



MomCare Program-Based Problem Management Plus (PM+)

Group psychosocial support with mothers in Kenya

FACILITATOR'S GUIDE

July 2022

Table of Contents

PREFACE	2
ACKNOWLEDGEMENTS	3
BACKGROUND	4
MODULE ONE: UNDERSTANDING MomCare PROGRAM–BASED PM+ (SESSION 1)	7
MODULE TWO: MANAGING STRESS (SESSION 2)	14
MODULE THREE: MANAGING PROBLEMS (SESSION 3)	19
MODULE FOUR: GET GOING; KEEP DOING (SESSION 4)	26
MODULE FIVE: STRENGTHENING SOCIAL SUPPORT AND STAY WELL (SESSION 5)	35
APPENDIX A: PARTICIPANT INFORMATION AND CONSENT FORM	51
APPENDIX B: PRE AND POST ASSESSEMENT	55
APPENDIX C: HELPING HINTS AND FACILITATOR’S NOTES	57
APPENDIX D: 5-STEP PM+ POSTERS	70
APPENDIX E: MomCare (MMH) REFERRAL PROTOCOL	78
APPENDIX F: FACILITATOR’S DELIVERY GUIDE/CHECKLIST	69

PREFACE

According to Postpartum Support International, 15 percent of women across the globe battle perinatal mood disorders severe enough to prevent them from caring for themselves and their babies. Perinatal mood disorders are mental health conditions that occur during or after pregnancy and include for example postpartum depression while the most extreme is postpartum psychosis. One in eight mothers' experiences serious depression or anxiety during or after pregnancy. In rural Kenya, a pregnant woman could suffer from mental illness and not realize she is unwell. In some communities in Kenya, mental health conditions are still associated with witchcraft, while mothers battling mental illness are labeled as "bad mothers" or "mad".

This facilitator's guide has been therefore adapted from the WHO GROUP PROBLEM MANAGEMENT PLUS (GROUP PM+) MANUAL, which was intended to meet the needs of people experiencing mental distress and impairment: Group-based psychological help for adults impaired by distress in communities exposed to adversity. PharmAccess Foundation worked with key players in the field of mental health to package this **MomCare Program-Based Problem Management Plus (PM+) guide** - Group psychosocial support for expectant mothers in Kenya. The Foundation undertakes a research project in maternal mental health and assesses the acceptability and feasibility of integrating the group-based mental health intervention targeting pregnant women within the local primary health care setting. The intervention aims to reach pregnant women who have been identified as having challenges with their emotional and psychological well-being. The pilot of the intervention will be led by Community Health Workers attached to 3 research site hospitals in Kisumu County, Kenya.

The delivery of the MomCare Program-Based PM+ intervention in a small group format allows for greater reach and psychosocial support for expectant mothers experiencing challenges such as food shortages, lack of partner support, feelings of stress, sadness, financial and socio-economic problems, diseases, fatigue and the general dislike of people. The aim is to assess and promote the feasibility, acceptability and sustainability of this intervention in many community settings in Kenya. Delivering the intervention to expectant mothers also fosters social engagement and support, which is a critical factor in maintaining good mental health and well-being. It is expected that MomCare Program-Based PM+ will enable more people, especially expectant mothers, to receive quality mental healthcare.

MomCare Program-Based PM+ is designed for expectant mothers impaired by psychological distress and can be delivered by non-specialist professionals following brief training and with ongoing supervision. It draws on the same therapeutic strategies as the individual version of the WHO PM+ intervention and is delivered over five two-hour sessions.

ACKNOWLEDGEMENTS

Program Coordination

The MomCare Program Research Team

Adaptation of the Facilitator's Guide

Appreciation to PharmAccess Foundation, Amsterdam Institute for Global Health and Development (AIGHD) and TINADA Youth Organization teams for the rigorous process of adapting this guide from the WHO GROUP-BASED PM+ MANUAL – Group psychosocial support for expectant mothers in Kenya. Other literature used in the adaptation include: MomCare Focus Group Discussion (FGD) report, Evidence-based maternal mental health intervention. Illustrations by Barbara van Amelsfort. Ethical Clearance was granted by the Amref Ethics and Scientific Review Committee (ESRC) on September 9, 2021, with approval number P1033/2021.

This generic guide is written in a way that aims to be suitable for the cultures and contexts of expectant mothers in Kenya, especially in rural and peri-urban communities in Nyanza. However, parts of the guide, such as case examples, were adapted specifically to suit the context in which the MomCare program is implemented. The adaptation process also considered simple, correct and understandable language sensitive to the context.

Piloting

This guide is piloted in the MomCare program which focuses on maternal health, aiming to contribute to reducing maternal and neonatal mortality rates.

Funding

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BACKGROUND

Introduction

MomCare Program-Based Problem Management Plus (PM+) was adapted in 2021 as a five-session group-based intervention for expectant mothers experiencing challenges such as food shortages, lack of partner support, feelings of stress, sadness, financial and socio-economic problems, diseases, fatigue and the general dislike of people.

Although PM+ was developed for application to people affected by adversity, it has been adapted in such a way that it can help people with depression, anxiety, and stress, whether or not adversity has caused these problems. It can be applied to improve most psychosocial issues.

MomCare Program-Based PM+ was not adapted for use with the following problems:

1. a plan to end one's life in the near future;
2. severe impairment related to a mental, neurological or substance use disorder (e.g., psychosis, alcohol or drug use dependence, severe intellectual disability, dementia).

For participants presenting with acute needs and/or protection risks (e.g., a young woman who is at acute risk of being assaulted), it is advised that you respond initially with psychological first aid (PFA) and refer the person to a trusted protection agency. Once these risks have been adequately responded to and the person can engage in the intervention, such participants may also receive PM+.

Group format

This guide represents a version of the adapted PM+ intervention for application in groups of expectant mothers. Providing a group version of PM+ will likely offer a more suitable option for many contexts.

Who can use this guide?

This guide is aimed at (a) professionals who have never been trained in these techniques before; (b) a wide range of people without professional training in mental health care (ranging from people with a degree in psychology but without formal training and supervision in counseling to community workers and other lay helpers); and (c) trainers and supervisors of people who offer MomCare Program-Based PM+ interventions

This MomCare Program-Based PM+ manual may be for you if you:

- work in an organization that offers help to expectant mothers;
- have a genuine motivation to support expectant mothers and are based in a work setting that allows you to spend enough time with your participants;
- have preferably at least completed high school education;
- have completed training on how to use MomCare Program-Based PM+ guide;
- work in a team with others; and
- receive continuing support and supervision from a trained supervisor. If this is not possible, it should be someone who has extra training and practice both in the methods used in the guide and in carrying out supervision.

Training of facilitators

Community Health Volunteers (CHVs) may not be mental health professionals with formal psychosocial training. Therefore, their training as a facilitator should be completed in 40 hours (five full days), followed

by at least two groups of closely supervised practice. Routine support supervision should occur after training.

Classroom training includes:

- self-awareness
- basic helping skills;
- skills to lead and manage a group;
- information about common mental health problems (i.e., depression, anxiety, stress);
- the rationale for each of the MomCare Program-Based PM+ strategies and how to deliver them;
- role-play (trainer demonstrations and trainee participation) on delivering strategies and basic helping skills.
- helper self-care.
- Training on the administration of pre and post assessment tools

Support Supervision

Knowing the theory of MomCare Program-Based PM+ does not make someone skilled in delivering it. Supervised practice strengthens facilitators' knowledge of and skills in MomCare Program-Based PM+ and is essential to building the necessary confidence. Following classroom training, at least two sessions (i.e., 4 hours) of supervised practice of MomCare Program-Based PM+. The sessions should occur (frequency) every two weeks. The in-field practice sessions should happen with participants who have less severe presentations (e.g., not with severe depression) and under close supervision. After supervised practice, MomCare Program-Based PM+ should be implemented under routine supervision.

Peer supervision and one-on-one supervision (e.g., in response to an urgent participant issue or crisis) can be helpful additions to a group supervision model.

Supervision involves:

- discussion about participants' progress;
- discussion about difficulties experienced with participants or when delivering strategies;
- discussion about difficulties managing group dynamics;
- discussion about positive experiences with participants or the intervention;
- role-playing how to manage the challenges or to practice skills (to improve facilitators' skills in MomCare Program-Based PM+ and skills in group management);
- facilitator self-care.

Structure of MomCare Program-Based PM+ Sessions

MomCare Program-Based PM+ is structured in the following way:

- Pre-intervention and post-intervention assessments using PHQ-9 and EPDS tools;
- Family / partner engagement session (optional);
- Five group sessions;
- Sessions happen once every two weeks;
- Each session lasts approximately two hours, including time to arrive, teaching and activities and an optional refreshment break.
- Each session is to be facilitated by a pair of trained facilitators – **preferably a male and a female**;

Use of this facilitator's guide

This facilitator's guide is used to guide facilitators through each session. **You should be familiar with what will happen in each session before you lead that session.** You may also have this guide with you in the session to remind you what you should be doing.

Be familiar with the case example before leading a group. Check that the case example is appropriate for the participants included in your group.

Structure of the guide

This guide helps facilitators to:

- *describe strategies* – by listing key points to tell participants and giving suggested scripts to follow;
- *describe how to use each strategy* – by giving a case example that describes how each strategy can be used in an individual's life to help them manage their problems;
- *encourage group discussion* – by suggesting questions and prompts;
- *facilitate active learning* – by describing how to lead group activities;
- *manage time* – by giving estimated time limits for each session.

This guide is divided into 5 modules, each of which deals with a separate step of the MomCare Program-Based PM+ process, including a separate module for each of the five MomCare Program-Based PM+ sessions (see below for a session-by-session overview). A checklist of materials needed for each session is also included at the beginning of each module.

Each session includes all the information you will need to lead a group. The document guides you on when to read the case example begin group discussions and start an activity. There are steps for how to introduce each PM+ strategy, including key points that must be covered.

Appendices: At the back of the guide are a number of appendices containing important information. **You should be familiar with these sections before leading a group.**

MODULE ONE: UNDERSTANDING MomCare PROGRAM-BASED PM+ (SESSION 1)

Content	Time	Materials
Arrive and settle into the group	20 minutes	Refreshments
Welcome and introductions	15 minutes	Name tags if available Participant information and consent forms Pre-assessment questionnaires
Group guidelines	10 minutes	Large sheet of paper and markers Group Guidelines poster (optional)
What is MomCare Program-Based PM+?	15 minutes	What is MomCare Program-Based PM+? and Five Strategies posters
Break (10 minutes)		
What is MomCare Program-Based PM+? Cont.' (Includes Individual fears, and concerns)	30 minutes	Reasons and Challenges handout (optional) Brainstorming session
Individual goals	15 minutes	Case example booklet
Closing session	5 minutes	Round sharing
Preparing for Session 1		
<ul style="list-style-type: none"> • Make sure that the case example is appropriate for the group you are leading and make any necessary changes. • Decide on what introduction activity you will do. • Have participant name tags if available or appropriate. • Make sure you bring: <ul style="list-style-type: none"> – Pre-assessment questionnaires (Appendix A) – Participant information and consent forms (Appendix B) – A ball of wool (optional) – Paper and pens for participants in case they want to write down their intervention goal 		

Welcome and Introductions 15 minutes

1. Welcome group
2. Group facilitators introduce themselves
 - Say something about yourself that you feel comfortable sharing with the group.
3. Ask each person in the group to introduce themselves
 - Suggest that they say their name and something about themselves.
 - Participants should only share information they feel comfortable sharing.
4. Provide name tags if this is appropriate and they are available

5. Provide information about logistics

- Directions to the toilets
- When break times occur and what will happen (i.e., participants should not leave the room, go home, etc.)
- What food/drinks will be provided
- Respond to any problems people have had in attending today.

6. Provide information about how the sessions will run

- What day and at what time sessions will occur
- In each session, 10–15 minutes for everybody to arrive and for you to start activities
- Two sessions of approximately 45–50 minutes with an optional refreshment break in the middle (note: a 10-minute break will keep the sessions under 2 hours; however, you can skip the break altogether if all participants agree).

7. Provide brief information about your role

- To support the group so that everyone learns how the PM+ skills can be helpful for them
- As a facilitator, you have experience in helping people who are having emotional and practical difficulties.

8. Describe today's session plan

- To learn about the program and how it can be helpful for everyone present
- Introduce the first strategy, which helps to manage stress.

Group guidelines 10 minutes

1. Provide a brief introduction to group discussions

- Everyone will have the opportunity to discuss their practical and emotional difficulties and to learn some new strategies for managing these.
- It is helpful for members of the group to support each other as they try new things and learn from each other.
- Sometimes discussions might not focus on problems that everyone is experiencing, but it is still important to stay involved.
- It is important to decide on group rules to help everyone feel comfortable about participating in group discussions.

2. Encourage open discussion about group rules/expectations

- **All personal information about participants must stay in the group.**
- Tell participants the **three limits to confidentiality**:
 - ✓ If someone's life is believed to be at risk: e.g., a participant has plans to end their life in the near future, instances of child abuse, or a participant is being seriously harmed by someone else.
 - ✓ The intervention team, including your supervisor, will know information about participants and what happens in the group. Explain that the supervisor is a trained professional and their role is to make sure that participants are receiving the best care.
 - ✓ The whole group is responsible for keeping confidentiality, including group facilitator(s) and participants (e.g., participants should not talk to each other about other participants outside of the group, they should not talk to family or friends about participants in the group).
- Ask participants to suggest rules:
 - ✓ *"What are other important rules to help you feel comfortable participating in the group?"*

3. Display rules on a large sheet of paper (e.g., stick up symbols, draw or write)

- Show this poster in each session so you can refer to the rules at any time (e.g., when you believe a rule is being broken. This can be done on a flip chart - optional).
- Be sure that the following guidelines are included:
 - ✓ Support and respect everyone's different experiences with adversity.
 - ✓ It is OK to get upset in the group.
 - ✓ Listening and contributing are equally important.
 - ✓ Attend the sessions on time (or let facilitators know if you cannot attend or will be running late)
 - ✓ Practice MomCare Program-Based PM+ strategies between sessions.
- Discuss what participants should do if they see each other outside of the group.
 - ✓ Encourage participants to decide on what they all feel comfortable with.

What is MomCare Program-Based PM+? 15 minutes

Materials

- Poster 2: Physical and behavioral symptoms of stress
 - Facilitator's notes (optional): Reasons for and Challenges to Joining MomCare Program-Based PM+ (pg. 29)

Purpose of What is MomCare Program-Based PM+?

- To help participants (accurately) understand the program
- To give participants hope that there are good strategies to help them with their problems.

Steps to What is MomCare Program-Based PM+?

1. Give an overview of MomCare Program-Based PM+

Key points to include

- MomCare Program-Based PM+ strategies help people, especially expectant mothers, manage both practical problems (e.g., unemployment, housing problems, family conflict, pregnancy-related) and emotional problems (e.g., feelings of sadness, hopelessness, worry, stress, etc.).
 - Give examples of problems that you know many participants are experiencing (i.e., information from the pre-Group PM+ assessment).
- Five strategies are taught in Sessions 1–5.
- A case example is read to describe each strategy and how it can help someone in their daily life.
- MomCare Program-Based PM+ works best if participants come to every session.
- To get the most out of MomCare Program-Based PM+, participants should practice strategies between sessions.
- If a participant cannot attend, they should tell you in advance.

2. Introduce participants to the case example by reading the following script

- Encourage participants to change any background information about the woman in the case example to help them identify with her:

- ✓ e.g., choose what area she comes from, her cultural background, her children's names, etc.
- ✓ participants can change the name of the character if they wish to.

3. Discuss reasons why participants have come to MomCare Program-Based PM+

- Discourage too much personal disclosure in this activity, as it is only brief and introductory.
- Encourage participants to share only what they feel comfortable with. It is okay if participants do not want to share anything.
- Be prepared for the fact that some participants may express some distress in this activity.

Suggested script:



We are all here because we are facing many challenges in our lives that are causing food shortages, lack of partner support, financial and socio-economic problems, diseases, fatigue, and the general dislike of people. These reactions are understandable and you do not need to feel ashamed here. Let's talk a little now about some of the reasons we have joined the group. In this activity, we will only share general information, so nothing too specific about our problems.

- **Instructions:** The facilitator first says their name and gives an example of a reason for attending MomCare Program-Based PM+ (“So, for instance, you might say I am here to reduce my stress and improve my relationships with my family”). The facilitator then passes it on to the next participant either on the left or right who then says her name and gives a reason for attending MomCare Program-Based PM+ and the pass goes on round until it gets back to the facilitator.
- Give a clear and brief conclusion to the activity.

Suggested script:



While all the participants in the group are different and bring unique personalities and experiences, we are all connected by the challenges we have faced in this life and by our desires to improve our well-being by coming to this group.

BREAK – 10 Minutes

4. Discuss reasons for and challenges to joining MomCare Program-Based PM+(see Reasons and Challenges Table below)

Discussing participants’ reasons for joining MomCare Program-Based PM+ is helpful for several reasons:

- You can use these reasons to increase participants’ motivation and engagement in the program.

- ✓ E.g., if a participant is not putting in the effort to practice PM+, you can remind them of the reasons why they joined in the first place.
- You can correct any wrong expectations a participant might have about the program (e.g., PM+ will solve all my problems, PM+ will get me a job, etc.).

Discussing the difficulties in coming to MomCare Program-Based PM+ is also helpful:

- It might be possible to resolve these difficulties.
 - ✓ E.g., someone with transport problems could travel with another participant; the group could think of solutions to someone’s child-minding problem.
- It is helpful for you as a facilitator to be aware of these difficulties in case they affect participants’ motivation.
- It helps to build a good relationship with participants if they see that you are trying to understand what they have to give up to come to the group.
 - ✓ Do this before asking participants for their reasons and challenges.

Suggested script for starting the discussion:



There can be different reasons for and challenges to coming to PM+ for all of us. We must discuss these together and find solutions to the challenges when we can. Let’s look at some of (case example’s name) reasons for and challenges to joining first.

- Decide whether the next discussion will be a large group discussion or a smaller one (e.g., with 2–3 participants per group).
 - ✓ Choose small groups if many participants seem shy (not talking very much).
- Ask the group what their reasons are for joining MomCare Program-Based PM+ and the challenges they face.
- Refer to the Reasons and Challenges table below for ideas about questions to encourage discussion.

Note: You only need to choose 1–2 questions from the table. Below is a suggested script for examples of how to use the questions to encourage discussion:



Lots of people have benefited from this program. What do you think you will personally get out of it?

I also understand that it can be challenging for some people to join a program like this. What are some of the problems for you in joining the program

- If participants are shy about giving responses, you may need to:
 - ✓ ask them to work in pairs;
 - ✓ ask them if they have any reasons for or challenges to joining MomCare Program-Based PM+ similar to those of the person in the story.
- Optional activities:
 - ✓ If participants are illiterate: participants think of one reason for attending and one challenge to attending and share these with the group if they feel comfortable about it.

- Summarize the group’s responses and emphasize the reasons for coming to MomCare Program-Based PM+ over the challenges.

Suggested script:



So, there may be some difficulties in coming to MomCare Program-Based PM+, such as... (insert common/ frequently mentioned challenges to joining MomCare Program-Based PM+). However, many of you think that coming to MomCare Program-Based PM+ is good because... (insert common advantages). These reasons are very important. I hope these good reasons will motivate you to continue coming to the group even when it is hard to do so.

Individual goals 15 minutes

Purpose of individual goals

- To help MomCare Program-Based PM+ facilitators understand what participants want to get from the program
- To help participants commit to MomCare Program-Based PM+
- To build group relationships between facilitators and participants.

Steps to individual goals

- Note: Participants’ goals can be chosen from the reasons for joining MomCare Program-Based PM+ that were identified in the previous discussion.

1. Introduce discussion on individual goals

- Define goals: they are things that participants would like to change (i.e., good things they want to improve or problems they want to reduce) by the end of the program.
- Explain to participants that achieving their goals might be a reason for joining MomCare Program-Based PM+.
- Defining goals is helpful so that participants can look at how they are improving throughout the program.
- The group will look at these goals in the last session to see how they have been met.

2. Invite participants to decide on their personal goals for the group

- This can be completed as a group discussion.
- Limit it to five goals per participant (it is okay if participants have fewer than five goals).
- You may choose to write participants’ goals on a large sheet of paper if everyone is comfortable with this.
- Goals should relate to participants’ emotional and practical difficulties.
- Goals should be specific.
- Goals should be modest so that participants can achieve them in four weeks.

Questions to help participants set more specific goals:



What would be different in your day-to-day life if you achieved this goal? Would your feelings have changed? Would you act differently, would you do more things around the house or more enjoyable activities?

3. Summarize common goals

- Tell participants that MomCare Program-Based PM+ is designed to help them reach their goals.
- Participants may not completely reach these goals until after the group has finished.
 - ✓ This is because the program is very brief.
 - ✓ The program is designed to give them strategies so they can achieve their goals even when the group has finished.

As you conclude the session give a brief summary of the session so far. Participants have:

- discussed what is involved in MomCare Program-Based PM+
- identified personal reasons for and challenges to coming to MomCare Program-Based PM+
- chosen personal goals – things that each person would like to change in their lives by the end of the program.

Closing the session – 5 minutes

1. Round-sharing session

- ✓ Allow participants to share how the session has been and one thing they are taking *home*.

MODULE TWO: MANAGING STRESS (SESSION 2)

Content	Time	Materials
Arrive and settle into the group	10 minutes	Refreshments
Welcome and general review	5 minutes	Name tags if available
What is a challenge?	10 minutes	What is a challenge? Poster
Challenges in pregnancies, other challenges and common reactions	25 minutes	Challenges in pregnancy, other challenges, and common reactions handout
Break – 10 minutes		
Managing stress	50 minutes	Case example booklet and managing stress practice
Ending the session	10 minutes	Individual action plans Managing Stress handout
Preparing for Session 2		
<ul style="list-style-type: none"> • Make sure that the case example is appropriate for the group you are leading and make any necessary changes. • Decide on what introduction activity you will do. • Have participant name tags if available or appropriate. • Make sure you bring: <ul style="list-style-type: none"> – for What is a challenge? posters (for what is a challenge? – Appendix D-1) – large sheet of paper, markers, and a timer (or watch) for Managing Stress + managing stress poster (Appendix D-3) – balloon (or balloons) for Managing Stress. • Read Helpful Hints for Managing Stress (Appendix D-3). 		

Welcome 5 minutes

1. **Welcome the group back**
2. **Tell participants the plan for today's session:**
 - Introducing a challenge in relation to pregnancy
 - Practicing managing stress to end the session.

Steps to What is a challenge? - 35 minutes

1. Define "Challenge"
 - Challenge = any very difficult, stressful, or negative life event
 - Examples:

- ✓ Death of a loved one
- ✓ Lack of partner support with the child
- ✓ Poverty
- ✓ Unemployment

2. Challenges in Pregnancy

Today the family life cycle for many women is marriage, motherhood, divorce, single parenthood remarriage, and widowhood. Below are stressors that most pregnant mothers go through while in the mentioned situation;

- Economic difficulties are the primary problem for single mothers
- Often-conflicting demands of playing both father and mother and the difficulty of satisfying their own needs for adult companionship and affection.
- Trying to balance being a mother, wife, and employee during pregnancy may build up the stress levels
- In cases of stepfamilies, the pregnant mother may experience lots of pressure to have a healthy and preferred baby in terms of gender or trying to handle a blended family.

3. Other challenges

- Relationship difficulties e.g., with a partner, family members, friends, people in the community
- Insecurity/attacks/violence
- Physical problems e.g., traumatic childbirth, illness and disease, injuries and disabilities
- Caring for a physically or mentally disabled family member.

- Tell participants that people can have many different reactions to challenges

4. Group discussion on common reactions to challenges

- Continue the discussion on common reactions to a challenge (from the previous activity).
- Refer to the case example, stories that pairs have created and more personal stories.

Suggested prompt questions:



What were some of the problems (case example name) were experiencing as a result of adversity?

Many of you have said that you want to deal with problems of depression and be more involved in activities with your families and community. Do you feel that depression and inactivity are problems for many people in your community?

How do you see these problems (i.e., identified by participants) affecting people in the community (e.g., people not participating in community events, high rates of unemployment, people isolating themselves or not caring for themselves, increase in community violence, etc.)?

Do these problems (i.e., identified by participants) affect everyone in the community or particular groups of people (e.g., men, women, older or younger people, etc.)?

5. Summarize information about common reactions to challenges

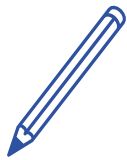
- Provide an opportunity for participants to ask questions about this information.

Key points to include

- By a challenge we mean any stressful or difficult life experiences.
 - E.g., living in poverty, difficult child birth, having someone close to you become sick or die, having relationship difficulties, being affected by natural disasters or war.
- People will experience a range of different reactions to adversity.
 - E.g., intense fear, hopelessness, extreme sadness, tiredness, severe headaches.
- These feelings and reactions cause problems in peoples' lives.
 - E.g., unable to get out of bed, unable to take care of themselves, difficulties completing daily routines like housework, conflict with family, not going out or enjoying pleasant activities anymore.
- For most people these reactions reduce over time.
- For some people these feelings get stuck.
- Learning strategies to manage these feelings can be helpful.

Managing Stress 45 minutes

BREAK – 10 Minutes



Materials

- Ball of wool (optional)
- Large piece of paper and a marker
- Balloon (optional)
- Managing Stress handout (Appendix D-2)



Purpose of Managing Stress

- To inform participants about how adversity causes stress
- To help participants understand how stress affects the body
- To introduce a basic strategy to manage stress through calming the body.

Steps to Managing Stress

1. Introduce Managing Stress as the first strategy of MomCare Program-Based PM+
 - Point to Managing Stress image
2. This strategy focuses on Managing Stress through our bodies
3. Talk about what stress is and how it affects the body, poster on what is stress (Appendix D-1b)

- Ask participants to give their definitions of stress.
- Remind participants of the case example: stress caused (name) to have severe headaches.
- Introduce visuals about physical and behavioral symptoms associated with stress
- Ask participants how stress affects their body (if they have not stated this in their definition previously).
 - ✓ E.g., headaches, pains in the body, stomach aches, tingling, dizziness, racing heart, difficulties breathing.
- Ask participants (if they are comfortable) to share examples of times they have felt stressed and what happened.
- Sometimes people experience physical problems and this can increase their stress. Regardless of whether the physical problems are or are not caused by stress, learning ways to reduce stress may also help alleviate the physical problem.

Key points to include

- Stress is a common reaction to adversity.
- Stress can affect our body in the short term (e.g., our breathing and heart rate can quicken in a situation where we feel stressed) and in the long term (e.g., over time stress can cause us to experience headaches, pain or discomfort in the body).

4. Breathing activity

- Invite all participants (including group facilitators) to count the number of breaths they take in *one minute* (one facilitator will keep time). One breath = breathing in and out. Tell participants not to change their breathing.
- Start timing for one minute and participants count their breaths in their heads.
- After one minute, invite participants to tell you their number of breaths and write these on a board or a large sheet of paper.
 - ✓ **Note:** Do not be concerned about the differences in these numbers or if any seem unusual.
- 10–12 breaths per minute is the optimal number for feeling relaxed – you may comment on this given participants’ scores.

5. Discuss participants’ experiences of trying Managing Stress

- Ask the group what they found good about Managing Stress.
- Ask them what they found difficult about Managing Stress.
- Problem-solve any difficulties that participants had (see Appendix C: Helpful Hints and Facilitators’ Notes).

Ongoing practice

1. Discuss practicing Managing Stress between sessions:
 - *“In MomCare Program-Based PM+ we encourage participants to practice strategies between sessions. Why might this be important?”*
 - Prompt: *“Do you encourage your children to practice new things so they can improve in them?”*
 - Ask them to think about what times and in what situations Managing Stress would be helpful:

- ✓ E.g., regular practice every day, at times when they feel stressed, anxious, etc.
 - Ask the group to think of ideas about how they can remember to practice Managing Stress daily (discussing aides to remind themselves, practicing at a regular time).
 - Participants can use music to help them breathe slowly (if needed).
2. Tell participants that at any time in the program that you notice someone is experiencing strong emotions (e.g., anxiety, stress, sadness, etc.), you may lead the group (or participant) in Managing Stress as the first response. This will help participants to know when to use this strategy and will improve their abilities to use it when feeling overwhelmed by distressing emotions.

Ending the session 10 minutes

1. Give a summary of the session. The group has:
 - learned about the program and how it can help them;
 - learned about adversity and how it affects the body;
 - learned Managing Stress, a strategy to help reduce stress in the body.
2. Ask participants to say one thing that has been helpful for them in today's session.
3. Remind participants to regularly practice Managing Stress.
 - Ask participants to call out the days/times they are going to practice Managing Stress.
4. Remind them about the next session – time and location – and tell them the topics that will be discussed (i.e., how to manage practical problems).

MODULE THREE: MANAGING PROBLEMS (SESSION 3)

Content	Time	Materials
Arrive and settle into the group	10 minutes	Refreshments
Welcome and general review	5 minutes	Name tags if available
Review Managing Stress	10 minutes	Case example booklet
Managing Problems – education and example	30 minutes	Case example booklet Managing Problems poster
Break		
Managing Problems – participant problems	40 minutes	Managing Problems handout and pens (optional)
Managing Stress	5 minutes	
Ending the session	10 minutes	Individual action plans Managing Problems handout
Preparing for Session 3		
<ul style="list-style-type: none"> ▪ For each group discussion, decide whether it will be done as a large group, in small groups, or in pairs. ▪ Read through the Facilitators’ Notes on Managing Problems (Appendix C). ▪ Bring the Managing Problems poster (Appendix D-3). ▪ Read the Helpful Hints for Managing Stress (Appendix C). 		

Welcome 5 minutes

1. *Welcome the group back*
2. *Tell participants the plan for today’s session:*
 - Review of Managing Stress practice
 - Introduce the next MomCare Program-Based PM+ strategy to deal with practical problems
 - Practicing Managing Stress to end the session.

Managing Stress practice review 10 minutes



1. *Review Managing Stress home practice*
 - Before asking for experiences, educate participants about home practice.
 - ✓ There are three possible experiences that people will have with any home practice:
 - successfully completed their action plan
 - tried to do action plan but it was unsuccessful
 - unable to do action plan.

- ✓ All these experiences are okay and it is important to share them (especially normalize experiences two and three above).
- ✓ Everyone can learn from other participants' experiences, especially experiences that were unsuccessful.
- Then invite participants to share their experiences when practicing Managing Stress during the past week.
 - ✓ This discussion can be done as a large group, in small groups, or in pairs.



How did people go about practicing Managing Stress?

What happened when you practiced Managing Stress?

Respond to and manage any difficulties that participants had in practicing Managing Stress

- See Helpful Hints for Managing Stress (Appendix D-2).
- Encourage other group members to suggest ideas about how to overcome problems.



Does anyone else have any ideas about what (name) could do to overcome this problem?

Have others had similar problems? And what did you do?

Managing Problems – education and case example 30 minutes



Materials

- Managing Problems posters (Appendix D - 3).



Purpose of Managing Problems

- To help people better *manage* practical problems (i.e., not all problems will be solved).
- Practical problems include problems with household chores, raising children and caregiving, employment or conflict with others, etc.
- Teach participants the seven steps to follow to manage a problem.
- Managing practical problems can help people feel more positive and more hopeful.

Note: Be familiar with the Facilitators' Notes for Managing Problems (Appendix C).

Steps in Managing Problems

1. *Introduce the second strategy of MomCare Program-Based PM+, which is called Managing Problems*

- Point to Managing Problems strategy.

2. Tell participants that Managing Problems focuses on managing practical problems

- Define practical problems by giving two examples (e.g., problems with managing household chores, finding a job, and raising children).
- Then ask participants to call out other examples of practical problems.
- If a participant identifies an emotional problem (e.g., feeling sad or stressed, etc.) for which other PM+ strategies are well suited, tell them that this is an emotional problem and one that PM+ will deal with through other strategies. Emphasize that the Managing Problems strategy is especially good for practical problems.
 - ✓ Tell participants that emotional problems might improve once practical problems have been solved or managed.

3. Discuss the differences between solvable and unsolvable problems

- First tell participants that Managing Problems aims to see what parts of the problem can be solved or influenced. This means that you might not always be able to solve the whole problem.
- Give an example of a problem that cannot be solved by the participant (e.g., war).
- Invite participants to give other examples of problems that cannot be solved.
 - ✓ If they give a problem that could be partly solved, help them to understand how this could be done.



I can see how this problem looks unsolvable, but I think you could solve this problem if you were able to....

- Participants could identify problems that are partly solvable. Discuss the idea that Managing Problems can be used to solve part of a problem or to influence it.



While we cannot completely solve the problem of poverty, we might be able to do things to improve the situation, such as looking for work.

4. Read each of the steps for Managing Problems

- Refer to the Managing Problems poster and name each step (do not explain each step yet).
 1. List problems as solvable or unsolvable.
 2. Choose one problem.
 3. Define it with as much information as you can.
 4. Think of all the possible solutions to solve or influence this problem.
 5. Choose the best solution that it is possible to implement.
 6. Make an action plan to carry out (do) the solution.
 7. After you have completed the action plan, review how successful it was in terms of solving or influencing your problem.



5. Refer to managing problem poster

- Refer to each Managing Problems step as you read the case example (e.g., by pointing to the Managing Problems poster).
 - ✓ For example, Step 4 is only about thinking of all the possible solutions regardless of how good they might be.
- To engage the group, ask them to:
 - ✓ think of any additional potential solutions to the case example's list of problems as you read through them (or beforehand);
 - ✓ consider which solutions they would have chosen if they had this problem.

Note: If you have time remaining, decide whether to go to the break early or start the next section.

BREAK – 10 Minutes

Before starting the next activity, give a brief summary of the session so far. You have:

- reviewed Managing Stress
- introduced Managing Problems (test participants' knowledge about this strategy by asking the group questions e.g., what problems are dealt with by Managing Problems, how many steps are there to Managing Problems, etc.).

Managing Problems – participant problems 40 minutes



Materials

- Managing Problems poster (Appendix D-4)

Note: Make sure that the Managing Problems poster is visible to all participants. To deliver Managing Problems well, you must be familiar with the Facilitators' Notes (Appendix C).

Options for leading the following discussion (decide before the session what you plan to do):

- When all participants are literate: they can use the Managing Problems handout to write their responses.
- When there are any illiterate participants: keep the following activities as a verbal discussion. As the facilitator, you can complete the Managing Problems handout for each participant so that you have a record of their responses. You should repeat these so that participants can remember what has been discussed.

1. Large group discussion

Note: There is limited time to cover everything in Managing Problems. If you find that you are running out of time, complete the session as a large group. It is important that you do this well so that participants understand Managing Problems. If participants do not get the chance to go through Managing Problems with their own problems, make sure that you allow time to do this next week.

- As a large group, work through the first six steps of Managing Problems. Point to each picture on the Managing Problems poster as you do so.

- ✓ See the Facilitators' Notes for Managing Problems (Appendix C).
- ✓ Refer to the case example to help you emphasize a point.
- ✓ Optional: The facilitator can write the group's responses down on the Managing Problems handout or on a large piece of paper for all to see.
- Select a problem to work through as a group.
 - ✓ Try to choose a problem that is common to many participants (e.g., relationship difficulties with partners, a small argument with a neighbor) if possible.
 - ✓ **Note:** Choose a *small* (easy) problem, so participants have an opportunity to solve it quickly.
- Before moving on to the next step, ask participants to tell you what the next step is (e.g., "Okay, so we have just chosen the problem, which is Step 2. What is the next step?")
 - ✓ This will help all participants to understand the steps for Managing Problems.
- **Note** for Step 4: Make sure that every participant gets an opportunity to suggest one or more possible solutions to the chosen problem.

Suggested script:



Can you think of any solutions that might solve or influence this problem? Remember, at this stage, it doesn't matter how good or bad the solution is. We'll decide that later.

- **Note** for Step 6:
 - ✓ Be sure to break the action plan down into very small, manageable steps (the smaller the steps, the more likely it is that the participant will complete them).
 - ✓ The action plan can be completed in one attempt or over several days.



Let's all imagine carrying out this action plan today. What would you be doing in order to carry it out?

2. Smaller group discussions

- Decide beforehand the size of small groups (e.g., split the group into two, have participants work in groups of two or three, etc.).
 - ✓ Put participants who have similar problems into the same group.
 - ✓ If participants do not have similar problems, the whole group will work on one problem together at a time.
 - Ask one participant to volunteer their problem or choose which participant's problem the group can start with. Make sure that this participant is comfortable talking about their problem in front of the group.
 - ✓ The group will help complete each step.
- Tell groups to work through the first six steps of Managing Problems, like you just did, with their chosen problem.
- Tell groups they have only 20 minutes. Be sure to tell them regularly how much time is

remaining.

- The problem should be one that a participant in the group is experiencing.
 - ✓ Ask one participant to volunteer their problem or choose which participant's problem the group can start with. Make sure that this participant is comfortable talking about their problem in front of the group
- Walk around each group and help individuals to complete each step.
- If the group finishes working on the first problem, tell them to start again with another participant's problem.
- Return to the larger group and review each group's progress and, if participants feel comfortable, ask them to share their attempts at Managing Problems.
 - ✓ To manage time, only ask participants to tell you what problem they chose (Step 2), what solutions they chose (Step 5), and the action plan (Step 6).
- If there is time, encourage smaller groups who were unable to complete Managing Problems to share so that the larger group can help them finish or overcome the problems they had.



Would someone like to share their steps to Managing Problems with the group?

Managing Problems is not always easy to do. Is there a group that had difficulties completing any of the steps? Would you please share what you have been able to do, and we can help you finish it as a group?

3. Discuss each participant's action plan

- Go around the group and ask participants to tell the group what they plan to do in the next week.
 - ✓ There is space on the Managing Problems handout to record their action plan (i.e., write or draw, depending on the participant's literacy).
- The facilitator should write down each participant's action plan so that they can remember what each participant planned to do when it comes to reviewing their home practice in Session 3.
- If you believe that an action plan is not detailed enough, work as a group to make it more specific. See the suggested script below:



That's a great attempt at writing an action plan, but I think we can make it more detailed. This will make it much easier for you when you come to carrying it out. Does anyone in the group have any suggestions for what (name) can include in the action plan?

Imagine carrying out this action plan right now. What would you be doing so you could carry it out?

- Ask participants to suggest ways they can remind themselves to complete the steps of their plan.
 - ✓ E.g., setting mobile phone alerts, using meal times as a reminder, arrange for participants to remind each other.

Managing Stress 5 minutes

1. Remind participants why this strategy is helpful

- It helps to relax the body, which can help participants feel less stressed.

2. Lead the group in Managing Stress

Steps to follow

1. Participants relax their bodies (move arms and legs, rock head from side to side, roll shoulders back).
2. Instruct participants to breath from their stomachs (balloon in their stomach).
3. Once everyone is comfortable with Step 2, begin counting three seconds for the in-breath and three seconds for the out-breath. Continue for one minute.
4. Stop counting and encourage participants to count themselves or to keep the rhythm of slow breathing going (if you have a clock, you could encourage participants to follow the ticking of the seconds to keep the rhythm slow).
5. Continue for at least three minutes.

Ending the session 10 minutes

1. Give a summary of the session. The group has:
 - reviewed Managing Stress (refer to specific problems that were discussed or solved);
 - learned about the strategy Managing Problems, to help manage practical problems.
2. Ask participants to mention one thing that has been helpful for them in today's session.
3. Remind participants to regularly practice Managing Stress.
4. Remind participants to complete their Managing Problems action plan (this will be reviewed in the next session).
5. Remind them of the next session – time and location – and tell them the topics that will be discussed (i.e., improving their mood and activity levels).

MODULE FOUR: GET GOING; KEEP DOING (SESSION 4)

Content	Time	Materials
Arrive and settle into the group	10 minutes	Refreshments
Welcome and general review	5 minutes	Name tags if available
Review Managing Problems (and continue with same or a new problem)	15 minutes	Case example booklet Managing Problems poster Managing Problems handout and pens (optional)
Get Going, Keep Doing – education and example	25 minutes	Case example booklet large sheet of paper and marker Four Strategies and Inactivity Cycle posters
Break		
Get Going, Keep Doing – participant activity	40 minutes	
Managing Stress	5 minutes	
Ending the session	10 minutes	Individual action plans Get Going, Keep Doing handout
Preparing for Session 4		
<ul style="list-style-type: none"> • List of participants' problems you wrote down in the last session. • Read the Helpful Hints for Managing Problems (Appendix C). • Decide where smaller groups can sit without disturbing each other for the Managing Problems review. • Hang up the Managing Problems posters (Appendix D-3). • Hang up the Inactivity Cycle poster (Appendix D-4A). • Decide the group sizes for Get Going, Keep Doing discussions. 		

Welcome 5 minutes

1. Welcome the group back
2. Tell participants the plan for today's session:
 - review Managing Problems and continue with the same or a new problem
 - introduce next PM+ strategy to deal with feelings of low mood and inactivity
 - practice Managing Stress to end the session.

Managing Problems review 15 minutes



Materials

- Managing Problems poster (Appendix D-3)



1. Refer to managing problems - helpful hints and facilitator's notes (Appendix C)

Note: Remember to give attention to any participants who did not get to focus on their problem last week. One of the facilitators might sit with them individually to work through their problem while the group continues. Alternatively, you might have the whole group help the participant as part of the Managing Problems review.

2. Invite participants to share their experience of completing their Managing Problems action plan during the week

- Before asking for experiences, tell participants that there are three possible experiences people will have with any home practice:
 - ✓ successfully completed their action plan
 - ✓ tried to do action plan but it was unsuccessful
 - ✓ unable to do action plan.
- All experiences are okay and it is important to share them (especially normalize experiences two and three above).
- Everyone can learn from other participants' experiences, especially from experiences that were unsuccessful.
 - ✓ If possible, review at least three participants' action plans in the larger group.



Did anyone manage all or part of their problem this week?

Of those of you who completed your action plan for Managing Problems, would you like to share what happened?

- Be sure to watch the time, so ask participants to be brief so that everyone can have a turn at sharing.

3. Respond to and manage any difficulties participants had in completing their action plan

- See Helpful Hints for Managing Problems (Appendix C).



At some point in this program, all of you will probably encounter a problem in completing your action plan. Perhaps the action plan was unsuccessful in managing your problem or maybe you were unable to carry out your plan. These experiences are okay and do not mean that you have failed in any way. They are also important learning opportunities for us all. So, did anyone have any problems doing their action plan in the last week?

What kind of difficulties did people have completing their Managing Problems action plan over the last week?

Of those of you who had difficulties completing your action plans, would you like to share what happened so we can work through the problems as a group?

4. Small groups continue with Managing Problems

- You have two options for this part of the session: split the group into A. two groups or B. pairs.

- Be sure to have the Managing Problems poster visible to participants.

A. Split the participants into two groups

- Decide beforehand where the two groups can sit so, they do not disturb each other.
 - ✓ If you have two facilitators, make sure that one of you sits with each group to support participants.
- If you have a large number of participants, you can divide them into smaller groups of three or four people. Be sure to split the groups up only after you have given them instructions on what to do.
- Be aware of limited time, as participants can often be slow to move into smaller groups.
 - ✓ Group 1 could include participants who wish to continue managing the same problem.
 - ✓ Group 2 could include participants who wish to start managing a new problem (i.e., the first problem has been solved or managed, or the participant has decided that the first problem is not solvable).

Suggested script:



We are going to work in small groups now. Those participants who would like to continue Managing Problems with the same problem from last week will sit (say place/area). Those of you who would like to start Managing Problems with a new problem can sit over (say place/ area). Please begin to move to your areas now so we can start straight away.

B. Pairs

- Ideas for pairing participants:
 - ✓ One partner could be someone whose action plan was discussed in the larger group and the other partner someone whose action plan has not been discussed yet. The first partner could work with and support the second to review their action plan and either continue to solve the same problem or begin Managing Problems with a new problem.
 - ✓ Partners could be participants with similar problems.
- Facilitators should walk around the room and support all participants.

5. Lead each group or pairs as follows

Group 1: Managing the same problem

- Help participants continue with managing this problem.
- Begin by reviewing Steps 2 and 3 of the Managing Problems strategy.
 - ✓ Ask each participant to say aloud the problem they have chosen to solve.
 - ✓ Remember you should have written these down the previous week (or participants may have completed the Managing Problems handout).
 - ✓ Check whether these problems are still considered solvable.
- Start Step 4 of Managing Problems:
 - ✓ You will need to choose one participant to talk through their problem first. Make sure that this participant is comfortable with the group hearing about their problem.
 - ✓ Ask the participant to remember any solutions from the week before (or refer to their handout).
 - ✓ Then ask the participant to first think of as many new solutions as possible.

- ✓ Then invite the group to suggest more possible solutions.
- ✓ Some of the old solutions (from last week) might be kept and some new solutions might be added.
- Continue with Step 5 of Managing Problems with the same participant’s problem.
 - ✓ Ask the participant which solution(s) they think would be the most helpful and practical.
- Step 6 of the same participant’s problem:
 - ✓ Help the participant to develop an action plan for the next week.



What would be the first step to carrying out this solution?

Imagine you are completing this solution right now. Tell me in as much detail everything you would do in order to carry it out.

- Repeat Steps 2–4 of the Managing Problems strategy (i.e., choose a problem, define the problem, suggest possible solutions) with the next participant’s problem.

Group 2: Managing a new problem

1. **Go through Managing Problems from the beginning.**
 - Begin with Step 1: review the problems that participants listed last week and either keep these problems or add new ones to the list.
 - Move to Step 2: ask each participant in the group to say aloud the problem they would like to choose.
 - ✓ Before moving to the next participant, help each person to do Step 3 (define the problem as specifically as possible).
 - ✓ Make sure that you write the problem down so you can remember the problem that every participant has selected.
 - Choose one participant’s problem that you can start working on as a group. Make sure that this person is comfortable talking about their problem in front of the group.
 - Continue with Step 4:
 - ✓ Ask the participant to first think of as many solutions as possible to the problem.
 - ✓ Then invite the group to suggest more possible solutions.
 - Before moving on to the next step, ask participants to tell you what it is (e.g., “Okay, so we have just chosen the problem, which is Step 2. What is the next step?”)
 - ✓ This will help all participants understand the steps for Managing Problems.
 - Step 5 of the same participant’s problem:
 - ✓ First ask the participant which solution(s) they think would be the most helpful and practical.
 - Step 6 of the same participant’s problem:
 - ✓ Help the participant to develop an action plan for the week ahead.
 - ✓ There is space on the Managing Problems handout to record their action plan (i.e., write or draw, depending on the participant’s literacy).



What would be the first step to carrying out this solution?

Imagine you are completing this solution right now. Tell me in as much detail as you can everything you would do in order to carry it out.

- Repeat Steps 2–4 of the Managing Problems strategy (i.e., choose a problem, define the problem, suggest possible solutions) with the next participant’s problem.

Get Going, Keep Doing – education and case example 25 minutes



Materials

- Four Strategies and Inactivity Cycle posters (Appendix D-4A).



Purpose of Get Going, Keep Doing

- Teach participants that adversity can cause people to become stuck in low mood and inactivity.
- Reassure participants that problems with low mood and inactivity are not uncommon (i.e., they are not a sign that they are going crazy, etc.).
- Teach participants that becoming active (e.g., engaging in hobbies, doing things that the person finds pleasurable) through Get Going, Keep Doing can break this cycle of low mood and inactivity.
- Get Going, Keep Doing improves mood, which can also help people feel more confident in solving their practical problems.

Steps for Get Going, Keep Doing

Introduce Get Going, Keep Doing as the third PM+ strategy

- Point to Get Going Keep Doing – Helpful hints and facilitator’s notes (Appendix C).

Show and explain the inactivity cycle

Key points to include

- Adversity can cause changes in people’s mood – they can feel very sad and hopeless.
- Over time, if this mood does not improve, people can feel a lack of energy and motivation to do things.
- People might find that they do not enjoy doing things that they used to enjoy.
- This can start a cycle, called the inactivity cycle.

- Show participants the Inactivity Cycle poster (Appendix D-4A).
- Explain each part slowly as you point to the picture: low mood can cause a person to stop doing things they used to do, which can cause their mood to worsen. When their mood worsens, it makes it harder to do things, so they withdraw more.
- Go through the inactivity cycle again using the case example.



Female case example: Akinyi *felt sad after her mother died* (point to top image), *so she started to withdraw from activities like handicrafts and visiting her neighbors* (point to image on right). *Over time her mood worsened* (point to bottom image) *and she found it harder to do things again* (point to image on left).

- Invite participants to share their own stories of low mood, lack of motivation, being stuck in this cycle, etc.

Does this cycle or what I described about Akinyi sound familiar to any of you? Would anyone like to share their experiences of feeling sad and not being able to do activities?

- Prompt questions to emphasize the inactivity cycle in the person’s story:



So, when you felt sad, what specific activities or hobbies did you find hard to do or no longer enjoyed doing?

Were you still able to do activities that you used to enjoy or able to socialize with friends? When you stopped doing these things, what happened to your mood?

Discuss how the inactivity cycle can be broken

- If there is time, you can invite participants to suggest ideas about how this cycle can be broken.

Suggested discussion questions:



Does anyone have any ideas about how the inactivity cycle can be broken? Has anyone been stuck in this cycle themselves and been able to break it?

Do you know someone who was stuck in this cycle, but they were able to break it? What did they do?

- Summarize the common themes or points in participants’ stories. Look for the following points to emphasize:
 - ✓ It is hard to do things when your mood is low.
 - ✓ Many people do not enjoy things as much when their mood is low.
 - ✓ When you are inactive for long periods of time (e.g., do not do chores, work or pleasant activities), your mood usually worsens.
- Tell participants that being active breaks the cycle.



Often people will think, “I will start doing things again when I feel better”. Or, they think that you need to feel energetic first to be active. Actually, the reverse is true: being active makes you feel energetic. So, to break this cycle you need to start doing things again, even though you may not feel like it.

BREAK – 10 Minutes

Before you start Get Going, Keep Doing, give a brief summary of the session so far. You have:

- reviewed Managing Stress;
- reviewed Managing Problems (specify any points that were taught while doing the review);
- introduced Get Going, Keep Doing (you can test participants’ knowledge by asking questions about Get Going, Keep Doing e.g. “What types of

problem does Get Going, Keep Doing help improve?”)

- **Get Going, Keep Doing – participant activity - 40 minutes**



Materials

- Participant handouts (optional): Inactivity Cycle and Get Going, Keep Doing (Appendix D-4B)

1. Briefly review the education for Get Going, Keep Doing
 - Refer to Helpful hints and facilitator’s notes (Appendix C).
2. Large group discussion: help participants to select an enjoyable activity they would like to start doing
 - Invite participants to suggest one enjoyable activity that they would like to start doing again.
 - ✓ Enjoyable activities are those that give them pleasure or make them feel happy, relaxed or content.
 - ✓ The activity should be either something they are not currently doing or something they would like to do more often.
 - ✓ Give participants time to think about an activity and invite them to raise their hand to share it with the group.
 - ✓ Select participants to share their activity if it is taking too long for people to respond.
 - ✓ Help participants who are unsure of what to do.



Is there anything you would like to do that others’ have already mentioned? Tell me what you used to enjoy doing a year ago.

If a participant cannot think of an enjoyable activity after using these questions, ask other participants to give examples of things the person might enjoy. Ask the participant to think about these things. Then come back to them at the end of the discussion and ask them to choose one activity.

Suggested script:



Thinking about the things you used to do before you were feeling this way, what is one pleasant or enjoyable activity that you could start doing again or do more often?

Note: The activity chosen can be something that the participant completes as part of attending Group PM+. For example, they could talk to someone in the break time, walk to the group with another participant who lives nearby or invite another participant for tea after the group. If participants decide to meet outside of the group, remind them about confidentiality and not to talk about other participants.

- It is recommended that you begin with an activity that is not too big and is relatively easy to complete.

- ✓ Ask participants what they would need to do in order to complete this activity (i.e., all the steps involved).
- For example, meeting a friend might mean getting dressed, getting a baby ready to take out and walking to meet her, etc., before actually doing the activity. This might be too hard to do for someone who is feeling very depressed, and an easier activity should be chosen first.
 - ✓ Simple and easier activities can include things that can be done in the home or that do not need a lot of resources or other people.
- Examples: listening to music, singing, dancing, playing with their child, walking around the neighborhood, going to a park, looking at nature in their neighborhood, taking a bath, brushing one's hair, etc.
- If participants want to complete a task rather than an enjoyable activity, remind them that this will happen next week.

3. Help participants to break down the selected activity into small, manageable steps

- This discussion can be done as a large group or, if you have enough facilitators, in smaller groups.

Prompt questions:

What would be the first step to carrying out this activity?



Imagine you are completing this activity right now. Tell me in as much detail as you can everything you would do in order to carry it out.

What are the material things you will need in order to complete the activity? (e.g., shoes, furniture, people, food, etc.)

4. Support participants to schedule in the steps to complete the activity

- Discuss what each participant can do, on what day and at what time (get participants to be as specific as possible).
 - ✓ There is space on the Get Going, Keep Doing handout to record their action plan (i.e., write or draw, depending on the participant's literacy).
 - ✓ The facilitator should write these plans down so they can remember them for the Session 4 home practice review.
- As with Managing Problems, discuss with the group how participants can remind themselves to complete the steps over the week ahead.

5. Support participants to schedule in the steps to complete the activity

- Discuss what each participant can do, on what day and at what time (get participants to be as specific as possible).
 - ✓ There is space on the Get Going, Keep Doing handout to record their action plan (i.e., write or draw, depending on the participant's literacy).
 - ✓ The facilitator should write these plans down so they can remember them for the Session 4 home practice review.
- As with Managing Problems, discuss with the group how participants can remind themselves to complete the steps over the week ahead.

6. Remind participants that it might be difficult starting the activity

- Encourage them to keep going with it even if they do not feel like it.
- Tell them that their mood will improve gradually (i.e., not straight away) if they keep doing their activities.



For many people, it is starting the activity that is the hardest part. However, I can assure you that many people find that once they start doing activities it gets easier to keep going.

Managing Stress 5 minutes

1. Remind participants why this strategy is helpful
 - It helps to relax the body, which can help you feel less stressed.
2. Lead the group in Managing Stress

Steps to follow:

1. Participants relax their bodies (move arms and legs, rock head side to side, roll shoulders back).
2. Instruct participants to breath from their stomach (balloon in their stomach).
3. Once everyone is comfortable with Step 2, begin counting three seconds for the in-breath and three seconds for the out-breath. Continue for one minute.
4. Stop counting and encourage participants to count themselves or keep the rhythm of slow breathing going (if you have a clock, you could encourage participants to follow the ticking of the seconds to keep the rhythm slow).
5. Continue for at least three minutes.

Ending the session 10 minutes

1. Give a summary of the session. You have:
 - reviewed Managing Stress (refer to specific problems that were discussed or solved);
 - reviewed Managing Problems (refer to specific problems that were discussed or solved);
 - learned about Get Going, Keep Doing, a strategy that helps to improve mood and activity.
2. Ask participants to say one thing that has been helpful for them in today's session.
3. Remind participants to regularly practice Managing Stress.
4. Remind participants to complete their Managing Problems action plan (this will be reviewed in the next session).
5. Remind participants to complete their Get Going, Keep Doing activity (this will be reviewed in the next session).
6. Remind participants of the next session – time and location – and tell them the topics that will be discussed (i.e., how to strengthen social support).

MODULE FIVE: STRENGTHENING SOCIAL SUPPORT AND STAY WELL (SESSION 5)

Content	Time	Materials
Arrive and settle into the group	10 minutes	Refreshments
Welcome and general review	5 minutes	Name tags if available
Review Managing Stress	10 minutes	Case example booklet
Review Managing Problems (and continue with same or a new problem)	10 minutes	Case example booklet Managing Problems poster Managing Problems handouts (optional)
Review Get Going, Keep Doing (and continue with same or new activity)	15 minutes	Case example booklet Inactivity Cycle poster Get Going, Keep Doing handout (optional)
Break		
Strengthening Social Support – education and example	15 minutes	Case example booklet
Strengthening Social Support – participant spot including strengthening referral pathways	15 minutes	
Staying Well	15 minutes	Case example booklet Materials for PM+ reminders
Managing Stress	5 minutes	
Ending the session and closing ceremony	10 minutes	Individual action plans Strengthening Social Support handout, participation certificate
Preparing for Session 5		
<ul style="list-style-type: none"> • Get Going, Keep Doing; Strengthening Social Support and Stay Well (Appendix D-5). • Bring materials (posters, cards, markers, etc.) for making PM+ reminders. • MomCare (MMH) referral protocol (Appendix E) • Prepare closing ceremony materials such as certificates and food (depending on what you have organized). 		

Welcome 5 minutes

1. Welcome the group back
2. Tell participants the plan for today's session:
 - Review Get Going, Keep Doing

- Introduce final PM+ strategy to improve social support
- Practice Managing Stress to end the session.

Managing Stress practice review 10 minutes



1. *Refer to case example picture 21 and accompanying text*

2. Invite participants to share their experiences of practicing Managing Stress during the past week

- This discussion can be done as a large group, in small groups or in pairs.



*How did people go about practicing Managing Stress?
What happened when you practiced Managing Stress?*

3. *Respond to and manage any difficulties that participants had in practicing Managing Stress*

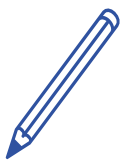
- See Helpful Hints for Managing Stress to assist you (Appendix C).
- Encourage other group members to suggest ideas about how to overcome problems.



Does anyone else have any ideas about what (name) could do to overcome this problem?

Have others had similar problems? And what did you do?

Managing Problems review 10 minutes



Materials

- Managing Problems poster (Appendix D-3)



1. *Refer Helping Hints and Facilitator's Notes (Appendix C)*

Encourage participants to think of potential solutions for the problems (poster).

- Possible solutions you can suggest to encourage discussion:
 - ✓ Practice slow breathing before going to sleep
 - ✓ Listen to relaxing music
 - ✓ Read a book/recite a story to herself.

2. *Review Managing Problems home practice*

- Invite participants to share their experiences of completing their Managing Problems action plan during the week.
- Before asking for experiences, educate participants about home practice.
 - ✓ There are three possible experiences people will have with any home practice:

- successfully completed their action plan
 - tried to do action plan but it was unsuccessful
 - unable to do action plan.
- ✓ All experiences are okay and it is important to share (especially normalize experiences two and three above).
 - ✓ Everyone can learn from other participants' experiences, especially from experiences that were unsuccessful.
- If possible, review each participant's action plan in the larger group.



Did anyone solve all or part of their problem by completing their action plan this week?

Of those of you who completed your action plan for Managing Problems, would you like to share what happened?

- Be sure to watch the time, so ask participants to keep their stories short so that everyone can have a turn at sharing.
- 3. Respond to and manage any difficulties that participants had in completing their action plans*
- See Helpful Hints for Managing Problems (Appendix C).



At some point in this program, all of you will probably encounter a problem with doing your action plan. Perhaps it was unsuccessful in managing your problem or maybe you were unable to carry out your plan. These experiences are okay and do not mean that you have failed in any way. They are also important learning opportunities for us all. So, did anyone have any problems doing their action plan in the last week?

What kinds of difficulties did people have completing their Managing Problems action plan over the last week?

Of those of you who had difficulties completing your action plan, would you like to share what happened so we can work through the problems as a group?

4. Small groups continue with Managing Problems

- You have two options for this section: splitting the group into A. two groups or B. pairs.
- Be sure to have the Managing Problems poster visible to participants.

A. Split the participants into two groups

- Decide beforehand where the two groups can sit so, they do not disturb each other.
 - ✓ If you have two facilitators, make sure that one of you sits with each group to support participants.
- If you have a large number of participants, you can divide them into smaller groups of three or four people. Be sure to split the groups up only after you

have given them instructions on what to do.

- Be aware of time, as participants can often be slow to move into smaller groups.
 - ✓ Group 1 includes participants who wish to continue managing the *same problem*.
 - ✓ Group 2 includes participants who wish to start managing a *new problem* (i.e., the first problem has been solved or managed, or the participant has decided that it is not solvable).

Suggested script:



We are going to work in small groups now. Those participants who would like to continue Managing Problems with the same problem from last week will sit (say place/area). Those of you who would like to start Managing Problems with a new problem can sit over (say place/ area). Please begin to move to your areas now so we can start straight away.

B. Split the participants into pairs

- Ideas for pairing participants:
 - ✓ One partner could be someone whose action plan was discussed in the larger group and the other partner will be someone whose action plan has not yet been discussed. The first partner could work with and support the second to review their action plan and either continue to solve the same problem or begin Managing Problems with a new problem.
 - ✓ Partners could be participants with similar problems.
- Facilitators should walk around the room and support all participants.

5. Lead each group or pairs as follows:

Group 1: managing the same problem

- Help participants to continue with managing this problem.
- Begin by reviewing Steps 2 and 3 of the Managing Problem strategy:
 - ✓ Ask each participant to say aloud the problem they have chosen to solve.
 - ✓ Remember you should have written these down from last week (or participants may have completed the Managing Problems handout).
 - ✓ Check that participants are happy with their responses here.
 - ✓ Check that these problems are still solvable.
- Start Step 4 (possible solutions):
 - ✓ You will need to choose one participant to talk through their problem first.
 - ✓ Make sure that this participant is comfortable with the group hearing about their problem.
 - ✓ Ask the participant to remember any solutions from the week before (or refer to their handout).
 - ✓ Ask the participant to first think of as many new solutions as they can.
 - ✓ Then invite the group to suggest more possible solutions.
 - ✓ Some of the old solutions (from last week) might be kept and some new solutions might be added.

- Continue with Step 5 of the same participant’s problem:
 - ✓ Ask the participant which solution(s) they think would be the most helpful and practical.
- Step 6 of the same participant’s problem:
 - ✓ Help the participant to develop an action plan for the next week.
 - ✓ There is space on the Managing Problems handout to record their action plan (i.e., write or draw, depending on the participant’s literacy).



What would be the first step to carrying out this solution?

Imagine you are completing this solution right now. Tell me in as much detail as you can everything you would do in order to carry it out.

- Repeat Steps 2–4 of the Managing Problems strategy (i.e., choose a problem, define the problem, possible solutions) with the next participant’s problem.

Group 2: managing a new problem

1. Go through Managing Problems from the beginning:
 - Begin with Step 1: review the problems that participants listed last week and either keep these problems or add new ones to the list.
 - Move to Step 2: ask each participant in the group to say aloud the problem they would like to choose.
 - ✓ Before moving to the next participant, help each person to do Step 3 (define the problem as specifically as possible).
 - ✓ Make sure you write the problem down so you can remember the problem that every participant has selected.
 - Choose one participant’s problem that you can start working on as a group. Make sure that person is comfortable talking about their problem in front of the group.
 - Continue with Step 4:
 - ✓ Ask the participant to first think of as many possible solutions to the problem as they can.
 - ✓ Then invite the group to suggest more possible solutions.
 - Before moving on to the next step, ask participants to tell you what the next step is (e.g., “Okay, so we have just chosen the problem, which is Step 2. What is the next step?”)
 - ✓ This will help all participants to understand the steps for Managing Problems.
 - Step 5 of the same participant’s problem:
 - ✓ First ask the participant which solution(s) they think would be the most helpful and most practical.
 - Step 6 of the same participant’s problem:
 - ✓ Help the participant to develop an action plan for the week ahead.
 - ✓ There is space on the Managing Problems handout to record their action plan (i.e., write or draw, depending on the participant’s literacy).




What would be the first step to carrying out this solution?

Imagine you are completing this solution right now. Tell me in as much detail as you can everything you would do in order to carry it out.

- Repeat Steps 2–4 of the Managing Problems strategy (i.e., choose a problem, define the problem, possible solutions) with the next participant’s problem.

Get Going, Keep Doing review 15 minutes



Materials

- Inactivity Cycle poster (Appendix D-4A)



1. *Refer to get going keep doing poster (Appendix D-4B)*

2. *Review Get Going, Keep Doing home practice*

- Invite participants to share their experiences of completing their Get Going, Keep Doing activity during the week.



Did anyone start or complete their Get Going, Keep Doing action plan this week?

Of those of you who completed your Get Going, Keep Doing activity, would you like to share what happened?

Be sure to watch the time, so ask participants to keep their stories short so that everyone can have a turn at sharing.

- Respond to and manage any difficulties that participants had in completing their activity.
 - ✓ See Helpful Hints for Get Going, Keep Doing (Appendix C).



What kinds of difficulties did people have completing their Get Going, Keep Doing activity over the past week?

Of those of you who had difficulties completing your activities, would you like to share what happened so we can work through the problems as a group?

- Make sure that those participants who had difficulties completing their activities have a clear idea of what they are going to try differently this week (i.e., their new action plan).
 - ✓ Ask participants to share aloud what they are going to try differently this week to help them complete the activity (i.e., a new first step that is smaller, a new activity entirely). Repeat this back to the participant or discuss any parts that they may

have missed or are unsure about.

- ✓ Write down participants' new plans for the week so you can review them in the next session (or have participants complete the Get Going, Keep Doing handout).
- Encourage those participants who were able to complete their activities to continue doing them this week.
 - ✓ Participants can also introduce new, pleasant activities if they feel confident doing this by themselves.

3. *Introduce Get Going, Keep Doing for a task-oriented activity*

- This is a large group discussion.
- Explain that it will follow the same structure as in Session 3 (i.e., when it was completed with a pleasant activity).
- Tell participants that you are now going to practice Get Going, Keep Doing with tasks and chores.

Key points to include

- Remind participants that Get Going, Keep Doing helps people to start being active again.
- When we feel low, we often lose motivation to do chores, work, self-care activities and other tasks that we need to get done.
- Being active with these tasks helps people feel a sense of achievement, which can improve mood.
- Today, participants will choose one task-oriented activity to start doing again.

4. *Large group discussion*

- Help participants to select a chore or a self-care or work-related activity they would like to start doing.
- Invite participants to suggest one task that they would like to start doing again.
 - ✓ Give participants time to think about an activity and invite them to raise their hands to share it with the group.
 - ✓ Begin to select participants to share their activity if it is taking too long for people to respond.
 - ✓ Help participants who are unsure of what to do.

Prompt questions:



Is there one thing that is not too hard that you could do around the house, for your family or yourself or to do with work?

Is there anything you would like to do that others have already mentioned? Tell me what you used to do a year ago.

If a participant cannot think of a task after using these questions, ask other participants to give examples of things the person could do. Ask the participant to think about these things. Then come back to them at the end of the discussion and ask them to choose one activity.

- ✓ Examples:

- Cleaning a small area of their home; Washing clothes; Collecting wood, water, or fuel; Washing oneself; Cooking a meal; Washing the dishes; Going to work; Helping a relative.

Suggested script:



Thinking about the things you used to do before you were feeling this way, what is one task, chore, or self-care activity that you could start doing again or do more often?

Note: The activity chosen can be something that the participant completes in the group time e.g., helps clear up the cups or glasses at the end of the session.

- It is recommended that you begin with an activity that is not too big and is relatively easy to complete (as shown in the case example).
 - ✓ Ask participants what they would need to do in order to complete this activity (i.e., all the steps involved).
 - Examples: getting up on time and getting dressed; going to work might mean organizing childcare and organizing transport to get to work.
 - ✓ Note that work-related tasks can be too hard to do for someone who is feeling very depressed, and an easier activity should be chosen first.
 - ✓ Simple, easier tasks might include those that can be done in the home or do not need a lot of resources or the involvement of other people.
 - Examples: washing only some of the laundry, sweeping an area in the kitchen, cleaning the kitchen bench, etc.
- Help participants to break down the selected activity into small, manageable steps.
 - ✓ Use one participant's activity as an example to remind the other participants how to break down their activity into smaller steps.
 - ✓ Then ask participants to break down their activity into smaller steps, on their own.
 - ✓ There is space on the Get Going, Keep Doing handout to record their action plan (i.e., write or draw, depending on the participant's literacy).

Prompt questions:



Sit quietly and imagine when you last did this activity. Can you tell me in as much detail as you can all the things you did, and I will write these down? These will be the steps you need to take to complete the activity.

What are the material things you will need in order to complete the activity/task? (e.g., shoes, furniture, people, food, etc.)

BREAK – 10 Minutes


Before starting Strengthening Social Support, give a brief summary of the session so far. You have:

- reviewed Managing Stress;
- reviewed Managing Problems (specify any points that were taught while doing the review);
- reviewed Get Going, Keep Doing (specify any points that were taught while doing the review).

Strengthening Social Support – education and case example 15 minutes

**Materials**

- Strengthening Social Support Poster (Appendix D-5)

**Purpose of Strengthening Social Support**

- Having good support helps people cope better in adversity.
- Support can prevent people from becoming very stressed, depressed, etc.
- Support can help people better manage practical problems.
- Support helps people feel that they are not alone in the problems they are experiencing.

Steps to Strengthening Social Support

1. *Give a brief definition of Strengthening Social Support*

- Point to the Strengthening Social Support strategy poster (Appendix D-5) and facilitator’s notes (Appendix C).

Suggested script:



Strengthening social support is all about connecting with others to be more supported and able to manage problems better.



2. *Refer to* Strengthening Social Support strategy poster and facilitator’s notes

3. Introduce Strengthening Social Support as the final MomCare Program-Based PM+ strategy

- Refer to previous discussions of other strategies that included social support (e.g., a solution for Managing Problems may have included getting support from someone or an organization; a Get Going, Keep Doing activity may have

involved socializing with others).

4. *Encourage a discussion about what social support is and how it can be helpful*

- Ask participants to give examples of times when social support has been helpful for them.

Suggested prompt questions:



When you think about social support, what comes to mind (what do you think of)?

Would anyone like to share a time that they received support from someone or an organization (Give the name of a local organization) to deal with a problem? And did it help? How so?

What has been people's experience coming to this group and sharing their problems with others? Have people found it helpful? How so?

How did Akinyi say that seeking support has helped her in the past?

Akinyi said that it helped her feel that her problems were not as big. She said that she was feeling more confident after getting support from group participants.

Are there other ways you think that strengthening social support might help people affected by a challenge?

How do you think it might help you?

5. *Discuss obstacles to strengthening social support*

- Tell the group that it can be difficult to seek out support, for different reasons.
- Ask the group what were Akinyi's difficulties in strengthening their social support.
- Invite participants to share their personal difficulties in seeking support.

Suggested questions:



What has made it hard for you to get support from others in the past?

What do you think might make it hard for you to strengthen your social supports this week?

- Give examples to help participants identify personal obstacles if needed:
 - ✓ Personal feelings: shame, embarrassment, low mood, anxiety or worry.
 - ✓ Negative expectations: it won't work; there's no point; I'll burden others.
 - ✓ Isolation: some participants might not have many people they can get support from.

- ✓ Difficulties trusting others (this is likely to be an obstacle for people who have experienced intimate forms of trauma, such as sexual assault or torture).

Suggested dialogue if a participant is very unsure about strengthening their social supports:



Many people feel unsure about talking with others about their problems or asking others for help. One reason is because they are worried, they will burden the other person with their problems. However, this is often not true. People will often share problems when their friend tells them about their own problems. Or they might ask for help in return. It can also be helpful hearing other people's difficulties so you get perspective about your own issues, especially if you think you are the only one experiencing a problem.

Another reason people do not get support from others is because they have no one they can trust. If you think you do not have anyone you can trust, shall we discuss more together on finding someone that you can trust?

Strengthening Social Support – participant support 15 minutes

1. Tell participants that the next fifteen minutes will be spent helping them plan to strengthen their social support
2. Large group discussion
 - Invite participants to choose one way that they can strengthen their social support in the next week.
 - Remind participants of the different ways that they can strengthen social support (see “Key points to include” box above).

Suggested questions:



Does anyone have an idea of how they would like to strengthen their social support? Is there social support you had in the past that you could start to strengthen again? Is there someone or an organization you could get support from?

3. *Begin helping participants to plan exactly what they are going to do*
 - To make this discussion easier, discuss actions for each different type of social support:
 - ✓ You can begin by just talking about participants who wish to strengthen support by talking to someone.
 - ✓ Then talk about plans for those participants who wish to strengthen support with an organization.
 - ✓ Then talk about plans for those participants who wish to ask for practical help.
 - Be sure to break this plan down into small, manageable steps as you have done with Managing Problems and Get Going, Keep Doing.

Suggested questions:



What would be the first step to strengthening your social support?

Imagine you are completing this action right now. Tell me in as much detail as you can everything you would do in order to carry it out.

4. *Rehearsing (role-playing) what to do*

- Participants form pairs and practice what they are going to say to the person or organization.
- If you do not have time, encourage participants who feel comfortable to meet with each other outside of the group, to practice what they are going to say or do this on their own.
- Tell participants that the more confident they feel in completing the task, the more likely it is that they achieve it.
- For example, role-play:
 - ✓ talking about a practical problem and how that makes them feel
 - ✓ talking about being involved in this program
 - ✓ talking about any specific problem
 - ✓ asking to meet with a friend/family member/other person
 - ✓ asking for help with a practical problem.

5. *Help participants to schedule in the steps to complete the social support activity*

- Discuss what each participant can do, on what day and at what time (get participants to be as specific as possible).

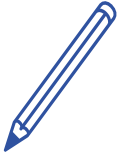
As with *Managing Problems* and *Get Going, Keep Doing*, discuss with the group how participants can remind themselves to complete the steps over the week ahead.

6. *Effective linkage for other support services*

- Effective linkage is a referral process that ensures the participant accesses and takes up the required service(s) at the point of service. The point may be preferred by the participant and /or recommended by a service provider (i.e., the facilitator who is a CHV)
- Consider the MomCare program (MMH) referral protocol before undertaking any referral or linkage (Appendix E)
- Effective linkage for other support services is crucial for the well-being of the participants. This may include:
 - ✓ sensitive cases
 - ✓ service not available within MomCare program
 - ✓ request by the participant to sort out other services
 - ✓ transference and counter-transference
 - ✓ other reasons that may warrant the service provider (CHV) not to continue with the session or delivery of service(s) to the participant(s).
- Steps in effective referral:
 - ✓ Agree on the need for linkage
 - ✓ Get consent for linkage including point of service from the participant
 - ✓ Record linkage details on the available referral tool – preferably MoH


- client/patient referral form
- ✓ Agree on mode of linkage – escorted or self
- ✓ Track linkage result is possible
- ✓ Record the result

Staying Well 15 minutes



Materials

- Materials (posters, cards, markers, etc.) for making PM+ reminders



Purpose of Staying Well session

- Participants can look back and feel proud of their achievements.
- Opportunity to tell participants what to expect when finishing the group.
- Help participants to continue to stay well after PM+ finishes by preparing the best response to future problems.

Steps to Staying Well

1. *Begin by again congratulating participants for their efforts and achievements*
Suggested script:



As you are aware, today is our last session and I wanted to congratulate you on reaching this stage. You have shown a lot of courage and effort to talk about some difficult topics and learn new strategies to manage difficulties. Are there areas that you think have improved since starting the program?

2. *Review participants' original goals for the program*
Suggested script:



Can anyone remember what they hoped to get out of MomCare Program-Based PM+ at the very beginning? What did you want to change in your mood, your behavior, your life, etc.?

- If you wrote down participants' goals in Session 1, you can read their goals out to them.
- Discuss goals that participants have achieved (whether they are ones they suggested in Session 1 or not).

Suggested script:



Have you been able to achieve these goals, either partly or completely? Can you tell me what has changed in your life as a result of MomCare Program-Based

PM+?

3. *Emphasize the importance of practicing strategies, even when participants are not having problems*

Key points to include

- MomCare Program-Based PM+ is like learning a new language: you need to practice it every day if you want to speak it fluently.
- The more you practice MomCare Program-Based PM+ strategies, the more likely you will stay well.
- If you face a difficult situation in the future, you will have a better chance of managing it well if you have been practicing MomCare Program-Based PM+ strategies regularly.
- Participants have all the information they need to use MomCare Program-Based PM+ strategies on their own.
- Sometimes putting reminders of the MomCare Program-Based PM+ strategies around one's house can be helpful (you can invite the group to suggest ideas on how to do this).
- Many participants will face problems in the future.



4. *Refer to the case example*

The case example is about a time when Akinyi faces a difficulty a few months after completing MomCare Program-Based PM+, and how she/he manages it.

5. *Invite participants to discuss this case example*



Does anyone have any thoughts about this case example and how Akinyi managed her problems after the group?

6. *Discuss potential future stressors or problems that participants might face*

Suggested questions:

What are some difficulties or problems that you could experience in the future?



- Prompts: *...such as money problems, problems with the baby, problems with your physical health, problems with family?*

What kinds of problems have you experienced in the past that you could experience again?

Suggested script:



It is not uncommon for participants to experience difficulties in the future. In fact, we will all experience some kind of stress or difficulties in life. However, it is important to respond to these difficulties in helpful ways so that they do not become overwhelming. What did Akinyi do to manage her/his difficulties after MomCare Program-Based PM+ finished?

7. *Help participants to identify which strategies they could use for each potential future stressor they might face*

- Refer to examples of future stressors that participants have already identified.
- For example:
 - ✓ feelings of stress, anger, anxiety and physical problems suited to Managing Stress
 - ✓ unemployment problems suited to Managing Problems
 - ✓ feelings of depression, low motivation or hopelessness, or inactivity suited to Get Going, Keep Doing
 - ✓ all problems are suited to Strengthening Social Support.
- Also, make sure you mention that if problems continue even after they have tried to practice the MomCare Program-Based PM+ strategies, then they should seek further help (e.g., visit their doctor or health care clinic).

Suggested script:



What do you think you can do if you experience a very difficult situation or notice negative feelings in the future?

8. *Suggest the group as ongoing support for participants*

- Suggest that relationships formed in the group can be helpful for participants afterwards:
 - ✓ It can help them remember MomCare Program-Based PM+ strategies.
 - ✓ It is a good source of social support.
 - ✓ Other participants can help watch out for signs that someone is not staying well.
- Tell participants that if they want to continue to meet with others from the group, they should organize this at the end of today's session.

9. *Discussion: how to remember to practice MomCare Program-Based PM+ strategies*

- Discuss what participants can do to remember to continue practicing PM+.
- As a group, spend some time designing and making PM+ reminders that participants can take home with them (optional).
 - ✓ For example, small cards, rocks or beads with pictures or symbols of the MomCare Program-Based PM+ strategies on them, photos, a piece of jewelry etc.
 - ✓ If there is not enough time, you can do this activity during the closing ceremony.
 - ✓ Provide participants with posters, small cards, markers, etc.

Managing Stress 5 minutes

1. *Remind participants why this strategy is helpful (Appendix D-2)*

- It helps to relax the body, which can help you feel less stressed.

2. Lead the group in Managing Stress

Steps to follow

1. Participants relax their bodies (move arms and legs, rock head from side to side, roll shoulders back).
2. Instruct participants to breath from their stomach (balloon in their stomach).
3. Once everyone is comfortable with Step 2, begin counting three seconds for the in-breath and three seconds for the out-breath. Continue for one minute.
4. Stop counting and encourage participants to count themselves or keep the rhythm of slow breathing going (if you have a clock, you could encourage participants to follow the ticking of the seconds to keep the rhythm slow).
5. Continue for at least three minutes.

Ending the session 10 minutes

1. Give a summary of the session. You have:
 - reviewed Managing Stress (refer to specific problems that were discussed or solved);
 - reviewed Managing Problems (refer to specific problems that were discussed or solved);
 - reviewed Get Going, Keep Doing (refer to specific problems that were discussed or solved);
 - learned how to apply Get Going, Keep Doing to start doing tasks again;
 - learned how to strengthen one's social support, through the strategy Strengthening Social Support.
2. Ask participants to name one thing that has been helpful for them in today's session.
3. Remind participants to regularly practice Managing Stress.
4. Remind participants to complete their Managing Problems action plan (this will be reviewed in the next session).
5. Remind participants to complete their Get Going, Keep Doing activity (this will be reviewed in the next session).
6. Remind participants to complete their Strengthening Social Support action plan (this will be reviewed in the next session).
7. Remind participants of the next session – time and location – and tell them the topics that will be discussed (i.e., reviewing the strategies and preparing for the future).
8. As a way of celebrating the end of the program, it is good to share a meal and/or a ceremony. You can also choose to provide participants with a certificate.

APPENDIX A: PARTICIPANT INFORMATION AND CONSENT FORM

PARTICIPANT INFORMATION AND CONSENT FORM FOR THE MOMCARE PROGRAM

You are kindly asked to participate in the “MomCare Program”. In order to decide if you want to participate, you should understand the terms and conditions that apply to the Program. These terms and conditions contain important information about the use and protection of your personal data. By accepting these terms & conditions you are deemed to fully understand them and give your explicit consent in relation to the same. Please take your time to make your decision and feel free to discuss with your friends, family, or physician.

Purpose and background Program

The MomCare program is a program of PharmAccess Foundation Kenya, a not-for-profit organization dedicated to improving access to healthcare in Africa, established under the laws of Kenya and having its registered office address at 52 El Molo Drive, Off Naushad Merali Drive, Lavington PO Box: 6711-00100.

The objective of the MomCare Program is to learn about the quality of care and improve healthcare going forward. The Program offers a specific benefit package for Mother and Child (MCH) services to mothers in low-income settlements. It uses data and technology to monitor pregnant women and allow for real time analysis of data with the aim to offer safer pregnancies and deliveries to reduce maternal and neonatal mortality.

Eligibility

To participate, you must be pregnant and have a national ID, (alternatively, a guardian/spouse’s national ID can be used). You must have a Safaricom line and be registered with M-TIBA (and accept the M-TIBA Terms & Conditions)

Maternity Services in the MomCare Program

Under the Program the following basic maternal care costs will be covered via M-TIBA:

- 4 Antenatal care consultations (based on term pregnancy and medical status)
- An antenatal care profile including laboratory tests
- Urinalysis also during ANC 2-3-4
- 1 ultrasound scan
- Delivery (Normal/C-Section)
- Iron and folate supplements during pregnancy
- Tetanus Immunizations
- Extra clinic consultations in case of health issues during pregnancy
- Treatment of pregnancy related hypertension, gestational diabetes, anemia & genitourinary tract infection
- Treatment of complications (as specified below, to be provided by a specified referral facility)
- 1 ambulance trip in case of a maternity referral case (only for Urgent/Emergency referrals)
- 1 checkup of the newborn by a pediatrician (in case of referral and if needed)
- 2 post-natal care consultations
- Immunization for the newborn until 14th week after normal delivery, according to the KEPI programme

Complications covered:

Reasons for normal, non-urgent referral	Reasons for urgent referral
Recurrent UTIs	(Pre-)Eclampsia
Upper UTI/pyelonephritis	Antepartum Hemorrhage (APH)
Severe Anemia	Malpresentation
Gestational Diabetes	Ectopic Pregnancy
Severe hypertension/Pre-eclampsia	Pre-Term Labor (baby)
Ultrasound	RPOC's/MVA
Placental or fetal abnormalities (to be referred back to the spoke)	Postpartum Hemorrhage (PPH)
Previous scars (fourth ANC @ Hub, prepare for elective CS)	Prolonged Labor
Bad obstetric history	Third degree vaginal and cervical tear
Severe Hyperemesis	Severe Malaria
Malaria	Fetal distress
Rhesus Isoimmunization	Meconium and NRFS
Deep Venous Thrombosis	Post datism
	Post-partum sepsis
	Secondary post-partum hemorrhage (PPH)
	Post CS wound sepsis

What is not covered:

- Hospital admission in case of complications beyond 7 days.
- Care & complications for your newborn child (**maximum of 7- 10 days - if admitted in the newborn unit. This is dependent on newborn diagnosis and immunization is covered up to week 14 of childbirth.**)
- Complications not covered in the package above
- Ambulance Transportation from home to facility (only covered from the facility to other facility)
- Ambulance will only be used for Urgent/Emergency referrals.

Personal data collected and used

We shall monitor the provided health care using pseudonymized personal data collected through various tools and Program Partners:

- M-TIBA, a service on your mobile phone, offered by CarePay Limited, allows anyone to send, save and spend funds specifically for medical treatment at accredited health facilities. We will use your M-TIBA code, M-TIBA use data, medical data, insurance status (if any), telephone number and age
- We will capture and use information about your level of education and social economic status
- Your health care practitioner will use the Patient Journey app, built by PharmAccess, providing an outline of the maternity journey according to International Guidelines, to follow and keep track of your patient journey. Via this app medical information is collected, such as your expected delivery date, obstetric and medical history and medical data captured throughout your pregnancy journey

- In case of referral, as applicable, information is collected by the health medical information system used at the referral facility to capture and collect medical and billing data of patients in their care
- We will do a baseline survey and you will be sent a maximum of 8 SMS with patient reported outcome surveys. The patient reported outcomes surveys are aimed at collecting your experiences with provided care, your wellbeing, and your health status, to provide you with better quality of care and support throughout your journey. You will receive the patient reported outcome surveys on your mobile phone, via a digital data collection platform offered by M-tiba/Ajua
- You will be sent a minimum of 4 SMS reminders when you are due for your next visit
- You may be contacted by phone to share some information regarding the outcomes of your pregnancy
- You will allow PharmAccess to contact you regarding updates of the MomCare program and new program offers

The data is only accessible to the participating healthcare provider(s), PharmAccess and the Program Partners. We will use your data for administration purposes, to provide access to the services under the Program, to contact you and to evaluate the services provided. We shall analyze your data to identify where improvements to the MCH services can be made. We also use your data for research and analysis, and in that regard may share anonymized data on an aggregated level with various partners and stakeholders.

We only share personal data with trusted third-party service providers and only if that data is strictly necessary to carry out their services. We do not retain your personal data any longer than necessary or as prescribed by law.

Please note that you will always have the right to information, access, rectification, withdrawal of consent, objection, erasure, and transfer in relation to your personal data used by us.

Limitation of liability

You agree that your participation is entirely at your own risk, and you assume full responsibility for any risk of loss or damage arising from your participation, with the exclusion of any willful misconduct or gross negligence by PharmAccess. Furthermore, you specifically agree that PharmAccess will not be liable for any mistreatment, malpractices, or wrongful actions by the clinic in providing healthcare services to you.

Who to contact in case of questions, concerns or to withdraw your consent?

If you have questions about this Program, you should contact Project Manager - Moses Otieno:

0723822556 You may also withdraw your consent or exercise your data privacy rights as stated above at any time by calling the mentioned telephone number.

If you have questions on validity of the study or your rights as a study participant kindly contact Amref SRC secretariat on **254795746777** or **esrc.kenya@amref.org**

Consent for you Participation in the MomCare Program

- I confirm to understand this consent form and the information it provides regarding the Program. I was able to ask questions and my questions have been answered to my

satisfaction.

- I voluntarily agree to participate in the Program. I am free to withdraw my participation in the Program at any time, which will not affect any of my rights, including my rights to medical care.
- I agree that the information collected during the Program, including medical data, will be used as described in this form for the purpose and in the manner as described in this form.
- I consent to participate in the screening for mental health support and be contacted to be invited for the support intervention with positive output of the screening.

Name of Participant Date Signature

If visually impaired, physically impaired, mentally impaired or illiterate

I have witnessed the accurate reading of the Consent Form to the potential study subject, and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.

Name of Subject	_____
Thumb/Footprint of Subject	_____
Signature of Witness	_____
DD/MM/YYYY	_____

Statement by the researcher/person taking consent

I confirm that the study subject was given an opportunity to ask questions about the study, and all the questions asked by the study subject have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of this Informed Consent Form has been provided to the study subject.

Print Name of researcher/person taking the consent	_____
Signature of researcher/person taking the consent	_____
DD/MM/YYYY	_____

APPENDIX B: PRE AND POST ASSESSEMENT

MomCare mental health pilot screening forms: EPDS and PHQ9

ADAPTED from Harrington 2021 and Velloza et al 2020 (Important to start with EPDS and then PHQ-9)

Edinburgh Postnatal Depression Scale (EPDS) and Patient Health Questionnaire-9 (PHQ-9) questions:
We will ask you two sets of questions about how you've been feeling. As you are pregnant or recently have had a baby, we would like to know how you are feeling.

EPDS: Please say the answer that comes closest to how you have felt in the PAST 7 DAYS, not just how you feel today.

	Item	Mother's feeling
1	In the past 7 days: ...I have been able to laugh and see the funny side of things:	<input type="checkbox"/> ₀ As much as I always could <input type="checkbox"/> ₁ Not quite so much now <input type="checkbox"/> ₂ Definitely not so much now <input type="checkbox"/> ₃ Not at all
2	In the past 7 days: ...I have looked forward with enjoyment to things:	<input type="checkbox"/> ₀ As much as I ever did <input type="checkbox"/> ₁ Rather less than I used to <input type="checkbox"/> ₂ Definitely less than I used to <input type="checkbox"/> ₃ Hardly at all
3	In the past 7 days: ...I have blamed myself unnecessarily when things went wrong:	<input type="checkbox"/> ₃ Yes, most of the time <input type="checkbox"/> ₂ Yes, some of the time <input type="checkbox"/> ₁ Not very often <input type="checkbox"/> ₀ No, never
4	In the past 7 days: ...I have been anxious or worried for no good reason:	<input type="checkbox"/> ₀ No, not at all <input type="checkbox"/> ₁ Hardly ever <input type="checkbox"/> ₂ Yes, sometimes <input type="checkbox"/> ₃ Yes, very often
5	In the past 7 days: ...I have felt scared or panicky for no very good reason:	<input type="checkbox"/> ₃ Yes, quite a lot <input type="checkbox"/> ₂ Yes, sometimes <input type="checkbox"/> ₁ No, not much <input type="checkbox"/> ₀ No, not at all
6	In the past 7 days: ...Things have been getting on top of me:	<input type="checkbox"/> ₃ Yes, most of the time I haven't been able to cope at all <input type="checkbox"/> ₂ Yes, sometimes I haven't been coping as well as usual <input type="checkbox"/> ₁ No, most of the time I have coped quite well <input type="checkbox"/> ₀ No, I have been coping as well as ever
7	In the past 7 days: ...I have been so unhappy that I have had difficulty sleeping	<input type="checkbox"/> ₃ Yes, most of the time <input type="checkbox"/> ₂ Yes, sometimes <input type="checkbox"/> ₁ Not very often <input type="checkbox"/> ₀ No, not at all
8	In the past 7 days: ...I have felt sad or miserable:	<input type="checkbox"/> ₃ Yes, most of the time <input type="checkbox"/> ₂ Yes, quite often <input type="checkbox"/> ₁ Not very often <input type="checkbox"/> ₀ No, not at all
9	In the past 7 days: ...I have been so unhappy that I have been crying:	<input type="checkbox"/> ₃ Yes, most of the time <input type="checkbox"/> ₂ Yes, quite often <input type="checkbox"/> ₁ Only occasionally

	Item	Mother's feeling
		<input type="checkbox"/> ₀ No, never
10	In the past 7 days: ...The thought of harming myself has occurred to me:	<input type="checkbox"/> ₃ Yes, quite often <input type="checkbox"/> ₂ Sometimes <input type="checkbox"/> ₁ Hardly ever <input type="checkbox"/> ₀ Never
TOTAL EPDS SCORE		<input type="text"/> <input type="text"/> (min=0, max=30)

PATIENT HEALTH QUESTIONNAIRE-9 [Read to participant]: I will ask you questions about how you have felt in the past two weeks. Please tell me if you have felt these not at all, several days (1-7), more than half the days (8-11 days), or nearly every day (12-14 days).

During the past **two weeks**, how often have you been bothered by each of the following symptoms?

During the past two weeks (14 days until today) , how often have you been bothered by each of the following challenges? (<i>Explain the four answer options →</i>)	Not at all (NEVER) (0)	Several days (SOMETIMES) (1-7 days)	More than half the days (OFTEN) (8-11 days)	Nearly every day (ALWAYS) (12-14 days)
1. Less interest or pleasure in doing things; (<i>not having courage; spirits are low</i>)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
2. Feeling down, depressed, or hopeless (<i>closed spirits</i>)?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
3. Trouble falling asleep, staying asleep (<i>insomnia, sleeplessness</i>), or sleeping too much?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
4. Feeling tired, fatigued or having little energy?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
5. Poor appetite or overeating?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down (<i>feeling ashamed or disgraced</i>)?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
7. Trouble concentrating on things, such as: participating in meetings or watching television?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
8. Moving or speaking so slowly that other people could have noticed? Or the opposite—being so restless that you have been moving around a lot more than usual (<i>being a disturbance or not at peace</i>)?	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
9. Thoughts that you would be better off dead or of hurting yourself in some way? (<i>feelings of suicide or lost hope</i>)** Refer to clinician for any score >0	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
TOTAL (per column; sum of columns should equal 9)				
Interviewer: Do these calculations AFTER you are done with the participant. Skip to question 5.	0	x 1=	x 2=	x 3=
GRAND TOTAL (add all columns; min=0, max=27)				=

APPENDIX C: HELPING HINTS AND FACILITATOR'S NOTES

Helpful Hints for Managing Stress



Participants might have a range of different problems when trying to practice ManagingStress on their own. Below is a list of common problems and possible solutions you can try.

Always discuss how to manage any problems or complaints a participant raises when practicing any strategy in your supervision sessions.

Problem	Solution
The participant is too concerned about breathing correctly (e.g., keeping to the three seconds in and out, breathing from the stomach).	<ul style="list-style-type: none"> • Encourage the participant not to worry about following the instructions exactly. • Help them to understand that the main aim is to slow their breathing down in the way that best suits them, even if it means that they are not keeping to the counts of three or even if they are not breathing from their stomach. • Once they have mastered how to slow their breathing down, they can try to use the counting or breathe from their stomach.
The participant cannot slow their breathing down when they are at the peak of their anxiety or stress.	<ul style="list-style-type: none"> • Tell the participant that this would be very hard for anyone to do immediately. • Help the participant identify early signs that they are beginning to feel anxious or stressed so they can start slow breathing earlier. • If this is too difficult, help them to schedule specific times throughout the day to practice slow breathing so they learn how to use it before they get too anxious.
Focusing on breathing makes the participant speed up their breathing and feel more anxious.	<ul style="list-style-type: none"> • Help them to focus on a ticking clock (or a musical beat in a song, or other regular beat) and breathe to the count of the clock rather than focus only on the breathing.
Participants can experience feelings of light-headedness or dizziness or feel that they are losing control.	<ul style="list-style-type: none"> • Remind them that these sensations are safe, and they are not losing control. • Encourage them to focus just on blowing all the air out (just the breathing out) and letting the in-breath come naturally (or by itself). • Then they can return to focusing on the whole process of breathing (in and out).



FACILITATORS' NOTES ON MANAGING PROBLEMS

Step 1: Listing problems

In the first assessment, you asked each individual to **name** two problems. The first step of Managing Problems involves reviewing these problems, asking if the participant has other problems, and deciding whether these are solvable or unsolvable problems.

Beware of participants who feel very hopeless. They may think that none of their problems can be solved, so you may have to tell them why you think a problem is solvable.

Unsolvable problems are those that you cannot change or have any influence or control over, such as widespread poverty or having an untreatable physical illness or disability. However, sometimes there are parts of an unsolvable problem that can be changed, such as how the participant views the problem.

- E.g. someone with cancer may not be able to change their illness, but there might be things they can do to help with their pain or with problems related to accessing medical treatment. Your role is to explore with participants whether there are any parts of the problem that can be changed or influenced.

Step 2: Choose a problem

The second step of Managing Problems is to **choose** which problem the participant would like to focus on.

The participant should choose an *easy or small problem first*. It does not have to be the same problem the participant mentioned in the first assessment. Choosing a small problem will give the participant the opportunity to experience early success in the program.

However, you should try to help participants use Managing Problems to tackle a bigger or more difficult problem as you progress with the program (e.g. in Session 3). This is because it may be more challenging for them to properly use Managing Problems without your support after completing Group PM+. However, as with other decisions, you should discuss this with your supervisor, as this may not be an appropriate decision to make with some participants who feel very hopeless, or due to the group setting.

Step 3: Define the problem

Next, you will help the participant to **define** the problem as specifically as you can.

There are a few reasons for this:

- More specific problems are easier to solve (because it is easier to think of solutions that will help solve the problem).
- The person can better judge whether their problem has been solved or influenced.
- More specifically defined problems do not seem so large and overwhelming for the participant (e.g. compare “problems with my marriage” with “being irritable with my husband when he gets home from work”).

Problems that are best suited to Managing Problems are those that are *practical* and that can be changed or influenced to some degree. A participant could say that “poverty” is a problem that they want to change. This problem is too big and too vague. You need to help the participant make it more specific and practical. Getting more information about the problem is a good way of doing this.

Suggested questions to help define the problem:

- *When is this a problem for you? In what situations does this problem happen?*
- *If I were to watch you when this problem happened, what would I see, what would you look like, what would you be doing or not doing?*
- *How would your life (e.g., daily living) be different if you did not experience this problem?*
- *If you did not have this problem, how would you or I know? What would be different in the way you felt, behaved, etc.?*

This step can be the most challenging for a facilitator. It is also very important to do this well, as it affects how you will teach the rest of the strategy. Therefore, it is important for you to prepare between Session 1 and Session 2 how you might define some of the problems that participants have identified at the first assessment. It is useful to discuss this during supervision. For many problems, a participant might not choose the problem that you have practiced defining, but at least you have had some practice defining problems as specifically as you can.

Step 4: Possible ways of managing the problem

Once the problem is defined, encourage the participant to think of as many solutions as possible to solve or manage all, or parts of, this problem. Also, help participants to think about their personal strengths, resources and support that they might be able to use.

This step is not about giving advice

Many participants will need some help thinking of possible solutions, particularly if they are feeling hopeless. The temptation for you will be to tell participants different solutions, especially if you are feeling impatient because you are concerned about time.

However, since PM+ acts like a training program for participants, it is important that you guide the participant by suggesting general ideas that can help them generate more specific solutions. This will help empower participants, so they are not dependent on you to manage problems in the future. This would become a problem once Group PM+ ends.

- For example, a participant is feeling overwhelmingly stressed about a problem with her children. The facilitator encourages her to think about seeking support from someone she trusts. This would be a preferred method of encouraging the participant to think of people she can get support from instead of telling her to talk with a specific person, such as her mother, about the problem. The aim of this step is to help the participants come up with their own ideas (see “Feelings of Hopelessness” below for more ideas to encourage possible solutions).

Be aware of personal values

This is also a time when you need to be careful that you are not allowing your personal values to interfere.

For instance, you may disagree with the values of the possible solutions that participants are considering (e.g. talking with a specific religious leader, cheating to complete a work-related task, refusing to help someone), or you might want to suggest a solution that is based on your own value system and not the participant's.

It is very important that during the program you put aside your personal values and help participants make decisions based on their personal values and beliefs. Be reassured that this is difficult to do for facilitators! However, it is very important for you to respect participants and not argue with their personal values.

When you find yourself disagreeing with a participant's solutions, it is okay to talk about this in supervision.

Solutions that fix the entire problem

At this stage, it is also important that the participant does not become too concerned about coming up only with solutions that will completely fix the problem. This is often where participants get stuck when they try to deal with an issue by themselves. The aim at this stage is to think of any solution, no matter how effective it is in solving the entire problem or even just part of it.

Remind participants that they are not deciding if the solutions are good or bad in this step.

Participants are only required to think of as many solutions as possible, regardless of how good they are. You might even use humor and offer silly suggestions to demonstrate this point.

Feelings of hopelessness

Participants who are depressed or who are feeling excessively hopeless may have a lot of difficulty thinking of possible solutions. This is because they often think that nothing will get better, and they have a lot of doubt about their abilities to change their situation. You can use different questions to encourage responses from the participant, including:

- Asking them to think of solutions that might work for a friend in a similar situation, but who does not feel depressed.
- Asking them what they have tried in the past (regardless of whether it has worked or not).
- Giving broad or vague ideas: e.g. *“Some people have found that talking to others can be helpful. Does this sound like a solution you could use? Who could you talk to? What could you say or ask that might help solve part of the problem?”*

Step 5: Decide and choose

Once you have exhausted all the possible solutions with participants, this is when you help them to **evaluate** each solution. This means considering how effective and helpful each solution might be. You will help the participant choose only those solutions that are helpful in managing the problem.

Short- and long-term consequences

In evaluating solutions, think about both the short- and long-term consequences of different ideas. For instance, choosing to not go out (isolate oneself) to deal with difficult memories of a loved one who has died might help with a participant's emotions in the short term. However, this is an unhelpful long-term solution as it can cause other problems, such as depression.

Unhelpful solutions

When the participant chooses a solution that is clearly unhelpful, you can be more direct with

them. An unhelpful solution would be one that causes significant problems for their physical and/or emotional well-being, for their friends and family members or for their work and/or social life. For instance, regularly getting drunk to manage stress is likely to cause more difficulties (e.g. it keeps people feeling depressed; it can lead to liver and kidney problems), and it might upset family and friends. It might also affect their ability to work (e.g. having to take days off work because of drinking, poor concentration at work because of a hangover).

Other examples of unhelpful solutions:

- Isolating yourself
- Breaking things
- Beating your children
- Becoming physically aggressive
- Using drugs
- Carrying out illegal or very dangerous activities.

Achievable solutions

You should help participants consider how achievable it is to carry out each solution. While one solution might be very effective, if the participant cannot complete it due to a lack of resources, it is not a good solution.

- For example, a participant identifies not having a job as his major problem. At Step 5, he mentioned that he was offered a job recently with a good wage. Although this would have been a very good solution to his problem, after further discussion he realised that the job was actually very risky – he would have to work at night in a very dangerous area of the city. The participant decided that, because he had a young family, he did not want to risk his life to get the job. Because of this, he decided that taking this job was an unhelpful solution to his problem. However, together the facilitator and the participant decided that he could speak with the manager and ask whether there were other jobs in less dangerous areas of the city.

The participant will then **choose** the best solution (one solution or a combination of them).

Step 6: Action plan

Spend a good amount of time helping participants to design an **action plan** to carry out the solution. This includes:

- Breaking the solution into small steps:
 - E.g. finding work might involve getting information about what work is available, learning about what is needed for different jobs, reviewing and, for some jobs, updating letters of recommendation.
 - Ask: *“What would be the first step to carrying out this solution?”*
 - *“Sit quietly and imagine as vividly as you can that you are completing this solution now. Tell me in as much detail as possible everything you would do in order to carry it out.”*
 - Helping participants choose a specific day and time to carry out each task:
 - Suggesting reminders to help make sure that participants complete the desired tasks (this can be a group discussion as other participants may have some good ideas).
- E.g. using alerts on a mobile phone, doing tasks at the same time as community activities, meal times, or having a friend or family member remind them are all good ways of helping the participant to complete the tasks.

If a solution involves talking to someone else and the participant does not feel confident about this, role-play (or practice) this interaction with the participant. This can be a good way of helping them practice what they would say if their plan is to ask for something or talk to someone. It can improve their confidence and the chances of them carrying out the plan.

Step 7: Review

In the next session of the programme, you will spend time **reviewing** how things went with completing the planned tasks. Discuss and manage any difficulties that arose so that participants can spend the following week trying to carry out the desired tasks again. If participants managed to complete the tasks, you may talk about what next steps they need to carry out to continue managing the problem, if applicable.

Reviewing is also important in increasing the participant's self-confidence, as well as showing them that you believe that completing these tasks is important and you care about whether the participant can get them done. This helps to build the relationship and keeps participants responsible for making efforts to practise the strategies outside of the group sessions.

It is important for facilitators to know that not all problems will be solved through Managing Problems. If a participant's problem has not been solved, it might be for a number of reasons (e.g. the problem is not solvable, the problem is too big, Managing Problems is not the right strategy for this problem).

Helpful Hints for Managing Problems



Participants might face challenges when trying to carry out their action plan for Managing Problems.

During supervision, always discuss how to manage issues that a participant raises with practising any strategy.

Problem	Solution
<p>The participant forgot to carry out their plan or they were unable to for other reasons (e.g. they were busy, they got work, other problems came up).</p>	<p>This is probably the most common difficulty that participants will have. Invite the group to suggest ideas for remembering to do action plans.</p> <ul style="list-style-type: none"> • What did participants who did complete their action plans do to remind themselves? • What has worked in the past if they have had to remember to do something? • What might they suggest to a friend who needs to remember to do something? <p>If other things distracted the participant from doing their action plan, tell them about the following in a gentle but firm way:</p> <ul style="list-style-type: none"> • This is normal and happens to many participants. • Distractions will often come up. • Remind them that in Session 1 they discussed the reasons for and challenges to joining PM+, and they decided to do their best to engage in PM+. • In order to improve their mood, they will have to do their best to practice as much as possible between sessions. • Discuss ways they might be able to make practising PM+ important in their daily life.
<p>The participant was unable to talk to someone because they did not know what to say or felt nervous.</p>	<p>Help the participant decide exactly what they want to say to the person. Invite the group to help them decide what to say if they are unsure.</p> <p>Then have the participant rehearse this with you or another participant. You may have them do this several times until they feel confident.</p>
<p>The participant's problem did not change or worsened after they carried out their action plan.</p>	<p>In this situation, first let the participant know that sometimes this can happen, but it might not be because they did anything wrong or because Managing Problems does not work.</p> <p>Then do the following,</p> <ul style="list-style-type: none"> • Get as much information about what the participant did (their action plan) and what happened. <ul style="list-style-type: none"> – You might be able to identify what went wrong from listening to the details. – You might find out that the problem they are wanting to solve is

Problem	Solution
	<p>not solvable and they need to choose another problem (e.g. if the solution to the problem relies on another person changing their behaviour, such as drinking).</p> <ul style="list-style-type: none"> • Invite the participant to first suggest what they think went wrong. • Then invite other participants to suggest what might have gone wrong. • Decide whether the problem is still solvable or unsolvable. • If it is still solvable, go back to Step 3 and make sure that the problem has been defined as specifically as possible. • Go to Step 4 and ask the group to think of as many solutions to the problem as they can. • Ask the participant and the group to choose the best solution (Step 5). • Have everyone help the group to develop a new action plan (Step 6). • Help the participant to decide when they will carry it out. <p>Sometimes Managing Problems is not the best strategy to address the problem. It can be helpful to wait and see if any of the other PM+ strategies help to manage it.</p>
<p>The chosen problem was too big.</p>	<p>Big problems are hard to manage!</p> <p>It is important to help participants choose a problem that is manageable. Sometimes this means breaking down the problem into smaller parts and choosing just one of these parts to work on.</p> <p>Big problems that should be broken down further include the following:</p> <ul style="list-style-type: none"> • “Time management” can be broken down into scheduling time, regular lunch breaks, not bringing work home, etc. • “Relationship with husband” can be broken down into argue less with husband, plan quality time with husband, etc. • “My child’s behaviour” can be broken down into reducing the child’s hitting others, reducing the child’s yelling, child to be more helpful around the house, etc. <p>See Facilitators’ Notes for Step 2 (above) for more information.</p>



FACILITATORS' NOTES ON GET GOING, KEEP DOING

Given the participant's low mood, lack of energy or stress, it is important to break the overall task down into smaller and more manageable steps. Remember, this is so that the participant does not feel overwhelmed with the task and to make sure that they experience some success in completing it. This will encourage self-confidence and begin to improve their mood.

For example, "doing crafts" might feel overwhelming for a participant. You can break this task down and start with "getting all your materials out and putting them in a place where you would feel comfortable to do your crafts". The participant does not need to even start doing any crafts yet. Then on another occasion they can spend 10 minutes on the crafts and build up from there.

Another example is with the task "cleaning your home": breaking this task down by choosing small sections of the home to clean (e.g. cooking area, sleeping area and so on) is more manageable and achievable for the participant.

Helpful Hints for Get Going, Keep Doing



Participants might have a range of different problems when trying to carry out their action plan for GetGoing, Keep Doing.

During supervision, always discuss how to manage any problems or complaints a participant raises when practicing any strategy.

Problem	Solution
<p>The participant did not feel like doing the activity/task when it came time to do it.</p>	<p>This is probably the most common difficulty that participants will have.</p> <p>First, let participants know that this is a very common problem for people to have when they first start Get Going, Keep Doing.</p> <p>Then do the following:</p> <ul style="list-style-type: none"> • Show them the Inactivity Cycle poster. • Remind them that they will probably never feel like doing the activity while they feel depressed, but this is what keeps the inactivity cycle going. • Remind them that they have to start doing some activity in order for their mood to improve. Once they do this, they will start to feel like doing these things again. • It can take time to break the inactivity cycle (a participant might need to practice their activity for several weeks before their mood improves). • Review the activity that was chosen. <ul style="list-style-type: none"> – Ask the participant what was difficult about starting this activity. Listen for clues that tell you that the activity is too big or that it wasn't broken down into small enough steps. • You can either break this activity down into smaller steps to help them get started or you can choose an easier activity they can do. • Note: The activity/task can be something that is completed during the group session (e.g. talk to someone in the break time, help set up the room before the session starts, etc.

<p>The participant forgot to carry out their plan or they were unable to for other reasons (e.g., they were busy, they got work, other problems came up).</p>	<p>This is probably the second most common difficulty that participants will have.</p> <p>Invite the group to suggest ideas for remembering to do action plans.</p> <ul style="list-style-type: none"> • What did participants who did complete their action plans do to remind themselves? • What has worked in the past if they have had to remember to do something? • What might they suggest to a friend who needs to remember to do something? <p>If other things distracted the participant from doing their action plan, tell them about the following in a gentle but firm way:</p> <ul style="list-style-type: none"> • This is normal and happens to many participants. • Distractions will often come up. • Remind them that in Session 1 they discussed the reasons for and challenges to joining PM+ and they decided to do their best to engage in PM+. • In order to improve their mood, they will have to do their best to practice as much as possible between sessions. <p>Discuss ways they might be able to make practising PM+ important in their daily life.</p>
<p>The participant was unable to talk to someone because they did not know what to say or felt nervous.</p>	<p>Help the participant decide exactly what they want to say to the person. Invite the group to help them decide what to say if they are unsure.</p> <p>Then have the participant rehearse this with you or another participant. You may have them do this several times until they feel confident.</p>
<p>Participants complain that their mood has not improved.</p>	<p>This is very normal. Participants should not expect their mood to change dramatically in one week.</p> <p>Tell participants that feelings often take time to change. However, they will eventually change with Get Going, Keep Doing.</p> <p>It is important that you encourage participants not to give up, because this will certainly cause their mood to stay the same or worsen.</p>

Helpful Hints for Strengthening Social Support



Participants might have a range of different problems when trying to carry out their action plan for Strengthening Social Support.

Always discuss how to manage any problems or complaints that a participant raises with practising any strategy in your supervision sessions.

Problem	Solution
<p>The person or organization the participant tried to seek support from was not available or was unhelpful.</p>	<p>Sometimes this will happen. It is important that participants do not feel hopeless about this and that they do not give up on seeking support.</p> <ul style="list-style-type: none"> • If availability is an issue: try to get as much information as possible from the participant about why the social supports were not available. <ul style="list-style-type: none"> – You might decide together that if the participant keeps trying at different times the person might be available. • If helpfulness is an issue: try to get as much information as possible from the participant about why the social supports were not helpful. <ul style="list-style-type: none"> – Was it because the participant did not communicate clearly what they wanted? If so, rehearse a better way of saying what they need. – Was it because the support person was unable at that time to give them support? If so, the participant might be able to try again at a different time. – Was it because the support person is not able to provide that kind of support? If so, decide on someone else the participant can seek support from. Also, this person might be able to offer a different kind of support (e.g. someone might not be able to give support about emotional problems but can be very helpful with practical problems). • From the information you have gathered, decide with the participant (and group) what the new action plan is for Strengthening Social Support.
<p>The participant forgot to carry out their plan or they were unable to for other reasons (e.g. they were busy, they got work, other problems came up).</p>	<p>This is a common difficulty that participants will have.</p> <p>Invite the group to suggest ideas for remembering to do action plans.</p> <ul style="list-style-type: none"> • What did participants who did complete their action plans do to remind themselves? • What has worked in the past if they have had to remember to do something? • What might they suggest to a friend who needs to remember to do something?

	<p>If other things distracted the participant from doing their action plan, tell them about the following in a gentle but firm way:</p> <ul style="list-style-type: none"> • This is normal and happens to many participants. • Distractions will often come up. • Remind them that in Session 1 they discussed the reasons for and challenges to joining PM+ and they decided to do their best to engage in PM+. • In order to improve their mood, they will have to do their best to practise as much as possible between sessions. <p>Discuss ways they might be able to make practising PM+ important in their daily life.</p>
<p>The participant was unable to talk to someone because they did not know what to say or felt nervous.</p>	<p>Help the participant decide exactly what they want to say to the person. Invite the group to help them decide what to say if they are unsure.</p> <p>Then have the participant rehearse this with you or another participant. You may have them do this several times until they feel confident.</p>

APPENDIX D: 5-STEP PM+ POSTERS

STEP 1 - CHALLENGE (ADVERSITY) POSTER

1A- What is adversity/challenge?

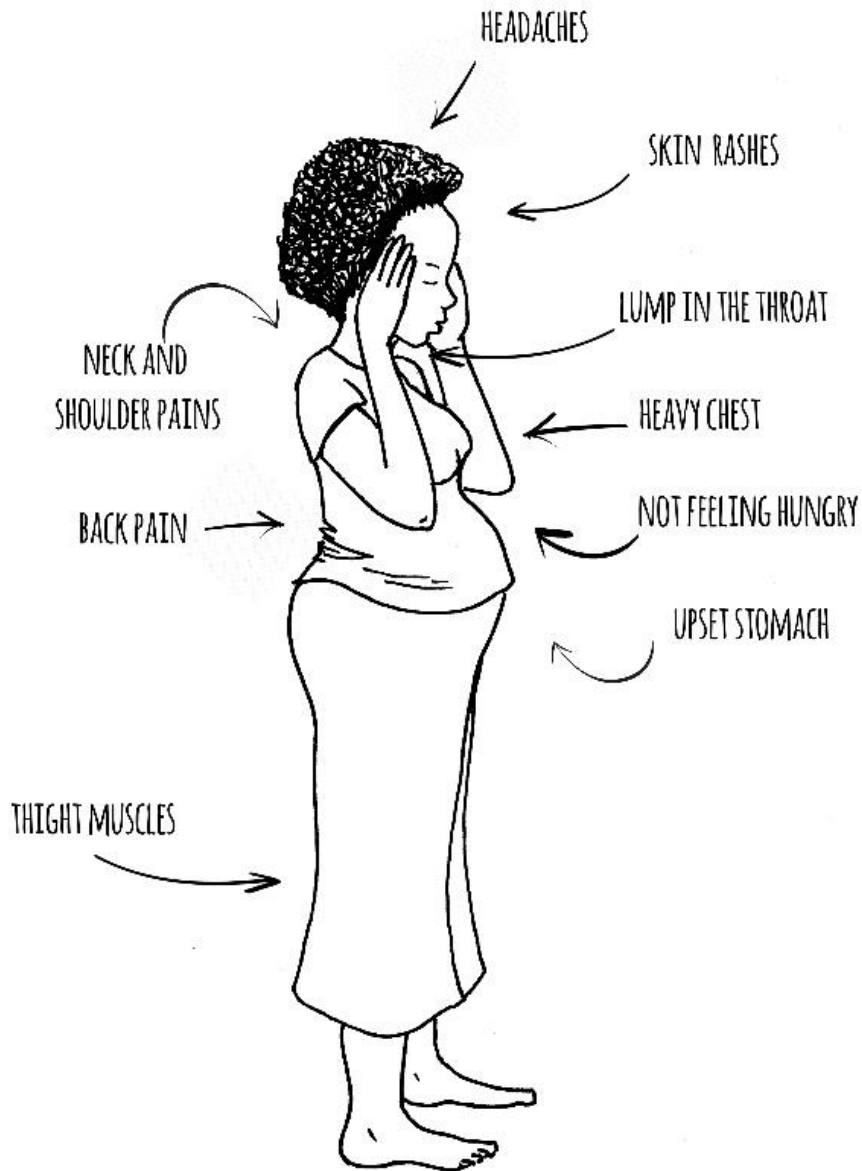
ADVERSITY



Mothers are at risk of these problems, let us all join hands to help in prevention and response

1B- What is stress

WHAT IS STRESS



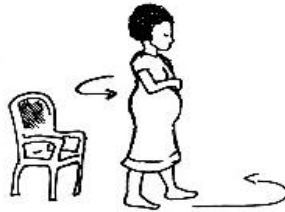
Mothers are at risk of these problems, let us all join hands to help in prevention and response

1C – Common reactions to stress

WHEN THEY ARE STRESSED, MANY PEOPLE.....



...CANNOT FOCUS



...ARE RESTLESS



...HAVE DIFFICULTY SLEEPING



...FEEL SAD OR GUILTY



...WORRY



...CRY A LOT

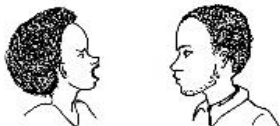


...FEEL VERY TIRED

...GET ANGRY EASILY WITH THE CHILDREN



OR WITH THEIR SPOUSE



... HAVE CHANGES IN APPETITE



EATING TOO LITTLE OR TOO MUCH

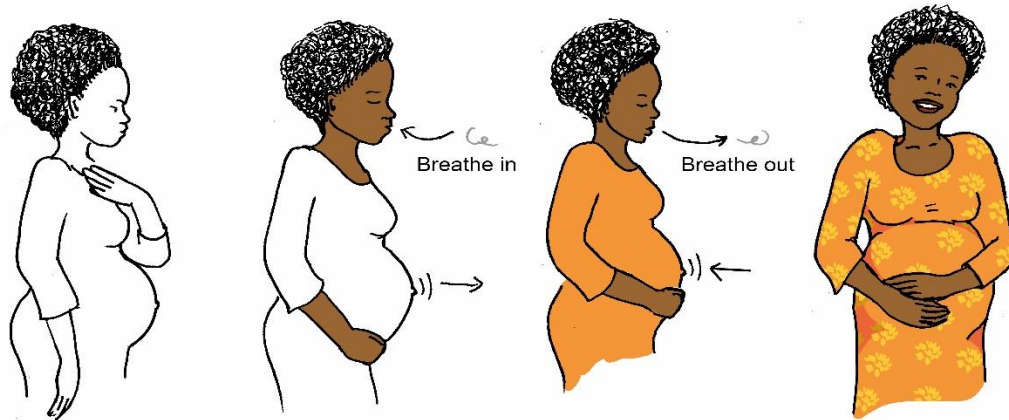
Mothers are at risk of these problems, let us all join hands to help in prevention and response

STEP 2 – MANAGING STRESS POSTER

2. Breathing Exercise Poster

Managing stress

Abdominal breathing exercise



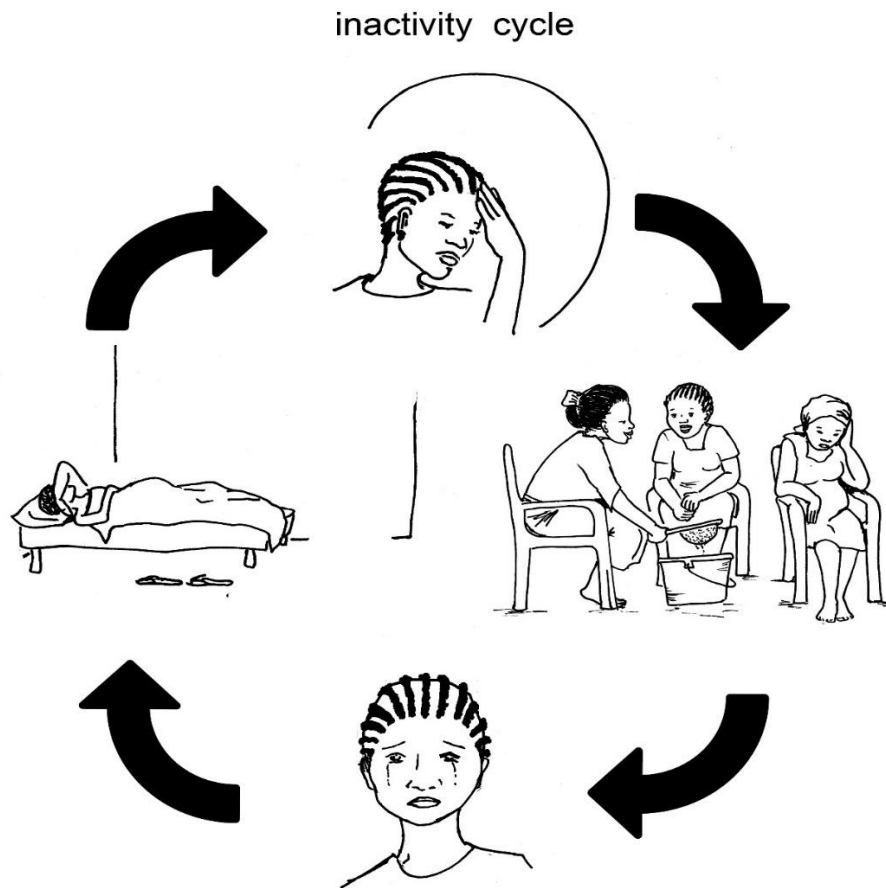
Breathing exercise – One of the simplest ways in which mothers can address/handle/manage stress

STEP 3 - MANAGING PROBLEMS POSTER

3 - Managing Problems - Illustrated Guide on What matters in times of managing problems



STEP 4: GET GOING, KEEP DOING
4A - Inactivity Cycle



Mothers need to avoid being alone, lonely, sad, much sleep and worries when faced with problems

4B- Get going keep doing

get going, keep doing



Instead, mothers should engage in useful discussions or daily chores with family members, friends, colleagues, health workers etc.

STEP 5 – STRENGTHENING SOCIAL SUPPORT

5- Market scene – Strengthening social support



Mothers should get social support - talk to someone you trust when faced with problems

APPENDIX E: MomCare (MMH) REFERRAL PROTOCOL

Research interview: Distress Follow-up and Referral Protocol for Sensitive topic.

Definition of a sensitive topic for research: “one that¹

- a) potentially poses for those involved a substantial threat, the emergence of which renders problematic for the researcher and/or the researched the collection, holding, and/or dissemination of research data”
- b) identification of participants would result in stigmatization, dissemination of findings could harm a social group, or the research challenges values that people hold sacred
- c) risk of inducing or exacerbating emotional distress. Individuals who participate in research on traumatic or aversive events, for example, may experience anxiety, depression, embarrassment, or acute stress reactions as they recall, re-examine, and reveal their experiences²

Recommendations:

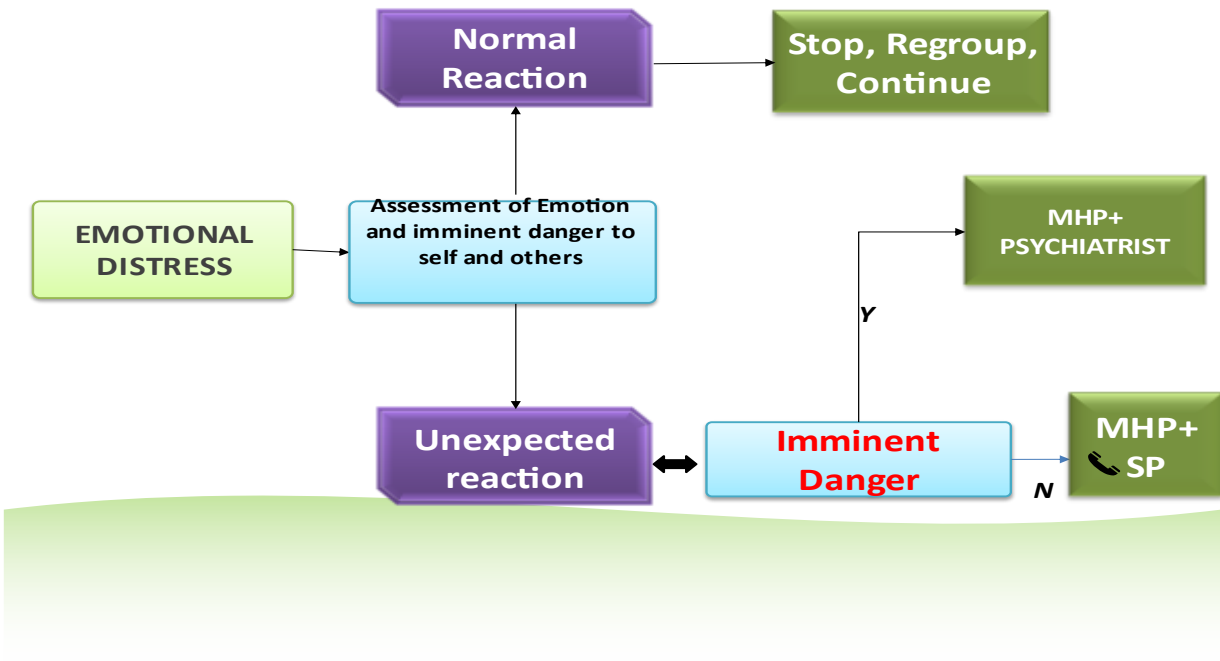
1. Presence of designated Mental Health Care provider at each site linked to Study Psychologist
2. Consent to include, “*because the topic may be sensitive and bring up feelings, some that may cause some participants to be emotional, are you comfortable proceeding with the interview/session?*”

INDICATION OF EMOTIONAL DISTRESS DURING INTERVIEW /SESSION	FOLLOW-UP ACTIVITY AND QUESTIONS	PARTICIPANT BEHAVIOUR AND RESPONSE	ACUTE EMOTIONAL DISTRESS Y/N	IMMINENT DANGER Y/N
Exhibiting indications that the interview is too stressful such as uncontrolled crying, incoherent	<ol style="list-style-type: none"> 1. Stop interview 2. Offer Participant Support and time to regroup 3. Assess Mental State: <ul style="list-style-type: none"> -What are you feeling now? -What thoughts are you 		Determine if the Distress is <i>beyond what would be expected in an interview/Session with a sensitive topic.</i> <i>N- STOP. REGROUP,</i>	<i>N- Mental Health provider</i> <i>Y= Mental Health Provider for immediate referral to Psychiatrist</i>

¹ Lee, R. M. & Renzetti, C. M. (1993). The problems of researching sensitive topics: An overview and introduction. In C. M. Renzetti & R. M. Lee (Eds.), *Researching sensitive topics* (pp. 3–13). Newbury Park, CA: Sage.

² Jorm, A. F., Kelly, C. M. & Morgan, A. J. (2007). Participant distress in psychiatric research: A systematic review. *Psychological Medicine*, 37, 917–926.

speech, lost in flashbacks	having? -Do you feel safe?		CONTINUE IF Y- Offer support as the participant is directed to Mental Health Provider in the Facility	
Indicate they are a harm to self	1. Stop the interview 2. Offer Support as the participant is directed to Mental Health Provider in the Facility who asks: -Tell me what thought you are having? -Do you intend to harm yourself, how, and when? -Determine in participant is Imminent Danger to self			
Indicate they are a harm to others	1. Stop the interview 2. Offer Support as the participant is directed to Mental Health Provider in the Facility who asks: -Tell me what thoughts you are having? -Do you intend to harm others, how, and when? -Determine if the participant is in Imminent Danger or a Danger to others			
Action: Mental Health Provider->Participant linked to Study Psychologist through Phone			Y	N
Action: Mental Health Provider-> Participant linked to Psychiatrist, Notify Study Psychologist and Principal Investigator			Y	Y



APPENDIX F: FACILITATOR'S DELIVERY GUIDE/CHECKLIST

A-Five Step Strategy and Delivery Approach

Take note that delivery starts immediately you finish consenting and pre-assessment (Appendices A and B)

MODULE ONE: UNDERSTANDING MomCare PROGRAM–BASED PM+ (SESSION 1)			
Time	Activity/Content	Teaching/Learning Method	Materials/Resources
2 HOURS (10 minutes break)	<p>Preliminaries</p> <ul style="list-style-type: none"> ▪ Trainers welcome the participants. ▪ Trainers introduce themselves then facilitate the introduction of pax ▪ Group expectations ▪ Goals and objectives ▪ Norming. ▪ General introduction to the intervention <p>Content Delivery Steps</p> <ol style="list-style-type: none"> 1. What is MomCare Program-Based PM+? (Definition) 2. Purpose of is MomCare Program-Based PM+? 3. Reasons for joining MomCare Program-Based PM+ (advantages) 4. Challenges to joining MomCare Program-Based PM+ (disadvantages) 5. Individual goals and purpose <p>Closing the session</p>	<ul style="list-style-type: none"> ▪ Self-introductions ▪ Brainstorming ▪ Open discussion (individuals in the group) ▪ Round sharing ▪ Poster presentation and discussion ▪ Writing on flip chart ▪ Sharing experiences by the participants ▪ Reference to the manual / guide (reading) 	<ul style="list-style-type: none"> ▪ Refreshments ▪ Name tags if available ▪ Participant information and consent forms ▪ Pre-assessment questionnaires ▪ posters ▪ Flipcharts. ▪ Felt pens ▪ Training manual and facilitators guide
MODULE TWO: MANAGING STRESS (SESSION 2)			
2 HOURS (10 minutes break)	<p>Preliminaries</p> <ul style="list-style-type: none"> ▪ Welcome the group back ✓ <i>An introduction where necessary i.e. new member(s) or as a reminder</i> ▪ Recap or review the previous session ▪ Outline today's agenda <p>Content Deliver Steps</p> <ol style="list-style-type: none"> 1. Define “Challenge” – adversity (Appendix D – 1a and b posters) 2. Outline challenges (in pregnancy & others) 	<ul style="list-style-type: none"> ▪ Self-introductions ▪ Brainstorming ▪ Open discussion (individuals in the group) ▪ Round sharing ▪ Poster presentation and discussion ▪ Writing on flip chart 	<ul style="list-style-type: none"> ▪ Refreshments ▪ Name tags if available ▪ Participant information and consent forms ▪ Pre-assessment questionnaires ▪ posters ▪ Flipcharts.

	<ol style="list-style-type: none"> 3. Common reactions to challenges (Appendix D – 2b poster) 4. Define stress, reactions and its effects to the body (Appendix D – 2a and b posters) 5. Steps to managing stress - including breathing exercise (Appendix D – 3a and b posters) <p>Closing the session</p>	<ul style="list-style-type: none"> ▪ Sharing experiences by the participants ▪ Reference to the manual / guide (reading) 	<ul style="list-style-type: none"> ▪ Felt pens ▪ Training manual and facilitators guide
MODULE THREE: MANAGING PROBLEMS (SESSION 3)			
<p>2 HOURS</p> <p>(10 minutes break)</p>	<p>Preliminaries</p> <ul style="list-style-type: none"> ▪ Welcome the group back ▪ Recap or review the previous session ▪ Outline today’s agenda <p>Content Deliver Steps</p> <ol style="list-style-type: none"> 1. Define problem and examples of common problems 2. Discuss solvable and unsolvable problems 3. Purpose of managing problems (Appendix D – 4a poster) 4. Steps to managing problems & what matters (Appendix D – 4b poster) 5. Planning – developing action plans <p>Closing the session</p>	<ul style="list-style-type: none"> ▪ Brainstorming ▪ Open discussion (individuals in the group) ▪ Round sharing ▪ Poster presentation and discussion ▪ Writing on flip chart ▪ Sharing experiences by the participants ▪ Reference to the manual / guide (reading) 	<ul style="list-style-type: none"> ▪ Refreshments ▪ Name tags if available ▪ posters ▪ Flipcharts. ▪ Felt pens ▪ Training manual and facilitators guide
MODULE FOUR: GET GOING; KEEP DOING (SESSION 4)			
<p>2 HOURS</p> <p>(10 minutes break)</p>	<p>Preliminaries</p> <ul style="list-style-type: none"> ▪ Welcome the group back ▪ Recap or review the previous session ▪ Outline today’s agenda <p>Content Delivery Steps</p> <ol style="list-style-type: none"> 1. Define get going 2. Define keep doing 3. Purpose of Get Going, Keep Doing 4. Explain the inactivity cycle(Appendix D – 4c poster) 5. Discuss how the inactivity cycle can be broken (Appendix D – 4d poster) <p>Closing the session</p>	<ul style="list-style-type: none"> ▪ Brainstorming ▪ Open discussion (individuals in the group) ▪ Round sharing ▪ Poster presentation and discussion ▪ Writing on flip chart ▪ Sharing experiences by the participants ▪ Reference to the manual / guide (reading) 	<ul style="list-style-type: none"> ▪ Refreshments ▪ Name tags if available ▪ posters ▪ Flipcharts. ▪ Felt pens ▪ Training manual and facilitators guide
MODULE FIVE : STRENGTHENING SOCIAL SUPPORT AND STAY WELL (SESSION 5)			
2 HOURS	Preliminaries	<ul style="list-style-type: none"> ▪ Brainstorming 	<ul style="list-style-type: none"> ▪ Refreshments

<p>(10 minutes break)</p>	<ul style="list-style-type: none"> ▪ Welcome the group back ▪ Recap or review the previous session ▪ Outline today's agenda <p>Content Delivery Steps</p> <ol style="list-style-type: none"> 1. Introduce/define Strengthening Social Support (Appendix D – 5 poster) 2. Purpose of Strengthening Social Support 3. Obstacles to strengthening social support 4. Linkage (effective referral) 5. Understanding what staying well means and practice <p>Closing the session and ending the intervention</p>	<ul style="list-style-type: none"> ▪ Open discussion (individuals in the group) ▪ Round sharing ▪ Poster presentation and discussion ▪ Writing on flip chart ▪ Sharing experiences by the participants ▪ Reference to the manual / guide (reading) 	<ul style="list-style-type: none"> ▪ Name tags if available ▪ posters ▪ Flipcharts. ▪ Felt pens ▪ Training manual and facilitators guide ▪ Post-assessment questionnaires ▪ Certificate of participation if available
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