

## **PART 2**

# **PROJECT MASIHAMBISANE INTERVENTION MANUAL**

## **Session Outlines**

### **Antenatal Sessions**

1. Living Positively
2. Keeping Myself and My Baby Healthy
3. Being Prepared
4. Choosing an Exclusive Feeding Method

### **Postnatal Sessions**

5. Loving My New Baby
6. Living a Long Life Together
7. Being Parents
8. Enjoying Life

# SESSION 1 (ANTENATAL): LIVING POSITIVELY

## Session 1 Objectives

- Give women an opportunity to talk about their feelings about being HIV+ and pregnant.
- Establish rapport with the women.
- Make women aware of the importance of looking after their physical and emotional health now that they know they are HIV+ and pregnant.
- Motivate the women to attend 4 antenatal clinic appointments and 4 Project Masihambisane sessions before their baby is born.
- Motivate and empower the women to go with their partner for joint STI testing before the baby is born and to obtain their TB test results (and treatment, if needed) at their next clinic visit.
- Help women decide how and to whom to disclose their pregnancy and HIV status.
- Make the women aware of the importance of social support in keeping themselves and their babies healthy.

## Session 1

### Opening

- 1) Song and prayer
- 2) Welcome
- 3) Explain structure of the session
- 4) Housekeeping (rest rooms, cell phones, etc.)

### Thanks Tokens

Distribute, explain, demonstrate

### Confidentiality

- 1) Explain
- 2) Ask for agreement to protect the confidentiality of the group.

### Mentor Mother Disclosure

Using the script you prepared for this session, tell about yourself and your HIV. Be sure you describe how you're managing to have a good life for yourself and they can, too.

### Pair-Sharing Introductions

- 1) Ask the women to pair up to introduce each other (name, something the same, something different).
- 2) Tell them to complete the following sentence aloud to their pair-partner:  
"I know I will be a good mother because..."
- 3) Summarize

## **Introduce Discomfort Cups**

- 1) Say that they've just shown that emotions influence a lot of what we say and do. We have a new way of talking about feelings we'd like to have you use.
- 2) Ask if someone will tell you something that makes them feel good. Get 2-3 responses.
- 3) Then ask someone else to tell you something that makes them feel bad.
- 4) Use the 2<sup>nd</sup> example just given (feels bad) and the woman who gave it as your first demonstration. Then show the woman who gave the first example (feels good) how to use the Discomfort Cups and ask her to rate that.
- 5) Use 2 or more examples illustrating each of three points on the scale. Ask the women to generate examples; if they are reluctant, you may use these or other examples:
  - a) Inviting a friend to share a meal.
  - b) Asking to go to church with a relative.
  - c) Finding out you're HIV-positive.
  - d) Learning that you're pregnant.
- 6) Let women express their feelings as they need to, crying or not. Show support for their feeling—don't try to talk them out of feeling the way they do.
- 7) Tell them that as difficult as things may seem right now, there is some good news. In these sessions they will learn important things:
  - a) How to do everything possible to improve their chances of having a healthy baby, one without HIV.
  - b) The things they do to accomplish this will also improve their own health.
  - c) This means that they may be able to live longer and healthier—to take care of their baby—than they may expect right now
  - d) While there are no guarantees, there are many things that they have control over in helping their babies, and by coming to these sessions, they will learn how to do them.
- 8) Ask women (using Discomfort Cups) to describe how much discomfort they feel about the possibility of having a healthy baby. Tell them we plan that they will feel even better about it as the sessions go on.

## **Core Messages**

Point to the appropriate poster when you start talking about it.

### **1. Decide who to tell about being pregnant or having HIV.**

- 1) Some of you have told other people you are pregnant. Is there anyone who hasn't? Anyone else you would like to tell?
- 2) Ask who they would like to tell that they're pregnant. What would the advantages be of telling that person?
- 3) What kind of reaction do you expect to get? (Get several responses.)
  - a) Pleasure, congratulations, good wishes, hug.
  - b) Worry about health, money, coping with a child.
  - c) Anger (About what?)
  - d) Scolding (How would you react to getting scolded for being pregnant?)
- 4) Who would be easiest to tell? Most difficult to tell? Use Discomfort Cups to show us how uncomfortable that would be.
- 5) Have one pair role-play in front of the group telling someone easy to tell that they're pregnant. Ask another pair to role play (also before the group) telling

someone “moderate” (not too easy, not too difficult) they’re pregnant. Use Discomfort Cups.

- 6) Have 2-3 pairs demonstrate their role-play for the group.
- 7) Ask them to think about who they would tell they have HIV. Who would that be? What are the advantages of telling him or her? What kind of response would you expect?
- 8) Which would be more difficult, telling someone you’re pregnant or that you have HIV? (Use Discomfort Cups.)
  - a) Have all members, in pairs, practice telling someone easy or moderate that they have HIV.
  - b) Ask 2 pairs to demonstrate for the whole group a role-play that worked out well.

## **2. Go to all antenatal appointments.**

- 1) Tell women that one thing they can do to feel and be healthier is to attend their antenatal appointments.
- 2) Ask women what are some of the benefits of going to their appointments. Remember to use Thanks Tokens.
  - a) Will help you stay healthy, and a healthy mother is necessary for a healthy baby.
  - b) Can make sure your baby is growing big enough.
  - c) Can make sure your baby is growing in a healthy way.
  - d) Can get the medicine and vitamins you need.
  - e) Any of your or your baby’s health problems can get identified and treated right away.
  - f) Can get TB test results and, if needed, get treatment.
  - g) Can learn different things about your health and your baby’s health.
  - h) Learn what to look for to discover if someone close to you has TB.
  - i) Learn what action to take if someone in your environment may have TB.
- 3) Using Discomfort Cups, ask them to describe how they feel about going to the clinic appointments.
- 4) Start the group talking about the source of any discomfort they have when attending the clinic. “What are the some of the barriers that might keep you from going to your clinic appointment?”
  - a) Ask the group to make suggestions about overcoming those barriers or situations.
  - b) Get the group role playing how to handle the barriers in a positive way.
  - c) Ask women what they liked, then what they would do differently in their role play if they were to do it over again.
    - Ask observers to say what they liked about the two role plays, what they would have done differently.
    - Ask all women to pair up and repeat the role play in pairs.
    - After, ask what they liked about what they did, what they would do differently.
  - d) Praise and give Thanks Tokens.
  - e) Some of the problems the women may bring up, and some suggestions you could make if they can’t think of any, are:
    - Missing the bus or ride. (Have someone remind you, trade chores.)

- Bored and hungry at clinic—long wait. (Bring friend to talk with, bring food.)
  - I'd rather do something else. (What? Reschedule the something else so you have it to look forward to. Remember you're doing this so you can have a healthy baby.)
  - A sister is mean to you. (Anything you did to cause that? No, then it's her problem, not yours, so you can be nice to her or ignore her bad attitude.)
- 5) Ask if there are ways in which a sister has been helpful or nice. How might you thank her for her help?
- a) If no one can think of anything, ask if they think sisters are trying to be helpful or nice, even if they aren't doing it right. Pull for something to compliment.

### **3. Go with your partner for STI testing.**

- 1) If don't have partner now, still need to learn this in case of future partners.
- 2) Ask them what are benefits of STI testing. Encourage them to generate reasons.
  - a) Important to find out if both have STIs—can get treated together to keep from passing them back and forth.
  - b) STIs can hurt your health as well as the baby's, can cause the baby to have serious health problems or even to die.
  - c) Protects the baby and for your health, too.
  - d) You and your man can both learn if you have HIV at same time and avoid blaming each other.
  - e) Can come back together for second test (and counseling) if positive.
- 3) Have them describe what makes them feel uncomfortable and what barriers there might be in getting their partner to come in.
  - a) Verbal abuse or anger.
  - b) Physical violence.
  - c) Abandonment.
  - d) What else?
- 4) Ask for suggestions on how they might cope with those problems. Have each use Discomfort Cups to show level of discomfort. Talk about resources for help.
- 5) Ask group to show, with their pair-partners, how they would get their partner to come in for testing. Ask them to re-use Discomfort Cups and notice if there's a difference after they practice.
- 6) Distribute STI testing referral cards, and describe their usefulness in getting partner to come to clinic.

### **4. Get support: it's good for you and your baby.**

- 1) What are the benefits of getting support while you're pregnant?
  - a) Being supported feels good. Feeling good is good for you.
  - b) People who are supportive are often helpful.
  - c) Women are sometimes moody when pregnant, and someone who cares can help cheer you up.
  - d) Feeling good helps your health, and your baby's health, too.
  - e) People who feel supported take better care of their health.
- 2) Where do you get support?

- a) From family, friends? Other?
  - b) Baby's father? Clinic, health worker?
  - c) This group is here to help support you, so if you keep coming, you'll feel more supported.
- 3) How full or empty is your Discomfort Cup when someone shows they care and offers you support? How full or empty is it when that doesn't happen? Get the group to talk about it, using Discomfort Cups.
  - 4) Use Thanks Tokens for participation.
  - 5) How do you ask for support? Who do you ask? What do you say? Ask people to demonstrate asking for support.
    - a) You can get support by coming here, to the group sessions, and we hope you feel supported by coming here.
    - b) Say, "I feel good when I see you come here, or when you smile."
  - 6) What do you do when asking for support doesn't work for you, when you feel the other person isn't supportive?
    - a) How do you turn that into something positive?
    - b) Role play in pairs asking someone for support.
    - c) Ask 2 pairs to role play before the group.
  - 7) Use Discomfort Cups and Thanks Tokens.

### **Closing**

- 1) Use the posters to summarize the core messages.
- 2) Tell them you want very much for them to come back to the group.
  - a) Each group different. May come next week, or next time they're at clinic.
- 3) Distribute and explain health booklets
  - a) To keep track of clinic appointments and visits, group sessions they attend, immunizations and health treatments, etc.
  - b) Later on will get one for their baby.
- 4) Remind them to ask for TB test results at next clinic visit.
- 5) Exchange, then turn in, Thanks Tokens.
- 6) Closing song and prayer.

# SESSION 2 (ANTENATAL): STAYING HEALTHY

## Session 2 Objectives

- Motivate and empower the women to stay healthy.
- Help the women identify and develop skills to avoid smoking, alcohol, and Isihlambezo.
- Provide information on eating healthy foods and taking vitamins.
- Discuss the importance of taking the right medications on time, and help the women develop methods to achieve this.
- Facilitate the development of techniques for the women to get adequate rest and relaxation, have fun safely, and obtain social support.

## SESSION 2

### Opening

- 1) Song and prayer.
- 2) Welcome.
- 3) Explain structure.
- 4) Housekeeping (rest rooms, cell phones, etc.)
- 5) Say that you know some have attended a previous session. Ask for those who were here before to raise their hands. Thank them for coming again.

### Thanks Tokens

- 1) Distribute while explaining Thanks Tokens for newcomers.
- 2) Demonstrate use of Tokens to 2-3 people by thanking the first person who arrived for being there, someone for turning off a cell phone, etc.

### Confidentiality

- 1) Explain.
- 2) Ask for commitment.

### Mentor Mother Disclosure

Use the script you wrote for this session. Describe how you're keeping healthy. Be sure you talk about how well you are coping despite having HIV.

### Pair-Sharing Introductions

- 3) Pair up with someone different from last time. Find out about them.
- 3) Complete the following: "To keep me and my baby healthy, I am going to ..."
- 3) Summarize and stress the following:
  - a) You have joined this group to learn more about how to make sure you do the best for yourself and your baby.
  - b) You are being a good mother by coming regularly to your clinic visits and to the Project Masihambisane.

### Introduce Discomfort Cups and Core Messages

Remind them and show how we used Discomfort Cups to help us understand how much discomfort we feel in different situations we'll be talking about.

### **Core Messages**

Point to the appropriate poster when you start talking about it.

**1. Avoid unhealthy things: smoking, alcohol, and isihlambezo.** We'll start by talking about things to avoid when pregnant. Ask what they think they should avoid while pregnant and nursing. Correct any misinformation. After talking about what the women bring up, take each of these separately.

#### 1) Smoking

- a) What are the disadvantages to you and your baby when you smoke?
  - Impairs your breathing
  - Less oxygen in your blood
  - Less oxygen to baby
  - Baby weighs less, is less healthy
- b) How do you feel when you think of stopping smoking? (Discomfort Cups)
- c) How do you feel when you think of having a healthier baby because you quit smoking? (Discomfort Cups)
- d) If you can't stop smoking altogether, do you think you can cut down? Whatever you can do will help your baby.

#### 2) Alcohol

- a) You are already doing many good things to help your baby be healthy. But you may not know that drinking alcohol during pregnancy can hurt your baby.
- b) Will someone tell me what we mean when we talk about drinking alcohol?
  - Beer
  - Wine
  - Spirits
- c) If a mother drinks any alcohol during pregnancy, her baby may:
  - Be very small and unhealthy
  - Have a different looking face (show picture of baby with fetal alcohol syndrome)
  - Have trouble sleeping and nursing
  - Be very slow to walk and talk
  - Have trouble paying attention and learning new things.
- d) What else happens when you drink alcohol besides being bad for baby's development?
  - Makes your judgment worse
  - Might do unsafe or unwise things
- e) Can someone tell me times when a woman might think she wants to drink? (Elicit examples and suggest some yourself.)
  - At a party, celebration, when upset, when angry, when partner is drinking, with friends at bars

- These are called risky times—times when circumstances or feelings make you want to drink.
- f) How can women resist or avoid these risky times and not drink while pregnant or nursing? (Elicit examples, make suggestions.)
    - Go for a walk, drink water or soda instead, play with the children, sing a song, visit with non-drinking friend.
  - g) Does someone in your life encourage you to drink alcohol? How can you respond so that you can avoid drinking and still feel good? (Discomfort Cups when someone tries to get you to drink alcohol.)
    - Remind them that you're pregnant and there's no amount of safe drinking during pregnancy.
    - Tell them you're staying healthy until the baby can feed himself.
    - Say you'd rather do something else (make a list of enjoyable things to do, from next segment).
    - Remind them you're doing this so you can have a healthy baby.
    - Say I'm sure you want the best for me and my baby.
  - h) Role play in pairs, each woman in each pair to practice a coping strategy to use during a time she might find risky.
  - i) Ask the group to agree to a goal of no alcohol during the remaining months that you are pregnant, and while you are nursing.
  - j) Ask them to use Discomfort Cups about their confidence they can avoid drinking during pregnancy and while nursing.
    - "Empty" means you are sure you will not drink at all
    - "Half full" means you are not sure whether or not you will drink
    - "Full" means you know you cannot stop drinking.
  - k) (After the meeting, ask to talk to the women whose cups are full; they may need a referral for treatment. Have referral information handy.)

### 3) Isihlambezo

- a) What happens when you use Isihlambezo?
  - Baby may come too soon
  - Some ingredients may be bad for baby
- b) How do you feel when someone wants you to use Isihlambezo and you don't want to? (Discomfort Cups)
- c) Ask the group to make suggestions about good things to say to avoid using Isihlambezo; role play some of the suggestions in pairs.
  - Your mother wants you to use Isihlambezo because she did and it helped her. (Tell her the clinic told you not to, and you don't think the baby is ready for that.)
- d) Discomfort Cups after role playing.

### 4) Give out card listing things to avoid during pregnancy

- a) Discuss ways of overcoming problems.
- b) Role play if still needed.

## 2. Do healthy things: Good nutrition and vitamins, important medications, exercise

- 1) Nutrition and vitamins. Ask women what positive things they can do to keep themselves and their baby healthy. What special eating needs do you have while you're pregnant? How do you handle them? Do you eat on a regular basis? How often?
  - a) Correct misinformation and if they don't mention the following, bring these up.
    - Eat healthy foods and take vitamins and the medicines you're supposed to take. Ask them what are some healthy foods they could eat.
    - Non- or minimally processed foods should make up at least 2/3 of each meal: fruits, vegetables, "wet" whole grains (whole grains that must be cooked in water such as brown rice, oats, barley, not dry ones like breads), and legumes.
  - b) Ask group to show, with their pair-partners, how they would get help to eat healthy food on a regular basis. Ask them to re-use Discomfort Cups and notice if there's a difference after they practice asking for help.
  - c) Ask the advantage of eating nutritious foods and taking vitamins while pregnant and nursing:
    - Provides better foundation for big, healthy baby.
    - Malnourished baby may not be as smart as well-nourished baby.
    - Mother's bones and body stay healthier while baby is using her nutrients to grow or, later, to nurse.
  - d) What are some things that can help you remember to eat healthy and take vitamins? Get group to discuss.
    - Eat on regular basis.
    - Have sensible schedule of getting food, preparing it, and eating it.
    - Have vitamins handy, easy to take.
    - Shop for food and eat meals with friends, relatives, who will reinforce healthy eating.
- 2) Medicines. What are the advantages of taking your medications for HIV or TB or STIs? When do you take your medicine? How do you remember to take it. What might make it easier for you to take it when you should. Using Discomfort Cups, talk about how you feel when taking vitamins in comparison to taking AZT.
  - a) Who needs to go back and get your TB results? Encourage them to do so at the next clinic visit.
- 3) Exercise. Ask women how far they walk in a day? How many steps. Talk about taking 10,000 steps each day. Describe how to use a step-counter and the different types (wrist, ankle, waist, other).
  - a) Ask what are the advantages of getting regular exercise?
    - Don't get fat.
    - Keep oxygen flowing to own tissues and to baby.
    - Good for digestion and sleep.
    - Improves mood.

- Something you can do with a friend.
- b) What is the enemy of exercise?
  - TV
  - Drinking
  - Smoking
- c) What types of day-to-day activities make for good exercise?
  - Walking
  - Climbing stairs
  - Dancing
- d) Let women pick a step-counter to keep and show them how to use it. Have them put it on.
- e) Suggest a 5-minute dance break for exercise. Have energetic music or ask women to sing an energetic song to dance to.
- f) Use Discomfort Cups after dance to describe how you feel now.
  - Point out that exercising makes them feel better.
  - How many steps does your step-counter indicate?
- 4) Give out list of vitamins and healthy foods.

### **3. Get practical support.**

- 1) Ask the women to identify who they go to for support. Using Discomfort Cups, who do they feel least discomfort with in asking for support? Who the most?
- 2) Have pairs role-play asking someone for help or support.
- 3) Have 2-3 pairs demonstrate their role-play for the group.
- 4) Ask the women to use the Discomfort Cups to describe how their discomfort changed after practicing.
  - a) What are the benefits of practicing something you want to be more comfortable doing?
    - Get more skillful at it.
    - Get another person's suggestions how to do it better.
    - Get more relaxed at trying it.
    - Get praised for your effort.
    - Help others learn by watching you.
- 5) Ask them to continue using Discomfort Cup idea at home (in their imagination) to identify discomfort in situations where they want support. OK to practice with a friend outside the group.

### **4. Do what relaxes you.**

- 1) What are the advantages of having fun and being relaxed while you're pregnant?
  - a) Doing things you enjoy feels good and it relaxes you, makes you feel calmer.
  - b) When you feel good and are relaxed your body and your baby are healthier.
  - c) Women are sometimes moody when pregnant and doing things you enjoy can help cheer you up.
- 2) When was the last time you felt calm and relaxed, and what did you do to feel that way? What do you like to do for enjoyment?
  - a) Discuss how you can relax and still engage in healthy behaviors and avoid unhealthy behaviors and activities.

- 3) Use the Discomfort Cup to talk about how the women feel while engaging in various activities. What activities give them an empty Discomfort Cup? Have some suggestions for healthy activities that are enjoyable if the women don't bring up any.
  - a) Singing, dancing, talking with friends.

### **Closing**

- 1) Use the posters to summarize the core messages.
- 2) The things you learn here will help you be a good mother.
- 3) Invite back.
- 4) Give out card listing clinic and group meeting days and times if they need one.
- 5) Song and prayer.

## **SESSION 3 (ANTENATAL): BEING PREPARED FOR MY BABY**

### **Session 3 Objectives**

- Motivate and empower the women to take their AZT and nevirapine as directed and to attend all clinic appointments.
- Get women to agree to tell the doctor or sister at the hospital they are HIV-positive when they arrive to give birth.
- Be sure to ask that nevirapine be given to the baby at 6 hours after birth and that AZT syrup be given to you to take home for the baby's first week, as well as a schedule for when the baby will need the medicine.
- Provide information the women will need to apply for a child grant when the baby is born.
- Encourage the women to maintain their own health record booklet and one for their baby.

## **SESSION 3**

### **Opening**

- 1) Song and prayer.
- 2) Welcome
- 3) Structure of group.
- 4) Housekeeping (rest rooms, cell phones, etc.)
- 5) Ask for those who were here before to raise their hands. Thank them for coming again.

### **Thanks Tokens**

Distribute, explain, and demonstrate.

### **Confidentiality**

Explain. Ask for agreement.

### **Mentor Mother Disclosure**

- 1) Using the script you prepared for this session, introduce yourself. Be sure the women know you are HIV+, you were pregnant, and you are coping with your situation. Also make these points:
  - a. I keep my own health records so I would know what to do and when to do it. (Show copy of health chart.)
  - b. I want to help you to stay healthy and prepare to have a healthy baby.

### **Pair-Sharing Introductions**

- 1) Ask the women to pair up with someone different (not same person as before) so you can introduce them after you get to know them.
- 2) Complete the following sentence aloud with your pair-partner: "To prepare for my baby's birth, I will ..."

- 3) After introductions, summarize; stress being a good mother by coming regularly to clinic visits and to Project Masihambisane.

## **Introduce Discomfort Cups**

### **Core Messages**

#### **1. Take your AZT and go to all clinic appointments.**

- 1) Ask women what medicines they are each supposed to be taking for their HIV. Review and clarify.
- 2) Ask what the benefits are of taking those medicines.
  - d) To keep self and baby healthy.
  - e) To fight HIV.
  - f) To maintain healthy amounts of the medicine in your body.
  - g) To live a long life.
  - h) To help keep the baby safe from HIV.
- 3) Ask women to explain the difficulties they have taking the medicine when they should. Use Discomfort Cups.
- 4) Problem-solve and role play:
  - d) What can you do or change so it's easier to take the medicines?
  - e) What can you do or change so it's easier to go to clinic?

#### **2. Take nevirapine when you go into labor.**

- 1) Explain benefit to baby. Describe when and how to take it, what to do if labor is prolonged.<sup>1</sup>
- 2) Discuss what might interfere with taking nevirapine when going into labor, how to overcome the obstacles.
- 3) Use Discomfort Cups to describe how you would feel about missing the dose.
- 4) Role play having a friend or your partner remind you. Use Discomfort Cups to describe how you would feel making sure your baby got the nevirapine.

#### **3. At the hospital to have the baby, tell the sister that you are HIV-positive.**

- 1) Distribute HIV+ cards to women. (The cards should have a request to put on the baby's chart that he will need nevirapine at 6 hours after birth.)
- 2) Describe how they can be used to let sister know your HIV status.
- 3) Ask them what the advantages are of letting the sister know:
  - a) She can help you get the medicine you need.
  - b) She will see that your baby gets the medicine it needs at 6 hours.
  - c) She can help you get the medicine you need to take home with you.
- 4) Ask what might make them reluctant to disclose to sister. Get group to problem-solve about overcoming that reluctance. Use Discomfort Cups.
- 5) Have the women role-play different scenarios for telling the sister, using the HIV+ cards you have handed out.
  - a) Include in the role play ways the women might thank the sister for taking care of her and her baby.
- 6) After role-playing, have women use Discomfort Cups again to identify greater ease in discussing HIV status with the sister.

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<sup>1</sup> Need specific information on nevirapine and AZT recommendations.

#### **4. Make sure your baby receives nevirapine syrup at 6 hours and AZT syrup during the first week.**

- 1) Ask group to generate ideas for reminding yourself it's time for nevirapine.
- 2) Using Discomfort Cups, problem-solve overcoming the unplanned-for:
  - a) What if baby doesn't get nevirapine on time? (Remind the sister nicely; ask for senior sister if you have to. The baby is most important.)
  - b) What if you're told you have to pay for it? (Tell sister your information is that it's free. Ask to see supervisor.)
  - c) What if you leave the hospital before 6 hours? (Don't. The baby needs the medicine, and they can't give you that first dose to take home.)
- 3) Ask each woman to pick a way to be sure her baby gets nevirapine on time.
- 4) Using Discomfort Cups, ask how confident each woman is that she can make sure her baby gets nevirapine. Continue problem-solving role plays if needed.

#### **5. Register for the child grant.**

- 1) Tell the women they will each be eligible for a child grant when the baby is born. Discuss the benefits (money each month, meaning better nutrition for you which translates into more and healthier breast milk for baby).
- 2) Show them your a copy of an application for a child grant.
- 3) Describe what they have to do to get the grant (have baby's birth registration from the hospital and mother's ID). Tell them where they can get help filling out the papers, and where to turn them in.
- 4) Ask them to describe how they feel about applying for the child grant, using the Discomfort Cups.
- 5) Ask each woman to make a plan for getting the child grant and describe her plan to the group.
- 6) Have the group use Discomfort Cups to describe how they will feel applying for the grant, then getting the money each month.

#### **6. Keep health record booklets for you and your baby.**

- 1) Ask the women to raise their hand if they already have their own health record booklet. Praise those that have it. Give copies to those who don't have one.
- 2) Show a sample health record booklet (or your own, if you wish).
- 3) Describe the benefits:
  - a) Keep track of treatments, immunizations, tests.
  - b) Can show it to sister or doctor when needed.
  - c) Especially important to show when you go to hospital to have your baby; also will be useful in the future.
  - d) Will be useful when baby gets its checkups.
  - e) Ask women if they can think of other benefits.
- 4) Using Discomfort Cups, ask how they feel about having a health record booklet. Problem solve negative responses:
  - a) Can't write to fill it out (ask a friend to help)
  - b) Don't know if it's correct (ask a friend to read it to you)
  - c) Someone might see it (keep it in a safe place—where would that be?)
  - d) Use Discomfort Cups to identify how the women feel after role-playing.

#### **Closing**

- 1) Summarize.
- 2) If they can do the things we discussed today, they will be good mothers.

- 3) Tell them you want very much for them to come back to the group. Give out card listing group and clinic meeting days and times if they need one.
- 4) Exchange and collect Thanks Tokens.
- 5) Closing song and prayer.

# **SESSION 4 (ANTENATAL): CHOOSING AN EXCLUSIVE FEEDING METHOD**

## **Session 4 Objectives**

- Motivate and facilitate the women's selection of and commitment to one and only one feeding method they will use with their baby.
- Provide information on best practices as well as what not to do in feeding the baby.
- Discuss practical universal precautions for the women to use at home.
- Provide a schedule for return visits for baby care, their own care.

## **SESSION 4**

### **Opening**

- 1) Song and prayer.
- 2) Welcome
- 3) Structure of group.
- 4) Housekeeping (rest rooms, cell phones, etc.)

### **Thanks Tokens**

### **Confidentiality**

### **Mentor Mother Disclosure**

- 1) Using the script you prepared for this session, introduce yourself.
- 2) We're here to talk more about what you can do to help have a healthy baby.

### **Pair-Sharing Introductions**

- 1) Ask the women to pair up to introduce each other to the group.
  - a) Complete the following sentence aloud to your pair-partner: "When I think about breastfeeding my baby, I feel ..."
  - b) You are being a good mother by coming regularly to your clinic visits and to the Project Masihambisane.

### **Introduce Discomfort Cups**

### **Core Messages**

#### **1. Decide how you will feed your baby.**

- 1) Ask: Has anyone has thought about how you're going to feed your baby? Tell us.
  - a) Pair share role play about feeding decision. Group sharing of methods.
  - b) Discomfort level about sticking with that method for 6 months.
- 2) What problems might develop with the feeding method you have chosen that we have not discussed?"
  - a) Role-play problem solving.

- 3) Reminder to tell nurse at hospital the feeding method you will be using, so they don't start the baby on another method accidentally. Discomfort level?
  - a) Role play solutions, if necessary.

## **2. Don't mix feeding methods for first 6 months.**

- 1) Explain that while many women breast feed sometimes and formula feed at other times, that is the worst thing you can do for your baby. Mixing feeding types assures that the baby's stomach lining is not prepared to fight off HIV and other diseases.
- 2) Ask the women to talk about what they have heard about feeding their babies. Correct any misinformation and provide supplementary information.
- 3) Ask what difficulties the women would expect to have if they breastfed only.
  - a) Neighbor may criticize you for breastfeeding when you have HIV.
  - b) Neighbor says your baby is crying, not getting enough food.
  - c) Using Discomfort Cups before and after, have women role play how to respond to these criticisms.

## **3. Exclusive breastfeeding for 6 months is best.**

- 1) Best for the baby is to breast feed exclusively for the first six months.
- 2) Breastfeeding is the best thing to do because it's healthier for the baby, even if the mother has HIV.
  - a) Less likelihood of baby getting sick from contaminated water.
  - b) Breast milk contains only small amounts of HIV, but more important, the milk itself protects the baby against HIV, as long as the baby doesn't get water or formula.
- 3) Don't even give him a sip of water, or gripe water, or formula temporarily.
  - a) Water or formula doesn't provide the protective coating for the baby's stomach that breast milk does.
  - b) Water or formula may stop baby from suckling.
  - c) Breastfeeding problems can be solved: ask sisters, others.
- 4) Breast milk is enough.
  - a) Breast milk protects the baby.
    - Foremilk (thin, watery) provides water for the baby, is easier to start suckling. It also coats baby's stomach to protect against HIV.
    - Hind milk (thick, creamy) provides nourishment for the baby so it will grow big and healthy. Also easiest for baby to digest (over any other type of nutrition). Also protects stomach lining against HIV.
  - b) Breast milk provides all the nourishment the baby needs for at least 6 months.
  - c) Breastfeeding is also easy to do at night.
  - d) Good way to bond with the baby.
  - e) Baby will soon learn to suckle if given only breast milk.
- 5) Ask their feelings about exclusively breastfeeding (use Discomfort Cups).
- 6) Can you think of more problems you might have?
  - a) Role play solutions suggested by group.
  - b) If there are problems go to the clinic and ask the sisters for help.
  - c) Go to a neighbor with the healthiest children who you know also breastfed her children, ask for advice.

- 7) Have you decided how you're going to feed your baby? How do you feel about it (Discomfort Cups)? Tell us also what problems you might expect
  - a) Try to get everyone to commit to a method.
  - b) Role-play problem solving.

**4. Don't use formula unless you have clean running water, flush toilet, electricity, and a steady income.**

- 1) You need clean running water to sterilize for:
  - a) Mixing the formula.
  - b) Sterilizing the cup and other containers you use for the formula.
- 2) You need flush toilets for cleanliness and to assure that the running water you have is not contaminated.
- 3) You need electricity so you can:
  - a) Boil the water to sterilize it for the formula.
  - b) Boil the water to sterilize the cup and other utensils.
  - c) Refrigerate the mixed formula until you use it.
  - d) Reheat the formula after it's refrigerated, so it's not too cold for the baby.
- 4) You need a steady income so you can afford to continue to buy formula and not to go back to breast feeding ever, because that would hurt the baby.
  - a) Once the baby has been fed formula or water, its stomach lining will not protect it from HIV and so it must not breast feed.
- 5) What will you say if your partner or your mother asks why not use formula?
  - a) Discomfort Cups, role play, repeat Discomfort Cups
- 6) How will you refuse if they offer you formula at the clinic?
  - a) Discomfort Cups, role play, repeat Discomfort Cups

**5. Return to the clinic in 6 days and again in 6 weeks.**

- 1) Your baby needs to be checked at the clinic when it is 6 days old.
  - a) Take the baby back and show the sister what a nice baby you have.
- 2) Your baby also needs to be checked and get immunized and tested for HIV at 6 weeks.
  - a) You need to go back to the clinic and get the HIV results so if your baby needs treatment, it will get it.
  - b) You might have a happy surprise and find out your baby is HIV-negative. Think how good that would feel.
- 3) If a sister was helpful, tell her thanks. Let her know you appreciate her help.
  - a) Role play thanking sister for help.
  - b) Role play thanking neighbor for advice and assistance with breastfeeding.

**5. Keep others safe from HIV.**

- 1) HIV is transmitted with blood. Clean yourself and your baby carefully.
  - a) Cuts. If you get a cut, tell your older children to be very careful and not to touch your blood.
  - b) Role play how to do this in gentle manner.
  - c) Discomfort Cup about confidence I can do this.
- 2) Use condoms while you are pregnant and nursing, so that you won't be exposed to new strains of HIV that might cause an infection in the baby.

## **Closing**

- 1) Use the posters to summarize the core messages.
- 2) Remind them that they identified what feeding method they're going to use with their baby exclusively.
- 3) Ask if anyone needs the "I'm HIV+" care to give to the sister at the hospital when they have their baby. Distribute as needed.
- 4) Tell them that all if they can do the things we discussed today and the other things they will learn in our sessions, they will be good mothers.
- 5) Tell them you want very much for them to come back to the group. May come next week, or next time they're at clinic.
- 6) Give out card listing group meeting days and times if they need one.
- 7) Lead the group in a closing song and prayer.

# **SESSION 5 (POSTNATAL): LOVING MY NEW BABY**

## **Session 5 Objectives**

- Reiterate and facilitate the women's selection of and commitment to one and only one feeding method they will use with their baby for its first 6 months. Be sure they know their schedule for return visits for baby care, their own care.
- Encourage good breast care while breastfeeding.
- Discuss how their feelings can change after the baby is born; help them identify ways they can cope with these changes.
- Help women identify ways they can increase their enjoyment of their baby.

## **SESSION 5**

### **Opening**

- 1) Song and prayer.
- 2) Welcome. Congratulate on producing such beautiful babies.
- 3) Explain structure.
- 4) Tell them that at the end of the session, we want to take pictures of them and their babies and will give them the pictures to keep.
- 5) Housekeeping.

### **Thanks Tokens**

### **Confidentiality**

### **Mentor Mother Disclosure**

- 1) Using the script you prepared for this session, introduce yourself.
- 2) Today we're going to talk about what you can do to keep your precious new baby healthy and loved.

### **Pair-Sharing Introductions**

- 1) Ask the women to pair up so they can introduce each other to the group.
- 2) Have them complete the following sentence aloud to your pair-partner: "Now that my baby is born, this is what I am going to do to keep both of us healthy and happy . . ."

### **Introduce Discomfort Cups**

- 1) Use "How do you feel about having your baby?" to both illustrate the use of Discomfort Cups and start a conversation about the baby.
- 2) Some women may want to talk about HIV status of baby. Let them and correct any misinformation. Remind them of need to test at 6 weeks.

### **Core Messages**

#### **1. Stay with your chosen feeding method for 6 months.**

- 1) Ask what this means. Correct errors and fill in missing information. Emphasize exclusive feeding method, not mixed.
  - a) Only breastfeeding OR only formula feeding, nothing else for 6 months.
  - b) If you are exclusively breastfeeding, that is enough for the baby for 6 months; don't need water, only breast milk.
    - Fore milk (thin, watery) is good for baby, protects stomach from HIV, gives all the water the baby needs.
    - Hind milk (thick, creamy) also protects stomach and also gives all the nutrition the baby needs.
    - Giving the baby additional water may cause diarrhea, pneumonia.
    - Babies don't need any solid food until they're 6 months old. Then start gradually.
  - c) If formula feeding, sterilize water before using (even for just a drink for the baby).
    - Sterilize cup and utensils you use for the baby. Each time.
  - d) Both methods: DO give vitamins and medicines that the clinic gives you.
  - e) If the baby cries, that's normal. It will stop by 3 months. Baby isn't crying because he wants something different.
  - f) Don't give gripe water, other local remedies, even if other mothers recommend them.
- 2) Ask the women to talk about the benefits of sticking with one method. Correct and supplement the information.
  - a) Better for the baby's stomach—less irritating.
  - b) Makes it easier for the baby to avoid getting HIV and other diseases.
  - c) Less work for the mother to keep the baby healthy.
  - d) Ask what the women say when others question them about this.
  - e) After 6 months, the baby will be strong enough to resist many of the problems that could come up.
- 3) Tell the women that it's very good that they've chosen one way to feed their baby and that they have committed to using only that one way.
- 4) Remind them to use the vitamins and other medicines that the clinic has given them and to go to appointments.

## **2. Solve any feeding problems you have—don't switch methods.**

- 1) Using Discomfort Cups, how has the method they chose been working?
  - a) What problems have they had?
- 2) How were they able to overcome those problems?
  - a) Get suggestions from others in the group.
- 3) Some women's breasts get sore when breastfeeding. What can they do to avoid this? What have you been told? What works for you?
  - a) Massage breasts with oil.
  - b) If lumps develop, put on hot water compress.
  - c) Relax, think of something pleasant for 15 minutes; get neighbor to take the baby so you can rest.
  - d) Make sure your breasts are clean when breastfeeding. Ask how they do this.
  - e) Talk about guidelines for cleaning and protecting breasts during breastfeeding.

- 4) Ask women what makes it difficult to stick to one method of feeding—what problems they have encountered.
  - a) What did other people say about the method they selected?
  - b) Using Discomfort Cups, how did you feel about what others said?
  - c) Did you do anything to make yourself feel better? How did that work?
  - d) Role play overcoming some of the difficulties. Discomfort Cups.
- 5) Discomfort Cup at thought of doing this for 6 months.
  - a) If someone not feeling very good about her method, ask the others what she might do to feel better.
  - b) Role play. Do Discomfort Cups again after the role play.
- 6) Role play situations that involve others, such as grandmother with other ideas.
- 7) Reminder: child grant can help you buy healthy food for yourself so you can produce milk or have enough energy to care for your child.
- 8) Get suggestions about where to go for help: clinic or neighbor using same feeding method as you.

### **3. Feelings change a lot after the baby is born.**

- 1) Using Discomfort Cups, ask women to describe what their feelings were last night.
- 2) When was the last time your Discomfort Cup was empty—no discomfort? What was going on? Can you do that at other times when your Discomfort Cup is fuller, in order to make it emptier?
- 3) Your body changes as it adjust to not having the baby inside and to your new situation. In addition, your feelings will change. Sometimes very rapidly.
- 4) What do you do to feel better?
  - a) Discussion and suggestions
  - b) Talk to friends or relatives, sing, listen to music, etc.
  - c) Exercise very important in feeling better—go for walk, dance.
- 5) If you get sad or depressed for a short time, this is usual. If depressed for five days in a row, go to the clinic and tell the sister about it.
  - a) Role play telling the sister. Use Discomfort Cups.
- 6) Ask the group how they get over bad feelings, how they change them to good feelings? What do they do?

### **4. Enjoy your baby; this is a special time.**

- 1) How much are you able to enjoy your baby? What is the best thing about having your baby? What do you like doing with your baby.
- 2) What would you like to be different about this experience? Ask the group to help problem-solve about individual concerns.
  - a) Mention relaxation and taking time.
  - b) Get as much sleep as you can; having a new baby is very tiring.
  - c) Ask a friend or neighbor to help. Who would you ask?
    - With pair partners, role play asking someone for help.
    - Use Discomfort Cups before and after the role play.
- 3) Everything you do with your baby helps you and your baby develop close, happy feelings for each other. Encourage the baby's father or other relatives to do things with the baby whenever you can—the baby will benefit from their attention, too.
- 4) Talk to your baby. Will help him or her learn to talk sooner, will help socialize the baby to people.

## **Closing**

- 1) Use the posters to summarize the core messages.
- 2) Remind them that they have started using the feeding method they're going to use with their baby exclusively, and tell them they should continue using only this method for 6 months.
- 3) Present them with a small gift for having been so committed to being good mother.
- 4) Tell them you want very much for them to come back to the group. May come next week, or next time they're at clinic. OK to bring baby.
- 5) Give out card listing clinic and group meeting days and times if they need one.
- 6) Lead the group in a closing song and prayer.
- 7) Remind those who brought babies with them to stay for photo with baby.

# SESSION 6 (POSTNATAL): LIVING A LONG LIFE TOGETHER

## Session 6 Objectives

- Motivate and empower the women to apply for a child grant for their new infant.
- Discuss importance and benefits of immunizations for the child.
- Help plan healthy eating for the women themselves.
- Encourage appropriate health monitoring and care for the mothers.
- Remind them of universal precautions for preventing HIV.

## SESSION 6

### Opening

- 1) Song and prayer.
- 2) Welcome. Congratulate on producing such beautiful babies.
- 3) Explain structure.
- 4) Housekeeping
- 5) Mention we want to give them a photo of their baby that we will be taking after the session, for those who weren't here for the last session.

### Thanks Tokens

### Confidentiality

### Mentor Mother Disclosure

Using the script you prepared for this session, introduce yourself.

### Pair-Sharing Introductions

- 1) Ask the women to pair up with someone new so they can introduce each other to the group.
  - a) Complete the following sentence aloud to your pair-partner: "Now that my baby is born, this is what I am going to do to keep him or her healthy and happy . . . "
- 2) Tell the group that there is joy and pleasure in having babies, but also pain and exhaustion. Say that feelings will change, and we are here today to talk about how we can celebrate the birth of the baby and do the best job possible in loving our babies.

### Introduce Discomfort Cups

### Core Messages

#### 1. Obtaining the child grant will make life easier.

- 1) Ask if anyone has applied for their child grant. If someone has, ask her to tell how that went. Any challenges or problems? Make a list of the challenges or

- problems so you can deal with them. (After the session, give the list—without names—to the coordinator so we can be prepared in future sessions.)
- 2) Have the women use Discomfort Cups in describing how the particular problems or the idea of applying for the child grant make them feel.
  - 3) Have a discussion with the women about why the child grant is important; list some reasons the women should apply for it.
    - a) Regular money they can count on to help buy healthy food for breast-feeding mother, so she has energy and so baby gets what it needs from her.
    - b) Can also buy food and formula for baby if exclusively formula feeding—mother still needs energy.
    - c) More stable home life.
    - d) Less worry.
  - 4) Describe how to apply for the child grant.
    - a) Need your ID card, the baby's birth certificate (Road to Health Card). If the baby is old enough for immunizations, bring proof he has had them.
    - b) Where and how to apply.
  - 5) Discomfort Cups about child grant. Problem solving potential problems (husband may object).

## **2. Get your baby immunized and tested for HIV and get the HIV results.**

- 1) Remind women to bring their baby to get immunized and tested for HIV at 6 weeks, or as soon as possible after that time.
  - a) Distribute list of immunization clinic days and times.
  - b) Ask the women to describe the benefits of immunizing babies.
  - c) Acknowledge what they say and give factual information.
- 2) Turn the discussion to HIV testing. Have women use Discomfort Cups to see how they feel getting HIV testing for their new baby in comparison to getting immunizations.
  - a) Ask women to discuss the advantages of getting their baby tested for HIV.
- 3) Now discuss the importance of going back to get the results of the HIV test. Tell women that sometimes if they're feeling anxious, might not go back. Ask women to talk about some of the reasons that may prevent them from getting the test results. Use Discomfort Cups.
  - a) Have the women role-play handling some of the situations that might stand in the way of their getting their baby's HIV results. Use Discomfort Cups.
- 4) Role-play hearing baby is HIV-negative, telling your partner.
- 5) Use Discomfort Cups after the role-play.
- 6) Suggest how to help the women feel better about getting results.
  - a) Relax the night before getting results
  - b) Tell yourself you'll be better able to help the baby live long if you know the results.
- 7) Give card with immunization clinic times.

## **3. Eat healthy food daily.**

- 1) Ask women to talk about what are healthy foods, about what makes foods healthy. (Repeat information from Session 2.)

- a) Eat healthy foods and take vitamins and the medicines you're supposed to take. Ask them what are some healthy foods they could eat.
  - b) Non- or minimally processed foods should make up at least 2/3 of each meal: fruits, vegetables, "wet" whole grains (whole grains that must be cooked in water such as brown rice, oats, barley, not dry ones like breads), and legumes.
- 2) Ask them if they are eating on a regular basis—every day at approximately the same times? Are there specific times of day that they eat now that their baby has been born? Emphasize importance of regular eating in helping them have energy, produce milk.
  - 3) Acknowledge what they say and make additional suggestions on what healthy eating might involve. Emphasize importance especially if breastfeeding.
  - 4) Hand out the illustrated list of healthy foods, vitamins (from Session 2).

#### **4. Get regular check-ups.**

- 1) Explain that even though they are no longer pregnant, they still need to visit the clinic regularly for check-ups. Ask them to think of benefits of doing this.
  - a) Can take better care of the baby if they're healthy.
  - b) Can identify and treat unhealthy situations better if caught early.
  - c) Should get check-up every three months.
- 2) Ask women to describe any obstacles they may face in going in for regular clinic check-ups.
- 3) Role-play how to address these obstacles. Use Discomfort Cups.

#### **5. Keep others safe from HIV.**

- 1) We talked about keeping other people protected from HIV. This is just a reminder to you.
  - a) HIV is transmitted with blood. Clean yourself and your baby carefully.
  - b) If you get a cut, tell your older children and other relatives to be very careful and not to touch your blood.
  - c) Role play how to do this in gentle manner.
- 2) Use condoms while you are pregnant and nursing, so that you won't be exposed to new strains of HIV that might cause an infection in the baby.
  - a) Role play problems using condoms at this time. How to handle problems.
  - b) Discomfort Cups about your confidence you can do this.

#### **Closing**

- 1) Summarize core messages.
- 2) Exclusive feeding method.
- 3) Ask if anyone needs a new health record booklet for their baby. Point out timeline for medicines, immunizations, solid food, etc.
- 4) Tell them that all if they can do the things we discussed today and the other things they will learn in our sessions, they will be good mothers.
- 5) Tell them you want very much for them to come back to the group. May come next week, or next time they're at clinic.
- 6) Give out card listing group meeting days and times if they need one.
- 7) Thanks Tokens to each other, then collected
- 8) Closing song and prayer

# **SESSION 7 (POSTNATAL): BEING PARTNERS**

## **Session 7 Objectives**

- Practice eliciting partner cooperation in getting tested for HIV.
- Deciding whether to have more babies in the future.
- Commit to use condoms during sex.
- Discuss and rehearse ways of coping with a partner's use of alcohol.
- Dealing with a partner having sex outside the relationship.

## **SESSION 7**

### **Opening**

- 1) Song and prayer
- 2) Welcome
- 3) Explain structure
- 4) Housekeeping
- 5) Acknowledge that some may have missed one or more of the previous sessions, and encourage them to make it up the next time it's offered, since they will learn different things in each session.
- 6) These sessions are designed to help you keep yourself and your baby healthy, and sometimes, that includes having a good relationship with your partner.

### **Thanks Tokens**

### **Confidentiality**

### **Mentor Mother Disclosure**

- 1) Using the script you prepared for this session, introduce yourself.
- 2) One of those things that we want that will often help the baby have a happy and healthy life is to have a good relationship with our partner, or with the baby's father. That is what we're going to focus on today.
- 3) Ask women who are in a relationship at the present to raise their hands.
- 4) Tell women that if they don't have a relationship at the present, they may have one in the future, so use this information and these skills as if they were in that future relationship.

### **Pair-Sharing Introductions**

- 1) Ask the women to pair up with someone they haven't paired up with before so they can introduce each other to the group.
- 2) Complete the following sentence aloud to your pair-partner: "Now that my baby is born, this is what I would like my partner to do for the baby and me..."
- 3) Tell them they can talk about a former partner or a future partner if they don't presently have a partner.

## **Introduce Discomfort Cups**

### **Core Messages**

#### **1. Talk about HIV and STI testing with your partner.**

- 1) Ask if anyone's partner has been tested for HIV and STIs. Ask if they got tested together. (Don't ask if the partner was HIV+ or not.) Ask how it went, asking their partner to get tested.
- 2) Give information about partner testing (when, where, free) and distribute HIV-STI testing cards to women who need them.
- 3) Ask the women to describe the benefits of having their partner get tested.
  - a) He can get treated if he needs it (for STIs as well as HIV).
  - b) It will help protect my health if he is treated.
  - c) We will have more information to decide if we need to use condoms.
- 4) Using Discomfort Cups, ask women whose partner has not yet been tested, or who do not have a partner, to tell how asking a partner to be tested would feel.
- 5) Get the women to suggested different ways to ask their partner to get tested, and have the women pick which they'd like to role play. (They may all role play different methods if they like.) Have them role play in pairs, then ask 2-3 pairs to demonstrated their role play before the whole group.
- 6) Ask everyone how full their Discomfort Cups are after the role play and observation.

#### **2. Decide whether to have another baby.**

- 1) Start a discussion about whether or not the women are planning to have another baby in the future.
- 2) Ask: how they feel about that by (use Discomfort Cups).
  - a) What made them make that decision; what does partner or family think of that; is it their choice or from pressure?
  - b) If not yet decided, what are the considerations they will think of when they make their plans?
    - HIV risk for baby
    - Other health issues for self or baby
    - Money
    - Time and energy
    - Health of baby's father
    - Care for baby if you get sick
    - Impact on this baby (of changes in my energy, time, money)
- 3) Using Discomfort Cups, have women "think out loud" why they would or would not have another baby. Discuss without criticism. Repeat Discomfort Cups.
- 4) If important issues are not brought up, the Mentor Mother should bring them up in a kind way.
- 5) What will you do to control having children until you want them?
  - a) Discuss condoms, other contraceptive methods.
  - b) Disease-prevention advantages of condoms (HIV, STIs).
  - c) Continuing HIV treatment to reduce risk to future children.
- 6) Praise the women and thank them for thinking about the future.

### **3. Think about using condoms.**

- 1) Ask the women if any have used condoms since learning they had HIV. Have them use Discomfort Cups in describing their experiences.
- 2) Ask the women what are the advantages of using condoms. Add information if it is needed:
  - a) Keep from giving the man HIV.
  - b) Keep from getting exposed to more or different HIV.
  - c) Keep from getting other STIs besides HIV.
  - d) Keep from getting pregnant before they want to.
- 3) Ask them how their partners react to their asking to use condoms. List negative reactions.
  - a) Remind them that condoms are effective and safe if they are used consistently and correctly.
- 4) Have women suggest ways of dealing with those reactions. Role play overcoming partner's reactions, using Discomfort Cups.
- 5) Have women tell how they express their appreciation to their men for agreeing to use condoms.

### **4. Think about your partner's use of alcohol.**

- 1) Open discussion of problems with partner's alcohol drinking.
- 2) Ask women what they would like from their partner in terms of drinking.
- 3) Using Discomfort Cups, have women role play how they would ask for what they want with regard to partner's drinking alcohol.
  - a) Drink less, drink not at all, stay away if they're drunk, no sex if they're drunk, etc.
- 4) Ask women if they consider drinking alcohol to be a problem for themselves? If so, what would they like to do about it? Who would they like to ask to help them. Have them pair up and role play asking someone for specific help for themselves or for someone else in their life.
- 5) Ask women to discuss what they can do if their partner refuses to change his alcohol drinking. If he is mean and abusive, what can they do? Suggest alternatives (go to a friend's home, ask the clinic for help, other).
- 6) Distribute alcoholism referral information, battered women's referral information.

### **5. Think about what to do if your partner has sex with others.**

- 1) Is your partner's having sex with another person a problem?
- 2) What do you want to ask him to do?
  - a) No sex with others because it hurts your feelings, makes you feel bad.
- 3) What do you want to *insist* that he do?
  - a) No sex with you without a condom because it puts you at risk for getting sick with STIs.
  - b) Other?
- 4) Using Discomfort Cups, role play some of the scenarios the women suggest.

### **6. Get support when difficult things happen.**

- 1) Say, "Remember when we talked about getting support before?"
- 2) What are the benefits of getting support now?
  - a) Being supported feels good. Feeling good is good for you.
  - b) People who are supportive are often helpful.

- c) Women are sometimes moody when their bodies change after giving birth, and someone who cares can help cheer you up.
  - d) Feeling good helps your health, and your baby's health, too.
  - e) People who feel supported take better care of their health.
- 3) Where do you get support?
    - a) From family, friends? Other?
    - b) Baby's father? Clinic, health worker?
    - c) This group is here to help support you, so if you keep coming, you'll feel more supported.
    - d) You can also call on other women you have met here to get together with outside of the group.
  - 4) How do you ask for support? Who do you ask? What do you say? Ask people to demonstrate asking for support.
    - a) What do you do when asking for support doesn't work for you, when you feel the other person isn't supportive?
    - b) How do you turn that into something positive?
  - 5) Role play in pairs asking someone for support.
  - 6) Ask 2 pairs to role play before the group.
  - 7) Use Discomfort Cups and Thanks Tokens.

### **Closing**

- 1) Summarize the core messages.
- 2) Remind them again that they have started using the feeding method they're going to use with their baby exclusively, and tell them they should continue using only this method for 6 months before changing to any other method or to solid food. If any problems, ask at clinic for help.
- 3) Tell them that all if they can do the things we discussed today and the other things they will learn in our sessions, they will be good mothers.
- 4) Tell them you want very much for them to come back to the group. Next session is the last one, and it's important and fun.
- 5) Give out card listing group meeting days and times if they need one.
- 6) Exchange Thanks Tokens.
- 7) Closing song and prayer.

# SESSION 8 (POSTNATAL): GETTING SOCIAL SUPPORT

## Session 8 Objectives

- Communicate importance of taking care of oneself.
- To encourage the women to enjoy and bond with their baby.
- To let them know it's good to ask for help and teach them how to do so.
- To put effort into keeping their friends.

## SESSION 8

### Opening

- 1) Song and prayer
- 2) Welcome
- 3) Acknowledge that this is the last session in the series, but some may have missed one or more of the previous sessions; encourage them to attend any sessions they have missed, since they will learn different things in each session.
- 4) Explain structure
- 5) Housekeeping

### Thanks Tokens

### Confidentiality

### Mentor Mother Disclosure

Using the script you prepared for this session, introduce yourself.

### Pair-Sharing Introductions

- 1) Ask the women to pair up with someone they haven't paired up with before so they can introduce each other to the group.
  - a) Complete the following sentence aloud to your pair-partner: "Now that my baby is born, this is what I am doing to keep us both involved with other people . . ."
- 2) Stress the following:
  - a) You have joined this group to learn more about how to make sure you do the best for yourself and your baby.
  - b) You are being a good mother by coming regularly to your clinic visits.

### Introduce Discomfort Cups

### Core Messages

#### 1. Take time for yourself.

- 1) Ask women what they do to make themselves laugh and feel good. Get a discussion going so the women can hear how others enjoy themselves. Have them use Discomfort Cups to tell how good it feels to do this.

- 2) Ask women to list benefits of doing things that make you feel good.
  - a) Helps your health
  - b) Helps you love your baby more
  - c) Helps you produce milk for your baby
  - d) Helps you fight off HIV
  - e) Helps your mood
- 3) Ask what gets in the way of spending enjoyable time on themselves.
  - a) Use Discomfort Cups to tell how they feel when they can't spend time on themselves.
  - b) How do they overcome that?
- 4) Ask women to pair up and tell each other what they will commit to doing for themselves. OK to suggest visit a friend, do something nice for someone else, play with baby, get some rest, exercise.

## **2. Enjoy your baby.**

- 1) Sometimes babies are more enjoyable than at other times. What makes your baby enjoyable? Use Discomfort Cups.
- 2) What makes your baby not so enjoyable? Use Discomfort Cups.
- 3) What do you do when your baby isn't so enjoyable, to make him/her more enjoyable?
- 4) What do you do to make yourself feel close to your baby? How do you arrange to spend some time playing with your baby?
- 5) Tell them it's important to enjoy your baby. Get a discussion going of things women can do to increase their enjoyment of their baby.
- 6) Role play overcoming problem situations.

## **3. Keep your friends close.**

- 1) It's important to have people you like in your life. Good for your mood, health, making life enjoyable. Who do you have in your life who helps you feel good? What do they do for you? What do you do together?
- 2) Using Discomfort Cups, ask the women to describe how they feel when they haven't seen or talked with a friend for a while. After you see your friend, how do you feel?
- 3) How do you ask friends to spend time with you? What other things do you want friends to do? (Show you how to do something, sit and have tea, bring their baby over to play, go to church together, plan and shop for meals?)
- 4) How do you let a friend know that her friendship is important to you? Have women role-play.

## **4. Let others help you.**

- 1) Sometimes you may find yourself in a bad mood or too tired to do something. What do you do in that case? Do you ask someone else to help you? Who?
- 2) Discomfort Cups: How do you feel when you ask?
- 3) Women can feel isolated after childbirth. Need to reach out to their man, get him involved in caring for the baby.
  - a) Using Discomfort Cups before and after, have the women role play how they would ask their man to play with the baby.
- 4) Start a group discussion and suggestions of what you would like a friend or nearby relative to do: to take care of the baby while you rest, fix a meal if you feel tired, etc.

- 5) Role play asking a friend or nearby relative to help. Discomfort Cups before and after. How do you feel about asking now?

**Free-Topic Problem-Solving Role Play** (if time allows)

- 1) Ask women if any left-over issues related to their lives that they'd like to role play solutions to.
  - a) If so, conduct a role play of addressing that issue.
  - b) If not, ask the women how they plan on staying in touch with one another. Encourage group to make suggestions of things to do together.
  - c) (Remember to leave enough time for closing—it will take longer than usual since this is the last meeting.)

**Closing**

- 1) Summarize the core messages.
- 2) Remind them again that they have started using the feeding method they're going to use with their baby exclusively, and tell them they should continue using only this method for 6 months, then changing to solid food. If any problems, ask at clinic for help.
- 3) Remind them of the 6-6-6 poster and what it means for the care of their baby.
- 4) Tell them that all if they can do the things we discussed today and the other things they will learn in our sessions, they will be good mothers.
- 5) Tell them you will miss seeing them in the group, but hope they will stop by the next time they're at clinic.
- 6) Exchange Thanks Tokens.
  - a) Remind them that this is the last time the group will be meeting together here.
  - b) Ask the mothers to give Thanks Tokens to group members who have said something particularly meaningful to them, or who have helped them by their presence.
  - c) Remind them to tell the person why they're giving a Thanks Token.
  - d) Tell them that they don't need Thanks Tokens to express their appreciation; they have learned to do it with words or gestures, and they can continue to do that in their real lives, without the Tokens.
  - e) Ask them to turn in all their Thanks Tokens.
- 7) Closing song and prayer.