Key BCC message for correlation of Nutrition and Polio

Poliovirus mostly attacks

children with lesser immunity,

hence breastfeed your child

exclusively for the first six months

to build your child's natural ability

to fight diseases and infections





For whom is this message?

This message is for all parents and caregivers of children up to 5 years of age in general, irrespective of caste, class and religion.

Why this message?

Poliovirus mostly attacks children with lesser immunity. If the mother does not exclusively breastfeed, the child's natural ability to fight diseases is not developed fully. Thus, the child is more prone to being affected by polio and other diseases.

Explanatory messages

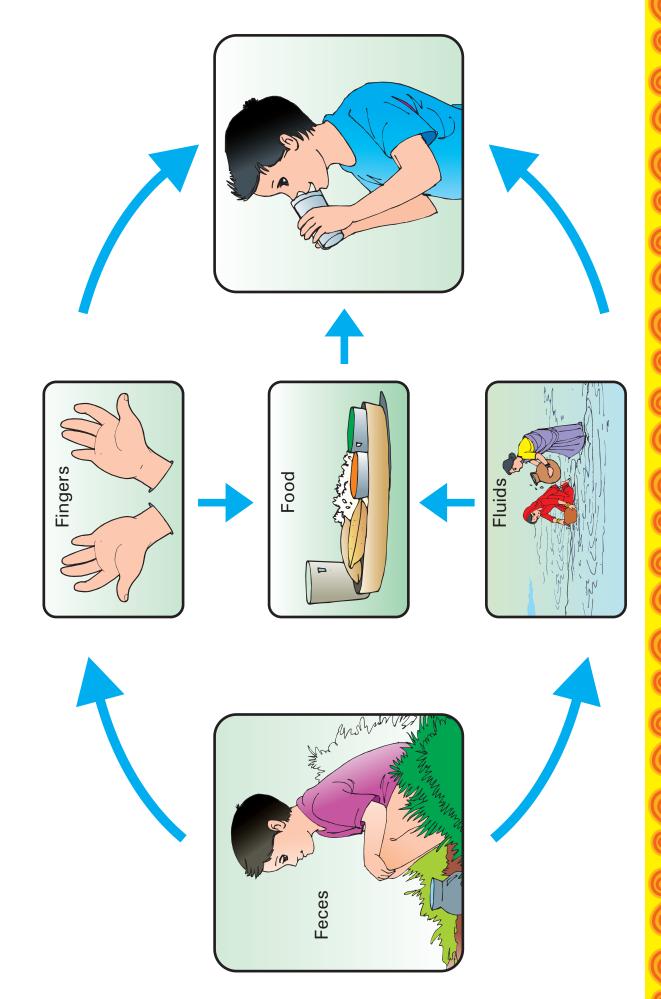
- 1. You should start breastfeeding within the first hour of your child's birth.
- 2. Your newborn child must be fed the thick yellowish milk colostrum as it is very nutritious and is essential in building your child's natural immunity against infections.
- 3. The first breast milk has all the required nutrients and water that a child needs to grow well. Therefore, do not give your child any other food or drink, not even water, honey, goat's milk, ghutti, etc.
- 4. Any other liquid or food may cause life-threatening diarrhea. Because of this even water should not be given to the child until 6 months of age.
- 5. Continue exclusive breastfeeding even if the mother is unwell until the time doctor instructs not to do so.
- 6. If your child is unwell, breastfeed the child more than normal days as the child will need more nutritious and easily digestible food.

Key BCC message for correlation of Hygiene & Sanitation and Polio

Poliovirus mostly attacks
children with lesser immunity,
hence you and your family members
should wash your hands with soap
at least four critical times
to prevent the spread of diseases,
including polio



Fecal - Oral Cycle of Poliovirus Transmission



For whom is this message?

This message is for all parents and caregivers of children up to 5 years of age in general, irrespective of caste, class and religion.

Why this message?

Polio mostly attacks children with lesser immunity. If children and their family members do not practice safe hygiene and sanitation practices, then they are exposed to the fecal-oral disease transmission route of spreading the poliovirus.

Explanatory messages

- 1. Poor sanitation and unhygienic practices including direct contact with stools can spread the poliovirus.
- 2. All your family members, including children, should wash their hands with soap at least four critical times so that you are safe from polio and other diseases:
 - a. after defecation
 - b. before preparing or serving food
 - c. before eating food or feeding the child
 - d. after disposal of baby's feces
- 3. Hand washing should be done with water and soap.
- 4. The feces of babies and young children should be safely disposed in toilets.
- 5. You and your family members should not practice open defecation.
- 6. Use a sanitary toilet for defecation.
- 7. Do not construct toilets close to hand pump/drinking-water sources.
- 8. Drink only safe water from identified safe drinking-water sources.
- 9. Store drinking water in a covered pot and do not put your hand or finger in drinking water. Use a ladle to take out water from the pot.
- 10. Keep your drinking-water source/hand pump surroundings clean and leak proof.
- 11. Food should be kept covered and do not allow flies to sit over food.
- 12. Fruits and vegetables should be properly washed before eating or cooking.

Key BCC message for correlation of Diarrhea management and Polio

Poliovirus mostly attacks

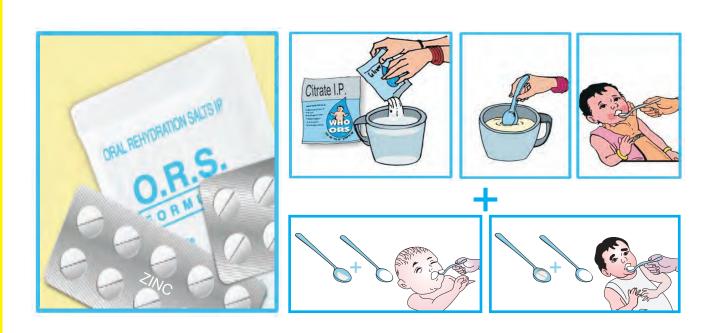
children with lesser immunity,

hence ORS and zinc supplement

should be given

to your child

to control diarrhea



For whom is this message?

This message is for all parents and caregivers of children up to 5 years of age in general, irrespective of caste, class and religion.

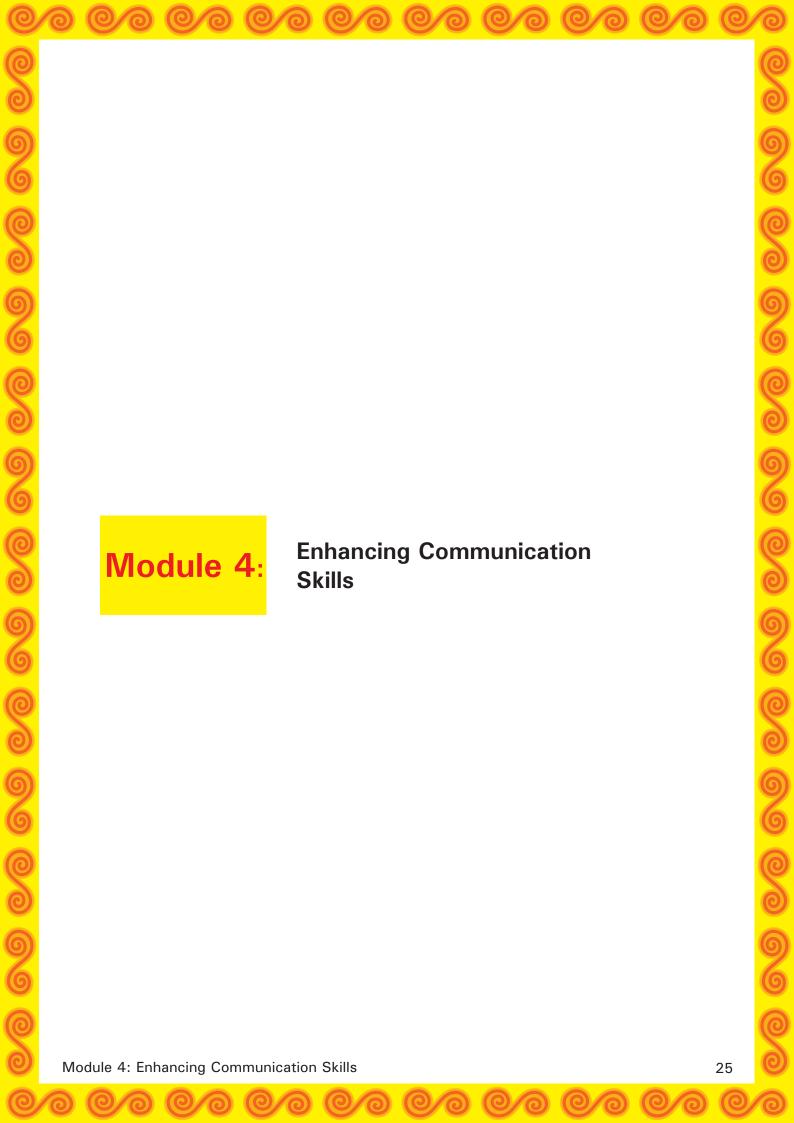
Why this message?

Poliovirus mostly attacks children with lesser immunity. If the child is constantly suffering from diarrhea, then the effectiveness of the OPV given during an episode of diarrhea is reduced. This would make the child more susceptible to becoming infected with poliovirus.

Explanatory messages

- 1. For infants less than 2 months, the symptoms for diarrhea are change in consistency and/or frequency of stools.
- 2. Infants under 2 months who have diarrhea should be immediately given ORS and taken to a doctor or health worker.
- 3. If a child older than 2 months and up to 5 years defecates loose and watery stools three or more times in a 24 hours period then he/she is suffering with diarrhea.
- 4. If you notice blood in the stools do not delay in seeking advice from your health worker/doctor.
- 5. Because of dehydration, untreated diarrhea may lead to the child's death.
- 6. During diarrhea, to prevent dehydration give your child ORS till the diarrhea stops.
- 7. Prepare ORS solution by mixing the contents of one sachet of ORS in a clean container with one litre of safe drinking water. After each episode of diarrhea, give the child additionally half to one cup of ORS solution in small amounts, repeatedly. The ORS solution can be used for maximum of 24 hours and if not consumed within 24 hours then you must dispose of it.
- 8. Additionally, start and continue zinc supplementation at the same time as ORS for 14 days, even after the diarrhea has stopped, to prevent a relapse. If you stop the zinc supplement before 14 days the treatment will be less effective.

- 9. Children between 2 and 6 months should be given a half tablet of zinc every day by mixing it in a clean spoon with breast milk.
- 10. Children over 6 months should have one tablet of zinc every day mixed in clean water. Care should be taken that the tablet is completely dissolved before giving it to the child. Older children can chew it directly.
- 11. Children between 2 and 6 months with watery stools should be first breast-fed (more than normal) then given ORS solution and zinc supplement in a spoon.
- 12. ORS treatment for all children between 2 months and up to 5 years should continue until the diarrhea is finished. The zinc supplement should be given for a full 14 days.
- 13. During diarrhea, your child needs to be continuously breastfed and, if older than 6 months, then according to his or her age, he/she should be given food regularly. If the child is still being fed with mother's milk, the same should be continued.
- 14. While recovering he/she needs to have more food than usual to replenish the energy and nourishment lost due to the illness. This will make your child stronger and help OPV drops work more effectively.
- 15. Ask your health worker to provide you with zinc supplement.



Six steps of IPC activity involving Individual/Community interaction

Greet the target audience (community/ family/ individual)

Ask the target audience about their wellbeing

ell the target audience the purpose of your visit and convey BCC messages

elp the target audience in deciding their acceptance towards the desired behaviour change

Explain with reasons the effects and effectiveness of the desired behaviour change

Return to the community as an observer or problem solver or motivator (if need be) to ensure sustained change in desired behaviour

Points to remember for GATHER

Greet

- 1. Whenever you visit a household, **greet** everyone as far as possible in their local tradition.
- 2. Introduce yourself and your organization.
- 3. Be informal during conversation.
- 4. Until they are familiar with you, do not sit with an open register as the community might feel threatened.
- 5. Maintain a friendly behaviour.
- 6. While talking to the community, **treat** each individual respectfully, and interact with them.



Ask

- 1. It is important to **ask** people about their wellbeing and establish a relationship with them.
- 2. Listen to what they have to say (about their life, problems, apprehensions etc).
- 3. Listening is a skill. Listening means:
 - Paying attention and understanding what others are saying
 - b. Encouraging others to talk
 - c. Giving others space to express what they feel
 - d. Respecting what the other person is saying and not negating him/her
- 4. When you are trying to understand the client's perception/ understanding/knowledge about a particular behaviour, try asking questions which need an explanation/description to answer (open-ended) instead of questions which can be answered as Yes or No (close-ended).



Tell

- 1. You should clearly tell the purpose of your visit.
- 2. You should also **tailor** your contents according to the needs/context of community/ individuals you are interacting with. Say things which would be of interest to the group.
- 3. While telling them about the BCC messages, keep in mind:
 - a. What they already know about the subject
 - b. What they may want to know
 - c. What specific fears and myths they have about the subject (desired behaviour change)
 - d. Which step of behaviour change they are currently at
- 4. You should prepare yourself with all the information about the subject so that you can answer potential questions and tackle fears and myths related to the subject.
- 5. Avoid too much information which might not be relevant or may confuse people.
- 6. Do not pretend to know everything or tell something which you are not sure of. If not confident about some information, say clearly that you will return and provide the required information after consulting your senior coordinator.

Help

- 1. In the process of behaviour change, it is necessary to **help** the person to have complete knowledge and bring about attitudinal change.
- You should help them analyze their current behaviour, understand the benefits of correct behaviour, and risks of not practicing correct behaviour.
- 3. The help to bring about the attitude change should be in form of encouragement to:
 - a. Overcome personal beliefs and fears
 - b. Overcome social obstructions
 - c. Overcome myths and misconceptions
 - d. Understand the intricacies of the subject
 - e. Find solutions to challenges in the form of lack of amenities/resources/skills/support required for the behaviour change
- Facilitation and encouragement will be required so that people are able to take a decision on acceptance/adoption of the desired behaviour change.



Explain

- 1. You will need to explain the various benefits and risks of the desired behaviour change.
- 2. You may also have to explain why age-old practices which may not have led to any mishaps earlier might affect their wellbeing in the future. Thus, they should change to the desired behaviour.
- 3. Explanation should be followed by visual materials and demonstrations as far as possible, as it is said that "I hear... I forget, I see... I remember, I do... I learn"
- 4. It is desirable to use local and contextualised examples such as simple analogies, languages and folklore.



Return

- 1. It is necessary to **return** to the village and see how things are going.
- 2. Repeated visits help in winning trust and thus ease the process of bringing about the behavioural change.
- In the return visits you will be able to identify the problems (if any) faced by community/family/ individual which may hamper the process of behaviour change.
- 4. You should help the community in their thinking/ problem solving/implementation process during the repeated visits.
- You should not do the things for them which they can/should do themselves. You should only play the role of facilitator and motivator.



