# HELPFUL HANDOUT 1 Ways of Keeping Germs Away

A child with HIV needs special protection from germs.



A. Clean up body fluids



B. Wash hands



C. Wash dirty clothes



D. Cover cuts and sores



E. Cover mouth when coughing



F. Bury waste or put in a pit latrine



**G.** Protect from mosquitoes



H. Wash bedding often and air outside (allow to dry outside in the sun)

#### A. Clean up body fluids

Show the caregiver how to do the following:

- Take a plastic packet. Cut small holes in it and place it in a small container.
- Pour a little water diluted with bleach (10 parts water to 1 part bleach) into the plastic packet.
- Put two plastic packets around your hands and clean up body fluids with a newspaper.
- Place newspaper and plastic packets from your hands into the bleach/water mixture and leave for 30 minutes.
- Throw away the plastic packets with the soiled newspaper in the pit latrine or bury it.

#### B. Wash your hands

Show the caregiver and child how to do the following:

- Wash your hands with soap and water as often as possible.
- Wash your hands before preparing or eating food.
- Wash your hands after going to the toilet.
- Ensure that clean water and soap for hand washing is available close to the toilet.

# C. Washing dirty clothes

Instruct and show the caregiver the following:

- If clothes are stained with blood, faeces, urine or spit then soak them in water with a small amount of bleach for at least 1 hour.
- Wash these clothes separately to other clothes.
- Allow to dry well in the sun.

# D. Dealing with cuts and sores

Show the caregiver and child how to do the following:

- If the caregiver or the child has a cut in their skin, wash the cut well with clean running water.
- Cover the cut with a clean cloth and hold it firmly until the bleeding has stopped.
- When the bleeding has stopped remove the cloth. Place the cloth in bleach/water mixture as described in **A: Clean up body fluids**, then wash and dry the cloth.
- Keep the cut covered with a clean bandage or plaster until it has healed.

### E. Dealing with a child who is coughing

If a child is coughing, show the caregiver and the child how to do the following:

- Show the child how to cover their mouth when coughing so germs are not spread into the air.
- If the child is coughing up spit, show them how to spit into a tin that has been half filled with ash from the fire.
- Cover the tin.
- Advise the caregiver to empty the tin in the latrine.
- Refer to a clinic if the child is coughing for more than 2 weeks for a TB test.

#### F. Bury waste or put it in a pit latrine

Teach the caregiver the following:

- Put things you use to clean the child (like toilet paper, cotton wool and nappies) in a container as described in **A: Cleaning up body fluids**.
- Put the plastic packet and waste into the pit latrine or bury it.

## G. Protect from mosquitoes

Teach the caregiver and child the following:

- Drain all stagnant (still) water. Spread a layer of oil over the stagnant water.
- Use a bed net if available. Dip nets in insecticide every 6 months.
- Burn mosquito coils at night.
- Avoid being outdoors after sunset.
- Wear long sleeved clothing.
- Close windows at night or use a screen.

# H. Washing and drying bedding

Teach the caregiver the following:

- It is important to clean bedding such as blankets, pillows, sheets and mattresses regularly.
- Some items of bedding are washable, like blankets, sheets and pillows. You should wash these often and dry them out in the sun.
- Other items of bedding like mattresses and bed stands may not be easily washed; you can move these out into the sunshine and let them air out.
- By drying and airing out bedding in the sun, you can get rid of germs and keep bedding clean.

# HELPFUL HANDOUT 2 Breastfeeding

A child with HIV can get much benefit from breast milk.

## 1. The advantages of breast milk:

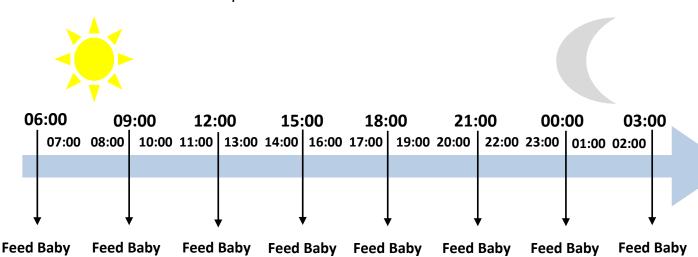
- Breast milk is easily digested.
- Breast milk can protect the baby from germs.
- Breastfeeding can help the mother and baby get close.
- Breast milk contains all the nutrients a baby needs in the right amounts.
- Breast milk is free and formula milk can be expensive.

## 2. Managing breastfeeding

If a mother chooses to breastfeed then she should give breast milk only and nothing else for the first six months.



Babies should be breastfed as often as the baby wants, both night and day, at least 8 times in 24 hours. For example:



#### Remember:

- The longer a baby sucks on the mother's breast, the more milk is produced.
- The mother should breastfeed completely from one breast until the baby is full, until the breast feels like it is almost empty. If the child wants more only then go on to the other breast.
- If a mother has to leave her baby, she could express (squeeze) breast milk into small containers. The container should be covered with a clean cloth and kept in a cool place or in a fridge.
- If the mother's nipples are cracked or sore or if the breast is very full, the baby may be unable to suck properly.
- The mother may be able to express milk from the unaffected breast to feed the baby.
- The mother may also need to visit a clinic as she may need medicines.

# HELPFUL HANDOUT 3 Formula Feeding a Baby

It may not always be possible to breastfeed a child with HIV.

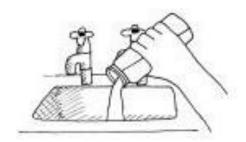


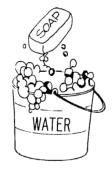
# What to do when formula feeding:

Step	Actions
Cleaning the bottle	<ul> <li>Wash your hands well with water and soap.</li> <li>Then thoroughly wash the bottle, teat and bottle top well with soapy water.</li> <li>Rinse well with clean water.</li> </ul>
Sterilising the bottle	<ul> <li>Place the bottle, teat and the bottle top in a pot with water.</li> <li>Boil the water.</li> <li>Cover the pot and allow to cool.</li> <li>Wash your hands again when you take the bottle from the cooled water.</li> </ul>
Preparing	<ul> <li>Clean a surface using clean water with small amount of water/bleach mixture.</li> <li>Wash your hands with water and soap.</li> <li>Boil some water and place the correct amount of boiled water into a very clean, sterilised bottle.</li> <li>Measure the right amount of formula and add to the bottle.</li> <li>Put the teat and bottle top on to the bottle and shake gently to mix the formula.</li> <li>Cool the bottle by running it under cold water.</li> <li>Wipe the bottle with a clean cloth.</li> <li>Check the temperature of the milk on your wrist.</li> <li>Give it to the baby.</li> <li>Keep the bottle somewhere cool while feeding the baby.</li> </ul>

## Cleaning and washing a baby's bottle after feeding

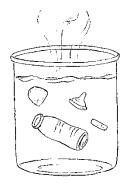
Throw any milk left in the bottle away if the baby has not finished it in one hour, especially if the weather is warm. You can keep mixed formula milk in the fridge for up to 24 hours.





Then fill a bucket or the sink with some warm water and soap.

Take apart the bottle so that you are able to clean each part. You will need to clean the bottle, the nipple or teat, the bottle top or cap, and the collar.





Using a bottle brush or a clean cloth, wash the inside of the bottle and all the other parts thoroughly.

Rinse all the parts properly.

You should let the bottle air dry as cloths may have germs on them. Once the bottle and all the parts are dry you can pack them away in a clean place.

# HELPFUL HANDOUT 4 Foods that are Good for Growth and Food Hygiene

A child with HIV needs good, clean food.

#### Information on when to give food and what food to give:

By six months children cannot get enough energy and protein from breast milk alone.

From 6 months give the child small amounts of mashed food (2-3 tablespoons) three times a day in addition to breast milk. Try mashed porridge, potato, butternut or pumpkin.

Add full cream milk (if the child is not breastfeeding).

Gradually increase the food thickness, the variety of food and the number of times the food is given.

Children should be fed family food rather than special ready-made baby foods. This is healthy as well as cheaper.

#### Information on good foods:

Mix the following with porridge: a small amount of margarine, fat, oil or peanut butter. Add 1 teaspoon of these to a cup of porridge.

Try and give the baby some of these foods every day:

- Eggs, meat, fish, chicken
- Mashed fruit and vegetables, beans
- Full cream milk (if not breastfeeding)



#### How to feed:

The child should have his or her own spoon and plate, which should always be kept clean.

It is important that you watch how much the child eats at every meal so that you can keep track and make sure he or she is getting enough good food.

At about 8 months the child can hold his/her own food like a banana.

### When to ask for help with feeding:

Refer a child to a clinic for help if the child is not receiving enough good food.



These two children are not getting enough good food.

The child on the left has marasmus. His head is very large. His arms and legs are thin and his skin is loose.

The child on the right has kwashiorkor. He has a swollen face, arms, legs and tummy.



Both children need referral to a nurse or doctor.

#### **Keeping food clean:**

A child with HIV gets sick very quickly if food is not prepared in a clean way.

- Remember to wash hands before preparing food.
- Wash hands before eating food.
- Clean all surfaces, plates and spoons.
- Cook food thoroughly.
- Keep cooked and uncooked food in separate places.
- Serve food immediately after preparing.
- Store food in a cool place or fridge.
- Store for only 1 or 2 days.
- If food has to be reheated, then reheat at a high temperature.
- Wash fruit and vegetables before serving.
- Use safe water that is boiled.
- Cover up food.



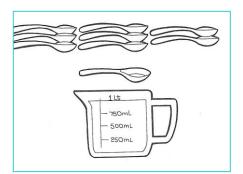
# HELPFUL HANDOUT 5 Dealing with Diarrhoea and Fever

#### Diarrhoea

Children with HIV can get severe diarrhoea often. They can become very ill when they have diarrhoea.

It is possible to prevent diarrhoea by keeping everything clean and by giving good food. A child with diarrhoea can become quickly dehydrated. The dehydration can kill the child.

A child with diarrhoea must get extra fluids to prevent dehydration. The caregiver must continue to feed the child (breastfeeding is good). Show a caregiver how to make up sugar salt solution (SSS):



**Sugar Salt Solution** 

- Wash hands with soap and water
- Boil 1 litre of water
- Let water cool
- Add 8 teaspoons of sugar
- Add ½ teaspoon of salt

Give small sips of SSS to the child often, especially after the child has diarrhoea. Continue giving the child SSS until the diarrhoea has stopped. Protect others from the diarrhoea as there may be germs in the diarrhoea.

#### When to refer to a clinic:

- The child is very sleepy.
- The child becomes confused and has sunken eyes (the child's eyes are dark and deep in the head).
- Reduced or less urine (no wet nappies).
- Delayed skin pinch pinch the tummy not the hand (pinching the child's hand is painful).
- Sunken fontanelle (the soft spot on a baby's skull).
- Blood in the stools.
- If the child has just started a new medicine like ART.



#### **Fever**

A child with HIV may have fever more often than other children as they get more infections. If a child feels very hot to touch, then we say they have fever.

### **Looking for causes of fever:**

There are many causes of fever. Think of the following when assessing a cause:

Look at	Look for
Ears	Are the ears red or sore? Is there a discharge from the ears?
	(Think of an ear infection)
Eyes	Does the light bother the child? (Think of meningitis)
Mouth	Are there sores on the mouth? Is it painful to swallow?
	(Think of thrush, mouth ulcers, herpes or a throat infection)
Skin	Is there a rash? Look for mosquito bites. (Think of malaria)
Neck	Does the neck feel very stiff or is it sore to move the neck?
	(Think of meningitis)
Chest	Is the child coughing? (Think of chest infection and TB)
Stools/Faeces	Is there diarrhoea? (Think of new drugs, such as ART, and think
	of a tummy infection)
Urine	Is the urine very dark or smelly or is it sore to pass urine?
	(Think of a urine infection)

If you find a cause for a fever, then the child may need to go to a clinic for medicines (antibiotics). Sometimes the cause of fever cannot be found.

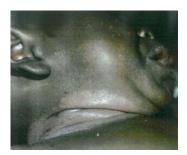
# Managing a fever:

- Remove extra clothing.
- Sponge the child down with tepid water (not very hot or not very cold).
- Fan the child with a newspaper.
- Encourage the child to drink fluids.
- Give medicine to reduce fever, like Paracetamol.
- Read the label on the medicine bottle carefully for the right amount. Don't give aspirin to anyone younger than 18 years old.
- Refer to a clinic if the fever doesn't respond to the medicine or takes longer than three days to get better.

# HANDOUT 6 Skin and Mouth Problems

# **Skin problems**

A child with HIV may have many skin problems.



This child has **THRUSH** around his neck. Thrush is common in children with HIV. It is found in neck and nappy folds. It may be painful.

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- Expose the skin to sun and air.
- Clean the area with clean water.
- Gentian violet or Nystatin cream are good for clearing up thrush.
- Give the child Paracetamol if it is sore.
- Wash nappies and clothes well.
- Refer to a clinic if it does not get better with Gentian violet or Nystatin.



This child has **EZCEMA** (or seborrhoeic dermatitis). The skin is covered with yellow-coloured scales. The skin may be itchy and sore.

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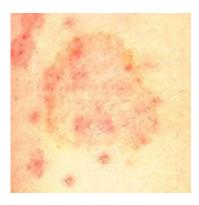
- Ensure that the child has clean, short nails.
- Wash the area using aqueous cream.
- Give the child Paracetamol if it is sore.
- Refer to a clinic.



This child has an ABSCESS on his chin.

He needs to go to a clinic.

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This is **RINGWORM.**It can spread easily from one child to another.

- Wash the rash and hands often with soap and water.
- Apply Whitfield's ointment or refer to a clinic.
- This may take a long time to get better.

This child probably needs to go to the clinic for treatment.



This is **CHICKEN POX.**A rash is found all over the body.

- It is painful so give the child Paracetamol.
- Wash hands often with soap and water.
- Refer the child to a clinic.



SCABIES.

Scabies is common in all children.

Children get very itchy bumps all over the body. It is common to find bumps between the fingers and in skin folds. Scratching can cause an infection.

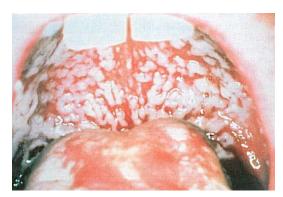
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- Wash all clothes and leave out in the sun to dry.
- Clean all bed linen leave linen and mattress out in the sun.
- Refer to a clinic for scables treatment.

#### **Mouth problems**

Mouth problems are very common in children with HIV.

Prevent problems by keeping the mouth clean and washing the child's bottle, spoon, cup and plate thoroughly.



This is **THRUSH**.

Look for white patches on the tongue and in the mouth.

It may be painful.

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#### Treating thrush:

- Wash hands with soap and water.
- Use a clean, soft cloth with salt water and gently wash the mouth.
- The child will need a medicine like Nystatin.
- Keep the medicine in the child's mouth for as long as possible.
- The child should not eat for 20 minutes after taking the medicine.
- Give pain relief like Paracetamol.
- Check the mother's breasts for thrush.
- Check that the bottle, spoon, cup and plate are clean.

# HELPFUL HANDOUT 7 Danger Signs



The presence of danger signs indicates severe illness. If you see these danger signs the child needs to be taken to the hospital or clinic as soon as possible.

DANGER SIGN	EXPLANATION
The child is unable to drink or breastfeed	The child does not refuse fluid, rather he or she is simply too weak or sick to swallow.
The child vomits up everything	No food or fluid can be kept in the stomach.
The child has fits	The arms and legs jerk or the child becomes unconscious.
The child is very drowsy or unconscious	The child is so sick that they are not aware of what is happening around them. They seem very sleepy and cannot be woken up.
The child is coughing and is breathing very fast (more than 50 breaths in 1 minute)	Fast breathing is a sigh of chest infection (pneumonia). The child breathes fast like a dog panting after running.



The presence of danger signs indicates severe illness. If you see these danger signs the child needs to be taken to the hospital or clinic as soon as possible.

DANGER SIGN	EXPLANATION		
The child is coughing and the chest is in-drawing	In-drawing of the chest is a soft of pneumonia (the chest was sinks inwards).	•	
A child with diarrhoea who has sunken eyes	Sunken eyes are a sign of dehydration. The child may have a sunken fontanelle (t soft spot on the baby's skuldelayed skin pinch on the tummy and no wet nappies	the II),	
Diarrhoea with blood	This indicates a severe infection (dysentry).		
A child less than 2 months old who develops a fever	This usually means that the child is ill.		
A child under 2 months who is not feeding properly	This usually means that the child is ill.		