MODULE ONE

GENERAL COMMUNITY HEALTH VOLUNTEER

MODULE I

Community Based Management of Diarrhea in Childhood

Community Health Services Division
Ministry of Health and Social welfare
Monrovia, Liberia

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Diarrhea Course Objectives: Things the gCHV needs to know.

1) Know the meaning of diarrhea
2) Know three (3) causes of diarrhea
3) Identify and know the meaning of serious Diarrhea
4) Identify signs and Symptoms
5) Determine referral conditions of diarrhea and dehydration
6) Identify results of severe diarrhea/dehydration
7) Assess a child with diarrhea/dehydration
8) Manage cases of diarrhea and dehydration
9) Describe the Four Home Rules in managing diarrhea / dehydration
10) Counsel caregivers how to prevent diarrhea and dehydration
11) Record appropriate information in the gCHV ledger and give timely reports to the clinic / MoH
1.0 Germs cause sickness

Most sickness that affect people spread from one person to another.

The thing that causes sickness is called germ. They are so small that it is not possible to see them with your eyes except through a machine called microscope.

Poopoo (stool) carries many germs out of the body but these germs can get on people fingers and on the food they eat and can make them sick.

Flies and other insects can also spread germs onto food by sitting on it. Anyone who eats food (contaminated) with germs can get running stomach / diarrhea or other sicknesses.

Here are some ways that people can be protected from getting infections or sickness:

1) Prevent the spread of germs (in poopoo, urine, saliva, blood) from a sick person to another person.
2) Drinking only safe water that has no germ inside or eating good food with no germs on it.
3) Give vaccine to children birth to 5 years to protect them against germs.
4) Give enough good food to children to make their body strong against sickness.
5) Wash your hands often at important times to be free of germs.
2.0 Meaning of Running Stomach (Diarrhea)

What is running stomach? (diarrhea)

Running Stomach/ Diarrhea is passing of 3 or more water poopoo (stools) in one day.

Mothers usually know when their children have diarrhea. Therefore, pay attention to what mothers say about their children.

2.1 How a child gets Running Stomach / Diarrhea

Diarrhea is caused by:

a) Drinking unsafe water with germ (creek water, uncovered well)

b) Drinking strong country medicine (toxic herbs)

c) Unclean practices (poor hygiene) such as:

- Eating spoiled food or uncovered food with flies sitting on it (Improper handling of food)
- Feeding the child with dirty hands, spoons, cup, plate etc. or not washing child’s hands.
- Touching the ’poo-poo’/stool or vomit and not properly washing your hands after.
- Not washing hands before eating or after using the toilet or changing baby diapers.
3.0 Result of Plenty, Plenty Running Stomach (Complications of Diarrhea)

Danger of Running Stomach includes:

1. Dehydration

- Severe dehydration can lead to the death of the child

Some dehydration

A dead child

Severe dehydration
3.0 Result of Plenty, Plenty Running Stomach (Complications of Diarrhea)

2. Malnutrition

Malnutrition

Severe Malnutrition

3. Death

Severe malnutrition can lead to the death of the child

A dead child
4.0 Meaning of Dehydration

What is dehydration?
1) **Dehydration** is losing plenty water and salt from the body.
2) **Dehydration** is caused by plenty, plenty (serious) running stomach or vomiting.

4.1 What you can see and feel (*Signs & symptom*) of some dehydration
1) Dry mouth
2) Thirsty, want to drink plenty
3) Small ‘peepee’ (Small urine)
4) Weak
5) Skin pinch goes back quickly

4.2 What you can see and feel (*Signs & symptom*) of bad or serious dehydration

Eyes go inside (Sunken eyes)
1) Very weak
2) Not able to eat or breastfeed at all
3) Pinch of the skin goes back slowly
5.0 Danger signs of Dehydration  (How can we tell when a child has bad/serious dehydration?)

What you can see and feel: (Signs & symptoms) of bad or serious dehydration:

1. Eyes go inside (Sunken eye)

2. Skin pinch goes back slowly

3. Not able to breastfeed or eat at all

4. Very weak
6.0 Conditions that require referral

**Dangers signs** are (any of the below problems should be referred to the health facility).

1. Passing plenty, plenty water poo poo
2. Skin pinch goes back very slowl
3. Eyes go inside (sunken eyes)
4. Bloody or slippery (mucous) poo poo
5. Plenty vomiting
6. Very weak
7. Not able to eat, drink or suck breast milk at all
8. Not improving

If you see any of the above danger signs do the following:

1. **Refer quick quick** to the clinic or health center.
2. Continue to give tay tay / breastfeed on your way to the clinic
3. **Continue to give the child ORS on your way to the clinic**
7.0 Check (Assess) the child with Running Stomach/dehydration

1) Ask
2) Look and feel
3) Classify the child dehydration
4) Treat the child
5) Talk to parents and caregiver (Counsel) on how to take care of the child at home
6) Tell mother when to go to Health Facility (refer)

7.1 Ask:

1. What happened to the child?
2. How many times a day has the child toilet watery poopoo?
3. How many days has the child’s stomach been running?
4. Is the poop poop bloody or slippery?
5. Is the child able to drink or breastfeed? (Offer child breast or older child clean water in cup.)
6. Is the child eating?
7. Is the child vomiting? How many times in one day?
7.0 **Check (Assess) the child with Running Stomach/dehydration** (continued)

7.2 **Look and Feel:**

*Look at the child’s general condition and see if the child is:*

1. Very weak and not able to move or talk (lethargic)
2. Not to himself/herself (unconscious)
3. Restless and crying a lot

Does the child have sunken eyes?

Is the child able to drink, eat or breast feed? Give the over 6 month old child water to drink and observe or ask the mother to breast feed / give “tay-tay” to the baby. See whether the child is thirsty or is drinking poorly.

Pinch the skin over the child’s stomach. Does the skin goes back quickly or slowly after it is pinched? (if it goes back slowly, this is a Danger Sign of dehydration.

7.3 **CLASSIFY THE CHILD**

**A. Severe Dehydration**

- Very weak or unconscious
- Sunken eyes
- Not able to drink, drinking poorly or not able to breast feed
- Skin pinch goes back very slowly

A child with severe Dehydration should be given ORS and referred immediately to the Health facility for treatment.
B. Some Dehydration— If can see any two of the following signs:
  - Restless and crying plenty
  - Sunken eyes
  - Drinking eagerly or thirsty
  - Skin pinch goes back fast *(quickly)*

C. No dehydration: If the child has no dehydration but has diarrhea only, treat the child as shown on page 14.

D. Dysentery: Is a Danger sign. If the poo poo is slippery (presence of mucus) or you can see blood in the watery poopoo refer to the nearest Health facility for treatment.

7.4 Treat the child

Home treatment of diarrhea

The 4 rules for home treatment of diarrhea to prevent dehydration are:

1) Give *Extra fluids* to children with diarrhea

Types of Fluid for rehydration include:

- Rice water
- Coconut water
- Watery Soup with out pepper

**Give ORS to prevent Dehydration**

Birth to 2 years give- 1/4 cup after each watery poo poo

Over 2 years give 1/2 cup or more after each watery poo poo
2) **Continue feeding (breast milk or food)**
- Breastfeed as often as the child wants, day or night.
- Give good food at least 4 times in one day

3) **Give zinc tablets (20 mg tablets)**

   How to give zinc tablets to a child:
   - Take a spoon and put some water in it.
   - Put required Zinc tablet in the spoon and let it melts.
   - Give to the child 10 to 14 days.

   **Children’s Zinc tablet is 20 mg**
   - Birth to 6 months old child: give ½ tablet one time a day (½ tab) for 10 days
   - 6 month to 5years old child: give 1 tablet one time a day for 10 days

**Note:** Do not give zinc more than 14 days
4) **When to return to the health facility;**

Mothers or caregiver should go to the gCHV for referral to the clinic:

- If the child is not improving
- If the child is unable to drink or breast feed
- If the child develops fever
- If there is blood or mucus in the stool
- If child is very weak

**Note:** Go to the clinic if the gCHV is not available

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**How to prepare ORS for the Management of Dehydration**

It is important to replace the water and salt lost from the body through watery poop poop. ORS is a special drink that will replace the water and salt from the body to avoid dehydration or death. Oral Rehydration Salt (ORS) is used to prevent dehydration.

**Materials needed to prepare ORS at home or in clinic include the following:**

- One liter measurement (eg. Liter cup or bottle)
- One or two small clean drinking cups
- One Clean Table spoon.
- One sachet of ORS.
- Water and soap for hand washing.
Method of preparation:

1. Wash your hands with soap and water properly before preparation.
2. Measure one liter of safe drinking in the liter cup.
3. Pour the water from the liter cup into a clean cup
4. Put the contents of the ORS package into the water
5. Stir until every particle completely Melt (disappears)

Note: ORS cannot Keep! Prepare new packet of ORS every day. Always waste the remaining solution at the end of each day.

7.5 Counsel the mother

a. How to prepare and give the ORS and zinc correctly to the child
b. On danger signs that she should watch for and to quickly carry the child to the health facility if they occur
c. Continuing with breastfeeding and give food and drink often to the child with diarrhea.
d. Do not give any other drug to a child for running stomach.
e. Give 3 packets of ORS to mother to take home and prepare one every day for 3 days if running stomach continues.
f. Give Zinc tablets as directed: one time each day for 10 days.
g. Tell the mother how much fluids and food to be given each time the child passes watery poo poo. (see management of dehydration above).
h. Tell the mother when to go to gCHV or Health Facility (within 3 days and any time the child condition becomes worse or is not improving develops fever).
8.0 PREVENTION OF DIARRHEA

8.1 How to prevent diarrhea

a) Wash your hands before eating or feeding the child.
b) Wash the child’s hands before eating
c) Wash your hands after using the toilet or changing baby diaper.
d) Keep surrounding or yard clean
e) Keep food away from flies and cockroaches (cover the food properly)
f) Don’t drink unsafe water eg. running or creek or shallow well water.
g) Keep wells clean, covered and treat regularly (home chlorination)
h) Use pit latrine or bury poo poo. Bury child’s poo poo or put down the latrine
i) Drink safe water such as hand pump water, chlorinated water.
j) Use clean dishes like plates, cups, bowls and clean containers with small top or gallon to store water.
Counselling

8.2  Counsel the mother or caregiver

1. As soon as diarrhea starts, give your child more fluids such as: soup without pepper, rice water, coconut water and continue breast feeding or give as much as the child wants.
2. Give more food which is cooked and mashed or ground well so it will be easier to digest.
3. Demonstrate how to prepare ORS correctly and give at least 3 ORS sachet to prepare at home.
4. Advise the mother how to prepare and give zinc to the child.
5. Give appropriate dose of zinc to take at home according to the child’s age.
6. Tell the mother or caretaker to bring the child back to the gCHV or clinic if the child has any referral condition.
7. Tell all family members to wash their hands with soap before preparing and eating food.
8. Wash all fruits before eating.
9. Tell family members to use latrines and also quickly dispose of the stool of young children in a latrine.
10. Ask mother to repeat the instruction.
8.3 Make water safe for drinking

The gCHV should make encourage community members to make drinking water safe by digging wells and regularly chlorinating the well as well as water stored in containers. In addition, the community should know how to keep drinking water in containers safe by keeping it clean and covered. Keep drinking bowls and cups clean at all time.

Steps in making water safe for drinking with few drops of clora (The Clora drops will kill all the germs that will make people sick)

Step 1: Tear a small piece of clean plastic bag and twist like thread.

Step 2: Dip the twisted piece of plastic into the clora bottle.

Step 3: Wait till you can count the drops from the end of the twisted plastic. Put 4 drops of clora into a 1 gallon container of water.

Step 4: Put 12 drops of clora into a 3 gallons container of water.

Step 5: Put 18 drops of clora into a 5 gallons container of water.

Step 6: Put 1 teaspoonful of clora in 1 white pig feet barrel of water.

Step 7: Safe to drink after 30 minutes
Wait for 30 minutes after you put clora drops in the water.
**Home Treatment for Diarrhea / Dehydration**

1) Give “More Fluid” frequently
2) Mix and give ORS Correctly
3) Give “More Food” Than usual
4) Give Zinc tablets according to the age of the child
5) Continue feeding/ Exclusive breastfeeding
6) Watch for danger signs and when to take the child immediately to the clinic
7) If running stomach continues for more than two days, refer the child to the clinic

**Method of preparation ORS:**

- Wash your hands properly before preparation.
- Pour one liter of safe drinking water into a clean cup
- Put the contents of the ORS package into the water
- Stir until every particle is completely dissolve
  - Give ORS 50 to 200 ml (1/4 to 1 Cup) after each loose stool
  - Give small slip from a cup
  - If child vomits wait 10 minutes then continue

**Give Zinc**

- Birth to 6 months - ½ tablet (10mg) daily for 10 days
- 6 months to 5 years - 1 tablet (20mg) daily for 10 days
# Treatment Card for Diarrhea

## Treatment with ORS

- Make sure that you have all the supplies that you need and that they are clean.
- Wash hands with soap and water. Air dry or dry with a clean towel.
- Pour 1 liter of safe drinking water into a clean cup.
- Put the contents of the ORS package into 1 liter of water and stir until all is dissolved.
- Give small sips from a cup or spoon (1/4 to 1 cup) after each water poo poo. If child vomits, wait 10 minutes and then try again.
- Do not keep prepared ORS over 24 hours. Give the mother 2 ORS packages to take home.

## Treatment with Zinc

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<th>Age Group</th>
<th>Dosage</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
<th>Day 7</th>
<th>Day 8</th>
<th>Day 9</th>
<th>Day 10</th>
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<tr>
<td>0 - 1 mth (less than 2 mths)</td>
<td>Refer to Child to the Clinic Quick Quick</td>
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<td>2 - 5 months</td>
<td>1/4 tablet (10mg) daily for 10 days</td>
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<td>6 months - 5 years</td>
<td>1 tablet (20mg) daily for 10 days</td>
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