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Ages and Stages Reference Package

# How to Support Integrated Responsive Care, Early Learning, and Exclusive Breastfeeding Practices

Module I: Birth Up to 6 Months of Age



## Ages and Stages Reference Package

**Purpose:** Support the design and implementation of integrated nutrition and responsive care and early learning programming based on the age and stage of a child.

**Audience:** USAID implementing partners seeking to integrate responsive care and early learning into their nutrition programming.

### About USAID Advancing Nutrition

USAID Advancing Nutrition is the Agency's flagship multi-sectoral nutrition project, led by JSI Research & Training Institute, Inc. (JSI), and a diverse group of experienced partners. Launched in September 2018, USAID Advancing Nutrition implements nutrition interventions across sectors and disciplines for USAID and its partners. The project's multi-sectoral approach draws together global nutrition experience to design, implement, and evaluate programs that address the root causes of malnutrition. Committed to using a systems approach, USAID Advancing Nutrition strives to sustain positive outcomes by building local capacity, supporting behavior change, and strengthening the enabling environment to save lives, improve health, build resilience, increase economic productivity, and advance development.

### Disclaimer

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In addition, please note this resource is not affiliated or associated with the early childhood development screening tool Ages & Stages Questionnaires (ASQ).

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**Reminder:** Please review the *Ages and Stages Program Design and Implementation Guide* before using this module for the first time.

## Overview of a Child's Development and Feeding Needs at This Stage



During this stage, a child is welcomed into the world and will ideally experience rapid physical, cognitive, and developmental growth. The child is getting to know the outside world—including their family.

At birth, children can see short distances and can hear their families' voices, so engaging with the infant through touch, sight, and sound is an important way to connect with the child and to help them develop. Everyday actions like smiling at the child, cooing, singing, talking, and telling them stories are all important ways to help the child learn and grow. Key early essential newborn care practices at birth, including skin-to-skin contact, zero separation of the mother and child, and **early initiation of breastfeeding** (within one hour of birth), are important ways to provide [nurturing care right from the start](#) (WHO & UNICEF 2021).

Following early initiation of breastfeeding, children should continue with **exclusive breastfeeding**

throughout the period (meaning no other liquids or foods, only breast milk). All the nutrition a child needs at this age comes from breast milk. Breastfeeding not only provides children with all the nutrition they need but also helps strengthen the mother-child bond by creating opportunities for the child to look at mom and for mom to nurture the child during breastfeeding.

Children do not need solid foods at this age. In fact, at this stage, children have a strong thrust reflex to push solid foods out to prevent choking, indicating they are not yet ready for those foods. Therefore, ensuring the child is breastfeeding well is important. A child should be breastfed on demand, typically 8–12 times per day during this early stage. If the child is breastfeeding correctly, you should be able to hear swallowing and see rhythmic throat movement, indicating they are eating well. The child should be content and happy after a feed, releasing the breast on their own. The breast should feel soft and less full after a successful feed. The child should finish on one breast before switching to the other to ensure they receive both the nutritious foremilk and hindmilk. Signs that the child is eating enough breast milk include gaining weight and passing light-colored urine at least six times a day. Signs of hunger include opening and closing the mouth, moving fists to the mouth, and looking for the breast. Crying is a late sign of hunger. By the end of this stage, infants may start showing an interest in other foods aside from breast milk. At six months of age, the child is physiologically ready to begin complementary foods, and caregivers should begin to think about adding food to a child's diet.

## What Are Signs of Healthy Growth and Development?

### Healthy Growth

Adequate increases in weight and length, according to the child's sex and age, are indicators of healthy growth during this stage. Caregivers should assess their child's growth during regular visits with health providers to ensure the child is growing optimally every month and not becoming malnourished. Regular growth-monitoring visits are also an opportune time to discuss the child's developmental milestones with a health provider.

#### BOX 1. THINGS TO WATCH FOR BY SIX MONTHS OF AGE:

While children develop at different paces, caregivers should speak with health providers if their child displays the following behavior at six months:

- Child doesn't show affection to parents or caregivers.
- Child won't respond to nearby sounds.
- Child doesn't laugh.
- Child has a hard time getting things into their mouth.
- Child doesn't make vowel sounds.
- Child seems too floppy or too stiff.
- Child can't roll over in either direction.
- Child doesn't attempt to grab objects nearby.

*Source: UNICEF n.d.*





## Infant Development

A child tells their caregiver what they need through cues (i.e., using sounds, facial expressions, and body movements). Cues that the child wants the caregiver's attention include wide-open eyes, being alert, looking toward the caregiver's face or toward someone who is talking, sucking on fists or objects, clasp hands or feet together, and grasping onto a finger or an object.

During this stage, most children will reach key physical, language, cognitive, and social-emotional developmental milestones. At the beginning of this stage (zero to two months), this includes working to hold their head up for a few seconds and then for a longer time, pushing themselves up to the prone position, moving their hands toward the center of the body, attempting to turn toward sounds, following things with their eyes, and smiling back at a caregiver. By the end of this stage, at six months of age, most children can sit with support, roll over, hold toys or objects, laugh and respond with sound when the caregiver talks, make responses to face-to-face play, and show recognition and preferences for caregivers by reaching, smiling, and inspecting their faces.

### BOX 2. MALNUTRITION'S IMPACT ON CHILD DEVELOPMENT

Malnutrition negatively impacts a child's growth and development by affecting their brain development and influencing their behavior. Malnourished children often have less energy and interest in playing and interacting with their environment, limiting their learning from the world around them. In addition, malnourished children may be more fussy and irritable, resulting in less responsive or negative interactions with their caregivers. In contrast, well-nourished children may be more active and demand greater attention and responsiveness from their caregivers. Lastly, malnourished children may also be harder to feed, resulting in the provision of less food and feeding in a less responsive manner. All of these factors contribute to malnourished children often reaching their developmental milestones at a slower pace than their healthy peers.

*Source: Maalouf-Manasseh, Oot, and Sethuraman 2015.*

## Common Caregiver Challenges at This Stage

Initiating and continuing breastfeeding can be difficult for many mothers, as breastfeeding takes knowledge, practice, time, and energy. Initiating breastfeeding (getting a good latch on the breast) can be difficult, especially for first-time and adolescent mothers, and feeding a child on demand (10–12 times throughout the day and night) is both physically and mentally tiring for mothers. During a growth spurt, children may also want to feed more often than 10–12 times per day. This is normal and helps to increase the mother's supply as

the child's need for breast milk increases as they age. However, this can be a particularly stressful time for mothers due to the increased feeding demands, and often mothers perceive they do not have sufficient breast milk. Mothers need guidance, support, and encouragement to breastfeed optimally and take care of their own needs. Furthermore, interacting with a young child may not be natural for some caregivers, and caregivers can feel stressed about finding time each day to interact with their child. Caregivers will need guidance and encouragement to interact with their children. Family engagement (from fathers, grandparents, etc.) is important to support mothers by reallocating household chores and responsibilities so mothers have time to breastfeed and interact with their children. Family engagement with the child, even at this young age, is critical to ensure the child receives the love, stimulation, and support they need to grow optimally. Individual home visits/counseling sessions and group sessions (see below) can be particularly helpful for problem solving and discussing local solutions to these challenges.





### BOX 3. PRIMARY CAREGIVERS NEED SUPPORT

Primary caregivers, typically mothers, rarely make infant feeding and care decisions alone, and they need support from other caregivers in the home (including fathers, grandmothers, grandfathers, aunts, etc.) as well as key influencers in their community to provide optimal care. A mother's ability to practice optimal feeding and care behaviors is influenced by household, community, and socio-cultural factors. For example, a mother may wish to exclusively breastfeed her four-month-old infant. However, her mother-in-law may disagree, fearing the child will die of thirst without water. These household dynamics impact feeding and care behaviors and can be stressful for caregivers. For more information on **factors that influence feeding and nurturing care behaviors** and how to **support primary caregivers**, see the *Program Design and Implementation Guide* and resources available in the online toolkit.

- Interact with the child throughout the day, including smiling at them; singing, talking, and reading to them; or telling them stories.
- Play with the child in age-appropriate ways.
- Identify developmental delays.
- Find time to rest and take care of their own needs.
- Recognize and appropriately respond to the child's cues in a timely manner.



Think through activities that will best address barriers and enablers from your behavioral analysis and, if indicated, consider using approaches shared in the Program Design and Implementation Guide (i.e., individual- and group-level activities). More information on these behaviors can be found in the Responsive Care and Early Learning (RCEL) Addendum and The Community Infant and Young Child Feeding (C-IYCF) Counselling Package (see “Additional Resources” below) and in Annex A, which provides illustrative examples of individual or group RCEL-specific activities that can be integrated with existing IYCF programming (USAID Advancing Nutrition 2023a; UNICEF 2012a).

### BOX 4. IMPLEMENTATION REMINDER

To effectively implement the suggested activities, program implementers need training, in-service support (i.e., mentorship or supportive supervision), relevant materials, and manageable workloads—ensuring that implementers have the capacity, resources, and time to implement quality activities.

Implementers should conduct activities on a consistent basis and with enough frequency to address a child's transient needs during this early stage of life. See the *Program Design and Implementation Guide* section on “Frequency of Activities” for more guidance on how and when to provide activities.

For **individual** activities, implement the five steps of counseling: 1) Welcome caregiver(s); 2) Assess; 3) Analyze; 4) Act; and 5) Recap and Close. This will ensure you have time to connect, listen to, and discuss and help the caregiver solve feeding or care issues.

For **group** activities, make sure to create age-specific groups (e.g., groups for caregivers of children zero–six months and six–nine months of age) or split the larger group into smaller, age-specific groups to discuss relevant topics before reconvening as a whole.

## Suggested Individual/Group Activities

Program activities should be selected and designed based on your prioritized behaviors and behavioral analysis. Common **prioritized behaviors** for this stage include the following:

- Breastfeed soon after birth, frequently, and on demand.
- Exclusively breastfeed. Continue to breastfeed during mother and child illness.

# ANNEX A for Module 1

## Birth Up to 6 Months of Age



### Illustrative RCEL Activities for Children Birth Up to 6 Months of Age

The table below provides illustrative RCEL-specific activities that can be integrated with existing IYCF programming and used during individual or group activities for caregivers of children ages **zero up to six months**. This is not an exhaustive list but rather examples of activities for this age group. These activities rely on the use of the *RCEL Addendum Counseling Cards* and are intended to support one or more of the IYCF/RCEL common prioritized behaviors identified above (USAID Advancing Nutrition 2023d).

For individual activities, select activities based on caregiver needs/interests and observations of caregiver-child interactions. Only select one to two behaviors to discuss during each session to not overwhelm the caregiver. For group activities, choose a topic for the session and review the relevant counseling card(s). Plan for the time you have. If you are meeting with a group several times, choose a new topic each time—allowing participants to weigh in

on what they are most interested in doing/learning about, if possible. Focus on one topic per session. Implementation of each individual activity should take approximately 15–30 minutes. Implementation of group activities should take approximately one hour. All materials and guidance necessary to conduct activities are included in the table and additional resources section below.

See the [Facilitator Guide](#) and [Participant Materials](#) from the *C-IYCF Counselling Package* and the training package and [counseling cards](#) from the *RCEL Addendum* for more information on how to conduct both individual and group counseling sessions (UNICEF 2012b; UNICEF 2012c; USAID Advancing Nutrition 2023c; USAID Advancing Nutrition 2023d). For more ideas on how to support child development at this age, see the [Playful Parenting Activity Booklet](#) for parents and caregivers (World Vision International 2020a). Programs can use ideas from this booklet to start discussions and practice

optimal behaviors during group sessions. In addition, the RCEL Addendum and [World Vision Toy Guide for Early Childhood Development](#) provide instructions on how to make simple toys for children in this age group and show how caregivers can engage and play with children using those toys (USAID Advancing Nutrition 2023a; World Vision International 2020b). For more information and resources, see the [Ages and Stages Resource Collection](#), where you can search for materials by age/stage (e.g., 12 up to 24 months) or cross-cutting themes (e.g., breastfeeding).

For information on how to **adapt these activities for children with disabilities**, see RCEL Addendum Counseling card, “[Tips for Supporting Children with Disabilities to Engage in Play and Learning](#)” in the *Responsive Care and Early Learning Addendum*.

Source: USAID Advancing Nutrition 2023d

**EXAMPLE RCEL ACTIVITIES FOR CHILDREN (BIRTH UP TO 6 MONTHS)**

Individual-level activities—integrate into home visits, one-on-one counseling sessions, etc.

	Foundational Activity <sup>1</sup>	Activity 1	Activity 2	Activity 3
<b>Who is the activity for:</b>	Primary Caregivers	Primary Caregivers (e.g., mother, father, grandparents)	Mother	Mother (and other family members)
<b>Activity:</b>	Counsel caregivers on responsive care practices	Counsel caregivers to incorporate play with child while doing household chores	Counsel mother to sing to her child while breastfeeding	Counsel mother and other family members on the importance and benefits of caring for the caregiver for both maternal and child welfare
<b>How to plan for activity:</b>	Review counseling card #1 on responsive caregiving.	Review counseling card # 4 on learning through play.	Review counseling card #3 on why and how to listen and talk to your child.	Review counseling card # 6 on the importance of taking care of yourself (the primary caregiver) in order to care for the child.
<b>How to implement:</b>	<ol style="list-style-type: none"> <li>1. Use card #1 to explain why responsive care is important.</li> <li>2. Ask the caregiver if s/he has seen any specific cues from their child and how they respond.</li> <li>3. Fill in any additional cues s/he may be missing, and discuss how it is essential to make eye contact with their child to observe, identify, and respond to them in an appropriate and timely manner.</li> </ol>	<ol style="list-style-type: none"> <li>1. Use card #4 to explain why play is important for a child to learn.</li> <li>2. Ask the caregiver how they currently play with their child during the day. Help them brainstorm ways they can interact with their child while doing chores.</li> </ol> <p>Examples include:</p> <ul style="list-style-type: none"> <li>• Make funny faces, smile, talk, and sing to your child during chores.</li> <li>• As you are walking to the market, point out and name things you see (e.g., look, a bird, a tree, another child!).</li> <li>• Tell them stories as you clean the house.</li> </ul>	<ol style="list-style-type: none"> <li>1. Use card #3 to explain why singing and talking to your child is important, and how breastfeeding is an ideal time to do so.</li> <li>2. Demonstrate to the caregiver.</li> <li>3. Encourage the mother to demonstrate practice to you.</li> </ol>	<ol style="list-style-type: none"> <li>1. Use card #6 to explain why taking care of the primary caregiver is important to being able to care for the child, especially during this stage when breastfeeding and infant care demand a lot from the mother.</li> <li>2. Ask the mother about how she takes care of her own needs. How can she do more of this? What are the benefits to the child?</li> <li>3. Help her brainstorm ways to manage her emotions and find time to care for herself, such as asking friends and family for help so she can breastfeed or rest.</li> <li>4. Ask family members to brainstorm and suggest ideas for how they will help and support the mother.</li> </ol>



EXAMPLE RCEL ACTIVITIES FOR CHILDREN (BIRTH UP TO 6 MONTHS)				
	Foundational Activity	Activity 1	Activity 2	Activity 3
<b>Why (behavior supported):</b>	Recognize and appropriately respond to the child's cues in a timely manner	Play with the child in age-appropriate ways	Interact with the child throughout the day, including smiling at them; singing, talking, and reading to them; or telling them stories	Find time to rest and take care of their own needs
<b>Group-level activities—integrate into mothers' groups, care groups, village savings and loan association (VSLA) groups, men's groups, etc.</b>				
<b>Who is the activity for:</b>	Any Caregiver	Mothers' Groups, Care Groups, Men's Groups, VSLA Groups	Mothers' Groups, Care Groups, VSLA Groups	Mothers' Groups, Care Groups, Men's Groups, VSLA Groups
<b>Activity:</b>	Facilitate group discussion on responsive care practices	Make age-appropriate play things together for the child	Facilitate group sing-a-long with children	Facilitate group discussion on strategies to incorporate play and communication during daily chores
<b>How to plan for activity:</b>	Review counseling card #1 on responsive caregiving.	Review the <a href="#">instructions</a> for this activity.  Optional: Use card #4 to start the session, explaining why play is important.	Review counseling card #3.	Review counseling card #4 and the <a href="#">instructions</a> for this activity.
<b>How to implement:</b>	<ol style="list-style-type: none"> <li>1. Use card #1 to explain why responsive care is important.</li> <li>2. Ask the caregivers if they have seen any specific cues from their children and how they respond.</li> <li>3. Fill in any additional cues they may be missing, and discuss how they can identify and respond to those cues in the future.</li> </ol>	<ol style="list-style-type: none"> <li>1. Explain the activity, and pass out the materials and instructions to build the toys. Make sure all toys are clean, safe, and not small enough to be a choking hazard.</li> <li>2. Help caregivers as they build toys.</li> <li>3. Demonstrate how to use the toys for age-appropriate play with their child. <ul style="list-style-type: none"> <li>• Show caregivers how to safely place children on their tummies to play with toys and watch other children. This is one way children like to play.</li> </ul> </li> <li>4. Ask caregivers to demonstrate how they will play with their children using the new toy.</li> <li>5. Close by reminding everyone that play helps a child learn. Even young babies can play.</li> </ol>	<ol style="list-style-type: none"> <li>1. Open session by discussing why singing and talking to young children is important for them to learn. Use card #3.</li> <li>2. Lead a brainstorm of songs that could be sung with actions. These can be popular songs or lullabies.</li> <li>3. Discuss times throughout the day that songs can be sung (e.g., while breastfeeding, while cooking, while walking to the market).</li> <li>4. Demonstrate singing songs with participants. Invite others to demonstrate and join in until everyone has practiced singing.</li> <li>5. Close by reminding everyone that singing and talking to their child helps them learn.</li> </ol>	<ol style="list-style-type: none"> <li>1. Explain the activity, and use card #4 to discuss why play is important for children to learn.</li> <li>2. Lead a brainstorm on how you can play with a child this age. You don't always need toys to play, and you can play using your fingers and hands. You can also play "peekaboo" with a child using a scarf, cloth, or your hands.</li> <li>3. Lead a brainstorm on how you play with your child throughout the day.</li> <li>4. Close by asking participants to try one to two games at home.</li> </ol>

## EXAMPLE RCEL ACTIVITIES FOR CHILDREN (BIRTH UP TO 6 MONTHS)

**Group-level activities—integrate into mothers’ groups, care groups, village savings and loan association (VSLA) groups, men’s groups, etc.**

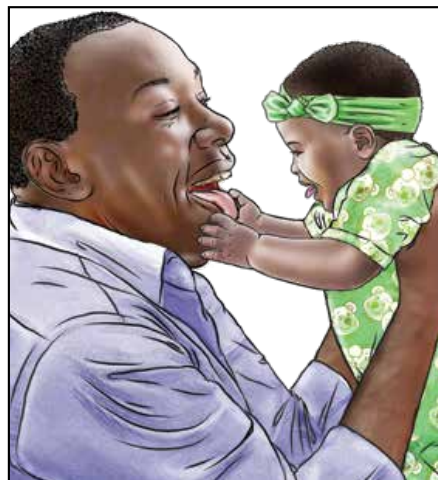
<b>Why (behavior supported):</b>	Recognize and appropriately respond to the child’s cues in a timely manner	Play with the child in age-appropriate ways	Interact with the child throughout the day, including smiling at them; singing, talking, and reading to them; or telling them stories	Play with the child in age-appropriate ways  Interact with the child throughout the day, including smiling at them; singing, talking, and reading to them; or telling them stories
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<sup>1</sup>Conduct this session first to ensure caregivers have a solid understanding of what responsive care is before beginning other activities.

# ADDITIONAL RESOURCES for Module 1

## RESOURCE: RCEL Addendum Counseling Card #1

### Your loving care helps your child grow and develop



Card 1: Responsive Care

# RESOURCE: RCEL Addendum Counseling Card #1

## Card 1: Responsive Care

**Steps 1-3:** After you have welcomed caregiver(s), assessed, and analyzed, you are ready to act!

**Step 4:** Act

*Introduce today's topic using the Key Messages*

- ✦ You are already helping your child learn and develop every day when you talk, play, feed, and care for your child. These simple activities help your child's brain to develop and make your child smart and clever.
- ✦ Responsive care is about interacting with your child, showing love, and responding consistently to match the needs and interests of your child.
- ✦ Responsive care is fun and easy to do! Dads, moms, grandparents, and the whole family play an important role in making your child feel safe, loved, and secure.

*Praise, demonstrate, and practice with the Practical Tips*

### Learning your child's cues

- ✦ Your child tells you what he needs by using his sounds, facial expressions, and body movements. Observe your child. With practice, you will often be able to read your child's cues and respond with what he needs.
- ✦ Reading your child's cues takes practice. Watch your child a lot and look for ways your child uses her eyes, mouth, and body to tell you what she needs. Crying is usually the last form of communication.
- ✦ Create a daily routine for your child's care, including times for meals (starting at 6 months), bathing, and bedtime. Routines help your child feel secure because he knows and recognizes daily activities.

### Responding when your child is upset

- ✦ When your child is upset, think through possible solutions—she may be hungry, tired, soiled, uncomfortable, or sick.
- ✦ Your child may just want your attention. Once you have calmed your child, think about the movements and sounds he was making. Over time, you will notice patterns in your child's movements and sounds and the kinds of things he needs.
- ✦ Gently rock, stroke, hold, or sing to your child. Provide skin-to-skin contact to stimulate and comfort your newborn baby.

### Responding when your child wants to interact with you

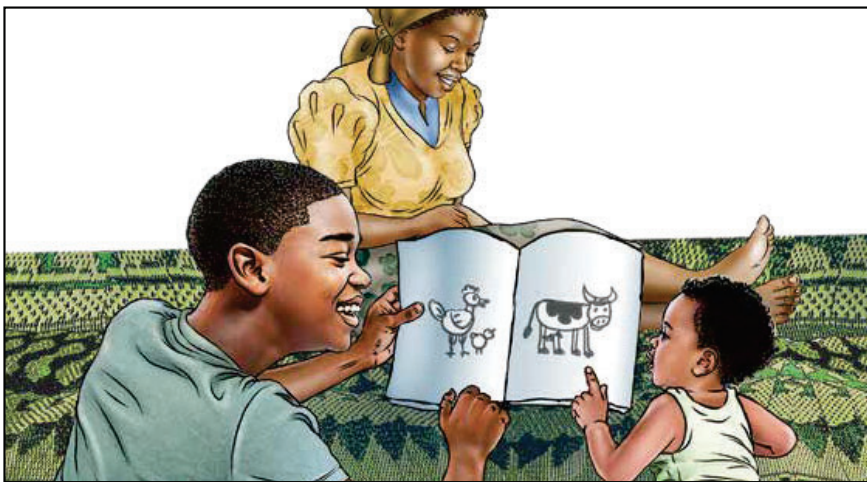
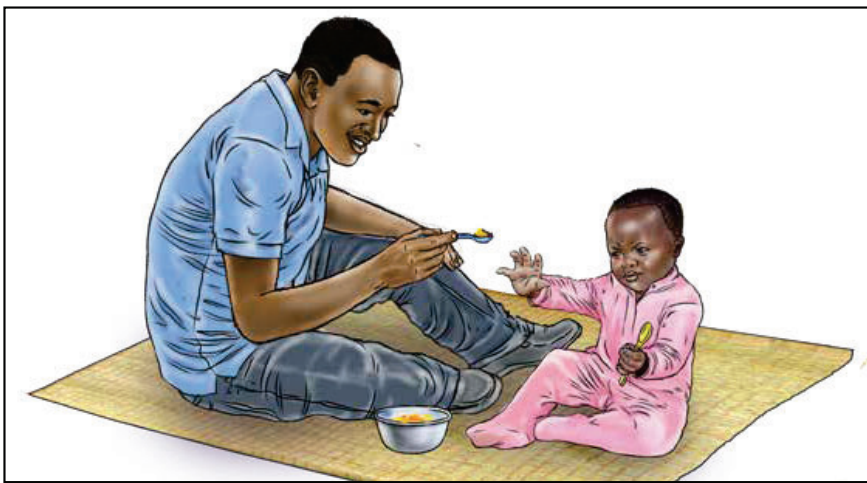
- ✦ Your child can see from the day she is born. Look into your child's eyes often. It will help her to connect with you, and she will learn to identify emotions in people.
- ✦ Signs your baby wants your attention are wide-open eyes, looking toward your face or toward someone who is talking, being alert, sucking on his fists or objects, clasping his hands or feet together, and grasping on to your finger or an object.
- ✦ Respond to your child's sounds and movements, such as reaching out, babbling, smiling, or making faces, by producing similar vocalizations, gestures, and talking to her.

**Step 5:** Summarize and close

- ✦ Summarize the session by asking the caregiver(s) to demonstrate or explain what they will go home and do with their child. Ask if the caregiver(s) see any barriers and problem-solve together how to overcome those barriers.
- ✦ If appropriate, agree on the next meeting date.

**RESOURCE: RCEL Addendum Counseling Card #3**

# Listen and talk to your child all the time



Card 3: Communication

# RESOURCE: RCEL Addendum Counseling Card #3

## Card 3: Communication

**Steps 1-3:** After you have welcomed caregiver(s), assessed, and analyzed, you are ready to act!

**Step 4: Act**

*Introduce today's topic using the Key Messages*

- \* Your child uses eye contact, cooing, facial expressions, and movement to tell you what she needs and wants from the day she is born. Follow her signals to understand her needs.
- \* Babies begin to understand many words before they can speak. Talk and sing to your child often so that he can hear words. He will learn to talk by listening to you talk.
- \* Have a conversation with sounds, words, and gestures. When your child communicates with you using sounds or movements, respond to him and he will respond back. You are each taking turns in the conversation.
- \* You can help your child learn new words by expanding on her language. If she says one word, such as “papa,” build her language by adding more words: “Papa loves you!”

*Praise, demonstrate, and practice with the Practical Tips*

**Birth up to 6 months:**

- \* During or after breastfeeding, talk and sing to your baby. She is listening and will find comfort in your voice.
- \* Imitate your baby's sounds and gestures. He is communicating with you with his sounds and movements. When he coos, respond to him. Your baby needs to hear you talk.

**6 up to 9 months:**

- \* Your baby can start to recognize common words. When you see your child is no longer hungry, ask her, “All done?” If she shows you that she is still hungry, say, “More?”
- \* Respond to your baby's sounds and interests. Call your baby's name and notice his response.

**9 up to 12 months:**

- \* Your baby will start to enjoy different soft foods now, such as soft fruits or cooked vegetables, and needs diverse, colorful foods to meet her nutritional needs. Use words to describe the food, and slowly she will understand new words. Name the different foods and parts of her body that she is using to eat, like her fingers and mouth.

- \* Talk to your baby as you prepare his meal. Describe what is happening as you interact with him, such as saying, “Here is your bowl” or “Dad cooked you potatoes.” Ask him questions, “Do you want eggs?” Give him time to respond with gestures such as pointing or sounds before you provide a verbal answer.

**12 up to 24 months:**

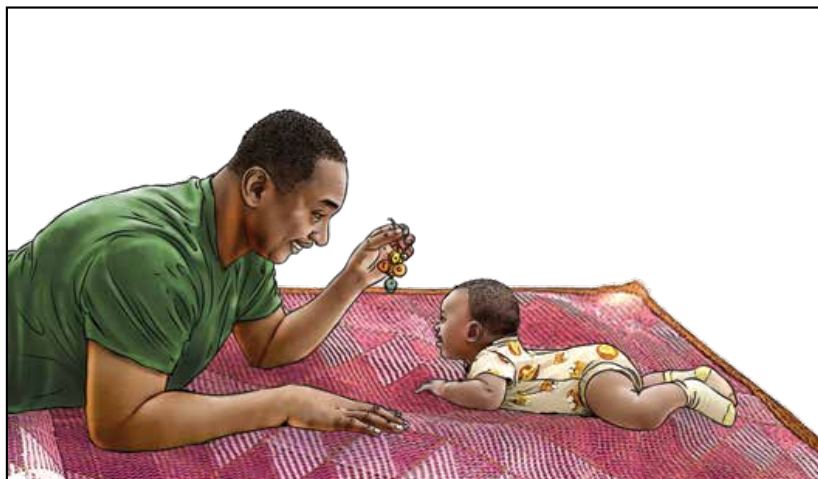
- \* As you feed your child, describe the colors and textures of her food. Encourage her to speak by asking her the name or the color of the food she is eating. Point and tell her the names of the foods after she has had a chance to try and answer you!
- \* Sing with your child. Start a song and let him sing parts that he knows. Over time, he can sing more and more himself as he learns more words and you can practice taking turns.
- \* Children learn to love stories when they read together with their parents every day. Ask her to point to different people and animals in a book, magazine, or poster. Praise her for finding the animals and objects!

**Step 5: Summarize and close**

- \* Summarize the session by asking the caregiver(s) to demonstrate or explain what they will go home and do with their child. Ask if the caregiver(s) see any barriers and problem-solve together how to overcome those barriers.
- \* If appropriate, agree on the next meeting date.

**RESOURCE: RCEL Addendum Counseling Card #4**

# Give your child daily opportunities to learn through play



Card 4: Play

# RESOURCE: RCEL Addendum Counseling Card #4

## Card 4: Play

**Steps 1-3:** After you have welcomed caregiver(s), assessed, and analyzed, you are ready to act!

**Step 4: Act**

*Introduce today's topic using the Key Messages*

- \* Children learn by playing, observing, copying, and trying new things starting from the moment they are born. Your child enjoys and learns through playing with you! All your child needs is you.
- \* Give your child opportunities to explore the world around him through play. He will enjoy playing with his fingers and toes, your face, and household objects. Follow his lead, encouraging play with safe objects that interest him. Observe his body language and sounds, and do not force him to play with something when he is not interested.
- \* Give your child challenging but achievable tasks. Guide her actions and build on what she can do to make the task slightly more difficult.

*Praise, demonstrate, and practice with the Practical Tips*

**Birth up to 6 months:**

- \* Slowly move colorful objects for your baby to see and reach for. Watch his eyes move side to side as he follows the object.
- \* Place your baby on her tummy with a colorful object out in front of her. Watch her reach for it and praise her when she picks it up! She learns by putting objects in her mouth so make sure the object is clean, not sharp, and not too small that she could swallow it.

**6 up to 9 months:**

- \* As you introduce new foods for your baby, he is learning new textures and tastes. Encourage him when he tries new foods! Having diverse and colorful foods is important.
- \* Give your baby clean, safe household objects to pick up, touch, feel, bang, and explore. Examples of simple toys to play with include small containers or a pot with a spoon.
- \* Draw or make simple picture books to develop your baby's curiosity and help her learn new things.

**9 up to 12 months:**

- \* During mealtimes, give your baby small finger foods and encourage him to try new, healthy foods. He is starting to learn how to pick up things with his fingers and chew. He will often make a mess and that is okay! He is learning to feed himself and exploring different types of foods!
- \* Play games like "peekaboo" with your baby. While she is looking at you, cover your face with hands or fabric. Say, "Where is Mommy?" Open hands and say, "Boo! Here I am!" Laugh with her as she sees you! She is starting to learn that you do not disappear when she does not see you.

**12 up to 24 months:**

- \* Play with your child and encourage him to try harder tasks. Encourage him to stack objects, knock them over, and start again. Give him more objects to stack. Help him if he gets stuck!
- \* Encourage your child's imagination using sock puppets. Make up a story using the puppets.

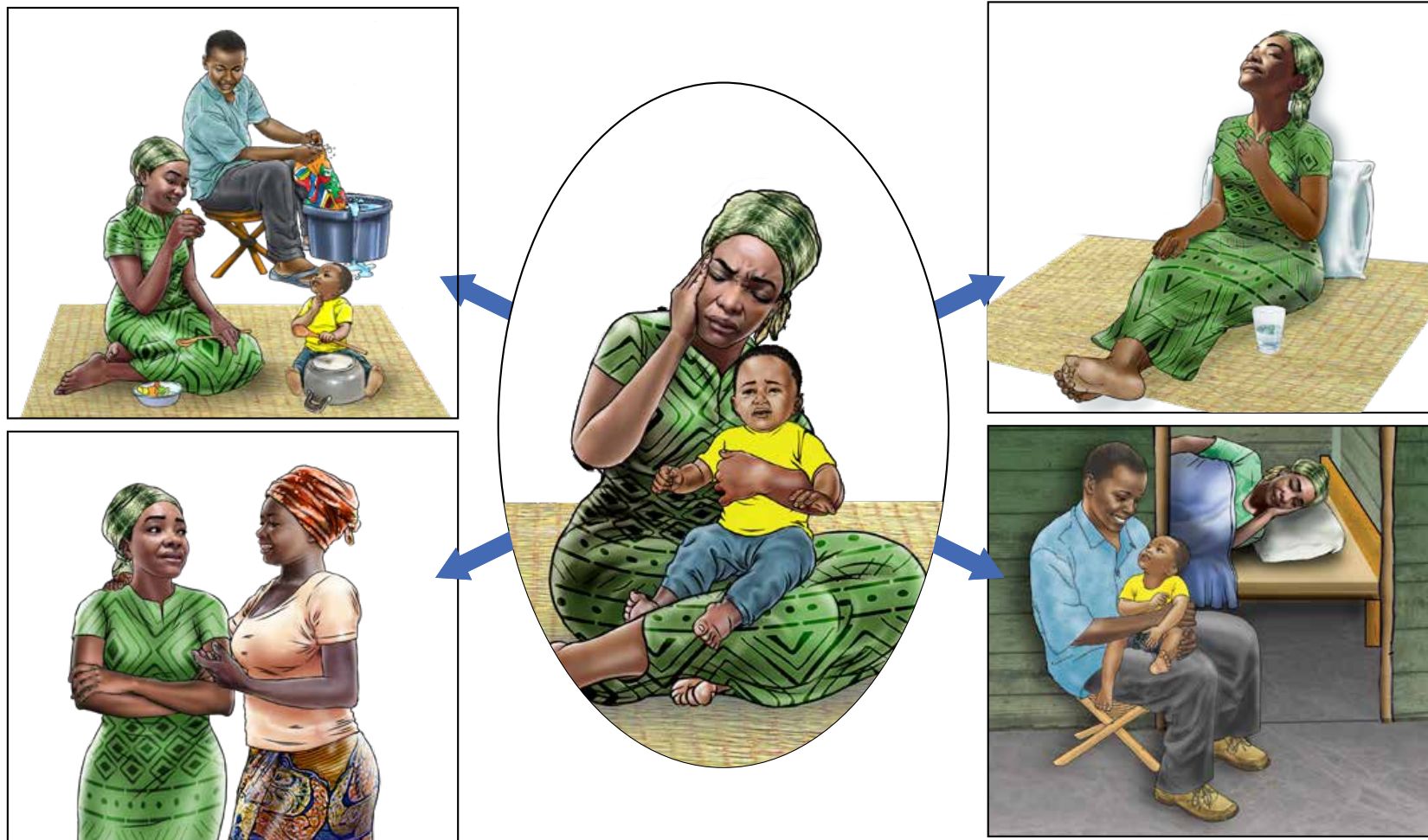
**Step 5: Summarize and close**

- \* Summarize the session by asking the caregiver(s) to demonstrate or explain what they will go home and do with their child. Ask if the caregiver(s) see any barriers and problem-solve together how to overcome those barriers.
- \* If appropriate, agree on the next meeting date.



RESOURCE: RCEL Addendum Counseling Card #6

# Take care of yourself in order to care for your child



Card 6: Caring for the Caregiver

# RESOURCE: RCEL Addendum Counseling Card #6

## Card 6: Caring for the Caregiver

**Steps 1-3:** After you have welcomed caregiver(s), assessed, and analyzed, you are ready to act!

**Step 4: Act**

*Introduce today's topic using the Key Messages*

- \* Your child loves spending time with you. He is learning by observing, imitating, listening, and interacting with you. Parenting is rewarding and fun, but it is not always easy.
- \* Feeling big emotions during caregiving is normal because it can be very stressful. Feeling these emotions is not something to feel guilty or ashamed about. All caregivers need emotional support and help from their partners, families, friends, and community.
- \* Creating routines is helpful for you and your child. Think of ways to include activities you enjoy in your routine. Consider singing, sewing, exercise, dancing, drawing, or any activity that calms you and helps you to take care of yourself.
- \* Talk with your spouse, friends, or family members. Share your experiences parenting with a confidant. Share both what is going well and any challenges you are having.
- \* Whenever you feel exhausted and overwhelmed, it is good to reach out for help from your partner, family, or friends. If these feelings do not go away, seek care from your health facility. Depression and anxiety are common challenges, especially in the postpartum period, and require treatment.

*Praise, demonstrate, and practice with the Practical Tips*

- Birth up to 6 months:**
- \* Your baby is feeding on demand all day and all night and depending on mom and dad for everything.
  - \* Ask your partner, other family members, and friends for help. It will benefit your baby and you and give you time to take care of yourself, such as time to visit with a friend, get some sleep or do any healthy activity that helps you relax. This can help prevent you from feeling exhausted and overwhelmed.
- 6 up to 12 months:**
- \* Your baby is starting to feed on solid foods, sleeps less, and is moving around! He might develop some fears of people he does not know and want to be with you all the time.
  - \* It is okay to feel frustrated because you cannot get your baby to calm down or she is not behaving how you would like. Take a moment and take several slow, deep breaths in and out. Focus on your breathing to calm yourself before going back to try to calm your baby. Do not hesitate to ask a family member or friend to help if you need a little rest.
- 12 up to 24 months:**
- \* Your child is developing her emotions, and she will soon start to do more things for herself like getting dressed and toileting. She will get frustrated when she tries but cannot do things herself. She may appear stubborn or get upset.
  - \* Recognize that this is normal and do not get angry. Step away if you need to, and do not be hard on yourself. Ask your partner or a confidant to look after your child while you step away. Even 10 minutes away from a stressful situation can help you feel more calm and able to respond appropriately.

**Step 5: Summarize and close**

- \* Summarize the session by asking the caregiver(s) to demonstrate or explain what they will go home and do. Ask if the caregiver(s) see any barriers and problem-solve together how to overcome those barriers.
- \* If appropriate, agree on the next meeting date.



## RESOURCE: RCEL Addendum Counseling Card—Supporting Children with Disabilities

### Tips for Supporting Children with Disabilities to Engage in Play and Learning

#### Modify the skill level

Consider sharing Practical Tips that the child can do, or are slightly challenging for the child, rather than providing tips that match the child's age.

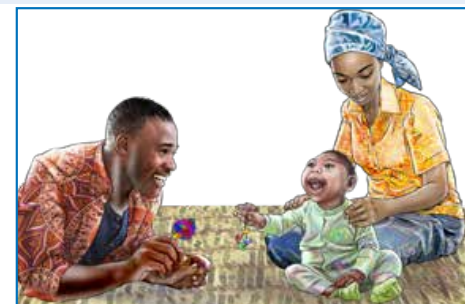
- \* Make an activity simpler by breaking it into multiple steps, such as providing only two objects to stack rather than many and adding more as the child progresses.
- \* Provide materials that are easier for a child to use: a container with a handle the child can grip rather than a jar with no handles.
- \* Consider adaptive devices to help a child: add a thicker handle to a spoon or utensil to make self-feeding easier or provide a supportive chair to help the child to sit.



#### Add a sensory component (touch, sound, sight, smell)

Adding more touch, sound, smell, or a visual component will stimulate the child's senses, particularly if the child has an impairment that affects their senses, such as difficulty seeing or hearing.

- \* Add a touch component to a story: if the story is about bath time, splash a little water on the child's hand.
- \* Add a smell to a shaker toy: add strips of lemongrass or spices in a container with bottle caps.
- \* Provide different textures of playthings: things that are smooth (like plastic), soft (like different fabrics), or rough (like stiff leaves glued to cardboard). Ensure that the objects are safe: clean, not sharp, and larger than your child's palm to prevent choking.



#### Support the child in exploring

Play should be led by the child, with the caregiver providing support only as needed by the child. Be patient and let the child take time to engage with an object or an activity. Remove objects that get in the way of playing.

- \* Provide some extra support during tummy time (like rolled-up fabric) under the child's chest to prop the child's torso up or place the child on your chest and recline back.
- \* Guide the child's hand alongside yours to explore an object or position the child in a way that helps her be able to look around and engage in play. Make sure the child's arms and legs are not restricted.
- \* Look for the subtle cues the child may use to communicate, such as using eye movements to look at something they want.



### Job Aid: Disability Inclusion

## RESOURCE: Let's Play With the Child in Our Daily Work

### Stage: Birth Up to Six Months

**Brainstorm:** Who in your home spends time playing with their babies?

**Ask:** Do you usually play with them?

**Ask:** Can someone demonstrate how you play with your child?

[Use RCEL Addendum Card # 4](#)

When a child plays, they learn many things. Playing is like the child's job. When playing, the child learns—

- thinking, paying attention, and problem solving
- speaking
- living with others
- using the muscles of the body (for example, training their little fingers to pick up a spoon).

**Ask:** Is there an age when a child starts to play?

**Answer:** A child plays when they are still in the belly and immediately at birth. For example, they can kick their legs or imitate the faces their mother or father makes.

So let's discuss how to play with a young child at this age (zero to six months). First, make sure your child has a safe, clean space to play and move around in. Then try any of the following options for play:

- Slowly wave colorful clothes or cloth in front of the baby's face.
- Hang colorful toys or pictures above the area where the baby lies down.
- Find items around the house of different textures for the baby to feel and touch, such as soft clothes, crumpled paper, a smooth cup or bowl, etc.
- Make funny faces, smile, and make eye contact with the baby.
- Have a "conversation" with the baby by copying the child's sounds and gestures.
- Put the baby on their tummy and encourage them to lift themselves up and reach for a colorful toy (e.g., a cup, piece of cloth, rattle).

**Ask:** So let's think of when and how we can play with the child while doing our chores. Each person should close their eyes and think about a job they do at home every day together with the baby (for example, feeding the baby, washing dishes, working in the field, walking to the market, cooking food).

Now, think of what fun you can have with your babies during this work.

*Examples include the following:*

- Make funny faces and smile at the baby as you are doing chores, and talk and sing to them, too.
- As you are walking to the market, point out and name things you see (e.g., a bird, a tree, another child).

Ask two or three people to share what task they chose, and then show how they will play with their child while doing that task.

Next, talk to the person next to you. Ask him/her about a job he/she usually does at home and share ideas about how to incorporate play during this job.

**Next steps:** At home, try to play one or two games with your child.

#### Additional resources:

- [How to Make Homemade Toys](#)
- [World Vision Toy Guide for Early Childhood Development](#)
- [Playful Parenting Activity Booklet](#)

## RESOURCE: How to Make Homemade Toys

### Learning Objectives

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

1. Use locally available and recycled materials to make toys and describe what children can learn from different toys.

### Materials

- For Learning Objective 1, Activity 1:
  - Recycled materials, scissors, tape, and glue for toy making
  - [Examples of Homemade Toys](#)

### Advance Preparation

- Review the instructions for each “Learning Objective” in this session.
- Prepare and gather all of your materials from the list above.
- Prepare 2–3 homemade toys in advance of the session that can be used for teaching different skills to children of different ages; for example, a shaker/rattle, a push/pull toy car, a homemade puzzle, etc.
- Gather materials for making toys. Some suggested materials to gather include water bottles with caps, soda bottle caps, yogurt or other plastic cups, dried beans or small rocks/pebbles, cardboard boxes, empty milk boxes, string, dried fruit shells (such as from coconuts), etc.

### Total Duration of Session: 30 Minutes

- **Learning Objective 1:** Use locally available and recycled materials to make toys and describe what children can learn from different toys (30 minutes)
  - **Activity 1:** Making Homemade Toys (30 minutes)

**Learning Objective 1:** Use locally available and recycled materials to make toys and describe what children can learn from different toys

**Methodology:** Small-group work




**Time:** 30 minutes

### Instructions

#### Activity 1: Making Homemade Toys (30 minutes)

1. Divide participants into pairs. Each pair will make one homemade toy from the materials gathered by the facilitator before the training. Give them about 15 minutes to make a toy.
2. Bring the group back together and ask for 3–4 volunteers to share the toy they have made with the group. For each toy, have participants respond to the following questions. Ask—
  - “How attractive is it (color, size, and sound) for a young child?”
  - “How easily could the young child hold it?”
  - “How does the size, and whether it is sharp or dull, or edible, affect its safety? How safe is it for children in different age groups? Remember, if an object is smaller in size than your child’s palm, it is a choking hazard for your child.”
  - “What age child would most like it? Note that the same toys may be attractive to children of different ages. A young child might enjoy dropping stones in a plastic bottle. An older child might use the same stones to count as she drops the stones in the plastic bottle.”
  - “What might the child learn by using it? Consider different skills the child might learn.”
  - “How could playing with the toy affect the interaction between the caregiver and child?”
3. Ask participants to open their Participant Handouts to “Handout for Optional Session 2: Examples of Homemade Toys.” Tell participants they can use this when discussing different toys caregivers can make during home visits or group sessions.
4. Close by reminding counselors that children do not need fancy toys, and that homemade toys, household objects, and even play without toys (such as games and songs using their bodies) all help children to learn!

## RESOURCE: Examples of Homemade Toys

Toys for Infants 0-6 Months of Age		
Toy	Ages	Adapting for Older Ages and Higher Complexity:
<p><b>Shaker or rattle</b></p> 	<p>Birth up to 12 months</p>	<ul style="list-style-type: none"> <li>• Fill the bottles with larger objects, such as clothespins or small stones, and let the child put the items in and out of the container.</li> </ul>
<p><b>Objects on a string</b></p> 	<p>Birth up to 12 months</p>	<ul style="list-style-type: none"> <li>• Let the child put the objects on and off of the string (as long as objects are big enough that the child will not choke).</li> <li>• Put together patterns on the string.</li> </ul>
<p><b>Mobiles hanging above baby (out of reach)</b></p> 	<p>Birth until about 6 months</p>	<ul style="list-style-type: none"> <li>• Hang handmade light objects or picture cards, such as things made of felt paper/foam or colored cards, and have the baby name the objects or colors.</li> </ul>

### SAFETY TIP

Make sure the toys are made with clean, safe materials. They should not be sharp or have small pieces that the child could choke on (anything smaller than the child's palm).

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