variety of foods
21. How to feed a child 6-8 months
22. How to feed a child 9-11 months
23. How to feed a child 12-23 months
24. How to feed a sick baby from birth to 6 months
25. Feeding a sick child 6-23 months
26. Mother-to-child transmission of HIV
27. Breastfeeding for HIV-positive mothers

These counseling cards were produced through support provided by the United States Agency for International Development, under the terms of Cooperative Agreement No. GPO-A-00-06-00008-00. The opinions herein are those of the author(s) and do not necessarily reflect the views of the United States Agency for International Development.



1st



2nd

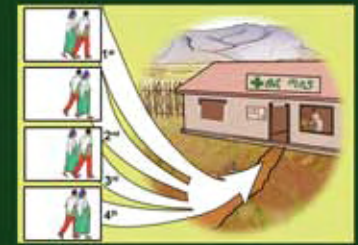
3rd



4th



1. Antenatal care (ANC)



Pregnant Women: Go to the health facility for antenatal care as soon as you know that you are pregnant. Attend at least four times during your pregnancy. During the first visit, the health worker will give you an appointment for your next visit. It is important to go for ANC checkups even when you are feeling well. The checkups will help you to know about your health and how your baby is growing and developing. The health worker can also identify possible complications early, and either provide treatment or a referral.

At the health facility, the health worker will:

- Examine you and tell you how the baby is growing and developing.
- Give you advice on how to keep yourself and the baby healthy.
- Give you the help and advice you need to have a normal birth without complications.
- Give you iron folate tablets to prevent anemia.
- Provide information on infant feeding.
- Advise you on options for family planning methods after you give birth.
- Offer HIV testing and counseling.
- Give you medicines to keep you healthy and help your baby to grow and develop well.
- The medicines given at the health facility may include:
 - Immunization to prevent tetanus.
 - Iron and folic acid to prevent or treat anemia.
 - Deworming tablets to keep you healthy and prevent anemia.
 - Anti-malaria tablets if you are living in a malarious area.



2. Care during pregnancy



Pregnant Women: Look after yourself during pregnancy to remain healthy and to help the baby grow and develop well.

- Eat adequate amounts of nutritious food.
- Prepare for the birth of your baby:
 - Decide the health facility where you will deliver.
 - Save some of the money you will need.
 - Prepare the clothes and bedding the baby will need.
- Go to the health facility for help immediately if you experience any of the following:
 - Vaginal bleeding
 - Fever
 - Severe lower abdominal pain
 - Headache
 - Blurred vision
 - Swollen face and arms
- Rest more and avoid hard labor during pregnancy to have a healthy and normal size baby.



3. HIV testing and counseling



Pregnant Women: Get tested for HIV at the health facility to know your status. Encourage your partner to be tested as well. The only way to know your status is to be tested. During the visit, the health worker will tell you about HIV and AIDS.

If both of you test negative, the health worker will explain what you and your partner can do to remain HIV negative. If you test positive, the health worker will:

- Give you the information you need to protect your partner from HIV. (This also applies if your partner tests positive and you test negative.)
- Discuss what you can do to remain healthy and live a long life.
- Advise you on what you can do to protect your baby from becoming infected with HIV during pregnancy, labor and delivery, and breastfeeding.
- Give you antiretroviral medications so you can remain strong and to help prevent the transmission of HIV to your baby.
- Provide information on how you can get other kinds of support you may need.



4. Nutrition during pregnancy



Pregnant Women: Eat a variety of foods during pregnancy to remain healthy and strong and to help the baby grow and develop well. Eating a variety of foods makes you strong enough to deliver without problems. Eat a variety of the following foods as available:

- Cereals (injera, bread, kolo, nifro, kita, rice)
- Roots and tubers (potatoes, beetroots, onions, kocho)
- Animal, fish, and poultry products (meat, fish, chicken, milk, eggs, liver)
- Legumes (beans, peas, chickpeas, lentils)
- Oils and fats (butter, cooking oil, sesame, nuts, groundnuts, linseed)
- Fresh fruits (ripe papaya, bananas, mango, oranges)
- Vegetables (carrots, pumpkins, kale, cabbages, tomatoes)

Eat one extra meal each day. Eating more helps the baby to develop well and strengthens you for delivery. Eating an extra meal will not cause your baby to grow too big.

- Use iodized salt to help your baby's brain and body develop well.
- Drink at least 10 glasses of water a day unless you are told not to do so by a health worker.
- Avoid alcohol and smoking during pregnancy. Alcohol and cigarette smoking can harm the health of the fetus in the womb.
- Avoid drinking tea and coffee during meals. Tea and coffee changes the way your body uses the food you eat. It is better to drink tea and coffee at least one or more hours before or after a meal.

Husband:

- Make sure your wife gets one extra meal each day.
- Support your wife so she can rest more during pregnancy. Rest and avoiding hard labor helps to have a healthy, normal size baby.



5. Avoiding malaria during pregnancy



Pregnant Women: Sleep under an insecticide-treated mosquito net to protect yourself against mosquito bites that bring malaria. Malaria causes anemia, which harms the health of the mother and baby.



6. Protecting your baby from HIV



Pregnant Women: If you are HIV-positive, discuss with your partner before your baby is born and agree on the way you will feed your baby. Seek the help of a health worker to make the decision.

If an HIV-positive mother is breastfeeding, it is important for her to breastfeed exclusively for the first 6 months. Giving other liquids or foods puts the baby at greater risk of becoming infected with HIV while breastfeeding.

Exclusive breastfeeding:

- Exclusive breastfeeding (giving **ONLY** breastmilk) for the first six months greatly reduces the chance of an HIV-infected mother passing HIV to her baby as compared with mixed feeding (feeding a baby both breastmilk and any other milks or foods, including water). In addition, an exclusively breastfed baby also receives protection from diarrhea and other illnesses.
- Mixed feeding (feeding baby both breastmilk and any other foods or liquids, including infant formula, animal milks, or water) before 6 months is the most dangerous way to feed a baby. Mixed feeding greatly increases the chance of an HIV-infected mother passing HIV to her baby, and also increases the chance of the baby dying from other illnesses, such as diarrhea and pneumonia, because he or she is not fully protected through breastmilk.
- Mixed feeding is always dangerous for babies younger than 6 months. A baby less than 6 months has an immature digestive system. Foods or drinks other than breastmilk can cause damage to the baby's stomach. This makes it easier for HIV and other diseases to pass into the baby.

If you are HIV-positive it is still important to use a condom during sex. Being infected with HIV again increases the viral load in your body. When the viral load is high, it increases the chance of infecting your baby with HIV.



7. Delivery



Pregnant Women: Deliver at the health facility under the care of a trained health worker.

A trained health worker:

- Knows when complications are coming and can act quickly to save your life and the life of your baby.
- Can help you to keep your baby warm and to begin breastfeeding immediately following birth.

Hold your baby skin to skin immediately after delivery. Skin-to-skin contact with your baby:

- Helps the baby to stay warm and breathe well.
- Establishes a strong bond between you and your baby, and helps your baby feel secure.
- Encourages your baby to start breastfeeding immediately.

Beginning breastfeeding immediately after delivery has many benefits. It:

- Helps the baby to learn how to breastfeed.
- Reduces maternal bleeding.
- Helps the placenta to come out quickly.
- Helps to increase the production of breastmilk.
- Provides the baby with colostrum, which provides protection from illness.



8. Initiation of breastfeeding



Mother/Delivery attendant: Put the baby on the breast immediately after birth, even before the placenta is expelled.
Start breastfeeding within one hour.

Give your baby the first yellowish milk (colostrum). Colostrum:

- Protects the baby from illness.
- Fills the baby's small stomach and helps to pass the first dark feces.
- Helps the baby to develop well.

Waiting until your milk comes in before starting to breastfeed:

- Denies the baby the food the baby needs at birth.
- Can make breastfeeding more difficult.

Avoid giving water or other liquids to the baby. They are not necessary and are dangerous for a newborn.



9. How to put your baby on the breast



Mother: Put your baby on the breast properly to encourage the baby to feed well and to produce enough milk. Good attachment ensures that the baby breastfeeds without pulling on the nipples and causing painful breastfeeding, sores, and cracked nipples.

To position the baby on the breast well:

- Sit in a comfortable position.
- Support the baby's whole body, not just the head or neck.
- Ensure that the baby's stomach and body are in a straight line and facing you.
- Ensure that the baby can get to the breast without turning.

Signs of good attachment:

- The baby's mouth is wide open when breastfeeding.
- You can see more of the dark skin surrounding the nipple (areola) above the baby's mouth than below.
- The baby's lower lip is turned outward.
- The baby's chin is touching the mother's breast.

Signs that the baby is breastfeeding well:

- The baby takes slow, deep suckles with pauses in between.
- You see or hear the baby swallowing after 1-2 suckles.
- Suckling is comfortable, with no pain to the mother.
- The baby finishes breastfeeding from one breast, releases it, and looks content and relaxed.
- The breast is soft after the feed.

Allow the baby to finish breastfeeding from one breast and then switch to the second breast.



10. Exclusive breastfeeding



Mother: For the first six months, give the baby breastmilk only and nothing else, not even water. You may also give medicine prescribed by a health worker. Breastmilk is the perfect food for a baby.

Breastmilk:

- Has all the food and water your baby needs for the first six months of life.
- Has enough water to satisfy the thirst of your baby even during very hot weather.
- Has substances that protect your baby from common diseases and illnesses, such as diarrhea and respiratory infections.
- It is clean, safe, easy to digest, and readily available.

Giving other foods during this period:

- May cause your baby to suckle less and reduce milk production.
- May make it difficult for your baby to breastfeed.
- May cause the baby to become ill or not grow well.

Exclusive breastfeeding during the first six months of your baby's life protects you against another pregnancy if:

1. You have not started menstruating after delivery,
2. Your baby is less than 6 months old, and
3. Your baby is breastfeeding exclusively.

When you exclusively breastfeed your baby during the first six months and have no menses, you are practicing a family planning method called Lactational Amenorrhea Method or LAM. LAM no longer protects against pregnancy when even one of the three conditions above does not exist. Ask your health worker for information about other family planning methods.



11. Postnatal care



Mother: Go to the health facility for a follow-up check on the 6th day and at the 6th week after delivery. During these visits, the health worker will examine you and your baby and advise you on what you can do to maintain your health and that of the baby.

The services provided during these visits include the following:

- Weighing the baby and counseling you on how your baby is growing and how to care for the baby.
- Counseling on how to feed the baby.
- Immunizing the baby.
- Giving you vitamin A. Ensure that you take vitamin A within 45 days after delivery to protect you and your baby from diseases.
- Family planning counseling and services.
 - It is important to think about family planning options in order to have time for you and your baby to be healthy and grow strong. Healthy timing and spacing of pregnancy means waiting at least 2 to 3 years before becoming pregnant again. It is also best to wait until at least 6 months after stopping breastfeeding before becoming pregnant. Healthy timing and spacing of pregnancy allows you and your baby enough time to grow strong and healthy before becoming pregnant again too soon.



12. Nutrition for lactating mothers



Mother: Eat two extra meals a day when you are breastfeeding. Your body needs extra food each day. Even if you cannot eat an ideal diet, you are still able to make enough, good-quality breastmilk for your baby; however, failure to eat a variety of foods affects your health.

- Eat a variety of the following foods when you are breastfeeding:
 - Cereals (injera, bread, kolo, nifro, kita, rice)
 - Roots and tubers (potatoes, beetroots, onions, kocho)
 - Animal, fish, and poultry products (meat, fish, chicken, milk, eggs, liver)
 - Legumes (beans, peas, chickpeas, lentils)
 - Oils and fats (butter, cooking oil, nuts groundnuts, sesame, linseed)
 - Fresh fruits (ripe papaya, bananas, mango, oranges)
 - Vegetables (carrots, pumpkins, kale, cabbages, tomatoes)
- Drink plenty of water whenever you are thirsty.
- Avoid alcohol and smoking. Alcohol and cigarette smoking can harm the health of your baby.
- Avoid drinking tea and coffee during meals. Tea and coffee changes the way your body uses the food you eat. It is better to drink tea and coffee at least one or more hours before or after a meal.
- Take vitamin A tablets immediately after delivery or within 6 weeks of your baby's birth so that your baby receives vitamin A in your breastmilk to prevent illness.

Husband: Ensure that your wife who is breastfeeding eats two extra meals every day to recover her health and strength. Help her to eat a variety of locally available foods.



13. How to make enough milk



Mother: Almost every woman can make enough milk for her baby. Even women who are not eating enough or eating well can make enough milk for their baby and the quality of breastmilk is still the best for the baby.

- To make enough milk, breastfeed the baby whenever he or she wants, day and night. Your newborn should feed at least 8-12 times a day in order to grow well, and to help establish your breastmilk supply. After you feel that you have a good milk supply, continue to breastfeed 8 or more times a day.
- The amount of milk you make depends on how often the baby breastfeeds. More suckling (with good attachment) makes more breastmilk.
- Let your baby come off the first breast on his or her own before offering the other breast.
- Crying is a late sign of hunger. Early signs that your baby wants to breastfeed include:
 - Restlessness.
 - Opening mouth and turning head from side-to-side.
 - Putting tongue in and out.
 - Sucking on fingers and fists.
- If your baby is ill or sleepy, wake him/her to offer the breast often.
- Do NOT use bottles, teats, or spouted cups. They are difficult to clean and can cause your baby to become sick.
- Get extra support from family members in caring for your baby and other children, and for doing household duties.

Note:

If a mother is concerned about her baby getting enough milk, encourage the mother and build her confidence by reviewing how to attach and position the baby to her breast. Reassure her that her baby is getting enough milk when her baby is:

- Not visibly thin (or is getting fatter/putting on weight, if he or she was thin earlier).
- Responsive and active (appropriate for age).
- Gaining weight. Refer to the baby's health card (or growth velocity table if available). If you are not sure if the weight gain is adequate, refer the child to the nearest health facility.
- Passing light-colored urine six times a day or more. (However, one cannot use this sign if the baby is being given water, oral rehydration salts, or other liquids as well as breastmilk.)

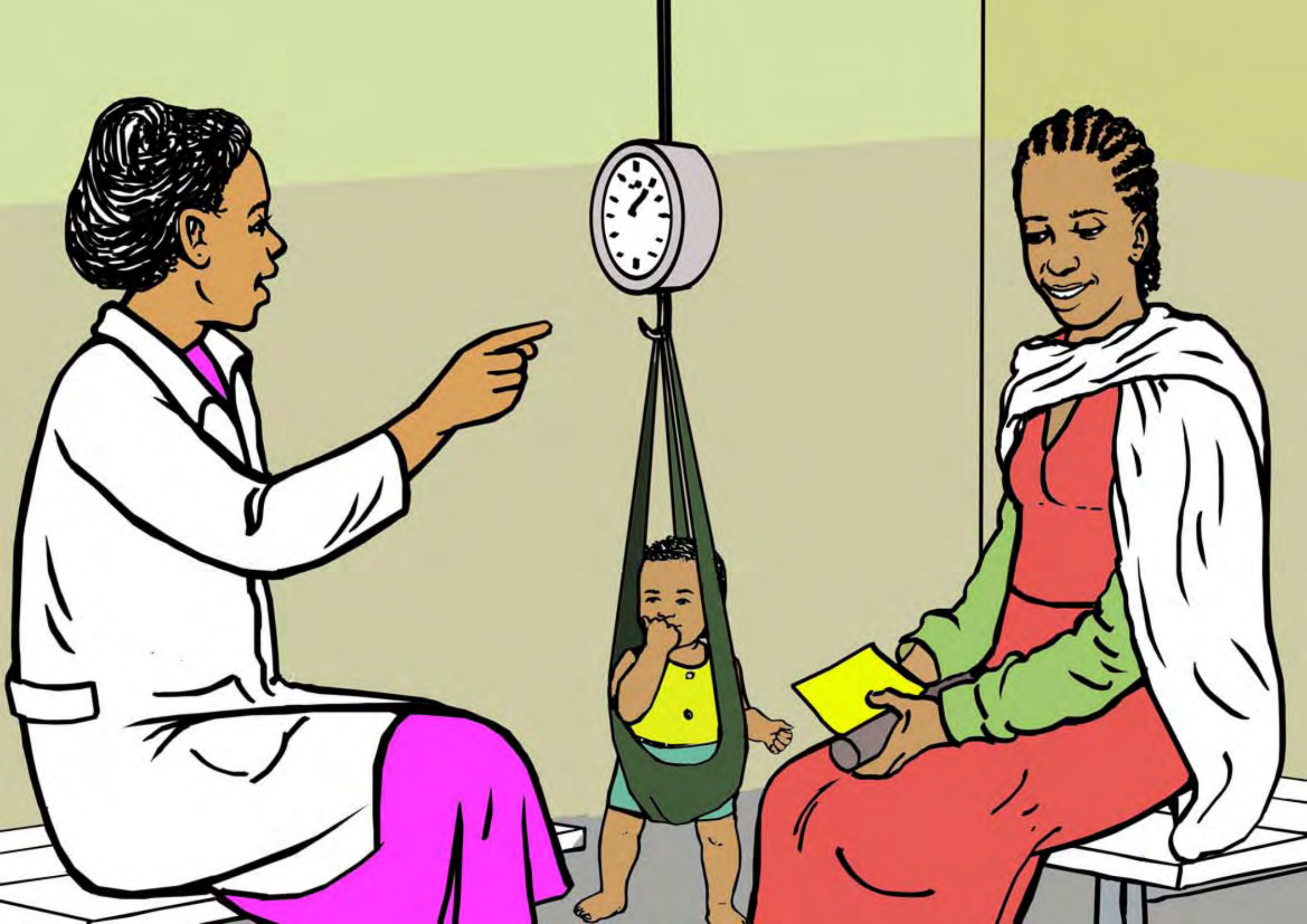


14. What to do when separated from your baby



Mother: If you have to be away from your baby because of work or social responsibilities, there are some things you can do to continue to provide breastmilk for your baby:

- Learn to express your breastmilk soon after your baby is born.
- Breastfeed exclusively and frequently for the whole period that you are with your baby.
- Express and store breastmilk before you leave your home so that your baby's caregiver can feed your baby while you are away.
- Express breastmilk while you are away from your baby, even if you cannot store it. This will keep the milk flowing and prevent breast swelling.
- Teach your baby's caregiver how to use a clean, open cup to feed your baby while you are away, and make sure they know the importance of washing the cup and other containers properly, and also washing their hands with soap before they feed the baby.
- Remember, expressed breastmilk (stored in a cool, covered place) stays in good condition for 8 hours, even in a hot climate.
- Take extra time for the feeds before separation from baby and when you return home.
- Increase the number of feeds while you are with the baby. This means breastfeeding more during the night and on weekends.
- If possible, carry the baby with you anytime you have to go out of the home for more than a few hours. If this is not possible, consider having someone bring the baby to you to breastfeed when you have a break.



15. Monitoring your child's growth



Parents: During the first two years, take your child to be weighed regularly, to know how the child is growing and gaining weight.

During weighing, the health worker will:

- Discuss with you how your baby is growing.
- Tell you if your baby has any health problems.
- Counsel you on what you can do to ensure the continued growth and development of your baby.



16. Immunization



Parents: Take your child for immunization to protect your child from diseases. Ensure that the child finishes all the immunizations before 1 year of age.

1st visit at birth or during the first contact within two weeks: The child receives the TB (BCG) and polio immunizations.

2nd visit, 6th week: The child receives the penta-1 vaccine dose. The child also receives the first Polio-1 immunization.

3rd visit, 10th week: The child receives penta-2 and the second polio immunization.

4th visit, 14th week: The child receives penta-3 and the third polio immunization.

5th visit, 9th month: The child receives the measles immunization, along with vitamin A supplementation.



17. The importance of vitamins A and D



Mother: Take vitamin A within 45 days after delivery. Taking vitamin A increases vitamin A in your breastmilk and protects your baby from diseases.

Vitamin A also:

- Strengthens your immune system and protects you from diseases.
- Protects the child's eyesight and strengthens the immune system.
- Helps your baby to grow and develop well.

Expose your child to sunlight for 20-30 minutes daily, in the morning and evening. The sun's rays help the body to develop vitamin D, which strengthens bones and will help your child to grow well.

Make sure that your child gets vitamin A capsules from the age of 6 months. You can obtain vitamin A capsules at the health facility, and give them to your child until 5 years of age.

After your baby is 6 months old, give foods rich in vitamin A. Foods rich in vitamin A include ripe yellow and orange fruits and vegetables such as carrots, mango, and papaya; kale; liver; and eggs.



18. Hygiene



Parents: Prepare your child's food in a clean way, on clean surfaces and in clean pots, plates, and cups. Feed your child using a clean cup/plate and spoon or your washed hands.

Wash your hands with water and soap or ash:

- Before preparing food for the baby or the family.
- Before feeding the baby.
- After cleaning the baby.
- After using the toilet.

Wash your child's hands with soap and water or ash before the child eats. Feed your child by cup and spoon or clean hands. Avoid using bottles and teats; they are difficult to clean. They easily carry germs that can cause diarrhea and other illnesses that can make your child sick.

Cover your child's food and keep it in a clean place. Prepare fresh food for every feed.



19. Appropriate complementary foods



Parents: At 6 months, start giving your child other foods as you continue breastfeeding, to help your child grow healthy and strong.

- Start with food that is as thick as or thicker than honey and increase the thickness as the child grows older. The porridge should be thick enough to stay on the spoon without running off. Thin gruel does not give a child enough nutrients.
- Give a variety of nutritious foods. Give 2-3 kinds of foods during each feeding. Add oil to the food to increase the energy content.
- Give adequate amounts to make the child full. Serve the child on a separate plate to ensure that he/she eats enough. This will also help you to know how much the child has eaten.

Babies/young children need to eat more food more often as they continue to grow. Feeding frequency increases as the age of the child increases.

- Between 6 and 8 months, a child needs 2-3 meals a day with 1-2 snacks.
- Between 9 and 23 months, a child needs 3-4 meals a day with 1-2 snacks.

Be patient and encourage your child to eat.

- Feed the child or sit with the child and encourage the child to eat by talking and singing songs.

Remember when you introduce complementary foods to your baby at 6 months, you are no longer practicing LAM. You will need to use another family planning method even if your menses have not yet returned. By avoiding another pregnancy too soon, you can help your baby to grow strong.



20. Give a variety of foods



Parents: Try to feed a variety of foods at each meal.

Give 2-3 kinds of food during each feeding, prepared from:

- Cereals (injera, bread, kolo, nifro, kita, rice)
- Roots and tubers (potatoes, beetroots, onions, kocho)
- Animal, fish, and poultry products (meat, fish, chicken, milk, eggs, liver)
- Legumes (beans, peas, chickpeas, lentils)
- Oils and fats (butter, cooking oil, sesame, groundnuts, linseed)
- Fresh fruits (ripe papaya, bananas, mango, oranges)
- Vegetables (carrots, pumpkins, kale, cabbages, tomatoes)

Animal-source foods are important and can be given to young children. Cook them well and chop them fine.

Use iodized salt.



21. How to feed a child 6-8 months



Parents: At 6 months, start giving your child complementary foods as you continue breastfeeding. Continue to breastfeed on demand at least 8 times day and night. Frequent feeding makes your child healthy and strong.

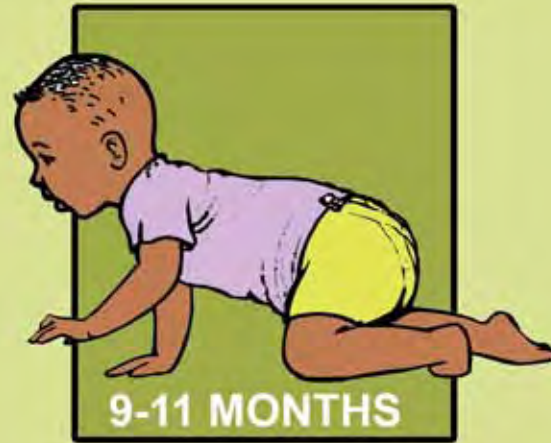
- Breastfeed the child first, then give other foods.
- Start with porridge as thick as honey or thicker.
- Increase thickness to semi-solid mashed foods as the child grows older.

Small children have small stomachs and can only eat small amounts at each meal, so feed your child many times in a day.

- Between 6 and 8 months, feed the child 2-3 times a day. Serve one buna cup of food at each meal.
- Give the child 1-2 snacks in between meals.

The meals should include a variety of foods, such as cereal porridge, bread, kita, enset (bula), fruits, vegetables, meat, milk, potatoes and sweet potatoes, beans, eggs, fish. Give 2-3 different kinds of foods at each feed.

- From 6 months, babies can eat a variety of foods as long as they are soft or pureed.
- Wash your hands and use a clean cup and spoon to feed your child.
- Store the child's food in a clean place.
- For a baby older than 6 months, a few sips of boiled or treated water from a clean, open cup can be offered after the child is full on breastmilk. Too much water can fill the baby up so he breastfeeds and eats less. Babies need the nutrition and calories in breastmilk to grow; water does not have these.



22. How to feed a child 9-11 months



Parents: At 6 months, start giving your child complementary foods as you continue breastfeeding. Continue to breastfeed on demand at least 8 times day and night. Frequent feeding makes your child healthy and strong.

Between 9 and 11 months, feed the child 3-4 times a day. Serve one buna cup of food at each meal. Give the child 1-2 snacks in between meals.

The meals should include a variety of foods, such as cereal porridge, bread, kita, enset (bula), fruits, vegetables, meat, milk, potatoes and sweet potatoes, beans, eggs, fish. Give 2-3 different kinds of foods at each feed.

- By 1 year, the baby is old enough to feed himself soft foods and foods and fruits cut in small pieces.
- Wash your hands and use a clean cup and spoon to feed your child.
- Store the child's food in a clean place.
- Give the child a few sips of boiled or treated water from a clean, open cup after the child is full on breastmilk or food. Too much water can fill the baby up so he breastfeeds and eats less.

Babies need the nutrition and calories in breastmilk to grow; water does not have these.



12-24 MONTHS



23. How to feed a child 12-23 months



Parents: By 1 year, a child is old enough to eat food eaten by everyone in the family.

The child needs 3-4 meals a day, plus 1-2 snacks. Serve 1-1.5 cups of family food per meal in a separate bowl.

- Cut the food in small pieces that the child can chew and swallow without difficulty.
- Continue to breastfeed until the child is 2 years or older.
- Use iodized salt to prepare food for both the family and the child.
- If the child wants, give small amounts of boiled or treated water after eating. Use a clean, open cup.
- Avoid giving your child sugary foods. Sugary foods spoil the teeth.
- Wash your child's hands with soap and water.



24. How to feed a sick baby from birth to 6 months



Mother: Breastfeed your baby more frequently when the baby is sick. It is important to feed your baby more often to help fight the illness, reduce weight loss, and recover quickly.

- Encourage the baby to breastfeed often.
- Continue to breastfeed your baby even if the baby is sick or has diarrhea.
- Express milk and give it to the baby if the baby is too weak to suck. Expressing will also help the milk supply to continue, and helps you to avoid breast problems.
- Take your baby to the nearest health facility for treatment when he/she is sick, has sores in the mouth, or the illness gets worse.
- Seek immediate help at the health facility if you have swollen breasts or cracked nipples.
- Give the baby only medicines recommended by a health worker. Breastfeed your baby even more frequently after the baby recovers from illness. This will help the baby to regain his/her health, weight, and growth.

When you are sick, you can continue to breastfeed your baby. You may need extra support and food during this time.



25. Feeding a sick child 6-23 months



Mother: Breastfeed your child more frequently when the child is sick. Give more food and liquids than usual. Your child needs more food and liquids when sick to make his/her body strong and able to fight the illness.

Encourage your child to eat small amounts many times a day:

- Give his/her favorite foods to encourage him/her to eat.
- Prepare the food in a way that will encourage the child to eat.
- Give foods that are easy to eat, such as thick porridge.
- Avoid giving food with spices.
- Continue to breastfeed and give food even when the child has diarrhea and is vomiting.
- If the child has diarrhea, give oral rehydration salts (ORS). Mix ORS according to the instructions on the packet.
- Take the baby to the nearest health facility for treatment if he/she is seriously sick, has sores in the mouth, or the sickness gets worse.

When your child gets better, encourage the child to eat an extra meal of solid food each day. This will help the child to gain the lost weight and to grow well again.

When you are sick, you can continue to breastfeed your baby. You may need extra food and support during this time.



ልጅሽ ስድስት ወር እስኪሞግጡ
የእናት ጡት ብቻ በቂ ነው!

26. Mother-to-child transmission of HIV



Mother: Take measures to protect your baby from HIV infection if you are HIV infected.

If an HIV-positive mother is breastfeeding, it is important for her to breastfeed exclusively for the first 6 months. Giving other liquids or foods puts your baby at greater risk of becoming infected with HIV while you are breastfeeding.

- Most babies born to women who are infected do not get infected with HIV.
- There is much that an HIV-positive woman can do to protect her baby from becoming infected, and when women take these actions, the risk of passing HIV is much lower.
- Exclusive breastfeeding up to 6 months of age and continuing breastfeeding with complementary feeding after 6 months will protect your child from HIV infection.
- HIV can be passed from a mother to her baby during pregnancy, childbirth, and breastfeeding. However, HIV-infected mothers who take measures to protect their babies from HIV infection have a very good chance of having an HIV-free baby.

If you are HIV-positive it is still important to use a condom during sex. Being infected with HIV again increases the viral load in your body. When the viral load is high, it increases the chance of infecting your baby with HIV.



27. Breastfeeding for HIV-positive mothers



Mother: If you are HIV positive and your baby is HIV negative or of unknown status, give your baby breastmilk **ONLY** for the first six months. Do not give anything else, not even water.

- Exclusive breastfeeding (giving **ONLY** breastmilk) for the first six months greatly reduces the chance of HIV passing from an HIV-infected mother to her baby, especially when both the mother and baby receive special medicines or antiretrovirals (ARVs).
- When an HIV-infected mother exclusively breastfeeds, her baby receives all the benefits of breastfeeding, including protection from diarrhea and other illnesses.

If you are an HIV-positive breastfeeding mother, it is important to:

- Seek immediate help from the health facility if you develop breast problems such as a breast abscess or sore or cracked nipples.
- Take ARVs to improve your health and prevent HIV transmission to your baby.
- Visit the health facility for continuous assessment of you and your baby.
- Introduce appropriate complementary feeding at 6 months and continue breastfeeding until 12-18 months.
- Stop breastfeeding at 12-18 months once a nutritionally adequate and safe diet without breastmilk can be provided.

HIV-positive mothers with HIV-positive babies:

HIV-positive mothers whose children are known to be HIV positive are advised to breastfeed their children exclusively in the same way as HIV-negative women:

1. Breastfeed exclusively for the first six months.
2. Introduce suitable complementary foods at 6 months of age.
3. Ensure that both the mother and child are on ARV drugs.