

Indicator: # of infants who were exclusively breastfed for the first six months (HE_MNCH_095)**HEALTH SECTOR** **PROJECT AREA:** Maternal, Newborn, and Child Health**Type:** Outcome**Unit of Measure:** Individual**Disaggregation:** None**Related Objective:** Increase the knowledge and skills of child caregivers to keep children under 5 healthy (Objective 2)**Precise definitions**

Infants: This indicator is somewhat complex because the unit of measure is the infant, but the respondent is the mother. The indicator is also asking about past behavior and a mother/caregiver may not always be able to recall this information accurately. The indicator assesses whether a baby was breastfed for the first six months of its life, so it may not be useful to ask this question to a woman/caregiver who has a child older than 2.

The mothers/caregivers being asked the question should have attended at least 75 percent of a multisession training on preventing and managing childhood illness co-facilitated by a PCV and their counterpart or local health staff/volunteer.

Exclusively breastfed: Exclusive breastfeeding is defined by WHO as no other food or drink (not even water) except breast milk (including milk expressed or from a wet nurse) for the first six months of life, but allows the infant to receive oral rehydration salts (ORS), drops, and syrups (vitamins, minerals, and medicines).

Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants; it is also an integral part of the reproductive process with important implications for the health of mothers. On a population basis, exclusive breastfeeding for six months is the optimal way of feeding infants. After that, infants should receive complementary foods with continued breastfeeding up to 2 years of age or beyond.

To enable mothers to establish and sustain exclusive breastfeeding for six months, WHO and UNICEF recommend:

- Initiation of breastfeeding within the first hour of life
- Exclusive breastfeeding—that is, the infant only receives breast milk without any additional food or drink, not even water
- Breastfeeding on demand—that is, as often as the child wants, day and night
- No use of bottles, teats, or pacifiers

Data collection**Tool:** Child Health Outcomes Survey

The Child Health Outcomes Survey is intended to be given to the mothers/caregivers who participated in a multisession training focused on preventing and managing childhood illnesses facilitated by the PCV and their counterpart. This survey tool should be used three times:

- 1) As a pre-test at the start of the first training session/meeting
- 2) As a post-test at the last session/meeting to assess change during the time of the training
- 3) Three to six months after the training/activity has finished to assess whether knowledge is retained

All mothers/caregivers should be given the pre-test and post-test. Only mothers/caregivers who attended at least 75 percent of the defined information sessions should be included in the survey three to six months afterward. If the timing of a PCV's close of service (COS) or other factors will not allow for this, a survey could be conducted earlier, but some indicators may need to be removed. For example, the indicator around pentavalent vaccine is time bound and not enough time may have passed to measure it accurately. While it is the mother/caregiver who is given the survey, many of the questions are focused on the child/infant. The survey should be conducted by the PCV and their counterpart or co-facilitator of the group following the instructions provided in the outcomes survey tool closely. The survey should only include the topics that were included in the training on preventing and managing child illnesses. Questions should be removed from the survey if not discussed in the training.

Reporting

To be counted for this indicator the following criteria must be met:

- The woman/caregiver attending the training has children under 5 years of age.
- The individual attended 75 percent of the training sessions offered on preventing childhood illnesses.
- The training was provided by a PCV or their partner in an individual or small group setting of 25 people or less.
- Attendance at each educational session was documented by the Volunteer or their partner.