

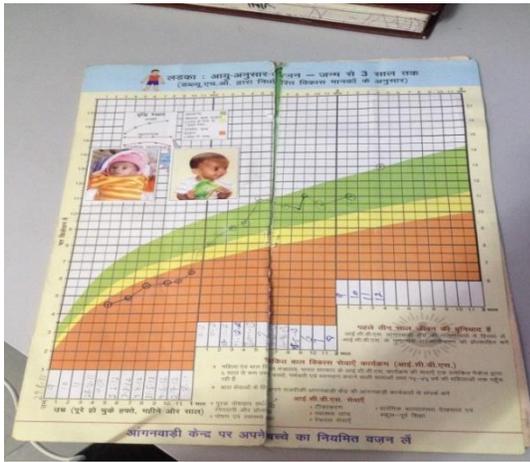
## Case study – Malnourished Child

This case study of a family in a village highlights (a) strong family beliefs on malnutrition with faith on local practitioners and faith healers even in educated parents (b) the role of communication in the form of repeated sms and phone calls in treating repeated episodes of acute diarrhea (c) the importance of ongoing communication and support in providing integrated care and (d) adoption of a leadership role by the mother in her village to advocate continuum of care and care for early childhood development. It has resulted in correcting severe acute malnutrition (SAM) and prevented stunting with very good performance in school.

### Case description

This male child was born to B in a village in district Yamuna Nagar in Haryana on 11.8.11 after a full term pregnancy. The mother is matriculate and the father is 12 grade pass. He is an electrician and earns about 7000 Rs per month. The child was born normally with birth weight 3.5 Kg. The first breast feeding was delayed until 2nd day since the family waited for aunt ('Bua') to help with the first breast feed. After a few days, he was started on cow's milk by a bottle since breast milk was not considered to be sufficient. The child gained weight poorly (only 1 Kg in 4 months). She was told by her neighbors that the child has developed 'Sukha Masan' (local term for malnutrition) which is believed to be caused by visitation by an evil spirit if the mother visits cremation place. He was treated with some faith healing rituals and herbal medicines but there was no improvement.

The child was registered by SWACH staff during household survey in June 2012. At this time an MCP card was prepared and the weight of the child was in -3 Z category. Family was sent a daily sms and the mother was encouraged to visit Anganwadi center daily. At the age of about 7 months the child developed acute diarrhea and vomiting. She tried medicine from village practitioner but this did not work. She called SWACH doctor on phone. She was advised ORS and the method of giving ORS was explained through a number of sms messages and phone conversation. She followed the advice. The messages were focused on correct use of ORS. When the vomiting stopped and diarrhea started to get better she was advised to resume feeding she was advised about hands washing and safe feces disposal and resume play and communication on the next day to help early recovery. She followed the advice and developed some faith. The episode of diarrhea was treated through (a) 20 sms messages (b) clarification through phone communication and (c) one follow up home visit by SWACH field staff. The child recovered from this episode fully in one week. The mother was then encouraged to give undiluted milk by a katori. The child started to show some improvement but after about one month the child developed diarrhea again but with no vomiting. This episode was treated again with ORS but this time the child was also advised oral zinc for a period of 10 days. This time the family was more compliant. The child could be resumed on normal feeding within 3 days of occurrence of diarrhea.



Mother child protection card



At age 8 months

The mother started to go to Anganwadi center regularly and participate in group learning as well as feeding the child. She started to play with the child at home and took a lot of interest in feeding the child semi solid foods. She stated “ initially I was not convinced and kept on visiting the faith healer but after the recovery of my child from diarrhea I felt more confident “. Once SWACH supervisor came, she discussed play and communication as well as feeding. The worker also explained the weight increase on MCP card. This impressed the mother and she started to share her experiences in the group meetings with other mothers. She stated that “daily informal discussions with other mothers made me more confident and the other mothers chose me as a leader of mother’s club. This helped me to become more confident, my son showed further improvement and this encouraged me to do more and get more involved in play and communication, my son gave a lot of encouragement to me and provided a lot of enthusiasm to keep going “.



After recovery from the first episode of acute diarrhea the child had gained weight steadily over the next 6 months. There were temporary dips in the weight gain due to illnesses (episodes of fever cough and cold) but the child recovered rapidly after the illness since the mother states that early resumption of feeding and continued play and communication has helped the child recover from illness fast. The child increased weight from -3Z to -2Z and this helped the mother to get more empowered. This gave her enthusiasm to persist with complimentary feeding and play. The body weight increased steadily and came within normal range.

One day SWACH team came. They took photographs and made a video. This increased my confidence even further. I was told to interact with my child, teach my child by copying, play with ball, with dough, use a picture book, show objects, animals, flowers, plants and other objects. I was advised to keep talking to him. This was a lot of fun and there was a lot of learning. Interactions with other mothers in the village and learning from each other's experience was very useful. Becoming a leader of the mother's club gave a lot of confidence in me. I continued to be the leader until I got ill with abdominal pain. After this she kept on having abdominal pain, nausea and vomiting which was diagnosed to be gall bladder stones. With the help of doctor from SWACH she got surgery done in the district hospital. Her son received a temporary setback for about one month. Guidance and support provided helped her in getting over this period and the child recovered fairly rapidly.

At the age of 2 years 9 months H started going to school, he learnt very rapidly. He developed the habit of washing hands with soap and water well on a regular basis. He took bath himself, dry himself with towel without the help of the mother. He put on clothes and remove them but required some help. He used to talk a lot and could recite poems and tell stories. He solved simple puzzles but he needed some help in writing. He was well mannered, shared his things with other children. At the age of 3 years he was well nourished. He was not stunted. At school also his teacher was very happy with his performance and the teacher said that this child is doing much better than other children. He also gets along well with other children.

The mother is a very positive person. She felt very encouraged by the growth and development of her child and she had the interest in involving other mothers in the village. For about one year she became the leader of the local mother's club and she started to share her experiences with other mothers who have young children below 3 years of age. The mother feels very happy and proud that as a result of her experience with her child and the guidance provided by SWACH, she has been able to help the other mothers in her village. In this process she has been able to help the growth and development of many other children in her village and she has also helped the other mothers in the village to become more confident and happy.

The mother adopted child spacing and she had her next child after 4 years. At 5 the child is going to a private school. He is the brightest child in his class and is considered to be well

behaved. He is considered to be a very social child. The child is quite independent. He is very active and is quite pleasant.

Now H is 5 years old and B have one more baby boy who is one year of age. Both the children are healthy and parents are very happy with the performance of H in school, he stood first in his class and is very active. His younger brother is also very active, mother spends most of her time with the children. Whole family is very happy and satisfied



10 months



18 months



42 months



60 months

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