

Household Handbook

Mother's Name	
Partner's Name:	
House Number:	
Name of ttC -HV	



Visit 1 – Antenatal Care

Antenatal visits

X ✓ _____

HIV testing

X ✓ _____

TB testing

X ✓ _____



Visit 1 – Home Care for the Pregnant Woman

handwashing

X ✓ _____

Iodized salt


X ✓ _____

Saving money/birth plan


X ✓ _____

Visit 1 – Home Care for the Pregnant Woman

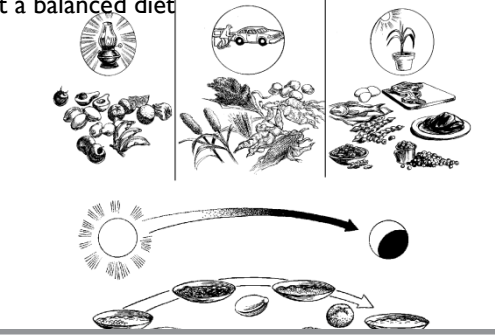
Eat more than usual




Sleep under an insecticide treated bednet

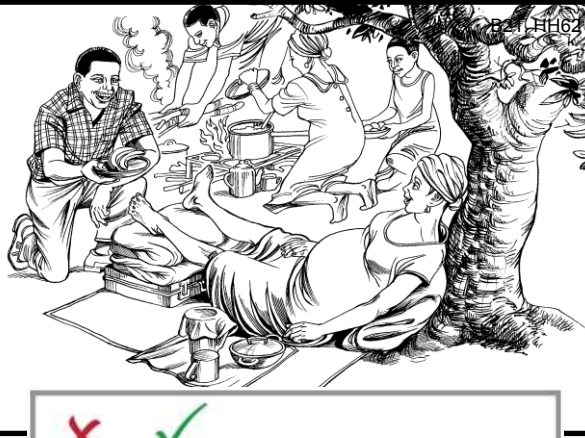


Eat a balanced diet




Visit 1 – Home Care for the Pregnant Woman

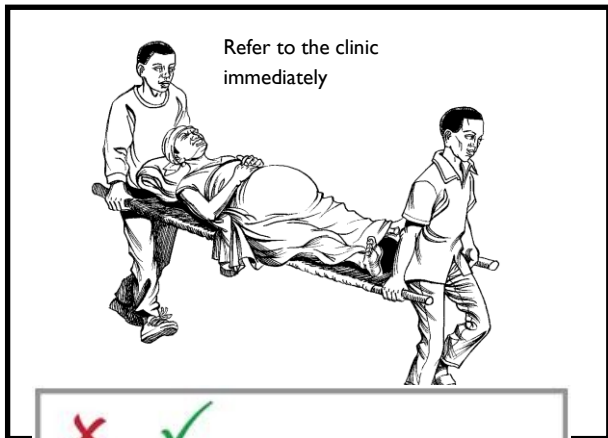
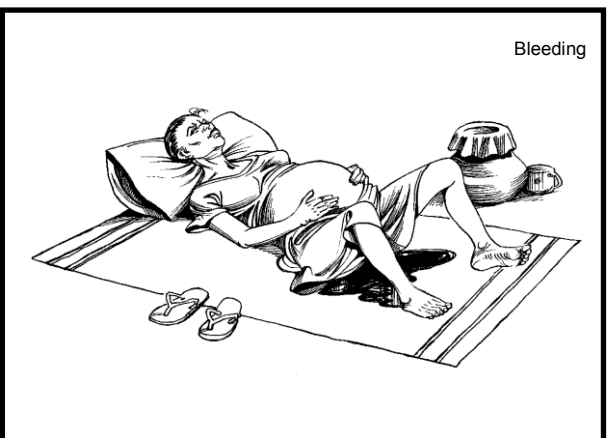
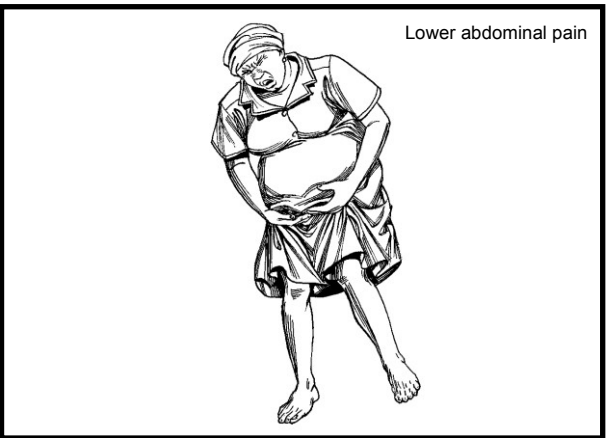
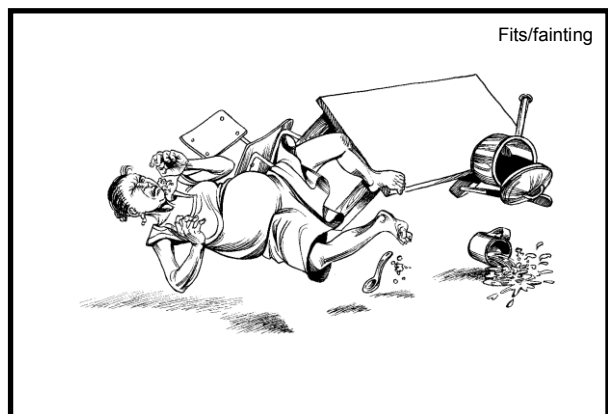
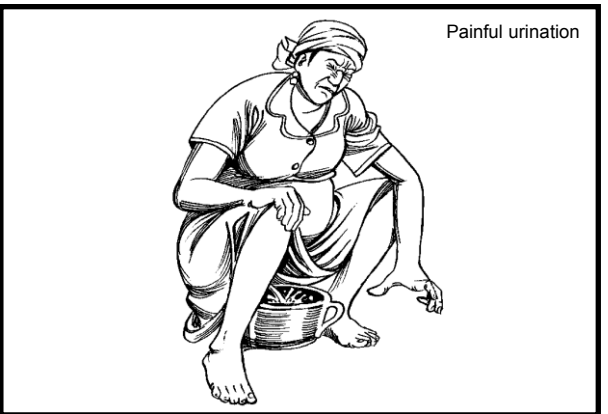
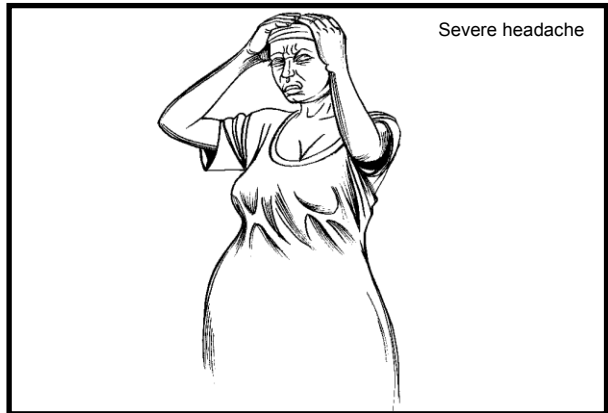




Take Iron and folic acid daily



Danger Signs in Pregnancy – all visits



X ✓ _____

Visit 2 – HIV and TB



Medicine adherence

X ✓ _____

Early testing for HIV

X ✓ _____

Use condoms to prevent reinfections

X ✓ _____

Antenatal care, nutrition and rest

X ✓ _____

Skilled delivery assistance

X ✓ _____

Early and exclusive breastfeeding

X ✓ _____

Visit 3 – Birth Plan and Family Planning

Birth plan

X ✓

Emergency transport

X ✓

Clean birthing kit

X ✓

Visit clinic

X ✓


Choose appropriate method

X ✓

Discuss Family Planning options

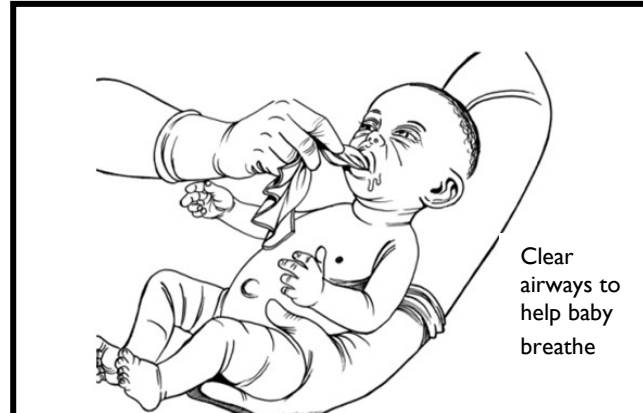
X ✓

Visit 4 – Immediate Newborn Care Page



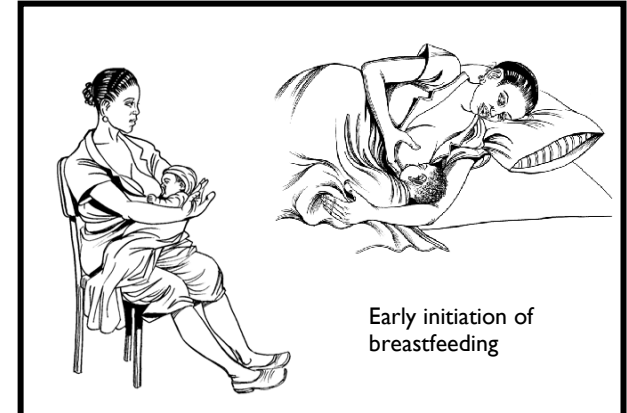
Keep baby warm, skin to skin. Do not put the baby in water for at least a full day

X ✓



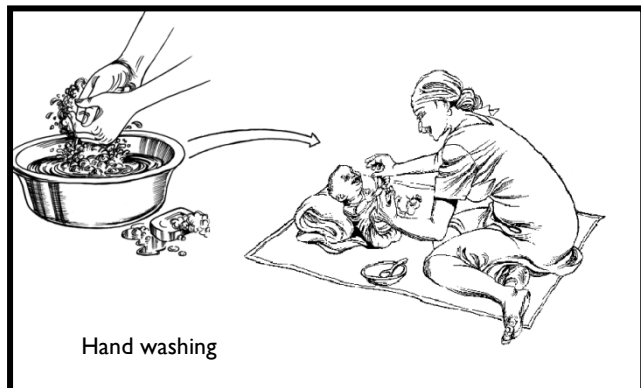
Clear airways to help baby breathe

X ✓



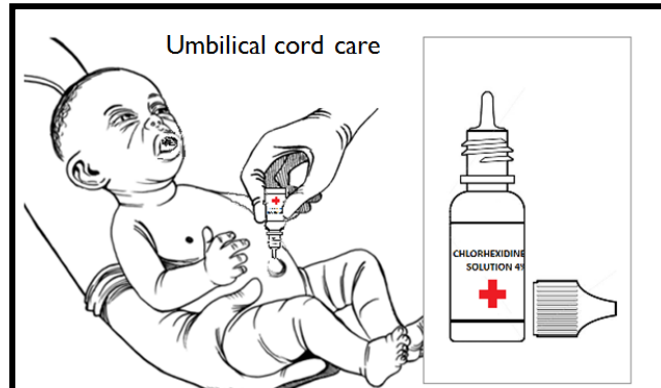
Early initiation of breastfeeding

X ✓



Hand washing

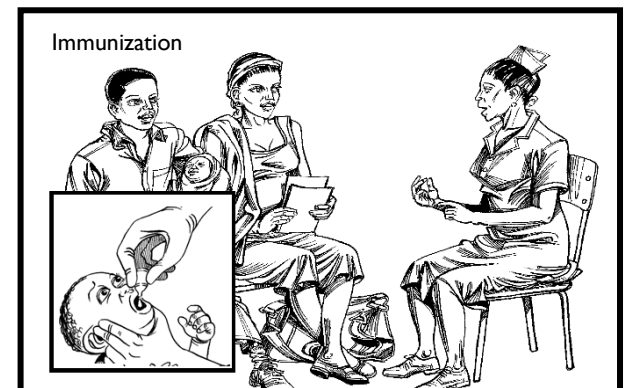
X ✓



Umbilical cord care

CHLORHEXIDINE SOLUTION 4%

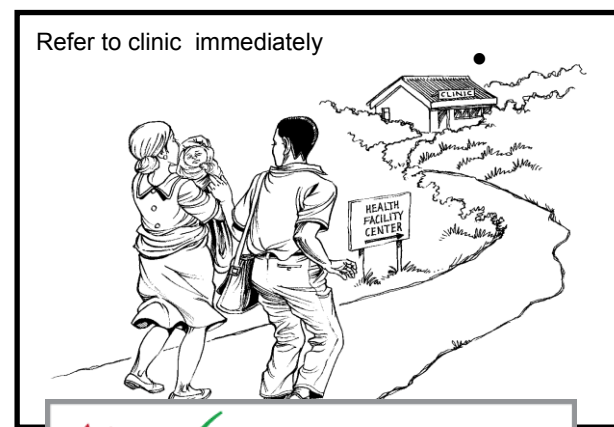
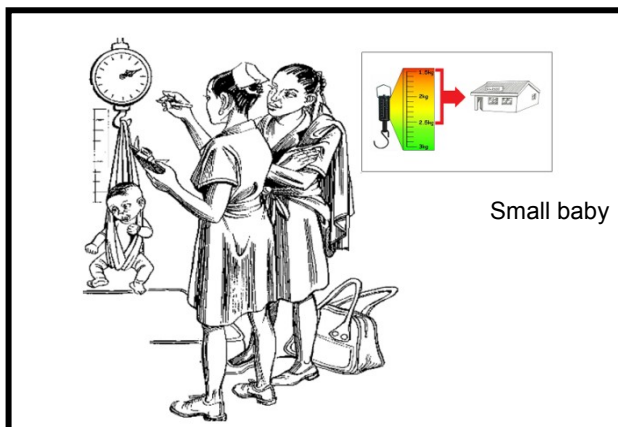
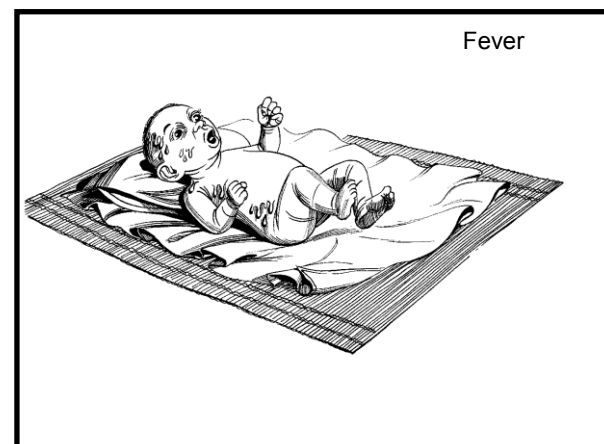
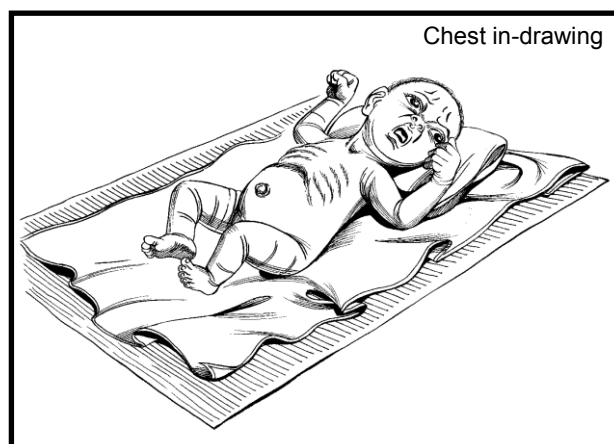
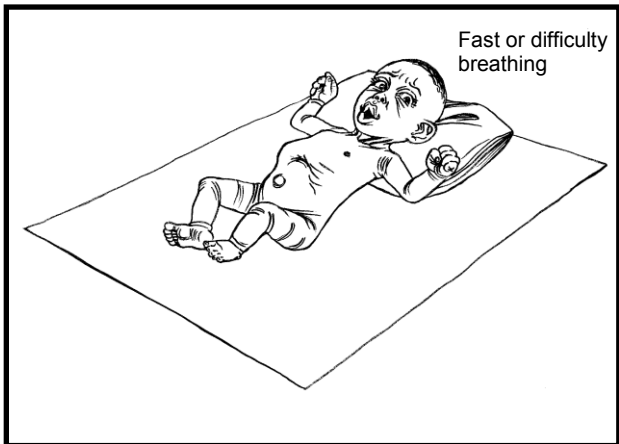
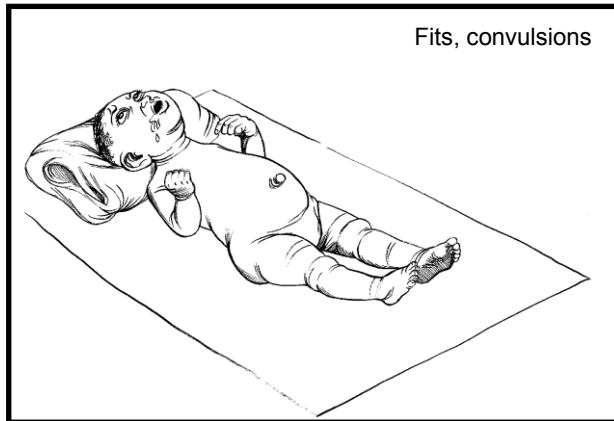
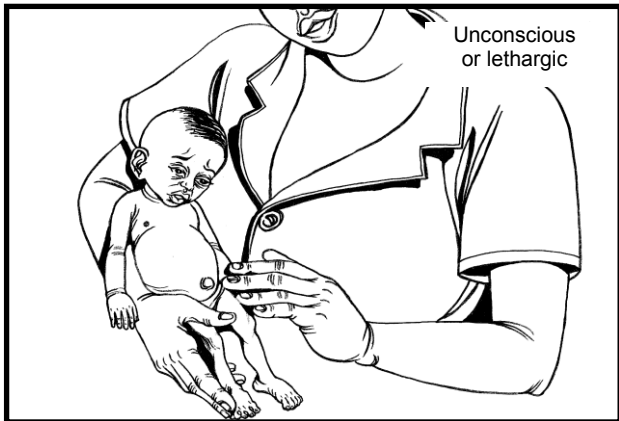
X ✓



Immunization

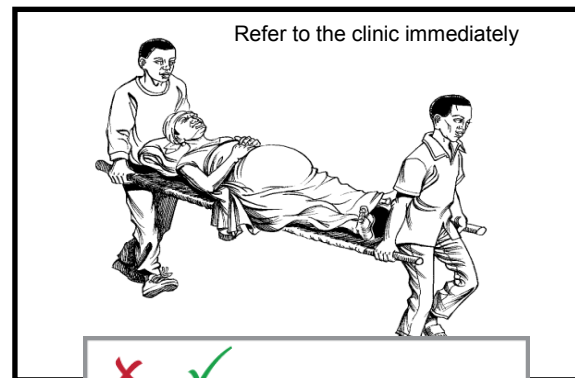
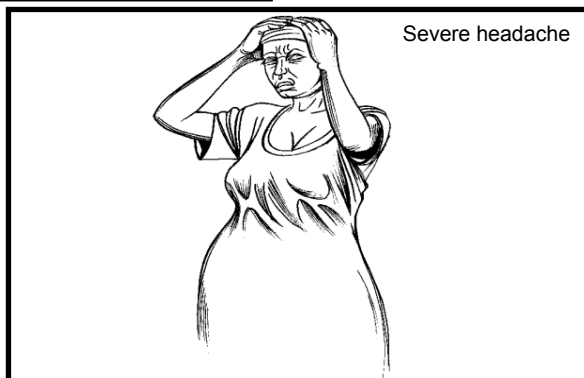
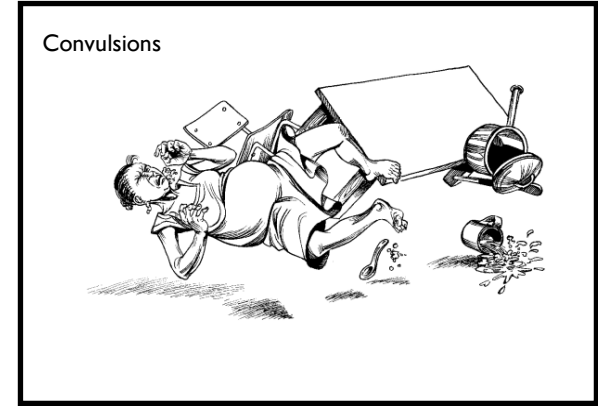
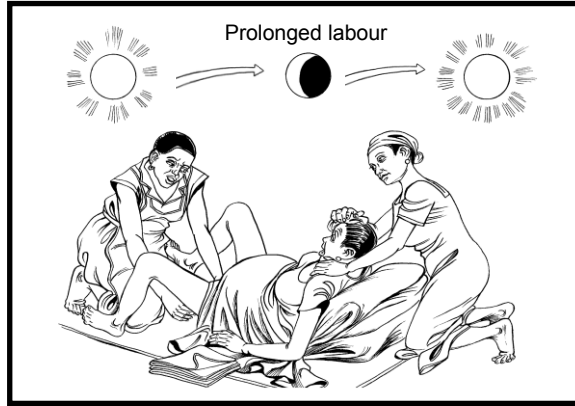
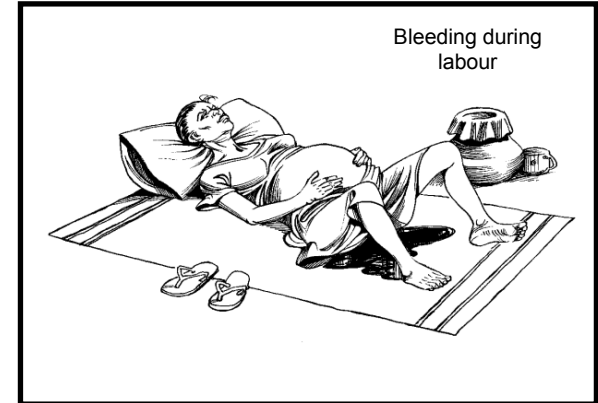
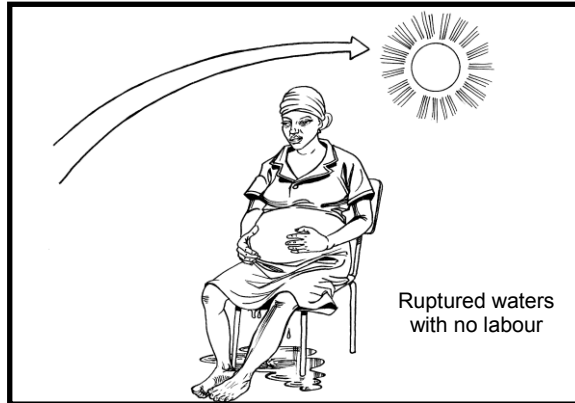
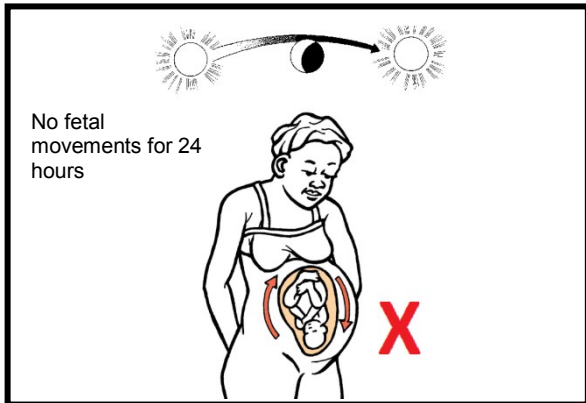
X ✓

Visit 4 – Danger Signs in Newborns



X ✓ _____


Visit 4 – Danger Signs in Labor and Delivery



X ✓ _____


Visit 5 – Newborn – First week of life

Exclusive breastfeeding.
No prelacteal feeds




X ✓

Day and night
on demand
feeding



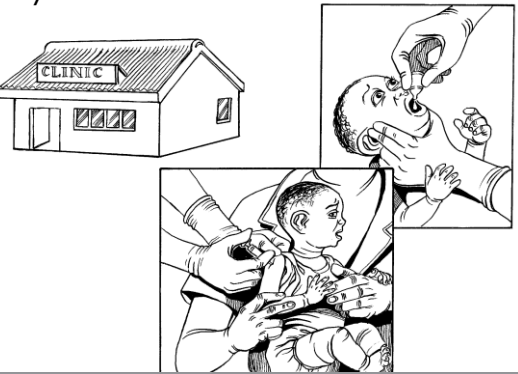
X ✓

Play and
communication



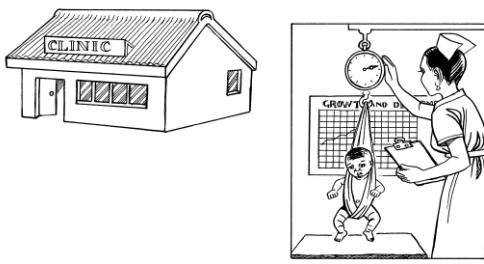
X ✓

Early immunization



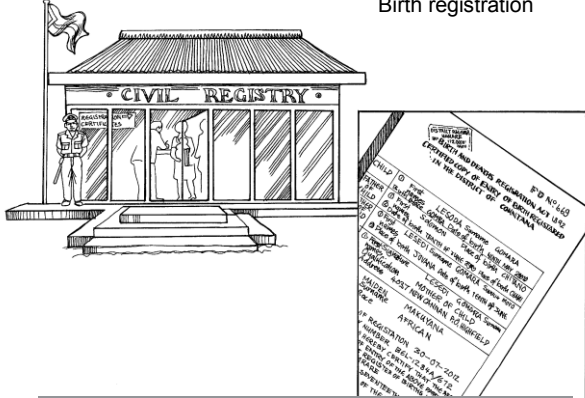
X ✓

Regular growth
monitoring



X ✓

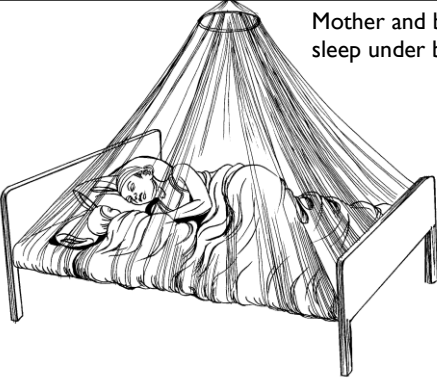
Birth registration



X ✓


Visit 5 – Maternal Care – First week of life

Mother and baby sleep under bednet




X ✓ _____

Take iron and folic acid tablets




X ✓ _____

Postnatal consultation




X ✓ _____

Mother rests well




X ✓ _____

Maternal hygiene



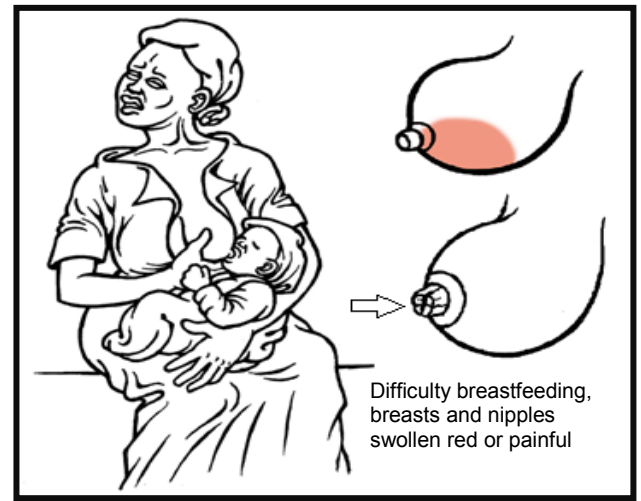
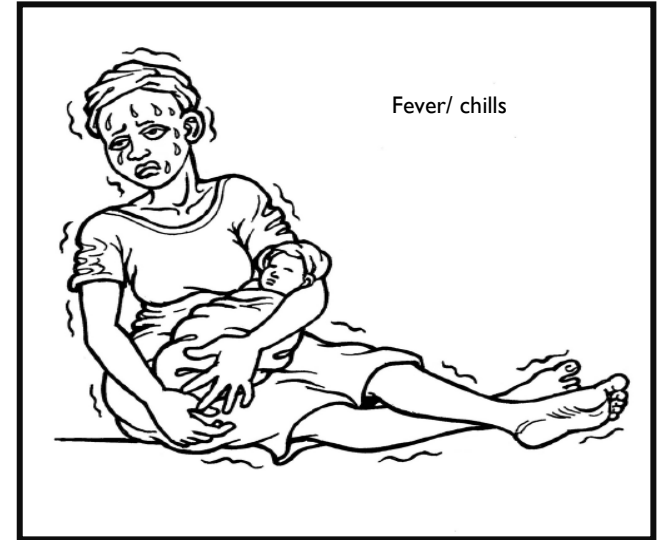
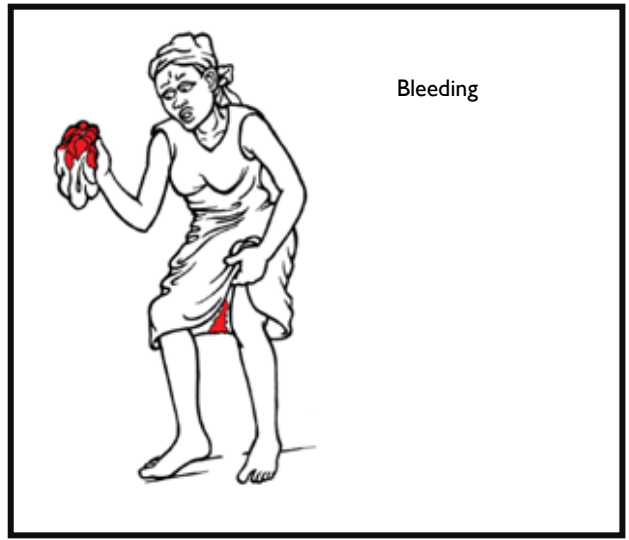
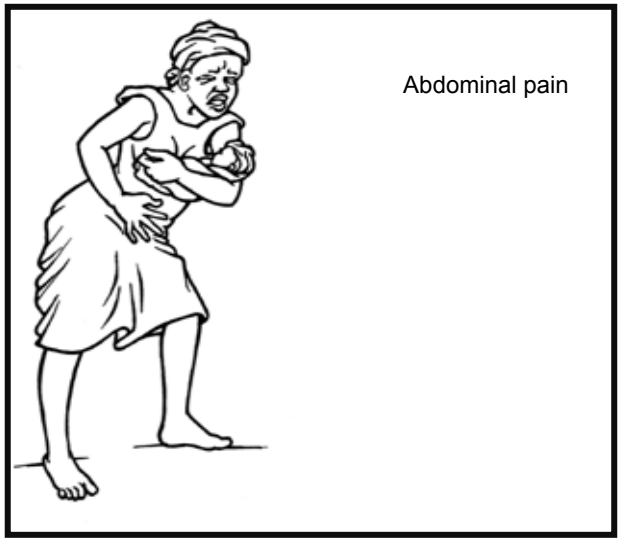
X ✓ _____

Continue to eat well during breastfeeding



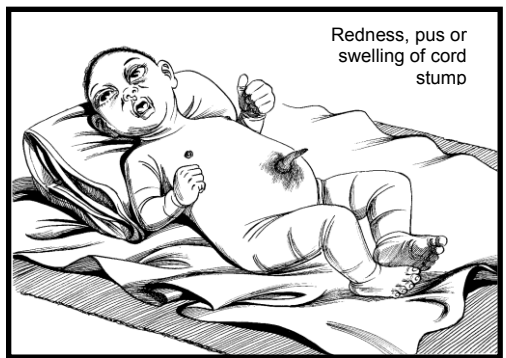
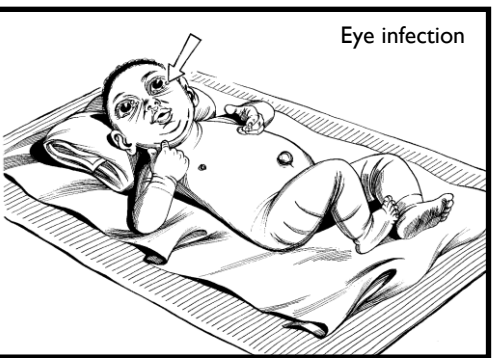
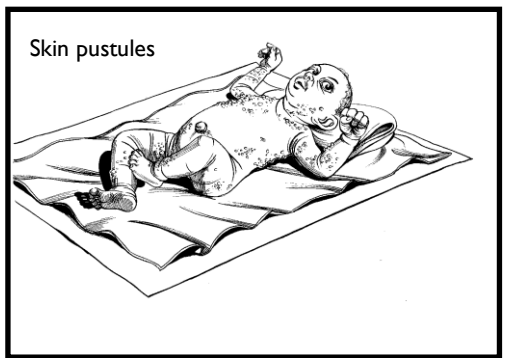
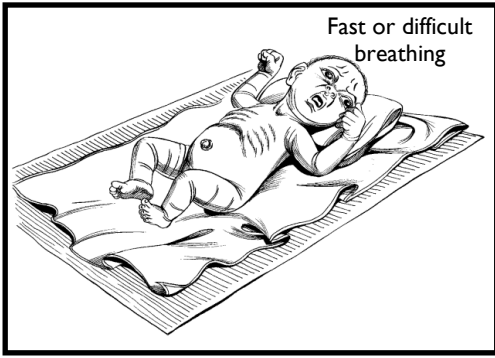
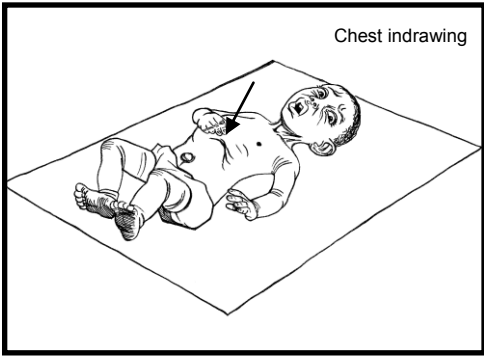
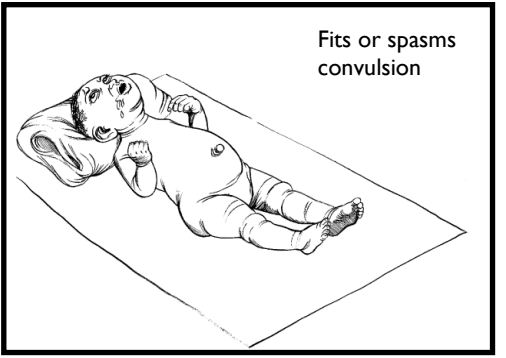
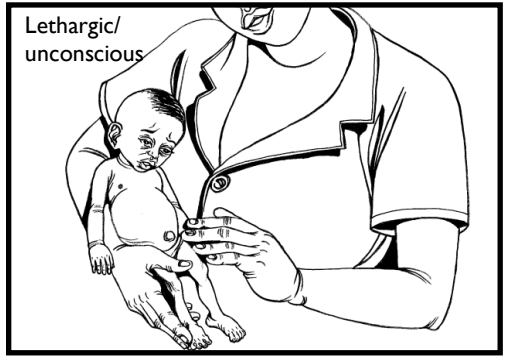
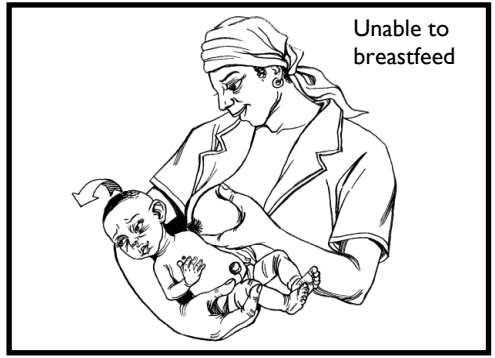
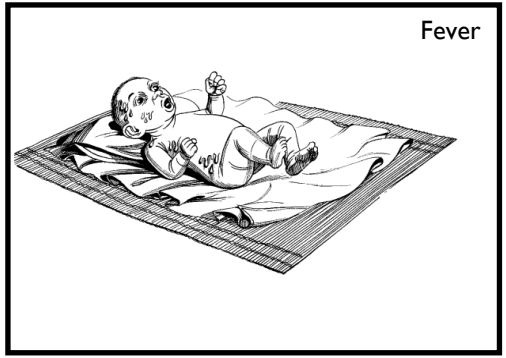
X ✓ _____

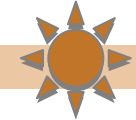
Visit 5 – Maternal Care – Post partum danger signs



X ✓ _____

Visit 5: Danger signs in the newborn





Visit 6: Routine Facility Visit

Immunization

X ✓ _____

Regular growth monitoring

X ✓ _____

Choose appropriate family planning method

X ✓ _____



Visit 6 – HIV Positive Mother

Early detection of HIV positive child

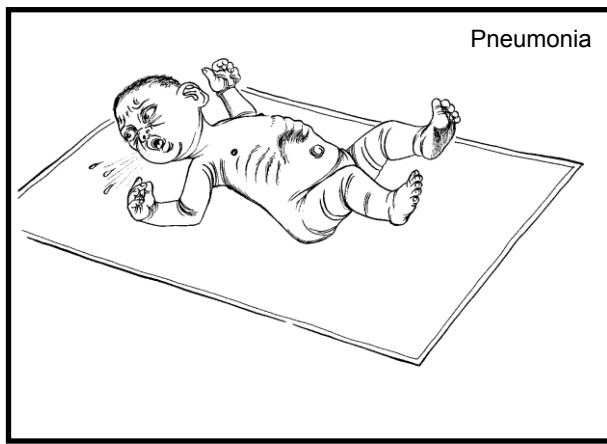
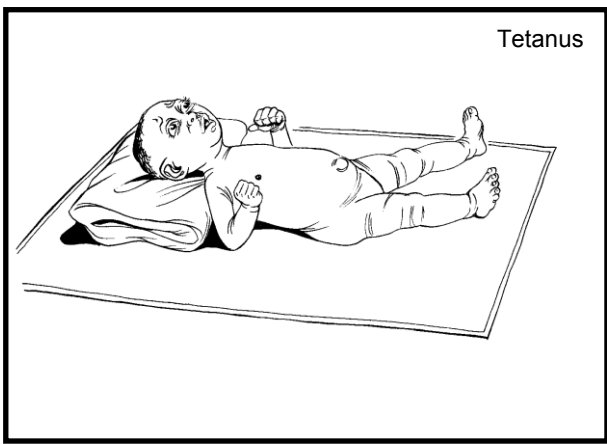
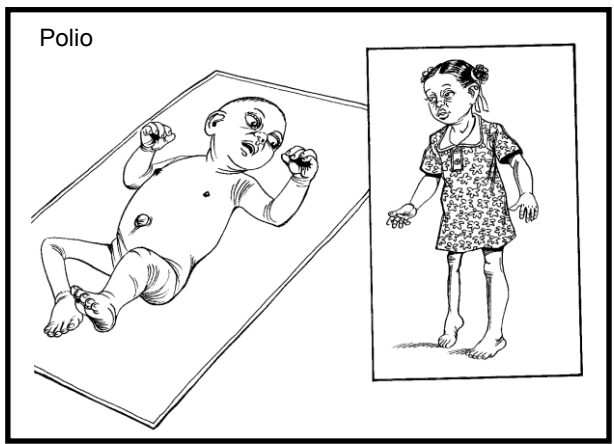
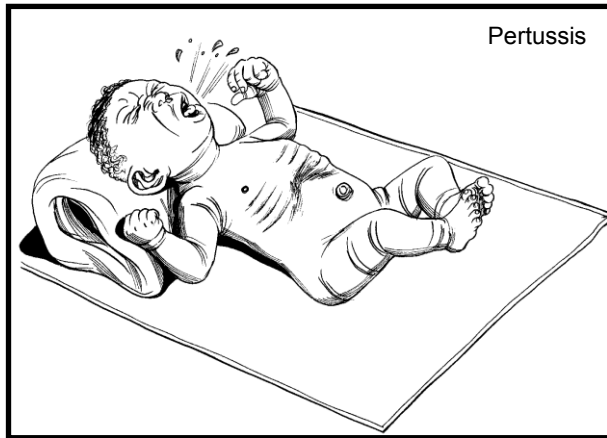
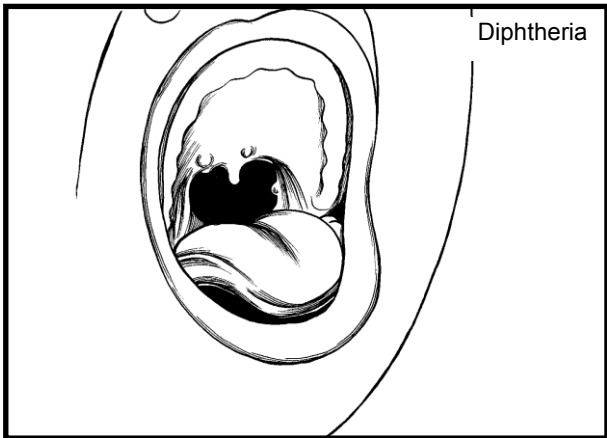
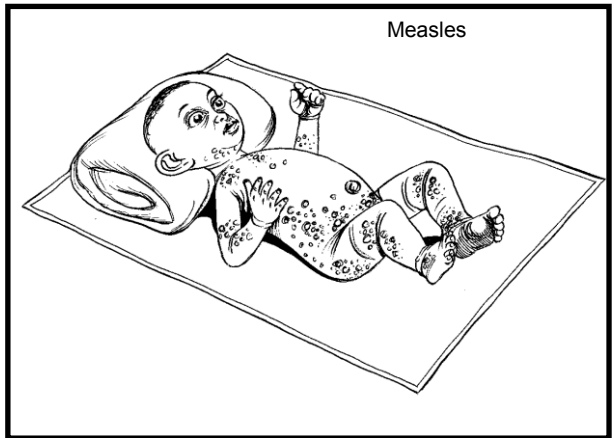
X ✓ _____

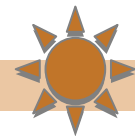
Cotrimoxazole for the HIV-exposed child

X ✓ _____



Visit 6 – Technical: Vaccine Preventable Diseases





Visit 6 – Danger Signs in Young Children

Vomits everything ingested

Unable to drink or breastfeed

Fits/convulsions

Lethargic/unconscious

Diarrhoea

Bloody diarrhoea

Sunken eyes

Fever

Cough with difficult breathing

Chest indrawing

Skin rash

Visit 7. Sixth Month – Complementary feeding

Dietary diversity/3 food groups

X ✓ _____

Continued breastfeeding

X ✓ _____

Iron rich foods

X ✓ _____

Handwashing and hygiene

X ✓ _____

From 6th month, 2-3 small meals per day

X ✓ _____

Give clean water to drink (boiled/purified)

X ✓ _____

Diarrhoea 3 watery stools in one day

X ✓ _____

Regular growth monitoring

X ✓ _____

Family planning

X ✓ _____



Visit 8 – Complementary Feeding: Ninth Month

Continued breastfeeding

X ✓ _____

Vitamin A rich food

X ✓ _____

Vitamin A from 6 months

X ✓ _____

Meal frequency 3-4 meals per day

X ✓ _____

Growth monitoring

X ✓ _____

Play and communication

X ✓ _____

Visit 9 – The One Year Old Child

Meal frequency

X ✓ _____

Iron rich foods

X ✓ _____

Immunization

X ✓ _____

Deworming from 12 months

X ✓ _____

Vitamin A supplement at 12 months

X ✓ _____

Regular growth monitoring

X ✓ _____

Play and stimulation

X ✓ _____



Visit 10 –Eighteen Month

Meal frequency

X ✓ _____

Iron rich foods

X ✓ _____

Vitamin A & deworming

X ✓ _____

Child should sleep under a bednet

X ✓ _____

Practice birth spacing

X ✓ _____

Play and communication

X ✓ _____