

WHO/FCH/CAH/00.5  
UNICEF/PD/NUT/(J)00-4  
UNAIDS/99.58E  
Distribution: General  
Original: English



# ***HIV and Infant Feeding Counselling: A training course***

## ***Overhead Figures***



**World Health  
Organization**



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# Defining HIV and AIDS

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HIV - Human Immunodeficiency Virus is a virus that destroys parts of the body's immune system

AIDS - Acquired Immuno-Deficiency Syndrome is the final stage of the disease caused by HIV

# Mother-to-Child Transmission of HIV

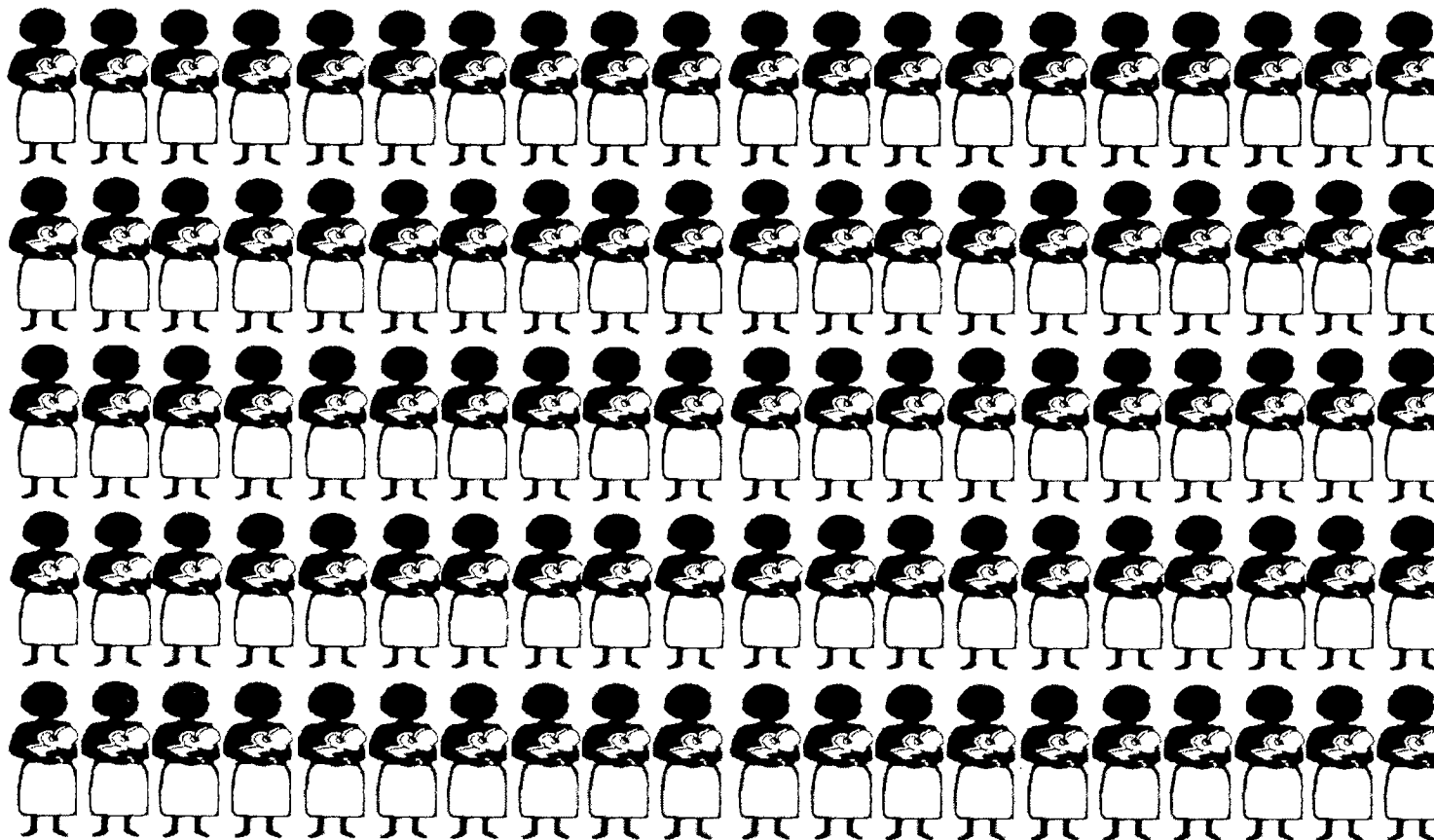
1/2

Most children who get HIV are infected through their mother

- during pregnancy across the placenta
- at the time of labour and birth through blood and secretions
- through breastfeeding.

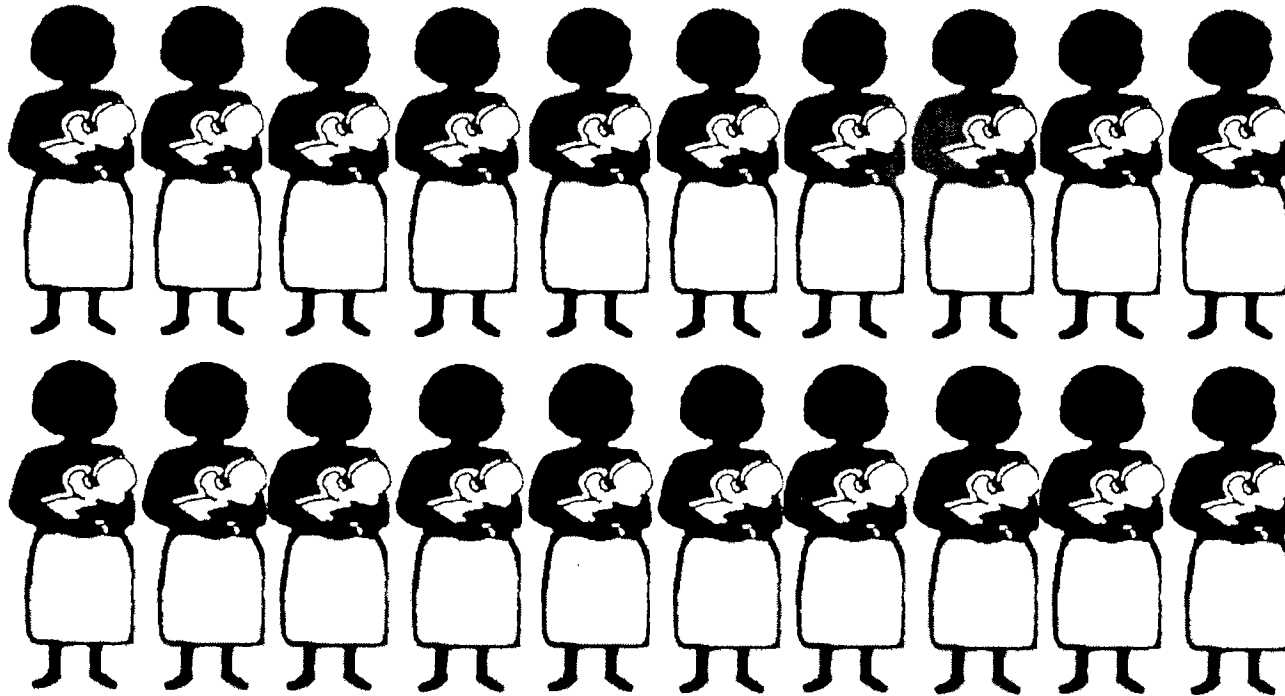
This is called mother-to-child transmission of HIV or MTCT.

# 100 mothers and babies



20 mothers and babies

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# **Factors which affect Mother-to-Child Transmission of HIV**

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Recent infection with HIV

Severity of HIV infection

Infection with sexually transmitted diseases

Obstetric procedures

Duration of breastfeeding

Exclusive breastfeeding or mixed feeding

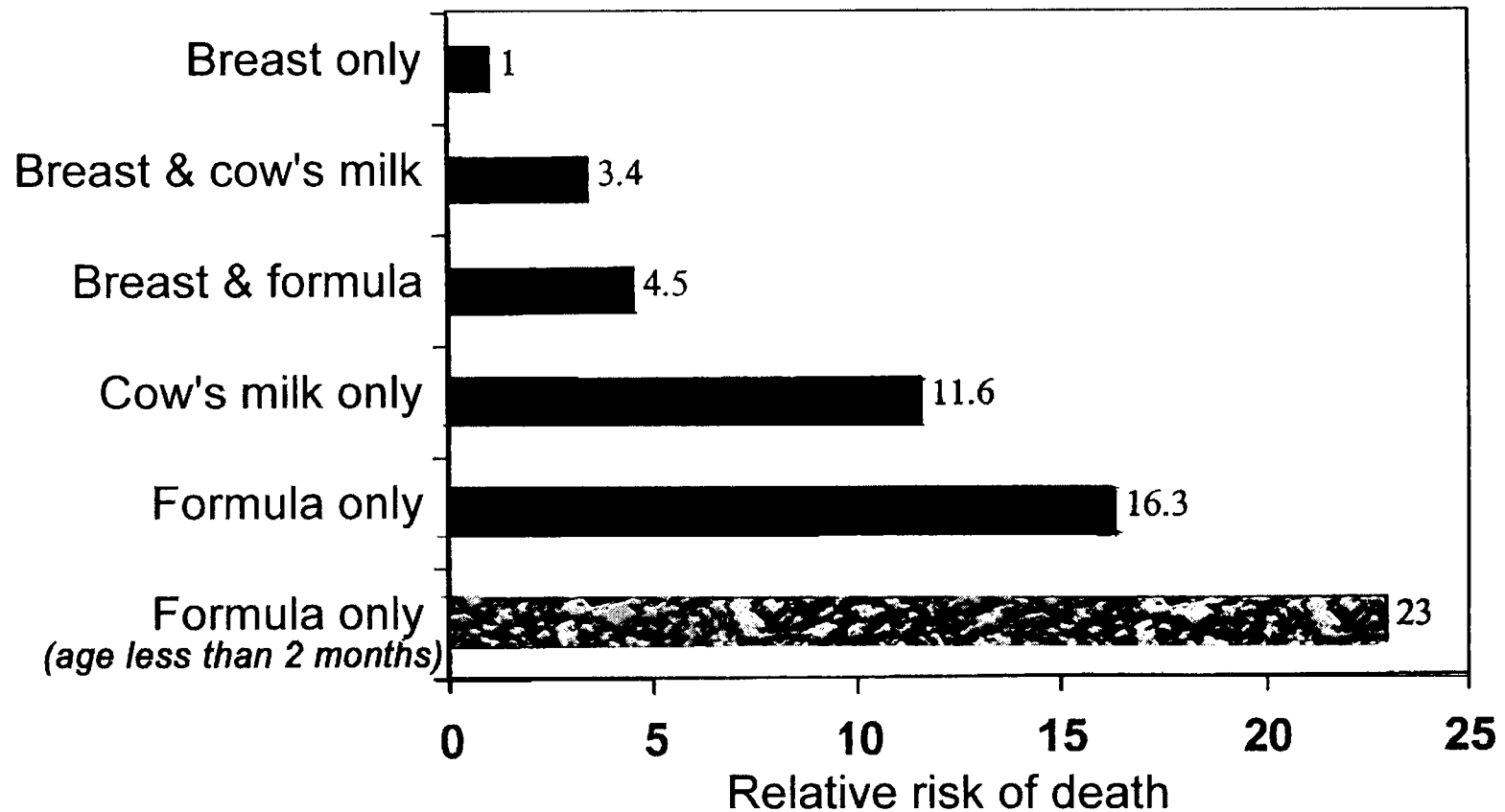
Condition of the breasts

Condition of the baby's mouth



# Risk of death from diarrhoea with different milks

Infants 8 days to 12 months



## **Policy of supporting breastfeeding**

**“As a general principle, in all populations, irrespective of HIV infection rates, breastfeeding should continue to be protected, promoted and supported.”**

HIV and Infant Feeding: a policy statement,  
developed collaboratively by UNAIDS, WHO and UNICEF, 1997

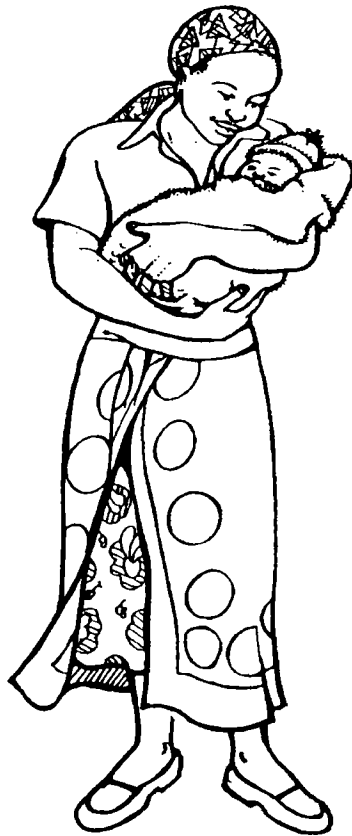
# Confidentiality



# Confidentiality



# Testing for HIV antibodies in children



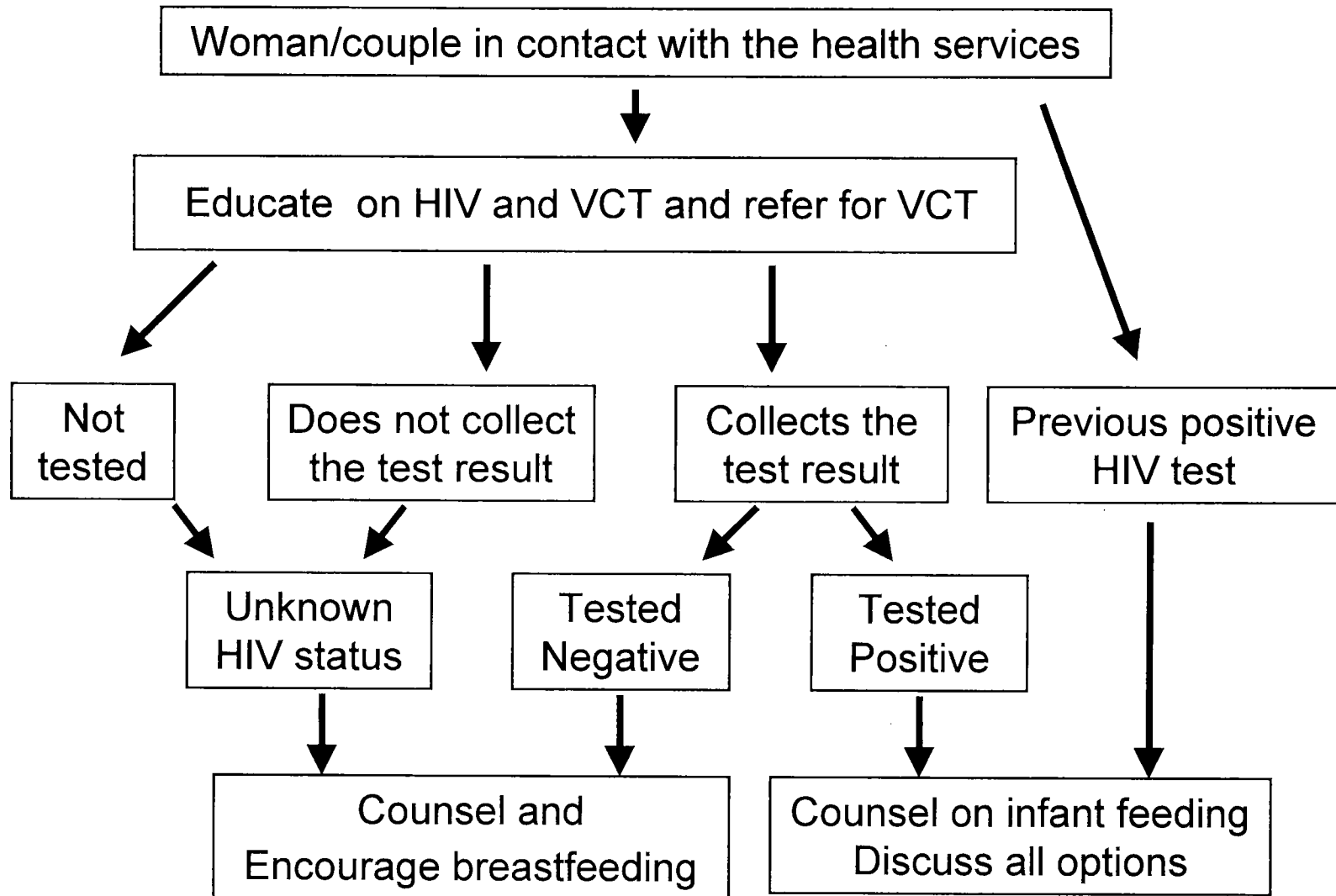
Antibodies  
from  
mother

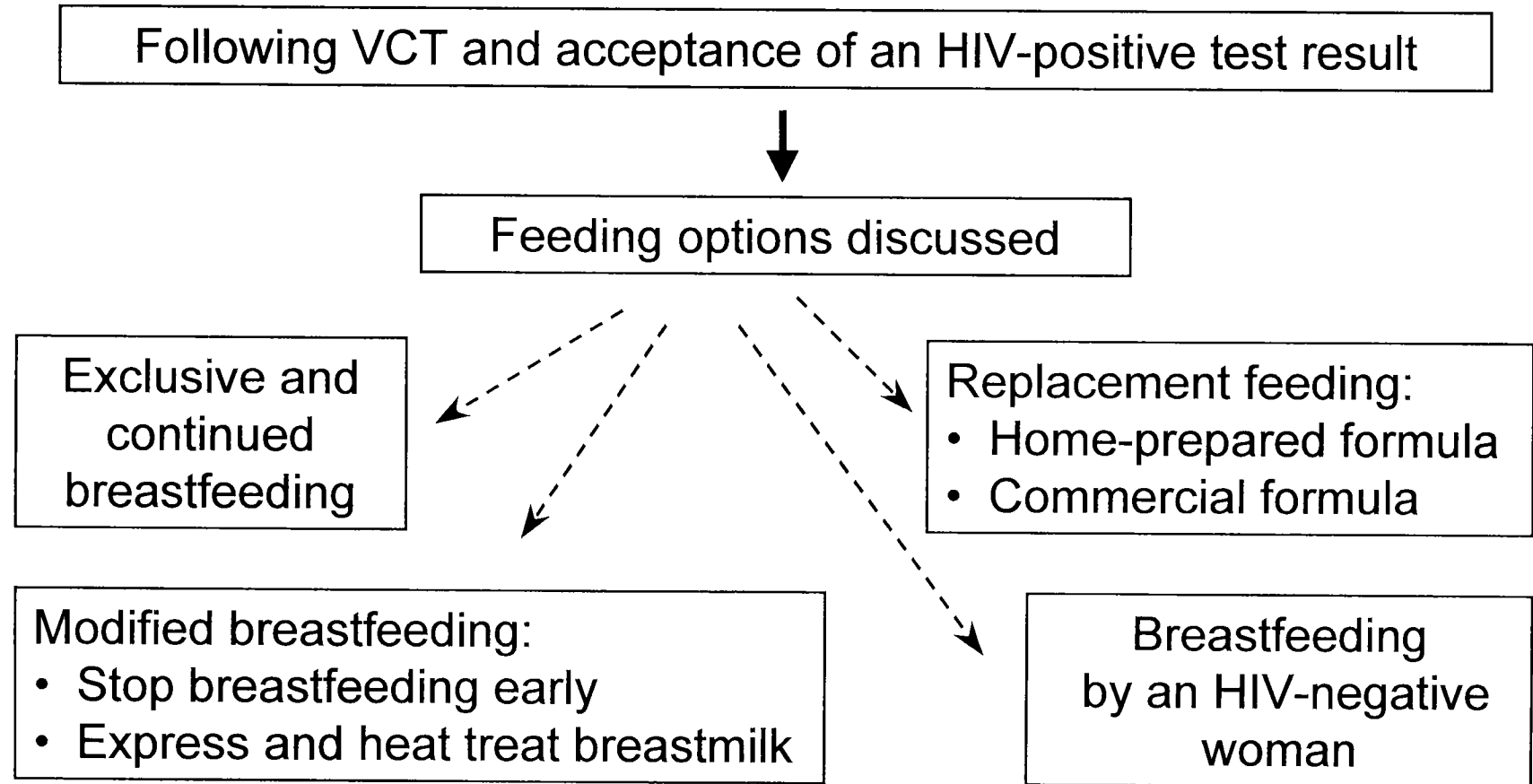


Antibodies  
may be  
from mother



After 18 months,  
child's own  
antibodies





Adequate complementary foods from about 6 months of age will be needed for all children

## **Replacement feeding**

is the process of feeding a child who is

- not receiving any breastmilk,
- with a diet that provides all the nutrients the child needs,
- until the child is fully fed on family foods.



## **Where prevention of MTCT of HIV needs to be integrated into MCH care**

Health education activities

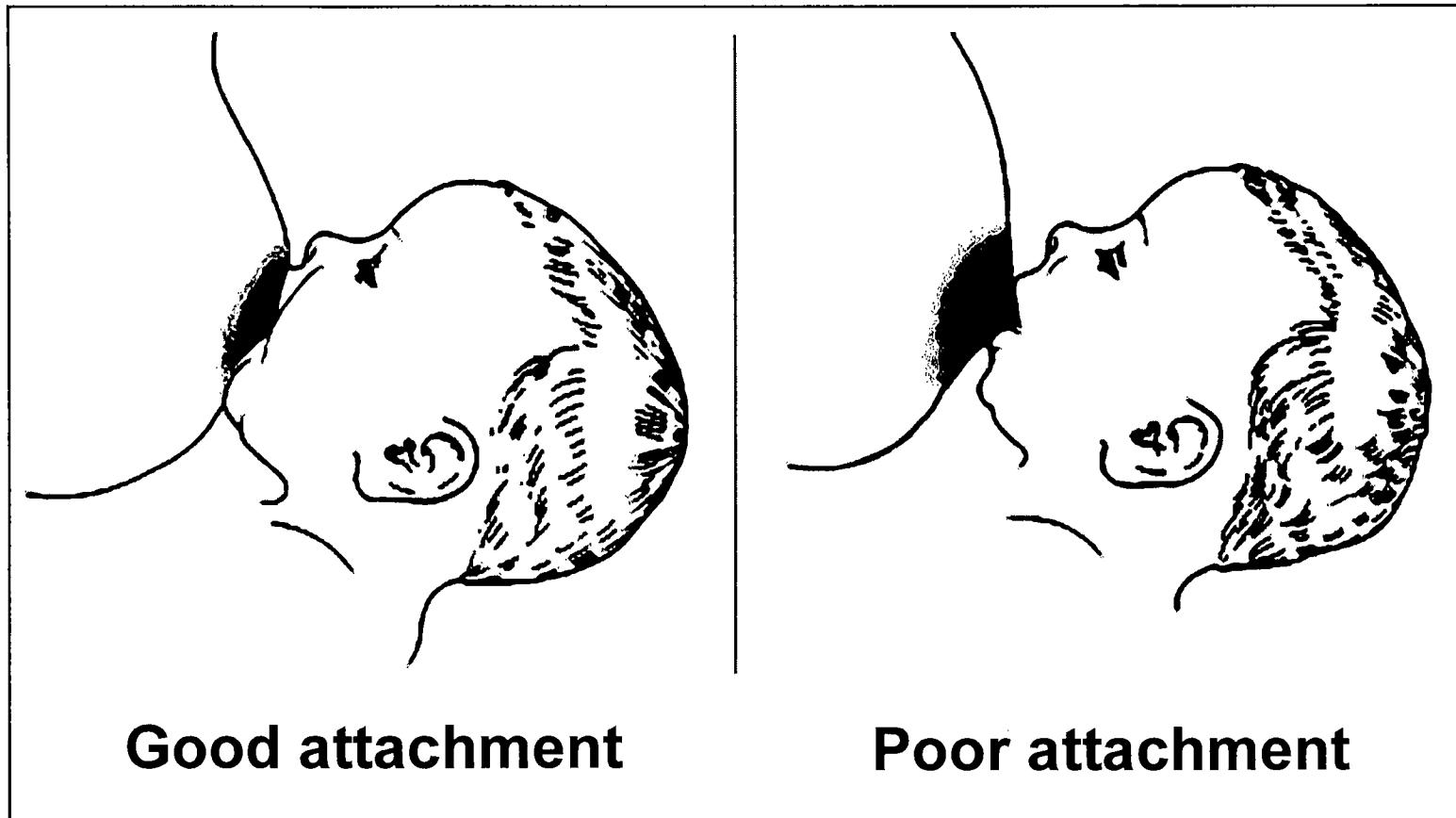
Treatment of sexually transmitted diseases

Family planning services

Antenatal care

Delivery and postpartum care

On-going health and nutrition care for children



# Clean hands

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- After using toilet
- After cleaning baby's bottom
- Before preparing or serving food
- Before feeding children or eating

# Clean utensils

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- Clean surface (table, mat or cloth)
- Wash utensils immediately after use
- Keep clean utensils covered
- Use clean utensils for baby

# Safe water and food

8/3



- Boil water for drinking and baby's feeds
- Keep water in clean covered container
- Boil milk before use
- Give freshly prepared complementary foods

# Safe storage

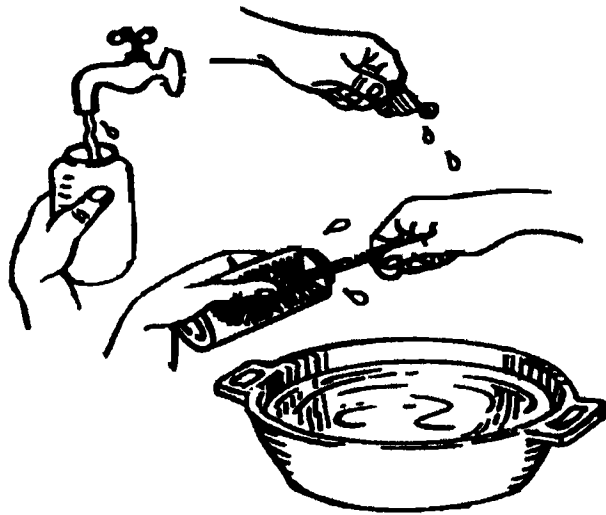
8/4



- Keep foods in tightly covered containers
- Store foods dry if possible (e.g. milk powder, sugar)
- Use milk within one day if refrigerated
- Use prepared feeds within one hour

# Disadvantages of feeding bottles

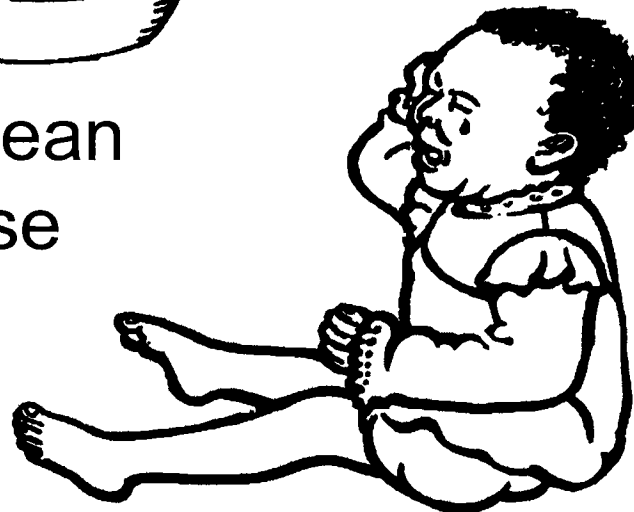
8/5



Difficult to clean  
and sterilise



Less adult  
attention



May cause illness

## Advantages of cup feeding

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Less risk of contamination

Infections less likely

Ensures adult attention



For the caregiver

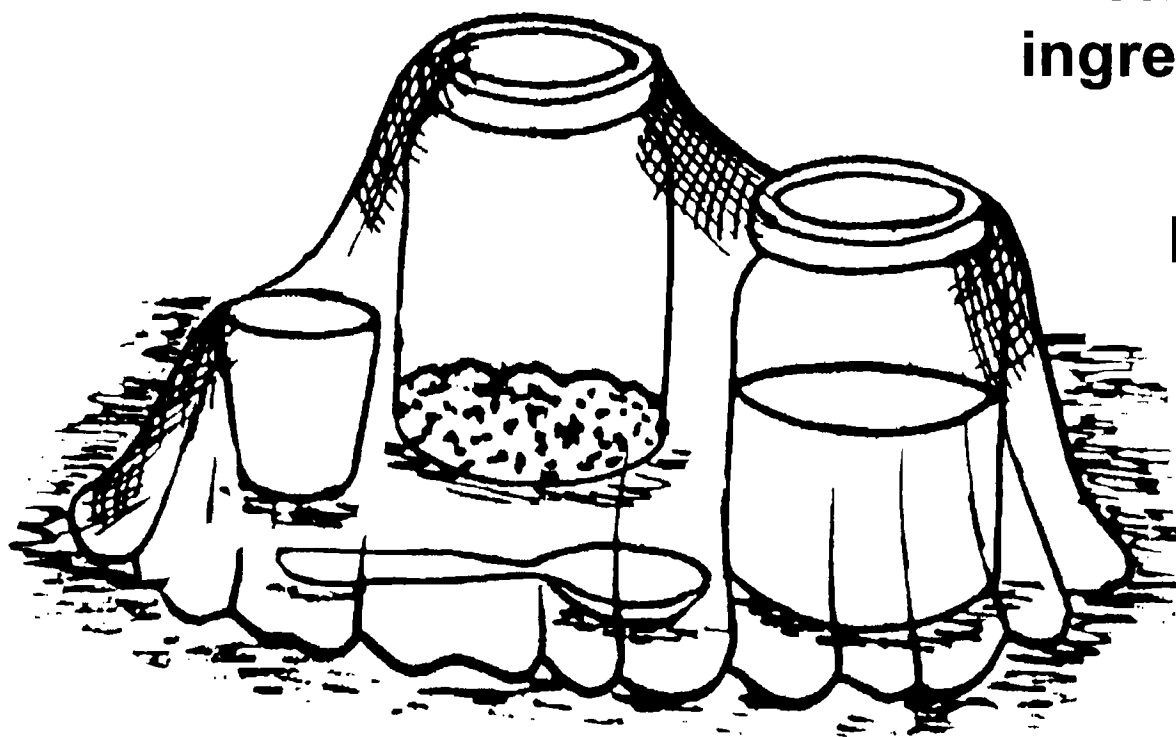
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Milk powder

**Correctly  
measured  
ingredients**

Boiled  
water

Cup for  
feeding

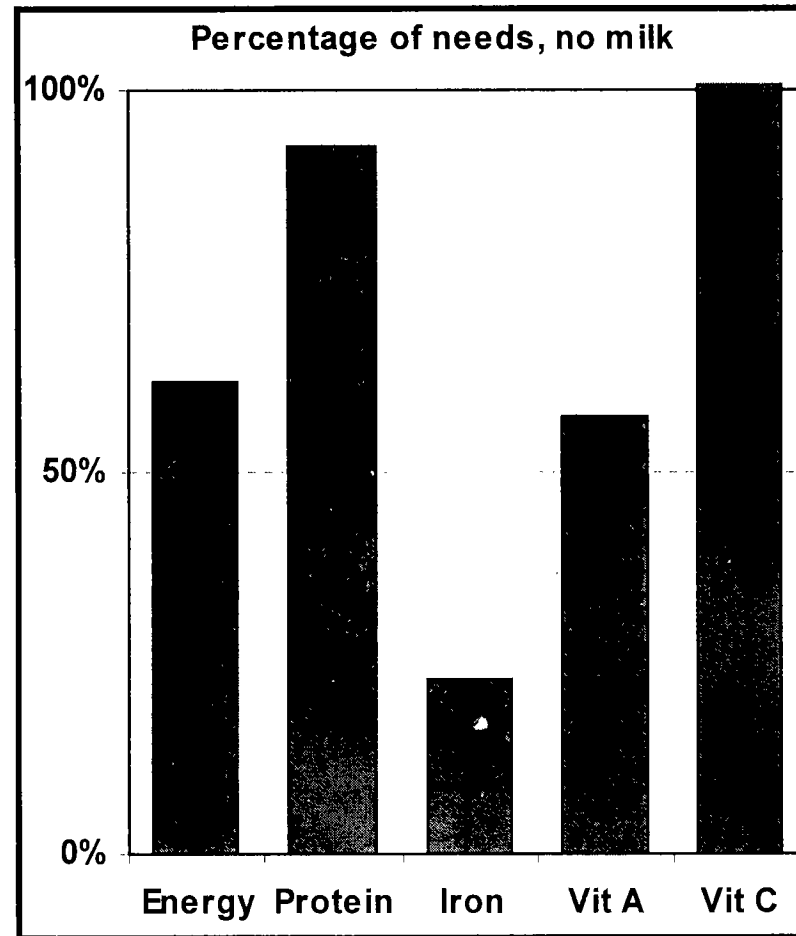


**Clean  
utensils**

Spoon for stirring

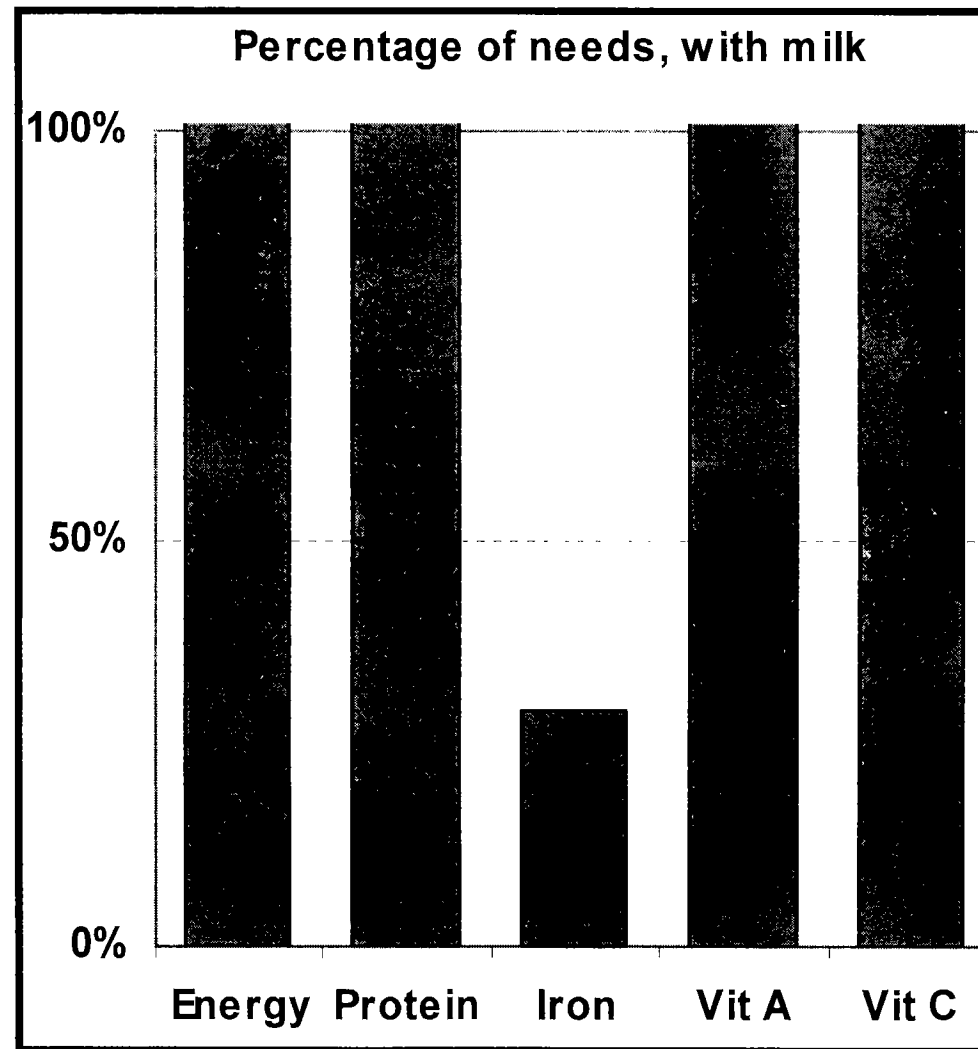
Child 1: no milk

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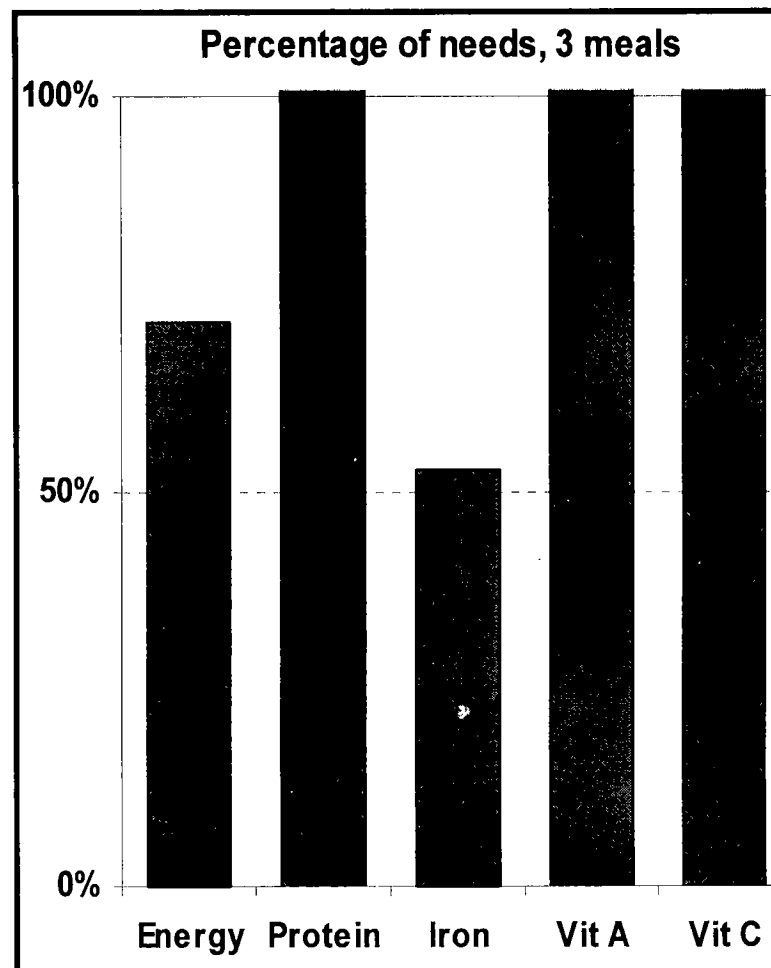


Child 1: 500 ml of milk added

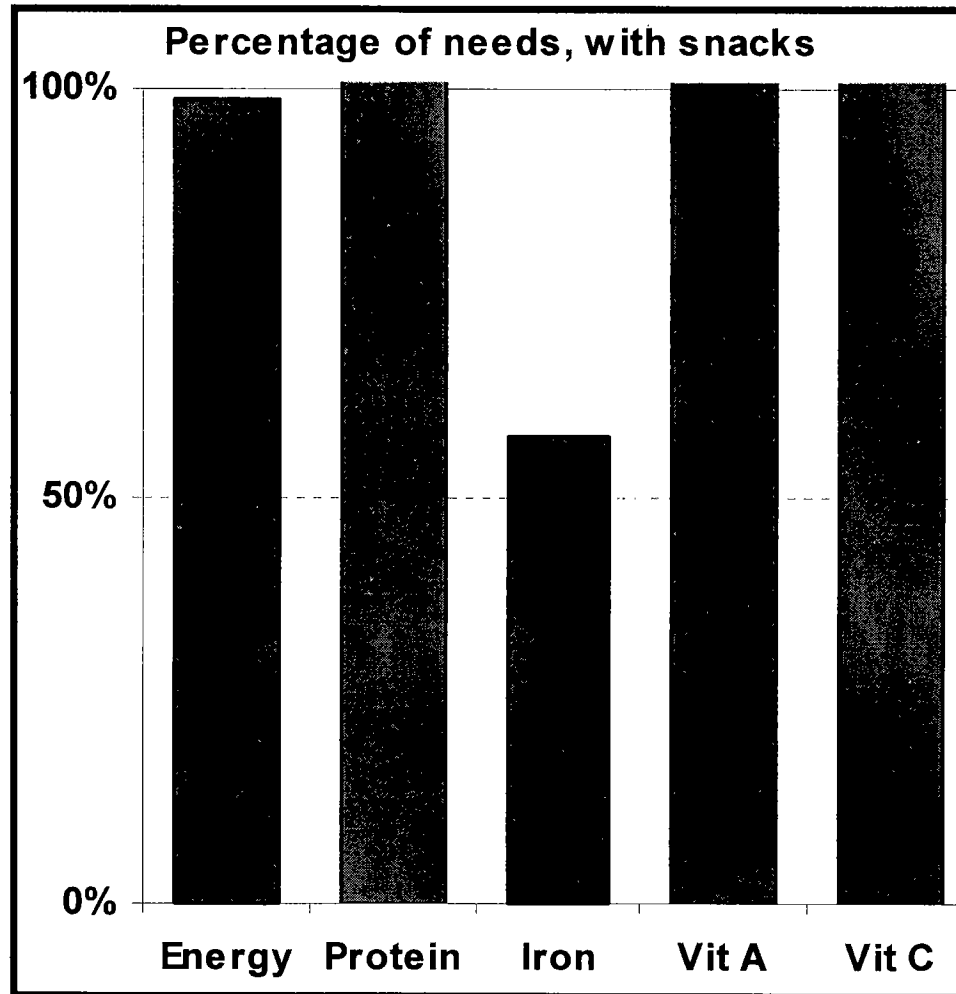
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# Child 2: Three meals



Child 2: Three meals and two snacks



# Active feeding

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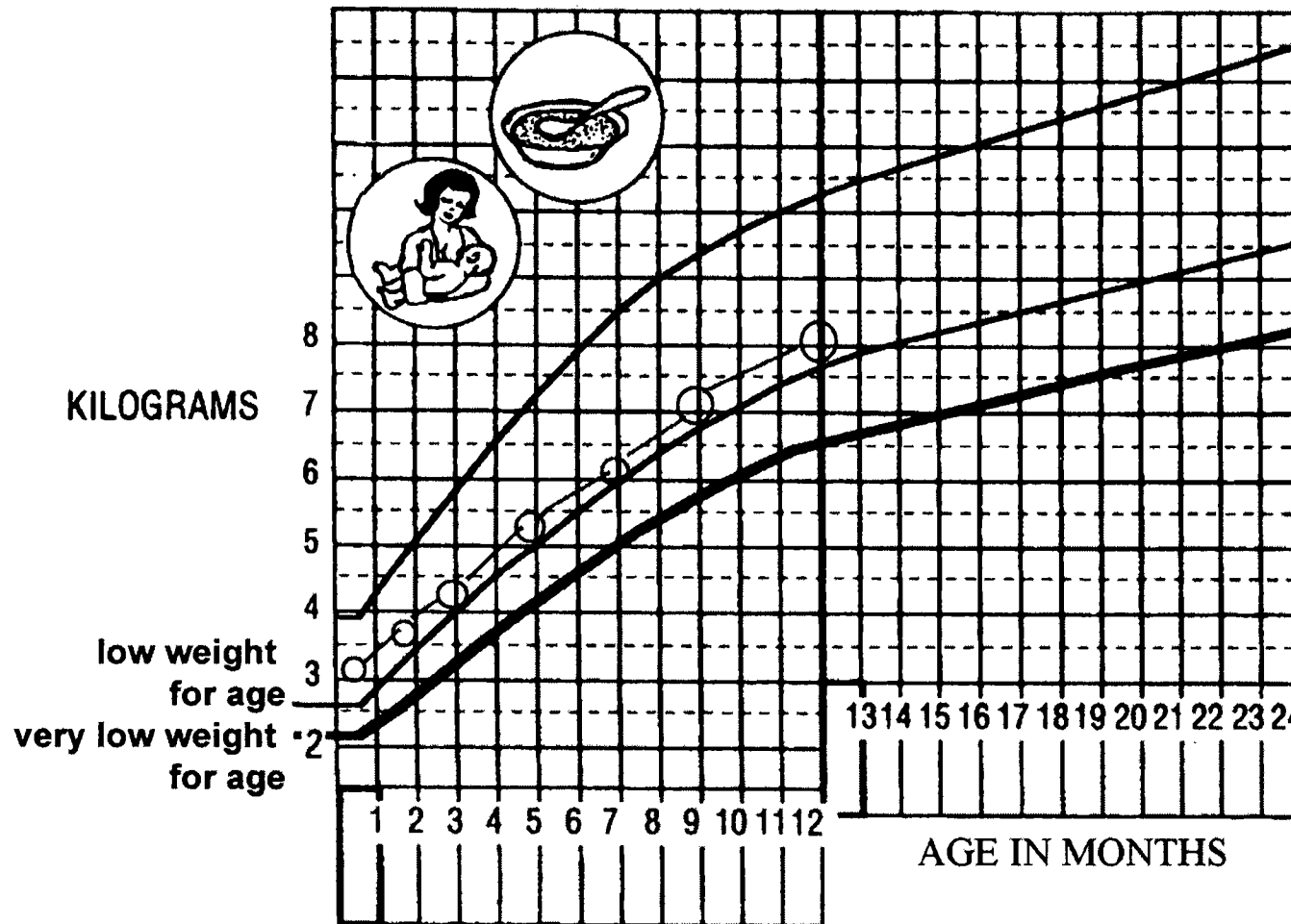
# Child needs own portion

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Child 1

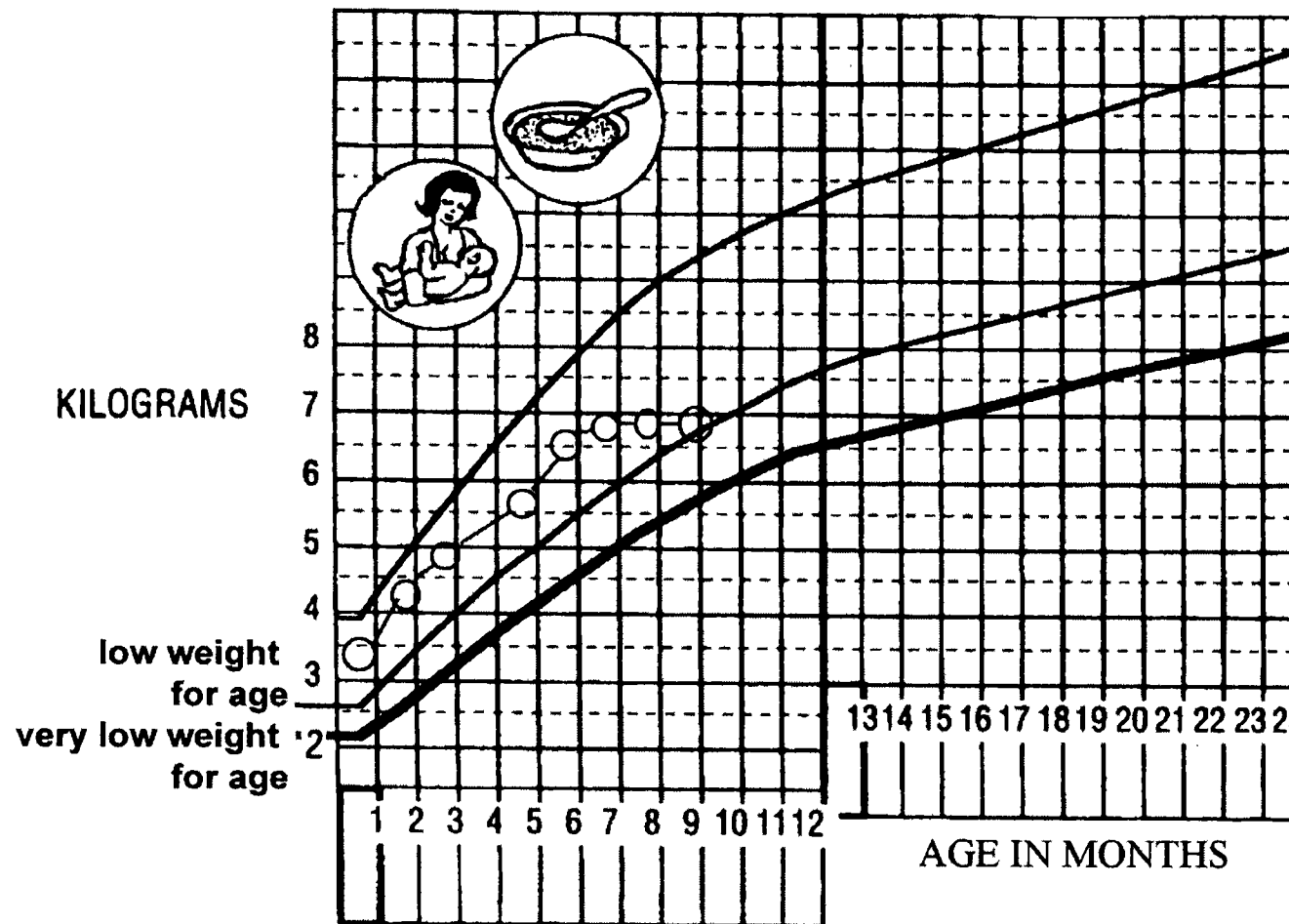
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Child 2

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