



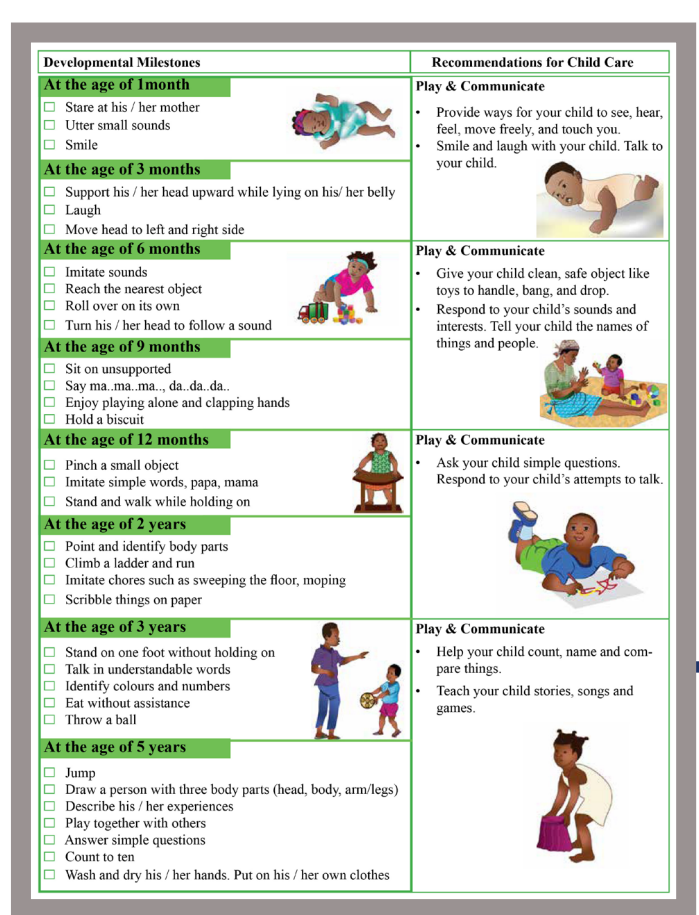


IYCF/RCEL Counselling Flow Chart for Child Welfare Services

Key

-  Step 1: Assess
-  Step 2: Analyze
-  Step 3: Act
-  Immediate Action



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Welcome caregiver and exchange introductions.

Ask opening questions, such as:

- How is your family doing? How is your child today?
- What do you enjoy doing with your child?
- Do you have any concerns you would like to talk about today?

Listen to and observe the caregiver's interaction with the child.

Is the child sick?

YES

Refer or treat per IMNCI protocol. Discuss immediate action caregiver can take until referral can be completed, including feeding while sick.

NO

- Weigh, measure length/height (if due), and record.
- Plot and determine nutritional status.
- Join dots as appropriate and determine growth over time.
- Assess for Bilateral Pitting Oedema and/or MUAC, if SAM is suspected.

Is the child severely malnourished?

YES

Refer and discuss immediate action caregiver can take until referral can be completed.

NO

Assess caregiver-child interactions, care practices, and caregiver stress. If needed, ask:

- How do you talk, play, and interact with your child?
- How do you understand when your child is trying to tell you what he or she needs?
- What kind of support do you get from family and friends?

Monitor child development milestones according to MCHRB.

Review assessment findings, caregiver concerns/sharing, and observations: growth trend, nutritional status, milestones, caregiver-child interactions, occurrence of learning activities, caregiver stress, etc. **to choose the most appropriate path of action below.**

Positive curve/growth, child is achieving milestones and responsive playful interactions?

Praise caregiver. Show caregiver positive growth curve and share the milestones they should expect to see. Agree on the next date of visit.

Stagnating or declining curve/growth, feeding difficulties, underweight, or moderate acute malnutrition?

Use MCHRB and nutrition algorithm to do feeding assessment according to age (e.g., breastfeeding for child under 6 months, complementary feeding for children 6 months and above).

Limited caregiver-child interactions, lack of learning activities, or caregiver showing signs of stress?

Warning signs, new developmental or disability concern, or caregiver signs of severe stress/mental health concerns?

Refer. Give reason for referral and immediate action caregiver can take until referral can be completed.

Prioritize 1-2 specific issues and counsel during this visit.

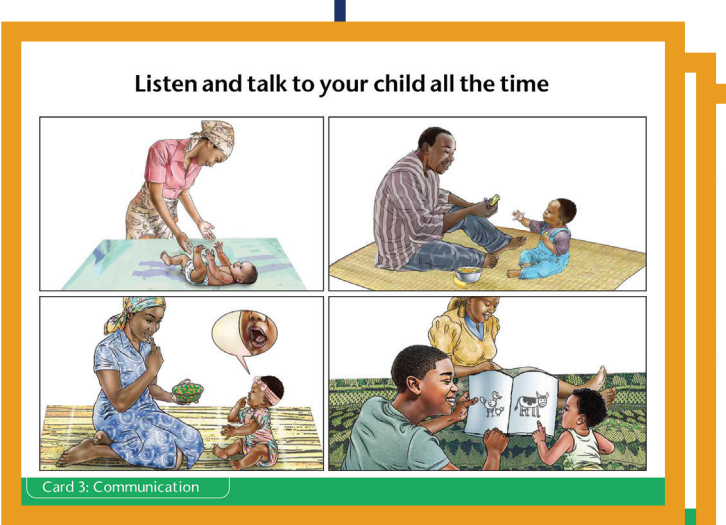
IYCF or feeding difficulties?



Limited caregiver-child interactions?



Lack of learning activities?



Caregiver signs of stress?



- Discuss barriers to applying recommendations/agreed-upon actions and problem-solve together how to overcome those barriers.
- Close by asking the caregiver to demonstrate or explain to you what they will do with their child following your discussions.
- Ask caregiver to come back more frequently.
- Agree on date for next visit.

Increase contacts with child and family. Conduct a home visit, connect them with a support group, link them with their community health volunteer, etc.

For further details on the counselling steps, refer to the Nutrition Algorithm Job Aid, MCHRB, C-IYCF Counselling and ECD Counselling Cards.