

Cooking Demonstration Guide



Implemented by

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Deutsche Gesellschaft
für Internationale
Zusammenarbeit (GIZ) GmbH



CRS faith.
CATHOLIC RELIEF SERVICES action.
results.

Foreword

This Cooking Demonstration Guide shall support organizations and institutions in the successful implementation of cooking demonstrations. It provides guidance in every step, in the preparation process, in the implementation and in the follow-up process to monitor and support the adoption of the practices. It addresses issues related to nutrition, WASH and food diversity.

The guide has been developed through a consultative process. The development of the Cooking Demonstration Guide was a district driven activity. In the three, FANSER¹ supported districts in Eastern province Katete, Petauke, and Sinda, institutions/organization were identified which are frequently implementing cooking demonstrations to promote good nutrition. These are the Ministry of Health (MoH), the Ministry of Agriculture (MoA), the Ministry of Community Development and Social Services (MCSS), and NGOs such as the Catholic Relief Service (CRS), Development Aid from People to People (DAPP), Every Home for Christ. A review showed that the documents that were being used for cooking demonstrations were mostly only recipe books, with some including some components especially related to WASH. Against this background actors in the districts decided to jointly develop a guide which should set standards and help implementing high quality cooking demonstrations in the rural communities.

A Taskforce was formed to facilitate the development process, which was made up of participants from each district. The guide was piloted in the three Districts and adapted after the pilot and validated by the three District Nutrition Coordinating Committees (DNCCs) in Katete, Petauke and Sinda Districts.

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¹ Food and Nutrition Security, Enhanced Resilience Project

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Abbreviations

CODEP	Community Development Enhanced Programme
CRS	Catholic Relief Services
DAPP	Development Aid from People to People
DNCCs	District Nutrition Coordinating Committees
EHC	Every Home for Christ
FANSER	Food Security and Nutrition, Enhanced Resilience Project
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
IEC	Information Education Communication
KDWA	Katete District Women Association
LMMU	Levy Mwanawasa Medical University
MoA	Ministry of Agriculture
MCDSS	Ministry of Community Development and Social Services
MFL	Ministry of Fisheries and Livestock
MGEE	Ministry of Green Economy and Environment
MoH	Ministry of Health
NFNC	National Food and Nutrition Commission
NGO	Non-Governmental Organization
OVP	Office of the Vice President
UNZA	The University of Zambia
WASH	Water, Sanitation and Hygiene

Introduction

This Guide provides guidance, on how cooking demonstrations can be implemented most effectively so that optimal impact on improved nutrition is achieved, especially for women of reproductive age and children aged 6-23 months. Optimal complementary feeding of the children helps to ensure proper infant growth and development and prevent malnutrition. Inappropriate complementary feeding practices and a low dietary diversity can contribute to malnutrition. Supporting mothers and caregivers with knowledge and skills in preparing nutritious foods for children and all family members is important. One approach that is used to provide mothers and caregivers with the required skills and knowledge to prepare nutritious foods are cooking demonstrations.

Situation analysis in Zambia

In general, the diets of most households in Zambia were found to be monotonous (Alamu et al., 2019). High levels of food insecurity, low levels of knowledge about adequate nutrition especially for women of reproductive age and young children, and low crop diversity have contributed to the low dietary diversity. Crop diversification can result in a diverse diet in a household. Diversified diets provide different nutrients required by the body. Women of reproductive age and young children require an adequate and diverse diet for a healthy life and optimal development. Nutritionally adequate and safe complementary foods for children aged 6-23 months have been a challenge when the diets are not diversified. In addition, meal frequency in these children has not been adequate.

Government line ministries and Non-Governmental Organisations have been implementing cooking demonstrations to promote good nutrition at household level, especially for women of reproductive age and children aged 6-23 months. Government ministries include the Ministry of Health (MoH), Ministry of Agriculture (MoA), Ministry of Community Development and Social Services (MCDSS), Ministry of Fisheries and Livestock (MLF), and Ministry of Green Economy and Environment (MGEE).

Cooking Demonstration

Conducting cooking demonstrations is a participatory way of showcasing easy-to-prepare nutritious and delicious recipes using especially locally available foods. In addition, during cooking demonstrations ingredients or uncommon preparation methods can be promoted and practiced which may be unfamiliar to the community members. Cooking demonstrations are an effective Social and Behaviour Change approach that informs the communities and improves their skills on how to make their diets more nutritious. Cooking demonstrations use different cooking techniques and recipes that can be adapted to the local context. This enables them to replicate the learnt practices in their homes. Mothers, caregivers, including men, should actively take part in the cooking. Cooking demonstrations are community-based activities where the local language is used to make sure that the community members can fully participate.

During cooking demonstrations, the target audience receives nutritional information through cooking and sharing nutritional tips as it is being done. This includes discussing different available foods, their nutritional value, how they can be used, as well as cooking the food together and tasting it. Even though there are different types of cooking demonstrations this Guide focusses on **cooking of entire nutritious dishes using a participatory methodology**. The facilitator guides the audience on the preparation of the food so that they are already learning by practicing.



Nutrient rich dishes prepared during a cooking demonstration for the whole family in Luapula Province. © GIZ/Jason J Mulikita

Ten Keys to a Successful Cooking Demonstration

1. Know your audience:

- How much experience or knowledge do they have?
- What do you want them to learn during the demonstration and why?
- Before starting with the cooking demonstration an analysis should be conducted. This will give guidance for the intended purpose of the cooking demonstration (e.g. we know from the analysis, that consumption of Vitamin A rich fruits and vegetables among children aged 6-23month is low. In this cooking demo the aim will be to promote recipes which have vitamin A rich fruits and vegetables). This influences the theme of the cooking demonstration.

2. Have clear and simple **nutrition and hygiene messages**.
3. **Be organized and well-prepared.**
 - Plan ahead; have a check list (see Annex 1 Planning Checklist) as a guide of things needed for the cooking demonstrations
 - Go over the recipe and make sure that all the preparation and cooking steps are well known.
 - Practice making the dish a couple of times, possibly in front of one or two people.
 - Prepare for how you will engage the participants/audience to make the cooking demonstration interesting.
 - Know your venue well.
4. **Ensure locally available foods are used. Use appropriate recipes** which are nutritionally adequate for the intended age groups
5. Be sure the **demonstration area** is appropriate and conducive.
6. Incorporate **nutrition information** throughout the demonstration.
7. Let the audience **participate in the preparation of nutritious foods** and let them **taste it** and feed their children.
8. Always implement measures to **ensure food safety** and **proper hygiene**.
9. If possible, give the participants **recipes to take home** and any additional flyers or brochures that will help reinforce the nutrition message.
10. **At the end of the session, conduct an evaluation** to inform future cooking demonstrations.

(Adapted from Spring Project, 2016)

Operational Definition of Terms

Term	Definition
Caregiver	Person who feeds and watches over the child, gives the child affection, communicates with the child, and responds to the child's needs
Community engagement	The process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people
Complementary feeding	The process of introducing foods and liquids in addition to breastmilk or formula to infants, when breastmilk or formula alone is no longer enough to meet the nutritional needs
Crop diversity	Growing more than one crop in an area
Cues for Action	This is the stimulus needed to trigger the decision-making process to accept a recommended health action
Dietary Diversity	A qualitative measure of food consumption that reflects household access to a variety of foods, and is also a proxy for nutrient adequacy of the diet of individuals
Food Insecurity	Lack of regular access to enough safe and nutritious food for normal growth and development and an active and healthy life
Food Safety	A science-based discipline, process or action that prevents food from containing substances that could harm a person's health.
Infant	Child below the age of 12 months
Meal Frequency	Number of times breastfed and non-breastfed infants and children aged 6-23 months are fed daily
Participatory Methodology	Systematic inquiry, with the collaboration of those affected by the issue being studied, for purposes of education and taking action or effecting change
Social and Behaviour Change Approach	A systematic process to analyse a problem in order to define key barriers and motivators to change, and to design and implement a comprehensive set of interventions to support and encourage positive behaviours
Women of reproductive age	All women aged 15–49 years
Young child	Child between the age of 12–23 months

How to use the Guide

Cooking demonstrations increase the knowledge and skills of mothers and caregivers in preparation of locally available foods for improved nutrition at household level. However, if not implemented in an effective, structured and coordinated manner, cooking demonstrations have little or no impact on household nutrition. This guide has been developed to support the implementation of cooking demonstrations for improved nutrition outcomes. It is based on best practices and field experiences from the community, government departments and organizations supporting nutrition interventions. The guide provides facilitators with knowledge on how to conduct effective cooking demonstrations. It focuses on planning, community engagement, implementation, monitoring and evaluation. Facilitators are provided with tips on how each critical stage of a cooking demonstration can be implemented.

The guide is divided into **3 critical steps**:

1. Preparing for a cooking demonstration (planning),
2. Implementing a cooking demonstration and
3. Monitoring and evaluation of the cooking demonstration.



.In the annex you can find useful IEC materials, links to IEC materials and documents for further reading which can be downloaded

STEP 1: Preparing for a Cooking Demonstration

The success of the cooking demonstration is dependent on planning and engagement of the community. To prepare/plan for a cooking demonstration the following must be considered:

1. Carry out the analysis to determine gaps e.g. consumption and feeding practices to be addressed in the planned cooking demonstration
2. Select the **theme for the cooking demonstration**, develop **key messages** and **identify recipes** that will be prepared.
 - A **theme helps** you as a facilitator to **develop the key messages** for the demonstration. When you define the theme, **be precise and clear**. **Examples of themes:**
 - *Preparing nutritious pre-mixes for children aged 6-23 months,*
 - *Preparing vegetables for children aged 6-23 months,*
 - *Preparing food rich in vitamin A for children aged 6-23 months,*
 - *Preparing beans recipes with reduced cooking time,*
 - *Preparing nutritious food to meet the nutrient requirements of adolescent girls and boys,*
 - *Preparing food to increase dietary diversity for women of reproductive age.*
 - *Preparing nutritious food for the children with special needs*
 - *Preparing nutritious food to meet the nutrition requirements of the elderly*
 - A theme can be developed based on the analysis taken in Step 1 or lesson of that month from the care group (e.g. Nutrition Support Group) or the seasonal food calendar. This helps the **mothers/caregivers to utilize the foods available** in the season.
 - The **theme** will determine the **recipes** and **what food items will be needed**.
 - **Key messages** support learning and are take home messages that will be used as **cues for action** (*This is the stimulus needed to trigger the decision-making process to accept a recommended health action*).
 - **When identifying recipes**, local knowledge on recipes can be solicited from volunteers and household members participating in cooking demonstrations.
 - *It is recommended to select and prepare 3-5 recipes (not more) related to the theme in the cooking demonstration.*
 - *Each recipe should include at least three food groups.*
 - *Even when you focus with your theme on the promotion of one food group (e.g. legumes, Orange Fleshed Sweet Potatoes, Eggs) it is recommended to cook a complete meal.*
 - *For complementary feeding ensure the recipes cater for the different age groups i.e. 6-12 months, 12-18 months and 18-24 months.*
 - *Facilitators can guide on the quantities or unit of measure for the ingredients. These can be documented as learning from the community.*

3. Determine the **date and time of the demonstrations**. For a good turnout select a date when the community has no events or community activities. Community events and activities can affect the attendance of participants in a cooking demonstration. As a facilitator, work with the community volunteers.
4. Determine the **venue that is central and can be easily accessed** by everyone. If possible, a cooking demonstration can be held at a neutral or public place (e.g. churches, health facilities, community halls). Ensure there are **no distractions**.

Cooking demonstration site arrangement:

The site should have shelter – under a tree or in a building. The site should have the following five (5) areas:

- **Washing and Handwashing station** (where there is clean water and soap for washing both hands and utensils),
 - **Feeding area** (with mats or chairs where infants and young children will be played with and fed from),
 - **Cooking area** (there should be a dish rack or basket for storing utensils and food brought for cooking demonstrations, fireplace) and (in some cases education area).
 - **Toilet (pit latrine or flushable toilet with a handwashing facility and soap nearby)** that can be used during the session to throw faecal matter for babies and use by adults.
 - **Garbage collection and disposal facility**
5. **Inform the households** on the **date and venue of the cooking demonstrations** through the community volunteers. The **ideal number of participants** for a cooking demonstration should be a maximum of 30 people.
 - Send out **two (2) appointments**.
 - The **first appointment** is the preparatory meeting meant to meet with the mothers, caregivers, and volunteers to plan for the upcoming cooking demonstration. This **meeting** should be held **a week before** the cooking demonstration. During the preparatory meeting:
 - *You will inform the mothers, caregivers and volunteers on the theme of the cooking demonstration.*
 - *Inform the mothers/caregivers and volunteers on the recipes that will be prepared.*
 - *Develop a list of food items and utensils that will be needed. Allow the participants to choose items that are readily available in their households, and they can contribute for the cooking demonstration.*
 - The **second appointment** is meant for the **actual cooking demonstration**.



- *Experience shows that when participants contribute food and other items, they feel a sense of ownership and are more active and involved in the demonstration. This also makes them **understand** that the **food they need can be sourced right in their communities. It is very important to promote locally available foods.***
- *As a facilitator, ensure that the mothers/caregivers are not pressured into bringing food items they cannot afford, or which are not available in their households. It is **not recommended** to support **purchasing of food items for the cooking demonstrations.***

6. Divide **tasks** and **responsibilities** between the **volunteers** and **willing mothers/caregivers**.

- There should be **one group** that checks with all the mothers/caregivers **two days before** the demonstration to ensure the **food items and other materials are available**.
- The **second group** should be responsible for preparing the venue and ensuring all the items needed are at the venue before the cooking demonstration commences.
- Endeavour to use **improved cooking stoves** which use less firewood and produce less smoke, during the cooking demonstrations.
- Volunteers should be tasked to **remind the households** to participate **the day before** the event.

7. Prepare the **necessary IEC materials/tools** that will be used. The materials will support **reinforcing** the **key messages**. Selected materials/tools depend on the theme and key messages. Find below examples of possible IEC materials.

List of possible IEC Materials/Tools (see also annexes) ²

- Food seasonality calendar
 - Food Groups Chart (see annex 4)
 - [Zambian Complementary Feeding Book-2nd Edition, 2015](#) (includes recipes and household measures) (See Annex 6)
 - Child feeding reminder cards in English and local language (see annex 9).
 - Other resource materials e.g. MIYCN, Care Group Lessons booklets
 - Child Feeding Bowl
8. Prepare the **evaluation and feedback session**. You can administer a short questionnaire that can be completed by randomly selected mothers/caregivers, or you can have an interactive session at the end of the demonstration where all mothers/caregivers who participated provide feedback on the food, the methodology used and the lessons they have learnt.

² Discover on the [NFNC Website](#): under “Resources” you find a variety of Resources and Information and Education Communication (IEC) material which can be used to create and reinforce messages.



Find a **simple format for the questionnaire** in **English and local language** in **STEP 3** and **annex 8**.

Arrangement of the facilitation of the cooking demonstration

When you plan for the details how to facilitate the cooking demonstration you can **consider engaging one or more “co-facilitators”**. How many facilitators would be needed might depend on the **number of participants** expected, on the **number of recipes** which will be cooked and how the **IEC Materials** will be used. It is recommended to **divide tasks and responsibilities** among the facilitators in advance.

STEP 2: Implementing a cooking demonstration



Introduction into the theme of the cooking demonstration in Eastern Province, © GIZ/CRS

Understanding Adult Learning

A facilitator needs skills that will enable them to pass information to the participants. It is important to understand how adults learn best. The following principles can be used to facilitate adult learning:

- **Motivation to learn:** This happens when the participants see that the learning content can help them address their needs – i.e., they feel that they can benefit from the learning process. This can be achieved by getting a good understanding of what they want to learn the most, using examples from real-life situations, and teaching communities practical things they can apply soon after the learning event.
- **Building on people's existing knowledge and experience:** Asking participants about what they already know, harnesses the unique knowledge and experience they have. It also shows value for what they know and how others can learn from it. This makes them feel more respected and appreciated.
- **Active participation and engagement:** Most adults do not want to sit and listen to someone talking for a long period. They want to share their opinions, ask questions about what interests them, and put into practice the things they have learnt.
Cooking demonstrations should be participatory to facilitate for learning.
- **Practicing what was learnt:** People learn the best by doing, less by hearing or seeing. Practicing helps them understand how things should be done. It also makes it easier for them to remember. And it makes people feel that they can do what they just learnt, which is a good motivator. That is why new knowledge, or skills must be promoted at a time when people can (and should) use them.
- **Safe learning environment:** It is important that we manage to create an environment in which people feel safe expressing their opinions and experience. This can be done by treating people with respect, encouraging them to speak, showing appreciation for the things they do well, saying that it is okay if they make a mistake, avoiding criticism, and other supportive actions. ***This is important and encourages men to participate in a cooking demonstration.***



NOTE

Be reminded about the preparatory steps

One day before Cooking Demonstration

A day before the cooking demonstration you:

1. Contact the volunteers or focal persons in the community to ensure the local leaders and **households have been informed** about the cooking demonstration.
2. Follow up with the volunteers to ensure households who pledged to contribute some foodstuff have the **items ready**. If the institution is assisting in buying some foodstuff ensure the food is available.
3. Ensure all the **cooking utensils** are secured and available during the demonstration.
4. Follow up with all the **volunteers with tasks** (to ensure all has been prepared for the demonstration).
 - Volunteers responsible for cleaning up the site before and after the cooking demonstration,
 - Volunteers responsible for cleaning the toilets in readiness for the cooking demonstration
 - Volunteers responsible for setting up the Tippy tap(s)/handwashing station
 - Volunteers responsible for providing the mats for the tasting and feeding area,
 - Volunteers responsible for garbage collection and disposal
5. Demonstration sites must be cleaned and set up for the cooking demonstration.

On the day of the Cooking Demonstration

1. As a facilitator **personal hygiene** is important. Hair should be covered in a clean scarf and **nails should be short and clean**. This information should be provided to the mothers/caregivers as they participate in the cooking.
2. Arrive **an hour before** the activity and prepare the place.
3. **Mats or chairs** should be **arranged** in a way that allows all the participants to see what is happening.
4. Ensure there is a **hand washing point with water and soap**. Safe drinking water should be available (treated with chlorine or boiled). Also, ensure there is enough safe water for cooking.



*Do **NOT** participate in the cooking demonstrations if you are unwell (Facilitator or participant). If there is any outbreak in the community, ensure you follow the recommendations or guidelines provided by the authorities before implementing the activity.*

The Cooking Demonstration

A cooking demonstration can take in total **2-3 hours**, depending on the program and number of participants.

Possible Agenda

No	Activity	Time/Duration
0	Opening prayer	
	Participant List	
1	Welcoming Remarks and Introduction	
2	Introduction of the theme and key messages (ALWAYS emphasize on the importance of Exclusive Breastfeeding for 0-6 months and continued breastfeeding up to 2 years and beyond)	
3	Introduction to the six food groups (see annex 4)	
4	Introduction of the recipes (related to food groups)	
5	Food Hygiene and Handwashing session	
6	Preparation of food: explain recipes in detail	
7	Tasting and Feeding session: participants explain the recipe they prepared	
8	Nutrition Games/Activity to reinforce learning	
9	Feedback session (include commitments, vote of thanks)	
10	Closing remarks and prayer	

The steps of each agenda item are explained below:

Introduction of the theme and key messages

Introduce the **theme** of the cooking demonstration and explain the **key messages**. It is very important that the **demonstration relates to the theme** and the participants understand the key messages. If the theme is on **complementary feeding**, refer to the *Zambian Complementary Feeding Book*³. You can write the theme on a flip chart so that it is visible throughout the demonstration.

Introduction to the Six Food Groups

Before you start explaining the recipes, introduce the audience to the six food groups from the *Zambian Food Based Dietary Guidelines*⁴. You can use the chart below for illustration and for details refer to Annex 4.



The Six Food Groups

³ [Zambian Complementary Feeding Book-2nd Edition, 2015](#)

⁴ [Zambian Food Based Dietary Guidelines](#)

In addition, **ALWAYS** emphasise on the importance of **breastfeeding** to support the promotion of exclusive breastfeeding from 0-6 months and continuous breastfeeding up to two years and beyond (see messages in annex 3)⁵.

Introduction of Recipes

Introduce the recipes that will be prepared. **Each recipe** should include **at least three food groups**. Use the **food group chart** to explain the different food groups in the recipe. Explain and discuss with the participants:

- Which food groups are part of the different recipes.
- Which nutrients do the different foods provide: e.g. macronutrients which are carbohydrates, proteins and fat, and micronutrients which are vitamins and minerals.
- What role the nutrients play for healthy development, disease prevention, and well-being.

Handwashing and food hygiene session

Before starting the preparation of the food, demonstrate handwashing with soap. Explain the importance of **washing hands with soap** and under **running water** before preparing food. In addition to the practical, you can use the chart below and in annex 10.

Encourage a discussion on **other key moments to wash hands with soap under running water** (e.g. after using the toilet, after handling animals, after changing the baby's diaper, before eating, before feeding a child, etc.) and **WHY this is important**. You can explain that **even children should learn early** about the importance of handwashing and start practicing it.

All participants taking part in the cooking demonstration will need to wash their hands with soap as well.

A **tippy tap can be constructed** at the site as a way of reinforcing behavioural change in the use of a handwashing facility. Arrangements should be made for garbage collection and disposal at a designated point.

Handwashing Demonstration

Materials

- Basin
- Clean water in a jug/container
- Soap-bar soap/liquid soap

5 Nutrition Key Messages for the First 1000 Most Critical Days of Life - The National Food and Nutrition Commission (NFNC)

Method

- With help from someone, pour water from jar on both hands/use Tippy-Tap with container.
- Wash your hands with soap, including fingernails and between your fingers.
- Allow lather to form.
- Rinse with water into the basin (in case of using the jug, follow the following steps)
- Pour dirty water away, rinsing the basin after use.
- Allow the hands to air dry. (DO NOT USE A SHARED OR DIRTY NAPKIN/TOWEL.)

Wash hands for  20 seconds following these steps



Steps demonstrating handwashing



- *Do NOT wash your hands inside the basin or jug.*
- *If a handwashing facility is present, you can demonstrate using the facility. Using a jug and basin makes it easy for the mothers/caregivers to relate.*

Remind the participants that they **will be expected to wash hands with soap under running water at key moments during the cooking demonstration:**

- Before preparing or handling food
- Before eating
- Before feeding a child
- After eating
- After visiting the toilet
- After touching dirty items or handling raw food

Personal hygiene

Explain that one should not handle food or conduct a cooking demonstration if they have a cough, a cold, or a sore throat. Participants consider covering their hair and should not smoke or eat during the demonstration. Those coughing use a mask.

Food storage and handling

You can orient the participants on food storage, preservation, and handling: Food when harvested can become spoiled by microorganisms i.e. bacteria, yeast, and molds. It can also become spoiled when temperatures are high. Poor storage of food can result in it becoming rotten or spoiled. As such, food should be properly stored in order not to have negative effects on the health of the consumer. Foods should be stored in airtight containers, that will keep it dry and avoid pest infestation and contamination by microorganisms. In addition, proper cleaning and sanitizing is key.

Drying food prevents the growth of microorganisms that are naturally found in that food or would have contaminated the food. Proper storage of dried food is therefore very important. If the food is not dried properly, it can result in microorganisms growing making the food unsafe to eat or spoiled. Drying reduces the attack and damage of cereals and legumes by insects and fungi. Vegetables are also preserved through drying for later use. All these dried foods should be stored properly to avoid rotting. Low-cost storage technologies can be used to store these foods.

Good sanitation and hygiene are very important during the cooking demonstrations. Ensure all utensils used are clean and washed properly and any fleshy foods are kept fresh. Food that has already been prepared should be properly stored and covered to avoid contamination. During food preparation, make sure that hands are washed with soap at critical moments. Avoid cross-contamination of germs by keeping different foods separately.

Cooking Demonstration: Preparation of foods

- Inform the participants about the meals you will prepare and **explain the recipes again**.
- Show them the **ingredients** for each recipe.
- Explain the **importance** of the different ingredients for children, adults (especially women), and adolescents (especially girls) nutrition.
- Explain **each step** of the recipe in detail.
- Encourage the participants to volunteer **to share tasks in the food preparation**.
- You can **create sub-groups** of 5 participants each which will be responsible for the preparation of the different recipes.



*When **men** are involved, it is an **option** to have a **men's group** and give them **their recipe** to cook.*



Men preparing the pumpkin for cooking, photo ©, GIZ/CRS

- Encourage the participants to **ask questions** about the preparation process during the cooking.
- **Seek feedback** from the participants at intervals in the preparation process.
- Once the food has been prepared, **show the final product** to all the participants.

Handwashing

Remind the participants of the importance of **handwashing with soap under clean running water before the feeding and tasting session** starts and let them practice.

Tasting/Feeding Session

- Let all participants taste the food for the acceptability of the flavor and texture.
- The **seating area** should be clean for participants, infants, and young children. Parents could be encouraged to come with mats or sacks where they sit while tasting the food or/and feeding their children.
- **Before you start** with the tasting/feeding session, let a **representative of each group** responsible for each recipe **explain the recipe, nutritive value (key messages)**, and the **preparation process** to the whole group.
- **For complementary feeding: Explain to the participants⁶:**
 - *Around the age of 6 months, an infant's need for energy and nutrients starts to exceed what is provided by breast milk, and complementary foods are necessary to meet those needs.*
 - *Continue frequent, on-demand breastfeeding until 2 years of age or beyond.*
 - *Start at 6 months with complementary feeding. Start with small amounts of food and increase gradually as the child gets older.*
 - *Increase the number of times that the child is fed with age:*

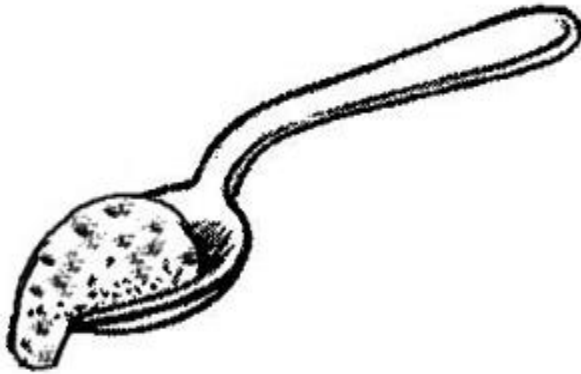
⁶ [Infant and young child feeding \(who.int\)](http://www.who.int)

MAKE YOUR BABY A STAR! What you need to know								
FEEDING EACH DAY	0 to 6 months		6 to 9 months		9 to 12 months		12 to 24 months	
	WHAT FOODS?		WHAT FOODS?		WHAT FOODS?		WHAT FOODS?	
	☐ Breast milk only		☐ Breast milk		☐ Breast milk only		☐ Breast milk only	
	☐ No water or porridge		☐ Soft foods: - Thick porridge with pounded groundnuts, milk or eggs; - Mashed fruits and vegetables like bananas, pawpaw or avocado		☐ Mashed or small pieces of family foods, not only soup		☐ All family foods, no more soup	
					☐ Thick enriched porridge		☐ Thick enriched porridge	
☐ Foods from animals (★ foods) like:		☐ Foods from animals (★ foods) like:		☐ Foods from animals (★ foods) like:		☐ Foods from animals (★ foods) like:		
☐ Vegetables and fruit (★ foods) like:		☐ Vegetables and fruit (★ foods) like:		☐ Vegetables and fruit (★ foods) like:		☐ Vegetables and fruit (★ foods) like:		
HOW MUCH?		HOW MUCH?		HOW MUCH?		HOW MUCH?		
☐ Empty both breasts at each feed		☐ Empty both breasts at each feed		☐ Start with 3 tablespoons of food at each meal & slowly increase as child grows to full bowl		☐ Start with 3 tablespoons of food at each meal & slowly increase as child grows to full bowl		
HOW OFTEN?		HOW OFTEN?		HOW OFTEN?		HOW OFTEN?		
☐ Whenever the baby wants - 8 to 12 times day and night		☐ Breastfeed 8 to 10 times, day and night		☐ Breastfeed 6 to 8 times		☐ Breastfeed 4 to 6 times day and night		
☐ Feed 2 times a day at 6 months. Increase to 3 times a day by 8 months		☐ Feed 3 meals a day and 1 snack/small meal		☐ Feed 3 meals a day and 1 snack/small meal		☐ Feed 3 meals and 2 snacks/meals a day		
HOW TO FEED?		HOW TO FEED?		HOW TO FEED?		HOW TO FEED?		
☐ Mother should be comfortable and support baby's whole body		☐ Make time to feed the baby		☐ Make sure baby eats all food		☐ Make sure baby eats all food		
☐ Empty one breast before feeding from the other		☐ Separate the baby's food in own bowl		☐ If baby is a fussy eater, try small amounts more often, ask for help		☐ If baby is a fussy eater, try small amounts more often, ask for help		
HEALTH	☐ Sleep under treated bednet		☐ Ensure the baby gets all the vaccinations that are due		☐ Wash caregiver and baby's hands with soap after changing the nappies and using latrine; and before every feed/meal		☐ Dispose all faeces in the latrine	
	☐ Attend monthly growth monitoring		☐ Get Vitamin A when baby is 6, 12, 18 and		☐ Boil or chlorinate		☐ Create clean feeding and play spaces	
Feeding Reminder Card								

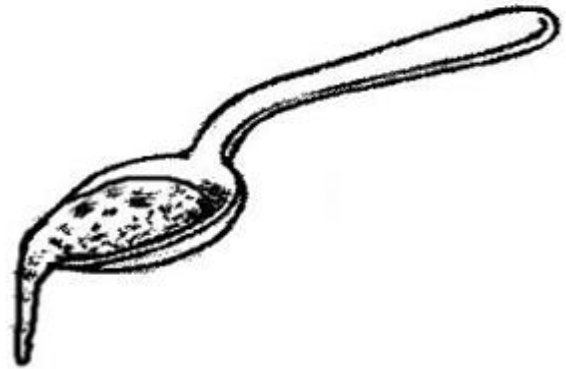
Feeding Reminder Card

- Meal frequency is categorized according to age of the child
 - Exclusive breastfeeding on demand for infants 0-6 months of age
 - 2-3 meals per day for infants 6-9 months of age and
 - 3-4 meals per day for infants 9-24 months of age, with 1-2 additional snacks as required.
 - Infants should be directly fed, slowly and patiently whilst talking to them and maintaining eye contact.
 - Infants should be encouraged to eat and not forced. The consistency and variety of the food should gradually be increased as well as the frequency of feeding as the child grows older.

- Show the participants the **appropriate portion** for **each age group** to serve the child. Let mothers/caregivers also **show the appropriate portion** and let them **explain the feeding frequency** for a child of a **certain age group** (see the feeding reminder card).
- Show the **appropriate thickness of the food** or let mothers/caregivers explain.



Thick Porridge



Thin Porridge

- Let mothers/caregivers serve the children and **practice feeding their children**.
- **Demonstrate** to the mothers/caregivers on how they can practice **active feeding** or let **them demonstrate**.
- **Observe the mothers/caregivers** as they feed the children to **ensure they practice active feeding**.
- **Encourage experience sharing** on difficulties and good experiences in feeding the child among the participants. Ask the participants whether they have had any difficulties in feeding their children and let that be a **point of discussion**.



Women feeding their children with prepared nutritious foods, © photo, GIZ/CRS

Learning Activity/ Nutrition Game

After the tasting/feeding session, you can play a game or have an activity with the participants. This is meant to reinforce learning and help the participants remember the key messages/theme of the cooking demonstration. **Possible activities or games** can include (selection depends on time factor and motivation of the participants):

- Singing songs related to feeding practices, food diversity, food density, food groups, WASH etc.
- Meal plan game/activity.
- [Nutrition card game.](#)
- Seasonal calendar (to discuss locally available foods in that season or month).
- Budgeting activity: This is to help participants learn how to budget for foodstuff, prepare a small cost analysis of the food prepared. It is easy for mothers/caregivers to cook the food at home if they know that it is affordable and easily accessible.

STEP 3: Monitoring and Evaluation

3.1 Group Feedback Session

Feedback from the participants helps you as a facilitator to improve the methodology used and delivery of the sessions. At the end of the demonstration ask the participants for their feedback. You can conduct a group session where participants provide feedback through a focus group discussion, following the guide in Annex 12. The participants will be divided into small groups of 8 to 12.

The feedback will address various aspects, including but not limited to the taste of the food, the preparation steps, and whether participants feel confident in cooking the food at home. Additionally, identify which foods or recipes the children enjoyed the most.

During this session fill out the **participant list** for record keeping.

3.2 Evaluation of Cooking Demonstration

Evaluation of the cooking demonstration can be administered using a short questionnaire (Annex 11). Out of the overall sample 30 (maximum number of participants recommended), 5 to 8 participants can be randomly selected with support from the community-based volunteers to complete the short questionnaire (Annex 11).

Using the discussion guide (Annex 12), facilitators can conduct focus group discussions comprising 8 to 12 participants with support from two community-based volunteers to take notes.



*After the group feedback and/or the evaluation you can **ask participants to make commitments on** how they will use or practice what they have learned.*

3.3 Monitoring post Cooking Demonstration

Supporting the mothers/caregivers after cooking demonstrations facilitates learning and contributes to behavior change. Using the participant list, randomly select mothers/caregivers that can be visited. A **follow-up visit** is recommended after **2-4 weeks**. During the visit you can ask the **following questions**:

- Have you tried any of the recipes prepared during the cooking demonstration?
- If you have tried out the recipes, has your child been eating the food? What is your experience?
- If not, why not? Please explain.
- Could you please explain the steps you took to prepare the food?
- What challenges did you face when preparing food? How have you addressed these challenges?

Annex

- (1) Planning Checklist
- (2) Checklist of Materials/Utensils for the cooking demonstration
- (3) Key messages on breastfeeding [Nutrition Key Messages for the First 1000 Most Critical Days of Life - The National Food and Nutrition Commission \(NFNC\)](#)
- (4) The Six Food Groups from the Zambian Food Based Dietary Guidelines (Ministry of Agriculture, 2021, [Zambian Food Based Dietary Guidelines](#))
- (5) Complementary Feeding Practices [Nutrition Key Messages for the First 1000 Most Critical Days of Life - The National Food and Nutrition Commission \(NFNC\)](#)
- (6) Feeding Frequency Chart and Household Measures ([Zambian Complementary Feeding Book-2nd Edition, 2015](#))
- (7) Cooking Demonstration Recipes to promote consumption of legumes and reduce cooking time
- (8) Cooking Demonstration Feedback Form (in English and Local language)
- (9) Feeding Reminder Cards (English and Local Language)
- (10) Demonstration on Handwashing with soap
- (11) Evaluation Questionnaire
- (12) Focus Group Discussion Guide

Annex 1: Planning Checklist

Planning Steps	Status (Tick if done)	Comment
Choose date, venue and time for cooking demo		
Choose theme and recipes to be cooked		
Develop messages which reinforce the theme		
Choose IEC material which will be used during the cooking demo		
Choose cooking demonstration site with washing and handwashing station, feeding area, cooking area, with a pit latrine nearby		
Send appointments for planning session and cooking demo		
Meet mothers/caregivers/fathers and volunteers for a planning session		
Select together with mothers/caregivers/fathers the food stuff they will donate		
Share roles and responsibilities with the mothers/caregivers/fathers and volunteers.		
Prepare the evaluation and feedback session of the cooking demo		
Remind volunteers to send reminders to the mothers/caregivers		

Annex 2: Checklist of Materials/Utensils for the cooking demonstration

Utensils		Materials	
Pots		Soap for handwashing and for washing utensils	
Knives		Sponge	
Wooden cooking sticks		Firewood/Charcoal	
Sieve		Stove (consider using an improved stove)	
Plates and cutlery		Matches	
Bowls		Mats, chairs	
Cups		Ask participants to bring spoons, plates, and cups for the tasting/feeding session.  TIP <i>It is recommended to ask the participants to also bring wider plates so that different foods can be tasted separately.</i>	
Pestle and mortar			
Tray			
Buckets for water-handwashing, drinking, cooking			
Basin			
Jug			

Annex 3: Key Messages on Breastfeeding

(NFNC Nutrition Key Messages For The First 1000 Most Critical Days Of Life)

3. Breastfeeding (early initiation, exclusive breast feeding and continued breast feeding)

*The first, thick and yellowish milk that is released from the breasts (colostrum) provides the first immunization to protect the baby from infections. Early start of breastfeeding within an hour of giving birth ensures that the baby not only begins to bond with the mother but also receives this vital milk. It is well researched that breast milk alone is enough for the first 6 months of a child's life. Any additional foods before the age of 6 months presents a number of complications that can risk the child's life or inhibit proper growth and development. After the age of 6 months the child is ready to receive other foods in addition to breast milk. This is because at this age the child is better able to digest other foods, and breast milk alone is no longer enough to provide all the necessary nutrients; **but** it still contains substances needed for the child to continue growing well.*



KEY MESSAGES

- Mothers should breastfeed their babies within the first hour of birth.
- Encourage mothers to give their children the first yellowish milk after delivery (colostrum)
- Encourage mothers to breastfeed exclusively for the first six completed months because breast milk contains all the nutrients that the baby needs for good health, growth, and development.

- Lactating mothers should be encouraged to frequently breastfeed their babies; the more the baby suckles the more milk will be produced.
- Encourage mothers to exclusively breastfeed for the first 6 months regardless of their HIV status, and provided they take their medication as prescribed by a health worker.
- Mothers should continue breastfeeding for up to 2 years or beyond because breastmilk continues to contribute to the child's nutrition.

Annex 4: The Six Food Groups (Zambian Food Based Dietary Guidelines, 2021)

1. CEREALS, STARCHY ROOTS and TUBERS
2. VEGETABLES
3. FRUITS
4. FISH, INSECTS and ANIMAL SOURCE FOODS
5. DAIRY
6. LEGUMES, PULSES and NUTS.

Eat different types of food from each of the six food groups every day!





EAT MORE

Eat different types of food from each of the six food groups every day to stay strong and healthy.

The six food groups are

- Cereals, starchy roots and tubers
- Vegetables
- Fruits
- Fish, insects and animal source foods
- Dairy
- Legumes, pulses and nuts

Whole or milled grains (cereals) and starchy roots/tubers

as part of your meals every day for a healthy heart and weight.

Aim for **4 servings per day** of whole cereals and starchy roots/tubers (about 560 g)



Vegetables of different types and colours

every day to provide your body with vitamins, minerals and roughage to prevent diseases.

Aim for **3 servings per day** of raw vegetables (about 230 g or 1.5 cups cooked or 3 cups uncooked)



Different coloured fruits

every day to provide your body with vitamins and minerals to prevent diseases.

Aim for **2 servings of fruit per day** (about 300 g or two medium size fruits like bananas or oranges or two cups of cut fruit)



Beans, cowpeas, groundnuts, or other nuts

daily to maintain good health. All these foods are rich sources of protein and a good substitute for meat.

Aim for **2 servings of nuts and seeds per day** (about 180g [1 cup] cooked pulses or 60 g [6 tablespoons] nuts and seeds or a mix of 90 g [9 tablespoons] of pulses and 30 g [3 tablespoons] nuts and seeds).



Chicken and other poultry, fish, eggs, insects or caterpillars

every day to build and repair your body.

Aim for **1 serving per day** (about 50 to 115 g depending on the food selected from the food exchange list).



Milk and milk products (like yogurt, sour milk, cheese)

every day for strong bones.

Aim for **1 serving per day** (about 245 g)



* If milk is not available, eat calcium-rich foods such as moringa, amaranthus, cowpeas leaves, cassava leaves, baobab fruit or leaves, tamarind leaves, kapenta and small fish eaten with bones.



4. Complementary Feeding Practices

After 6 completed months of life, breast milk alone is no longer sufficient to meet the nutritional and energy requirements of the baby. Therefore, additional foods should be introduced in small frequent amounts with continued breastfeeding up to 2 years or beyond to meet the demands of the growing baby. Moreover, the additional foods introduced must be of the correct texture, consistency, contain a variety of nutrients, and must be hygienically prepared and stored to ensure good nutrition. There are a number of traditional Zambian foods that are rich in nutrients and can be prepared for the baby.



KEY MESSAGES

- Encourage mothers to continue breastfeeding at least up to 2 years.
- Children need to be fed 3 or 4 main meals a day *with continued breastfeeding*.
- Sick children are more at risk of malnutrition; therefore encourage caregivers to give small, frequent meals in addition to breastmilk to help sick children recover quickly.

- Encourage caregivers to wash their hands with soap/ash and clean water before handling the baby's food and after changing babies' diapers to prevent diarrhoea and other infections.
- Encourage care givers to supervise the feeding of children less than 2 years to ensure that they eat enough food at each meal.
- Children need to be fed from a separate plate so as to monitor how well and how much they have eaten.
- Promote the use of traditional Zambian foods that can be prepared for children after the age of 6 months e.g. Orange fleshed sweet potatoes, beans, various green leafy vegetables, pumpkins, groundnut porridge, chikanda, etc.

Annex 6: Feeding Frequency Chart and Household Measures

(Zambian Complementary Feeding Book-2nd Edition, 2015)

Age in months	Frequency	Type of food	Remarks
6 – 9 months 	2 to 3 times a day Start with 2-3 full teaspoons per feed 	The food given should be soft, like porridge and mashed fruits and vegetables Porridges should be thick enough so that it does not run off the spoon. 	Continue breastfeeding your baby whenever he or she wants – day and night. Breastfeed your baby up to 2 years or older. Be patient and actively encourage your baby to eat. Do not use feeding bottles to feed your baby. Feeding bottles are very difficult to clean and can make your baby sick with diarrhoea.
9 -12 months 	From 9 months onwards, feed your child at least 3-4 main meals a day Give your young child $\frac{1}{4}$ of a 250 ml cup/bowl at each feed.	By 9 months the young child should be able to eat finger foods such as pieces of ripe mango and pawpaw, banana and vegetables.	Continue breastfeeding until your baby is 2 years or older Give your baby his or her own plate and make sure he or she eats all the food given. This will help you know how much your baby has eaten.
12 –24 months 	From 12 months onwards, feed your child 5 times a day (3 or 4 meals and 2 or 1 snack respectively). Give your young child one 250 ml cup/bowl at each feed.	Cut the food into small pieces so that the child can easily chew and swallow. By 12 months other solid foods and family meals can be given as many times as possible each day.	Continue breastfeeding your child up to 2 years old or beyond. Children eat more slowly than adults, so put the child's portion of the meal in his or her own bowl.
NB: Depending on the child's appetite - 1 or 2 snacks a day may be offered			

Household Measures

The following are household measures used to prepare the recipes in this book:

Feeding bowl (250 ml)



Cup (200 ml)



Large pot



Bunch of vegetables



2 finger pinch of salt



Small pot



Tablespoon (15 ml)



Teaspoon (5 ml)



Utensil	Corresponding measurement
1 cup	250 grams powder
2 teaspoons	10grams

Annex 7: Cooking Demonstration Recipes to promote consumption of legumes and reduce cooking time

VEGETABLE BEAN PORRIDGE

Ingredients

- ½ cup roasted (soya) beans
- Teaspoon vegetable leaf powder
- ½ maize meal
- 5 cups water
- 1 teaspoon salt

Methods

- Pound the roasted beans sieve and make flour.
- Heat 3 cups of water in a pot
- Mix maize meal, bean flour, vegetable leaf powder and salt together.
- Make a paste.
- Add this paste to the hot water in the pot and allow it boil gently until cooked (20-30min)
- Serve warm.

BEANS STEW

Initial preparation steps of beans

- Sorting beans: Use one type of bean variety. Do not mix the bean varieties.
- Sort out all foreign matters.
- Remove all broken, discoloured and not fully matured, weevil damaged or rotten beans.

Soaking beans overnight

1. Measure 1 cup of beans and put in basin.
2. Wash the beans thoroughly with cold water.
3. Add 3 cups of cold water and leave the beans to soak overnight (this is about 12-14 hours)



NOTE

1 cup of dry bean when soaked gives 2 cups of beans

4. Drain the soaking water.
5. Check that the beans are soaked well, remove any beans that is not soaked.
6. Optional: Remove the husks manually using hands.

PREPARATION

- Ingredients
- Beans - 1 cup.
- Onion-medium to large - 1
- Tomato-medium to large -1
- Cooking oil
- Salt
- Water

Methods

1. Clean, wash and soak the beans in 3 cups of water overnight.
2. Boil beans for 10-15 minutes when husk is removed and 30 minutes with husks.
3. Peel, wash and cut onions into pieces.
4. Wash tomatoes and cut into pieces.
5. Heat the oil and fry the onion till golden brown.
6. Add tomatoes and fry a bit.
7. Mix with the beans.
8. Serve with Nshima, Rice or Samp.

Annex 8: Cooking Demonstration Feedback Form

S/N	Questions	Yes	No
1	I like the food we prepared today. NDACHI KONDA CHAKUDYA CHOMWE CHAPIKIWA LELO.		
2	My child enjoyed eating the food we prepared. MWANA WANGA ASANGALALA KUDYA CHAKUDYA CHOMWE CHAPIKIWA.		
3	This demonstration taught me the skills I need to make this recipe at home. CHIWONESERO ICHI CHAKAPIKIDWE CHANDIPHUNZITSA LUSO LIMENE NDI FUNIKIRA KUSEWENZETSA KUNYUMBA PAMENE NDI PHIKA ICHI.		
4	I learned new ways to help my children eat healthier with the foods locally available and affordable to me. NDAPHUNZILA NJIRA ZATSOPANO ZOMWE ZIDZATHANDIDZA ANA ANGA KUDYA CHAKUDYA CHA THANZI CHOMWE CHIPEZEKA KUMALO OMWE NDI KHALA KOMANSO NDI KWANITSA KUGULA.		
5	The ingredients used in this demonstration are items that I use at home. ZIPANGIZO ZOMWE TASEWENZE KU CHIWONETSERO CHAKA PHIKIDWE NDI ZOMWE NDI SEWENZETSA KUNYUMBA		
6	The ingredients used in this demonstration are items that I am able to buy. ZIPANGIZO ZOMWE TASEWENZE KU CHIWONETSERO CHAKA PHIKIDWE NDI ZOMWE NDI KWANITSA KUGULA.		
7	I plan to make this recipe at home. NDILI NDI LINGO LOKAPHIKA CHAKUDYA ICHI KUNYUMBA.		
8	I have participated in food demonstrations before. SIKOYAMBA KUPEZEKAKO KU CHIWONETSERO CHA KAPHIKIDWE.		
9	What kind of foods would you like to see in future demonstrations? NDICHAKUDYA CHOTANI CHOMWE MUFUNA KUKAONA MU CHIWONETSERO CHAKAPHIKIDWE MU TSOGORO.		
	Comment/suggestions NDEMANGA/MAGANIZO		

Annex 9: Feeding Reminder Card

MAKE YOUR BABY A STAR! What you need to know					
		0 to 6 months	6 to 9 months	9 to 12 months	12 to 24 months
FEEDING EACH DAY	WHAT FOODS?	☐ Breast milk only ☐ No water or porridge	☐ Breast milk ☐ Soft foods: • Thick porridge with pounded groundnuts, milk or eggs; • Mashed fruits and vegetables like bananas, pawpaw or avocado	☐ Breast milk only ☐ Mashed or small pieces of family foods, not only soup ☐ Thick enriched porridge ☐ Foods from animals (★★ foods) like: ☐ Vegetables and fruit (★ foods) like:	☐ Breast milk only ☐ All family foods, no more soup ☐ Thick enriched porridge ☐ Foods from animals (★★ foods) like: ☐ Vegetables and fruit (★ foods) like:
	HOW MUCH?	☐ Empty both breasts at each feed	☐ Empty both breasts at each feed	☐ Start with 3 tablespoons of food at each meal & slowly increase as child grows to full bowl	
	HOW OFTEN?	☐ Whenever the baby wants - 8 to 12 times day and night	☐ Breastfeed 8 to 10 times, day and night ☐ Feed 2 times a day at 6 months. Increase to 3 times a day by 8 months	☐ Breastfeed 6 to 8 times ☐ Feed 3 meals a day and 1 snack/small meal	☐ Breastfeed 4 to 6 times day and night ☐ Feed 3 meals and 2 snacks/meals a day
	HOW TO FEED?	☐ Mother should be comfortable and support baby's whole body ☐ Empty one breast before feeding from the other	☐ Make time to feed the baby ☐ Separate the baby's food in own bowl	☐ Make sure baby eats all food ☐ If baby is a fussy eater, try small amounts more often, ask for help	
HEALTH	☐ Sleep under treated bednet ☐ Attend monthly growth monitoring	☐ Ensure the baby gets all the vaccinations that are due ☐ Get Vitamin A when baby is 6, 12, 18 and 24 months	HYGIENE ☐ Wash caregiver and baby's hands with soap after changing the nappies and using latrine; and before every feed/meal ☐ Boil or chlorinate water for the baby from 6 to 24 months		
			☐ Dispose all faeces in the latrine ☐ Create clean feeding and play spaces		



CHILD'S NAME: _____

When to take your baby to the clinic

☐ Baby has body hotness



☐ Baby has diarrhea



☐ Baby has a cough or problem breathing



DANGER

Take baby to the clinic IMMEDIATELY if:

☀ Baby is unable to drink or breastfeed



☀ Baby vomits everything taken



☀ Baby is weak or not responding



☀ Baby has had fits during the current illness



Feeding your sick or recovering baby

Feeding during illness:

0 to 6 months:

☐ Continue breastfeeding and breastfeed more often



6 to 24 months:

☐ Continue breastfeeding and breastfeed more often



☐ Continue feeding your child; If appetite is poor give smaller quantities, but more often

☐ Offer soft foods like porridge with mabisi, mashed banana, or avocado with lemon juice

☐ Take time, patiently feed, get help



Feeding for 2 weeks after the illness:

0 to 6 months:

☐ Continue breastfeeding and breastfeed more often



6 to 24 months:

☐ Give an extra meal of normal food each day

☐ Give an extra snack like an egg, milk, mashed avocado, or thick porridge with groundnuts



☐ Continue any medicine for the illness as advised, even if the child appears to be better

Feeding your baby if you are HIV+

Feeding:

0 to 6 months:

☐ Give breast milk ONLY for first six months. Do not give anything else - NO water or porridge



At 6 months

☐ Feed soft foods:

- Thick porridge with pounded groundnuts, milk or eggs;
- Mashed fruits and vegetables like bananas, pawpaw or avocado



☐ Continue breastfeeding until the baby is one year old



Treatment and Testing:

- ☐ Give your baby HIV prevention medicine every day as instructed by the health worker
- ☐ Continue giving your baby HIV prevention medicine for 1 more week after you have stopped breastfeeding
- ☐ Take your baby for testing at 6 weeks, 6 months, 1 year and 1 year 6 months
- ☐ Follow any other advice and give all other medication exactly as advised

Support:

- ☐ Discuss care, feeding and medicines with a health professional and your family so you receive help



PANGANI MWANA WANU KUKHALA NYENYENZI YOWALA! Zimene muyenera kudziwa

KUDYETSA KWA TSIKU ILI YONSE

KODI NDI ZAKUDYA ZOTANI?

Minyezi 0 kufika pa minyezi 6

- ☐ Mkaka wa kumawelesi basi



- ☐ Osampatsa madzi kapena phala



Minyezi 6 kufika pa minyezi 9

- ☐ Mkaka wa kubele
- ☐ Zakudya zofewa:
 - Phala yotimba yoikako nsinjilo, mkaka kapena mandanda/mazila



- Zipaso zogaya ndi zamasamba, munga vikonde/nthoci, papaya kapena kotapela



Minyezi 9 kufika pa minyezi 12

- ☐ Mkaka wa kubele
- ☐ Kugaya zina mwazakudya zimene nanunsi mukudya, kapena kumpatsa tudunsaw, oati muto
- ☐ Phala lotimba labwino lomwe lili nazo zofinikira zonse.
- ☐ Zakudya zochokeya ku nyamu (★★ zakudy) munga:



- ☐ Ndiyo zamasamba ndi zipatso (★ zakudy) munga:



Minyezi 12 kufika pa minyezi 24

- ☐ Mkaka wa kubele
- ☐ Zakudya zimene banja lonse ili kudya kopanda muto nthawi ino
- ☐ Phala lomwe lili ndi zofinikira zonse
- ☐ Zakudya zochokeya ku nyamu (★★ zakudy) munga:



- ☐ Ndiyo zamasamba ndi zipatso (★ zakudy) munga:



KODI ADYETSEDWE ZOCHULUKA MOTANI?

- ☐ Uyamwitsilatu mkakaonse mawelesi onse awiri kufikira utatha



Kumalezi

- ☐ Uyamwitsilatu mkaka onse mawelesi onse awiri kufikira utatha



Kumalezi



Minyezi 6



Minyezi 8



Minyezi 9



Minyezi 12



Minyezi 24

KODI AZADYETSEDWA KANGATI?

- ☐ Nthawi iliyonse malinga ngati mwana akufuna kuyamwa. Kasanu ndi katatu 8 kapena khumi ndi kawili 12 usiku ndi usana



- ☐ Yamwitsani mwana kansu ndi katatu 8 kapena khumi imodzi 10 usiku ndi usana
- ☐ Mudyetseni mwana kawili patsiku akakwanisa minyezi 6. Onjezeranikoni muzimudyesa katatu patsiku limodzi akakwanisa minyezi 8



- ☐ Yamwitsani mwana kansu ndi katatu 8 kapena khumi imodzi 10 usiku ndi usana
- ☐ Mudyetseni katatu patsiku ndi kumpatsako cakudya cina cacing'ono



- ☐ Yamwitsani mwana kansu kanani 4 kapena kasanu ndi kamodzi usiku ndi usana
- ☐ Mudyetseni mwana kansu katatu ndi cakudya cina cacing'ono kawili patsiku



KODI TIDYETSA BWANJI?

- ☐ Mai akhale bwino ndipo mwana wake amuyangate/amusamalire thupi lake lonse bwino



- ☐ Onani kuti mwana wayamwa maka wonse ku

- ☐ Khalani ndi nthawi yoyamwitsilap mwana



- ☐ Mwana mupatulilani cakudya cake pa mbala yake yain'gono

- ☐ Onani kuti mwana akudya cakudya conse pa mbele osasiyako ai



- ☐ Ngati mwana akunysanyaza kudya inu onani kuti mumudyesa pang'ono pang'ono ndipo pemphani thandizo ngati ndikufunika kutelo.

ZAUMOYO

- ☐ Onani kuti mugona mu ukonde wopakidwa mankhwala yophera udzudzu



- ☐ Pelekani mwana kuchipatala kuchipimo koteri kuti akamuone m'mere akulira



- ☐ Onani kuti mwana alandila katamera wonse panthwi yake



- ☐ Landilani katamera wa Vitamin A ngati mwana wakwanisa minyezi 6, minyezi 12, minyezi 18, ndi minyenzi 24



UKHONDO

- ☐ Onani kuti onse opipa mwana kapena kumuntha mathewela asamba m'manja asanagwile cakudya kapena pambuyo pochoka kuchimbuzi asanayambe kupesa mwana cakudya



- ☐ Gadusani madzi amwana kapena muyikemo chlorine mwana wa minyezi isanu ndi umodzi kufika pa minyezi 24.



- ☐ Teyani tuvi muchimbuzi chokumba.



- ☐ Khalani ndi malo aukhondo posewerela mwana ndinso podyesera mwana.





DZINALA MWANA:

Pomwe muyenera kupereka mwana wanu kuchipatala

☐ Mwana thupi ndi lotentha



☐ Mwana akuthulula



☐ Ngati mwana ali ndi cifuwa kapena akupeza bvuto popuma



CHIOPYEZO

Pelekani mwana kuchipatala mwamsanga ngati:

★ Mwana akulephera kumwa kapena kuyamwa



★ Mwana akusanza akadya kalilonse



★ Mwanandi ndi ofoka ndipo kufuna kalikonse



★ Mwana akukunyuka panthawi ya matenda yomwe akudwala



Kudyetsa mwana wanu wodala kapena amene wangopola

Kuyamwitsa munthawi yamatenda:

Minyezi 0 kufika pa minyezi 6:

☐ Pitilizani kuyamwisa mwana ndipo yamwitsani kawili-kawili



Minyezi 6 kukafika pa minyezi 24:

☐ Pitilizani kuyamwitsa ndipo yamwitsani kawili-kawili



☐ Pitilizani kudyesa mwana ngati alibe chilakolako chakudya muzimupasa pang'ono pang'ono koma kwali-kwali



☐ Mupaseni mwana zakudya zofewa, monga phala, mabisi, nthoci voyaga, makotapela nd manzi madimu



☐ Osafulumila, tengani nthawi kumudyesa mwana, funsani thandizo

Kudyetsa mwana masabata awili pambuyo pakudwala

Minyezi 0 kufika pa minyezi 6:

☐ Pitilizani kuyamwisa mwana ndipo yamwisani kawili-kawili



Minyezi 6 kukafika pa minyezi 24:

☐ Mudyetseni mwana takudya cina chapadera



☐ Mupatseni mwana chakudya chapaderamonga dzila, mkaka, makotapela yogaya kapena phala lotimba yoikako nsir jilo



☐ Pitilizani kupeleka mankhwala ku mwana yomwe madotolo anamupatsa, ngakhale mwanayo akuoneka bwino

Kadyetsedwe kamwana ngati muli ndi kadoyo ka HIV+

Kudyetsa:

Minyezi 0 kufika pa minyezi 6:

☐ Yamwitsani mkaka wa kumawe chabe kwa minyezi isanu ndi umodzi 6, musampatse chakudya china nipo otsampatsa madzi kapena phala!



Pa minyezi 6

☐ Mudyetseni zakudya zofewa:

- Phala yotimba yoikako nsinjilo, mkaka kapena mandanda/ mazila
- Zipatso zogaya ndi ndiyo zamasamba pomwe pali nthoci, ma papaya kapena makotapela



☐ Pitilizani kuyamwisa mwana kufikira atakwanisa caka cimodzi



Kuchilitsa ndi kupimisa:

☐ Patsani mwana mankhwala yochinjiliza ku kalombo ka HIV tsiku ndi tsiku kulingana ndi zimene wantchito wauzamoyo anakuuzani

☐ Pitilizani kupeleka mankhwala yochinjiliza ku matenda ya kalombo ka HIV kumwana wanu kwa sabata imodzi mutamuletsa kuyamwa

☐ Pelekani mwana kukapimidwa akakwanisa masabata 6, minyezi 6, chaka chimodzi ndiponso akakwanisa chaka chimodzi ndiponso minyezi 6

☐ Tsatila uphungu ulionse ndiponso patsa mankhwala monga momwe unauzidwila

Chithandizo:

☐ Kambalanani paza chisamaliro chabwino, kadyedwe kabwino ndi zamankhwala ndi akatswiri azaumoyo pamodzi ndi banja lanu koteri kuli mulandile thandizo



dspeg

Annex 10: Demonstration on Handwashing with Soap

Wash hands for  20 seconds following these steps



Annex 11: Evaluation Questionnaire

Province			
District			
Ward			
Zone*			
Catchment**			
Village/townships			
Age			
Sex			
Date			
S/N	Questions	Yes	No
1	I like the food we prepared today.		
2	My child enjoyed eating the food we prepared.		
3	This demonstration taught me the skills I need to make this recipe at home.		
4	I learned new ways to help my children eat healthier with the foods locally available and affordable to me.		
5	The ingredients used in this demonstration are items that I use at home.		
6	The ingredients used in this demonstration are items that I am able to buy.		
7	I plan to make this recipe at home.		
8	I have participated in food demonstrations before.		
9	What kind of foods would you like to see in future demonstrations?		
	Comment/suggestions		

Zone* refers to lowest governance structure at community level, Catchment** refers to operational area at the community level for the respective government ministries

Annex 12: Focus Group Discussion Guide

Date:

Location:

S/N	Questions	Comments
1	What do you think about the food we prepared today ▪ Taste, smell of food prepared ▪ Availability and accessibility of foods prepare ▪ Method used to prepare	
2	How did the children respond to the food we prepared Record the number of likes and dislikes	
3	What key insights or takeaways did you gain from today's session? ▪ Lessons learnt (messages, recipe) • What can be done at home	
4	What kind of foods would you like to see in future cooking demonstrations?	
5	What did you not like about the cooking demonstration session?	

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Imprint

Published by the

Deutsche Gesellschaft für

Internationale Zusammenarbeit (GIZ) GmbH

Registered offices

Bonn and Eschborn, Germany

‘Food and Nutrition Security, Enhanced Resilience (FANSER) Project In Zambia’

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As at

November 2024



Cooking Demonstration Guide 2024