

# COMMUNITY HEALTH WORKER (CHW) TRAINING DIALOGUES FOR COUNSELLING ON COMPLEMENTARY FEEDING

## INTRODUCTION

### HOW TO USE THESE TRAINING DIALOGUES

This is a guide for CHW supervisors to help you use findings from Mtoto Mwerevu's research to support effective counselling. The steps in this guide will help you as help CHWs as they discuss (step 5 of negotiation) and recommend (step 6) practices people can try to improve the nutrition of their children. These new, detailed messages on complementary feeding are based on research in communities like theirs. Through using these guides, you will assist CHWs as they help families overcome challenges they may face when feeding their young children foods such as eggs, meat, fish, poultry, legumes, beans, nuts, vegetables, and fruits. It is important for you to review the details of these messages in advance so that you can explain them to CHWs.

During your monthly meetings with CHWs, they will:

- Discuss their own experiences;
- Hear more detailed messages about complementary feeding;
- Listen to success stories from families in communities like theirs; and
- Role play home visits using negotiation.

You should devote two hours of your monthly meetings with CHWs to these activities. You can use these guides to help families:

- Give children a variety of foods to eat (session 3);
- Encourage children to eat (session 4); and
- Give healthy snacks (session 5).

A separate guide includes the following modules:

- Breastfeed exclusively (session 1);
- Know what to do when babies cry (session 2).

During role plays, *one* CHW will play his or her own role as CHW. One or two CHWs will play the role of mother, father, and/or grandparent. The remaining CHWs will observe the role play. At the end, CHWs can ask questions about the role play and provide helpful feedback. During role plays, as CHW supervisors, please do not demonstrate how to conduct negotiation using these more detailed messages. Rather, let CHWs demonstrate and practise this on their own, as specified below. While this is happening, you can observe then provide feedback that is not judgmental.

Now have two CHWs demonstrate in front of the entire group role play #1, below (Baby Joseph). One CHW plays his or her own role as the CHW and the other CHW is the mother or father. After the role-play, you can use the discussion questions listed or others you think may be helpful to generate a discussion amongst CHWs.

Small groups of three will now role play simultaneously to give more opportunity for each CHW to play each of the three roles. Once 2-3 CHWs have completed the first role play and all CHWs have had the opportunity to discuss it, give every CHW the chance to role play. In smaller groups of three CHWs:

- One CHW plays the role of CHW;
- One CHW plays the role of mother, father (or other family member); and
- One CHW is the observer.

For this part of role playing, use the same case (#3, Baby Joseph). In your role plays, every CHW gets an opportunity to practise, in groups of three (CHW, mother or father, and observer). This way, every CHW learns together how to support families. As you role play in small groups of three, think about the demonstration you just saw with one CHW and one mother or father. What went well? What can be improved? Try to incorporate what you learnt into your own role play in groups of three.

As with the role play in plenary, after the role-play, you can use the discussion questions listed or others you think may be helpful to generate a discussion amongst CHWs.

Once you have finished role-playing one time in your small group of three, conduct a second role play with the CHW becoming the mother or father, the mother or father becoming the observer, and the observer becoming the CHW. Then discuss what went well and what could be improved. During the third role play, switch roles once again so that everyone has the opportunity to practise being a CHW.



*Note: Some CHWs may struggle with the basic steps of negotiation. If this is the case, discuss each step that is a challenge to them. Have the CHWs demonstrate a home visit, and give CHWs feedback, based on what you observe. Steps that may be particularly challenging for CHWs may include:*

- Spending enough time asking about the caregiver’s situation (step 2: Ask) before identifying recommendations the caregiver might try (step 4: Identify);
- Identifying then giving several recommendations the caregiver can try (step 4: Identify and step 6: Recommend), not just one;
- As part of step 6 (Recommend), asking caregivers what they understand each recommendation to be to make sure that they fully understand the actions presented to them (step 7: Agree);
- Recommending things caregivers can try (step 6: Recommend) before asking about, listening, and discussing the caregiver’s situation;
- Making sure the caregiver agrees to a practice (step 7: Agree) before setting up the next home visit; and
- Using the job aid that corresponds to the age of the child. This is particularly important!

### **WHAT DID WE LEARN FROM THE HOUSEHOLD TRIALS RESEARCH?**

Tell CHWs: Children were not being fed a diverse diet. Most children were fed grains and tubers.

- Almost half of children were fed *dagaa*, but it was very uncommon for children to be fed other animal-source foods like fish, eggs, meat, poultry, or animal milk.
- More than half of children were fed fruits and vegetables, but feeding yellow or orange fruits and vegetables, beans, and nuts was uncommon.
- It is difficult for many families to access a variety of foods because of the high cost and seasonal availability.
- The idea of a “balanced diet” was not well understood. Several parents thought giving a variety of grains made a porridge balanced. A balanced diet has a variety of different types of foods, like eggs, meat, fish, poultry, legumes, beans, nuts, vegetables and fruits.

## **SESSION 3: HELPING FAMILIES TO GIVE CHILDREN A VARIETY OF FOODS TO EAT. A GUIDE FOR CHW SUPERVISORS DURING MONTHLY MEETINGS WITH CHWS.**

### **STRATEGIES TO SUPPORT FAMILIES TO INCREASE DIETARY DIVERSITY.**

#### **1. What have CHWs experienced?**

CHW supervisors, begin by asking what CHWs have heard from families:

We know that after six months it is important for babies to start eating other foods in addition to breastmilk. It is recommended that babies eat a variety of different types of foods. Most babies eat grains and tubers. What do families tell you about the types of foods they are feeding their children from 6 – 12 months and from 12 – 24 months? What challenges do they face feeding their young children other foods such as eggs, meat, fish, poultry, legumes, beans, nuts, vegetables and fruits?

Be sure to give CHWs enough time to discuss the topic.

#### **2. What do families need to know?**

Tell CHWs:

- It is good for babies to eat a variety of foods to grow well and be healthy and smart. Examples of a variety of foods includes *dagaa*, fish, meat, egg, beans, nuts, and orange/yellow fleshed fruits and vegetables, in addition to grains and tubers and other fruits and vegetables.
- Babies only eat a small amount of food so it is important that those foods will help them grow well and be healthy and smart.

Together with all CHWs, read through and discuss the messages and other information on giving children a variety of foods to eat (see table 3). Keeping in mind the 8 steps of negotiation, make sure the CHWs understand and are able to discuss (step 5) the messages and why they are important, and recommend actions (step 6) for mothers and fathers. This information will be used in the role-plays discussed below.

### **3. Real experiences from families participating in household trials on complementary feeding**

Supervisors, share the following success stories from caregivers with your CHWs:

Families were willing to try feeding new foods, this included adding foods like eggs, nuts, beans and animal milk to porridge or giving children small pieces of meat or fish that were cut very small. Families reported that children liked eating the foods and their children looked healthier. Fathers were involved in feeding their children in different ways. Some fathers purchased foods specifically for their children, others fed their children directly, and a few shared food from their plates with their child.

#### ***Here are some success stories from mothers:***

A mother said: “I make nutritional porridge with maize, dagaa, ground nuts, beans, several things. The porridge is thick, because if you make it light, it is like nothing. A mother should make a thick porridge, fill the cup, and feed the child with a spoon.”

Another mother said: “I gave my child smashed cooked bananas and dagaa. I just prepared it and gave it to him but when I saw he liked it I continued trying. Then, I mixed the cooked bananas with fish and again with beef. The results are great! He liked it and got used to it quickly. I see him having good health; he has a good body. Now he has grown plump.”

#### ***Here are some success stories from fathers:***

A father said: “When I got money, I thought I have a son that I should buy fish for, at least to boost his appetite. So, I bought fish and gave it to his mother to prepare for him and turns out he liked fish most.”

Another father said: “I prepared maize, searched for soya, I searched for millet. We went to grind. It is me who went and prepared and ground and bought those foods that had to be bought. At the time of cooking for him we added egg and small fish. I added some groundnuts because I had a little.”

A father said: “When they prepare the food for me, I invite my son. He comes and we eat from the same plate together. I have been doing this almost every day since it was recommended to me. It makes me happy. At first, my son was not used to it. When I used to invite him, he used to refuse until when he got used to it. Others in my family are happy seeing me eating with my child. Some fathers may not want to try this because small children have a tendency to get food on you and smothering you with food; but when they come to my house and see how I eat with my child, then they will learn from there on. The child sees that he is not segregated and he also likes it. I will continue because the child will learn how to feed himself and he will feel loved by each parent.”

**TABLE 3: RECOMMENDATIONS TO HELP FAMILIES FEED A VARIETY OF FOODS, USING THE 8 STEPS OF NEGOTIATION**

During negotiation, *discuss* the following messages, *recommend* 2-3, and help the mother or other family member pick 1-2 and agree to try them.

NEGOTIATION STEP 5: DISCUSS		NEGOTIATION STEP 6: RECOMMEND	
MESSAGE	WHY THIS IS IMPORTANT	FOR MOTHERS	FOR FATHERS
The child needs to eat eggs, fish, dagaa, or other meat as often as possible.	<ul style="list-style-type: none"> <li>From 6 months of age, young children can eat well-cooked and finely-chopped eggs and mashed meat and fish, even if they don't have teeth.</li> <li>Eggs, meat, fish and <i>dagaa</i> are very important to help children grow well and be healthy.</li> <li>Your baby's stomach is ready to digest foods like eggs or meat. You can ensure that your baby can safely swallow those foods by mashing them, chopping them finely, or making powder of dried meat.</li> </ul>	<ul style="list-style-type: none"> <li>Give your child fish, <i>dagaa</i>, or other types of meat, which can be minced using a mortar (<i>kinu</i>) or chopped finely with a knife.</li> <li>Give your child cooked eggs to eat.</li> <li>Give your child fish, <i>dagaa</i>, or other types of meat as early and as often as possible.</li> <li>Save some of the food you raise that you would normally sell (like eggs, milk, fish, chicken) and keep it for your baby.</li> </ul>	<ul style="list-style-type: none"> <li>Give your wife money to buy eggs, fish, <i>dagaa</i>, or other meat for your baby.</li> <li>Buy eggs, fish, <i>dagaa</i>, or other meat to give to your baby.</li> <li>Save some of the food you raise that you would normally sell (like eggs, milk, fish, chicken) and keep it for your baby.</li> <li>Reassure your wife (and other family members) that the child can eat meat, fish, and other family foods that are mashed well.</li> <li>Share food from your plate, including meat, fish, eggs, etc. with your child.</li> </ul>
The child needs to be fed a variety of foods.	<ul style="list-style-type: none"> <li>After 6 months and as the child grows older, he/she can eat well-cooked and finely-chopped eggs, meat and fish even if s/he does not have teeth.</li> <li>At this age, your baby is old enough to eat all family foods that are mashed and well-cooked.</li> <li>When your baby eats a variety of foods, it is good for your baby to grow well and be healthy and smart.</li> <li>Your baby will enjoy new tastes.</li> <li>Your baby will feel satisfied longer, will cry less, and allow the mother and father to do their work.</li> <li>In addition to breast milk and specially prepared foods (like porridge), family foods (like fish, meat, egg, and beans) help children to grow well and be healthy.</li> </ul>	<ul style="list-style-type: none"> <li>Offer family foods, including eggs, meat, fish, <i>dagaa</i>, vegetables, beans. These foods can be chopped and mashed so they are easy for the child to swallow.</li> <li>When feeding family foods, do not only give the broth/sauce. Be sure to give the thick parts (meat, fish, <i>dagaa</i>, vegetables, beans, peas).</li> <li>Give potatoes, yams, bananas, plantains, cassava and rice mixed with sauce and meat, fish, <i>dagaa</i>, beans, chicken, or peas.</li> <li>Vegetables can be pounded or mashed after cooking and given to your child.</li> <li>Fruits that are cut in small pieces or mashed/pounded can be a good snack.</li> <li>Save some of the food you raise that you would normally sell (like eggs, milk, fish, chicken) and keep it for your baby.</li> <li>Share food from your plate, including meat, fish, eggs, etc. with your child.</li> </ul>	<ul style="list-style-type: none"> <li>Give your wife money to buy different kinds of foods for your baby (such as eggs, fish, <i>dagaa</i>, vegetables, nuts, beans, milk, meat).</li> <li>Buy different kinds of foods for your baby (such as eggs, fish, <i>dagaa</i>, vegetables, nuts, beans, milk, meat).</li> <li>Save some of the food you grow or raise that you would normally sell (eggs, milk, fish, chicken, vegetables) and keep it for your baby.</li> <li>Reassure your wife (and other family members) that the child can eat meat, fish, vegetables, beans, nuts, and other family foods that are mashed well.</li> <li>Help your wife with her other chores so that she has time to prepare meals with a variety of foods for your child.</li> <li>Share food from your plate, including meat, fish, eggs, etc. with your child.</li> </ul>

#### 4. Role play: Practise counselling families on giving a variety of food

For the role play session, please remember to have CHWs learn by acting out roles of CHWs and family members, observing each other, and sharing ideas to improve negotiation with families on giving a variety of food. Encourage those acting as family members to raise challenges and not be too agreeable! Role plays should be as realistic as possible.

##### ROLE PLAY #1: BABY JOSEPH

The **CHW** should follow the 8 steps of negotiation:

1. Greet the mother and father with respect;
2. Ask them about current caregiving practices;
3. Listen to their problems or concerns;
4. Identify a few messages to share with the mother and father, based on their situation (see table 3);
5. Discuss each of the practices (table 3);
6. Recommend 2 or 3 of the practices parents can try (table 3);
7. Ask the parents to agree to practise 1-2 of these behaviours; Ask what might make it easy or difficult to try them;
8. Set up an appointment for a return visit at which time you can ask the mother and father how things have gone.

##### CHWs:

Do not read the scenario for mothers and fathers in advance; In your first few practices, please consult table 3. When you feel comfortable with the recommendations in table 3, you don't need to refer to it in subsequent role plays; and remember to have the mother or father tell you what you have learnt. When family members "teach back" what they have learnt about new practices, you can be sure that they understand the practices that they have agreed to try.

The **mother** and **father** read the scenario below and act their parts, per the scenario.

Baby Joseph is 11 months old. His mother is breastfeeding and also feeds him porridge, vegetables, and beans. Papa Tumaini is a fisherman, and the family often eats fish, but they do not think Joseph can eat fish at such a young age, so they often just give him the broth that the fish is cooked in. The family does not usually have eggs or meat. They sometimes have peanuts.

**Observers:** Watch how the CHW identifies problems, concerns, and negotiates a solution.

CHW supervisors: after the role-play, it is very important to discuss what the group learnt. Do this in a supportive way, not blaming anyone for mistakes. Remind CHWs that role-playing is just a way to practise and learn from each other!

CHW supervisors: first ask for comments from the group. Some ideas for possible questions after the role play are as follows:

For the CHW, how did it feel to deliver the new messages? What worked well? What was difficult? What needs more practice? Did the family ask questions that you did not know how to answer?

For the mother or father, what did the CHW do well? Were the messages clear? Did the CHW address your concerns? Did you feel comfortable asking the CHW questions?

For observers, how did the CHW try to build rapport with family members and was it successful? How did the CHW try to understand the family situation and help them with challenges? For example, did the CHW find out about the foods that the family had access to? What suggestions do you have for CHWs? Has this situation ever come up for you during your home visits? What did you do?

## SESSION 4: HELPING FAMILIES TO ENCOURAGE CHILDREN TO EAT. A GUIDE FOR CHW SUPERVISORS DURING MONTHLY MEETINGS WITH CHWS.

*Strategies to support families to practise responsive feeding*

### 1. What have CHWs experienced?

CHW supervisors, begin by asking CHWs: what have you heard from families about how they feed their children or encourage them to eat? What are some of the challenges families face?

### 2. What did we learn from the household trials research?

Tell CHWs:

- Many parents had challenges getting their young children to eat the food that was offered.
- Some mothers reported that children refused to eat certain foods or that children would spit out foods that were offered.
- Although this was a common challenge, very few families tried encouraging their children to eat more. But amongst those who did, they reported that encouraging their children to eat resulted in their children eating more.

### 3. What do families need to know?

Tell CHWs: Feeding times are periods of learning and love. It is recommended that caregivers talk to babies and young children during feeding, are patient, feed slowly, and encourage him/her to eat, but without force. Read through and discuss the messages and other information on encouraging the child to eat. Keeping in mind the 8 steps of negotiation, make sure the CHWs understand and are able to *discuss* the messages (step 5) and why they are important, and *recommend* actions (step 6) for mothers and fathers. This information will be used in the role-plays discussed below.

### 4. Real experiences from families participating in household trials on encouraging the child to eat

CHW supervisors, share the following success stories from mothers who tried these recommendations:

A mother said: “The thing that I liked was that the child ate food that she didn’t usually eat. I felt so happy and amazed because even when I don’t have money, I know that if I prepare this food and sing to the child when I’m giving it to her, she will eat and like it. I have seen that when I feed her and praise and clap and show her that I am happy, it has helped her to eat all of the food that she is given.

A father said: “I tried being at home during meal times so that I could eat together with my child and encourage him. I made it seem like a game and that he should like whatever he is eating. Even when I am not around, others in my family can do it.”

Another father said: “I enjoyed sitting and playing with my child when I’m home from work. If she’s here at home, I play with her. I tell her sweet stories. My wife says that I should continue playing with my child after I come home from work, so that my child can eat happily.”

**TABLE 4: RECOMMENDATIONS TO HELP FAMILIES ENCOURAGE THEIR BABIES TO EAT**

During negotiation, *discuss* the following messages, *recommend* 2-3, and help the mother or other family member pick 1-2 and agree to try them.

NEGOTIATION STEP 5: DISCUSS		NEGOTIATION STEP 6: RECOMMEND	
MESSAGE	WHY THIS IS IMPORTANT	FOR MOTHERS	FOR FATHERS
Be patient and actively encourage the child to eat	<ul style="list-style-type: none"> <li>Feeding times are a chance for the child to learn. Talk with the child about the names of foods and utensils, how things are bigger or smaller, how the food tastes, and colors or numbers.</li> <li>The child may need time to get used to eating foods other than breast milk.</li> <li>Infants and young children may need help to ensure that they eat enough. Feeding the child new foods may require active care and encouragement.</li> <li>Pay attention to the child’s signs for hunger and to encourage the child to eat new foods.</li> <li>Allowing children to touch and pick up their food and feed themselves helps develop coordination and improve movement.</li> </ul>	<ul style="list-style-type: none"> <li>Be patient and encourage your child to eat by sitting with your child and smiling, laughing, and talking to them</li> <li>Don’t force your child to eat. Feed slowly, and talk to the child during feeding, with eye-to-eye contact.</li> <li>Praise the child for trying new foods or eating all that is offered.</li> <li>If the child refuses a food, keep trying. It can take time to get used to new foods (7-8 times of trying a new food).</li> <li>If the child is distracted, feed in a calm place, and try to limit distractions during meals.</li> <li>Offer foods that your child can pick up with her/his fingers and feed herself/himself (sweet potato, bananas, slices of fruits, beans, and other foods cut into small pieces)</li> <li>Make feeding time a fun time with games, songs, and stories that encourage your child to eat.</li> </ul>	<ul style="list-style-type: none"> <li>Encourage your child to eat more. Offer soft/mashed foods off of your own plate.</li> <li>Talk with your children about their food and praise them for eating well.</li> <li>Help your wife with her other chores so that she has time to encourage your child to eat more at each meal.</li> <li>Help your wife with feeding your baby when she has too many tasks to do.</li> <li>Encourage your child to eat more by making it into a game. You can pretend the food is a truck or other vehicle that has to make a delivery into the child’s mouth.</li> <li>Help your wife by feeding your baby. You can make feeding fun by playing games and telling stories that encourage your baby to eat.</li> </ul>

## 5. Role play: Practise counselling families on responsive feeding

For the role play session, please remember to have CHWs learn by acting out roles of CHWs and family members, observing each other, and sharing ideas to improve negotiation with families on responsive feeding. Encourage those acting as family members to raise challenges and not be too agreeable! Role plays should be as realistic as possible.

### ROLE PLAY #2: BABY NINA

The **CHW** should follow the 8 steps of negotiation:

1. Greet the mother and father with respect;
2. Ask them about current caregiving practices;
3. Listen to their problems or concerns;
4. Identify a few messages to share with the mother and father, based on their situation (see table 4);
5. Discuss each of the practices (table 4);
6. Recommend 2 or 3 of the practices parents can try (table 4);
7. Ask the parents to agree to practise 1-2 of these behaviours; Ask what might make it easy or difficult to try them;
8. Set up an appointment for a return visit at which time you can ask the mother and father how things have gone.

#### CHWs:

Do *not* read the scenario for mothers and fathers in advance;

In your first few practices, please consult table 4. When you feel comfortable with the recommendations in table 4, you don't need to refer to it in subsequent role plays; and

*Remember to have the mother or father tell you what you have learnt.* When family members “teach back” what they have learnt about new practices, you can be sure that they understand the practices that they have agreed to try.

The **mother** and **father** read the scenario below and act their parts, per the scenario.

Baby Nina is 10 months old. Nina's mama is breastfeeding and feeding the baby porridge. Mama tried giving the baby egg, but the baby would spit it out and refuse to eat it. She tried a second time, but it seemed like the baby was throwing up. Her mother-in-law and husband suggested waiting until the baby is older. If asked, the family would be willing to try talking, singing, and other ways to encourage the child to eat. The father is often home in the evenings when the mother is feeding the baby.

**Observers:** Watch how the CHW identifies problems, concerns, and negotiates a solution.

CHW supervisors: after the role-play, it is very important to discuss what the group learnt. Do this in a supportive way, not blaming anyone for mistakes. Remind CHWs that role-playing is just a way to practise and learn from each other!

CHW supervisors: first ask for comments from the group. Some ideas for possible questions after the role play are as follows:

For the CHW, how did it feel to deliver the new messages? What worked well? What was difficult? What needs more practice? Did the family ask questions that you did not know how to answer?

For the mother or father, what did the CHW do well? Were the messages clear? Did the CHW address your concerns? Did you feel comfortable asking the CHW questions?

For observers, how did the CHW try to build rapport with family members and was it successful? How did the CHW try to understand the family situation and help them with challenges? For example, did the CHW find out about the foods that the family had access to? What suggestions do you have for CHWs? Has this situation ever come up for you during your home visits? What did you do?

## SESSION 5: HELPING FAMILIES TO GIVE HEALTHY SNACKS. A GUIDE FOR CHW SUPERVISORS DURING MONTHLY MEETINGS WITH CHWs.

*Strategies to ensure children receive healthy foods and snacks.*

### 1. What have CHWs experienced?

CHW supervisors, tell CHWs: After 6 months, babies and young children should be fed a variety of healthy foods. But it is becoming more common for babies to also receive sugary snacks and drinks, like biscuits, sweets, and drinks with sugar. CHW supervisors, ask CHWs: What do families tell you about giving biscuits, sweets, and sugary drinks? What are some of the challenges families face?

Be sure to give CHWs enough time to discuss the topic.

### 2. What did we learn from the household trials research?

Tell CHWs:

- More than half of babies had been fed sugary snacks in the week before our first visit with them.
- Many babies were given coffee or tea with sugar, juices with sugar added, or soda.
- All parents who agreed to try replacing sugary snacks with healthy snacks reported making this change.

### 3. What do families need to know?

Tell CHWs:

Parents should avoid giving their child sugary snacks (like biscuits and sweets) and sugary drinks (such as tea, coffee and soda) because these drinks have low nutrient value and decrease the child’s appetite for more nutritious foods. Read through and discuss the messages and other information on giving children healthy snacks. Keeping in mind the 8 steps of negotiation, make sure the CHWs understand and are able to *discuss* the messages (step 5) and why they are important, and *recommend* actions (step 6) for mothers and fathers. This information will be used in the role-plays discussed below.

### 4. Real experiences from families participating in household trials on giving children healthy snacks

CHW supervisors, tell CHWs: Parents were happy to replace sugary snacks with healthy snacks because they understood that sugary snacks did not benefit their child’s health.

#### CHW supervisors, share the following success stories from mothers:

One mother said: “I liked that recommendation to stop giving sweets and biscuits because those things are harmful. Sweets and biscuits have too much sugar which is not good for the baby. They can cause decaying of teeth. My family members agreed and said it is not good to give the baby sweets and biscuits.”

Another mother said: “I tried not giving the biscuits or sweets, and instead I gave her fruits. I gave her bananas. Sweets have nothing. I didn’t encounter any difficulty.”

#### Here are some success stories from fathers:

One father said: “I educated the family members not to give the baby biscuits. I educated them that the foods that we give the baby, for instance tinned juice, soda, and biscuits are not healthy for the child.”

Another father said: “As soon as I was informed and realised that biscuits are not healthy for children, I stood up and started educating my family that this food is bad for children and we made changes. They asked me what the child can eat. I advised them on fruits like papaws, watermelon, cucumber, mangoes and oranges, but things with much sugar like biscuits are not good.”

**TABLE 5: RECOMMENDATIONS TO HELP FAMILIES FEED HEALTHY SNACKS AND DRINKS**

During negotiation, *discuss* the following messages, *recommend* 2-3, and help the mother or other family member pick 1-2 and *agree* to try them.

NEGOTIATION STEP 5: DISCUSS		NEGOTIATION STEP 6: RECOMMEND	
MESSAGE	WHY THIS IS IMPORTANT	FOR MOTHERS	FOR FATHERS
Replace sweet snacks and sugary drinks with healthy snacks and drinks	<ul style="list-style-type: none"> <li>Sweet snacks and sugary drinks do not give your child important nutrients. Fruits and other snacks will help the child feel satisfied longer, cry less, and allow the mother and father to do other work.</li> <li>If the child eats too many sweet snacks, he/she may not feel hungry at meal time.</li> </ul>	<ul style="list-style-type: none"> <li>Avoid giving a baby tea, coffee, soda and sugary or colored drinks. Offer milk or breastfeed instead.</li> <li>Avoid giving sugary biscuits and other snacks; give fruits (such as pieces of ripe mango, papaya, banana), avocado, vegetables, boiled Irish potatoes, sweet potatoes.</li> </ul>	<ul style="list-style-type: none"> <li>Only buy nutritious foods for your baby, do not buy sugary snacks, biscuits, or sweetened drinks and ask others not to feed these foods to your child.</li> </ul>



## 5. Role play: Practise counselling families on healthy snacks and drinks

For the role play session, please remember to have CHWs learn by acting out roles of CHWs and family members, observing each other, and sharing ideas to improve negotiation with families on giving healthy snacks and drinks. Encourage those acting as family members to raise challenges and not be too agreeable! Role plays should be as realistic as possible.

### ROLE PLAY #1: BABY STANLEY

The **CHW** should follow the 8 steps of negotiation:

1. Greet the mother and father with respect;
2. Ask them about current caregiving practices;
3. Listen to their problems or concerns;
4. Identify a few messages to share with the mother and father, based on their situation (see table 5);
5. Discuss each of the practices (table 5);
6. Recommend 2 or 3 of the practices parents can try (table 5);
7. Ask the parents to agree to practise 1-2 of these behaviours; Ask what might make it easy or difficult to try them;
8. Set up an appointment for a return visit at which time you can ask the mother and father how things have gone.

### CHWs:

Do not read the scenario for mothers and fathers in advance;

In your first few practices, please consult table 2. When you feel comfortable with the recommendations in table 2, you don't need to refer to it in subsequent role plays; and

Remember to have the mother or father tell you what you have learnt. When family members "teach back" what they have learnt about new practices, you can be sure that they understand the practices that they have agreed to try.

The **mother** and **father** read the scenario below and act their parts, per the scenario.

Baby Stanley is 14 months old, and is the youngest of three children. Stanley's mama is breastfeeding and Stanley eats family foods, though sometimes he does not seem to be very hungry for the evening meal. Papa will often bring home sweets and biscuits to the children when he arrives home in the evening after working. Name enjoys eating biscuits, and Papa likes to see Stanley eating them.

**Observers:** Watch how the CHW identifies problems, concerns, and negotiates a solution.

CHW supervisors: after the role-play, it is very important to discuss what the group learnt. Do this in a supportive way, not blaming anyone for mistakes. Remind CHWs that role-playing is just a way to practise and learn from each other!

**CHW supervisors: first ask for comments from the group. Some ideas for possible questions after the role play are as follows:**

For the CHW, how did it feel to deliver the new messages? What worked well? What was difficult? What needs more practice? Did the family ask questions that you did not know how to answer?

For the mother or father, what did the CHW do well? Were the messages clear? Did the CHW address your concerns? Did you feel comfortable asking the CHW questions?

For observers, how did the CHW try to build rapport with family members and was it successful? How did the CHW try to understand the family situation and help them with challenges? For example, did the CHW find out about the foods the child was eating? What suggestions do you have for CHWs? Has this situation ever come up for you during your home visits? What did you do