

MIRA Makwanpur

Mother Infant Research Activities

(MIRA)



Mother's meeting manual

(For VDC Facilitators)

Facilitation and training division
Hetauda
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1. Introduction

i. Introduction to the manual

This manual is for VDC facilitators to be used when working in MIRA Makwanpur, Mother and Newborn Care Programme, as a guideline for conducting meetings with women's groups. The manual guide us through the first 10 meetings of the action research process and includes methods on how to identify and prioritise maternal and neonatal problems locally. The last meeting in this manual involves the women's group presenting their priority problems to the rest of the community and together developing strategies. The content for the following meetings will depend upon what action and strategies are made at the local level.

ii. Manual Objectives

The objectives of the manual are:

- To make the VDC facilitators aware of their responsibilities
- To provide guidelines to conduct women's group meetings
- To assess maternal and neonatal problems and prioritise them
- To provide skills and guidelines for the future planning process in the community

iii. How to use the manual

- Conduct meetings and discussion as given in the manual
- At the beginning of every session make the objectives of the meeting clear
- Use the methodology given in the manual, but adapt it according to the local situation
- Try to complete the discussion within the given time
- Try to motivate the women inbetween the discussion
- Try to make the discussion easy and participatory

iv. Formatting guideline

Objectives are written in this style.

Instructions are written in this style.

Inside this type of box is an important message or a story for you to use during the meeting.

Inside this type of box is an example to guide the manual's instructions.

Inside this type of box is a saying or a proverb

2. Aim of MIRA Makwanpur

MIRA Makwanpur is a research collaboration between Her Majesty's Government of Nepal, Mira (Mother, Infant, Research Activities) and ICH, (Institute of Child Health), London. The aim is to improve maternal and neonatal health through sustainable interventions.

i. The objectives of MIRA Makwanpur

- Increased awareness of maternal and neonatal problems and ways of approaching it in the community.
- Increased number deliveries attended by a trained person in a clean environment.
- Improved knowledge and skills of health workers.
- Improved availability and use of antenatal care, safe delivery kits and referral systems.

3. VDC facilitator responsibilities

The role and responsibilities of the VDCf are as follows:

1. to assess and select mothers group for the programme
2. activate and strengthen the selected groups
3. where there is no group to form another one
4. conduct regular discussion and meetings with the mothers
5. the following work will be done with the mothers group
6. to support to identify maternal and neonatal problems
7. to help in prioritising those problems
8. to facilitate to identify possible solutions of those problems
9. to support in community planning process

4. Role of the mother's group

The role of the ward mothers groups:

- regular meeting (twice a month)
- identify maternal and neonatal problems and prioritise them
- identify possible solutions
- to plan, implement and monitor for these solutions in the community
- information discussed in the meeting should be shared with other women
- to participate actively in health related activities in the community

REMEMBER

Rapport is not built once at the first contact, but is a continual process.

REMEMBER

To informally chat before each meeting begins and finishes.

5. Guideline for conducting mothers group meeting

Meeting 1

Purpose

a) to introduce the group to MIRA Makwanpur's work

Methodology

Presentation, discussion

Materials needed

Newsprint, markers, map of Makwanpur district showing MIRA's working VDCs, MIRA's logo

Time taken

2 hours

Activities

a) to introduce the group to MIRA Makwanpur's work

Discuss what the women have heard about MIRA and what they think are its activities. List the answers on newsprint.

Show the women MIRA's logo and clarify the meaning of MIRA and its work.

MIRA started in 1994 in Kathmandu.
It is a Nepali NGO.
MIRA is a research organisation.
MIRA does not work in TB, ulcers or cancer but works with mother and newborn's health.

Clarify the work of MIRA Makwanpur Mother and Newborn Care Programme.

Research of mother and newborn.
MIRA will work for 3 years in Makwanpur district.
MIRA is a research activity, not a big project
Only the collection of data

Show the map of Makwanpur district and point out the working VDCs or show a list of the working VDCs.

MIRA Makwanpur is working in 24 out of 43 VDCs in the district.

Intervention	Control
Padam Pokhari	Hatiya
Ambhanjyang	Shikharpur
Phakhel	Sisneri
Manthali	Sukaura
Betini	Kogate
Bhaise	Namtar
Bhimfedi	Markhu
Churemai	Shreepur Chhatiwani
Daman	Gogane
Nibuwater	Kulekani
Dadakharka	Barta
Harnamadi	Dhiyal

Explain about the different divisions in MIRA Makwanpur.

Mira Makwanpur has 5 divisions, out of the 5 divisions, 3 will be working directly with the community:

1. Facilitation team
In 12 VDCs out of 24 with MIRA will work with women's groups to try and develop local strategies to reduce the number of mothers and babies, which die during and after birth
2. Monitoring team
Who are collecting information related to mothers and newborns in all 24 VDCs.
3. Health service team
Who are training and strengthening the staff of the hospital, PHC/HP and SHP.
4. data
5. administration

Explain MIRA Makwanpur's work with woman's groups.

Women's groups
Meet every 2 weeks to identify together the maternal and neonatal problems in the community.
Work together to prioritise these problems.
With the rest of the community develop local strategies to address these problems and implement them.

**Sometimes when you speak no-one is listening.
If they are listening, they may not understand.
If they understand, they may not put this into practice.**

Meeting 2a
(For groups of less than 10 women)

Purpose

- a) *to discuss why mothers and newborn's die*
- b) *to introduce how MIRA will work in the community*

Methodology

Story telling, discussion

Materials needed

Newsprint, markers, story card

Time taken

2 hours

Activities

- a) *to discuss why mothers and newborn's die*

Tell the women the story of Sunita's son.

Story of Sunita's son

There was mother called Sunita who lived in a village in Makwanpur. She already had two daughters and was pregnant for the third time. Sunita did not have any problems during pregnancy, but went to visit the health post, as her mother-in-law heard that every mother should have an injection during pregnancy. Sunita walked for an hour and reached the health post. When she arrived, there was no one but the peon and he told her to come back another day. So Sunita walked back home.

She did not go to the health post again, it was time to sow soya bean and millet in the fields.

One day, when returning from working in the fields, Sunita felt the pains of labour, she could hardly move the pain was so strong. She started to prepare food, but soon after her waters broke. Sunita sent her little daughter to fetch her mother-in-law from the fields. But by the time her mother-in-law came Sunita had already given birth to a baby son. Sunita used an old razor blade that was kept on the shelf to cut the umbilical cord.

Sunita and her husband were very happy, as they had a son. They need not worry about their future now.

Four or five days after birth, Sunita was sitting in the corner when her son seemed to find it difficult to suck at the breast. He also felt a bit hot. Sunita was scared and did not say anything in the hope that he would get better. By the next morning, her son was not feeding at all and his body felt a bit stiff. She spoke to her mother-in-law, who in turn spoke to Sunita's husband and he brought the dhama jankheri. The dhama jankheri performed a blessing for a whole day but by now Sunita's son kept having spasms where his body tightened and his back and neck bent backwards. The dhama jankheri said that he could do no more and so Sunita's husband borrowed Rs. 500 from his neighbours and they went straight to the district hospital.

At the hospital Sunita and her husband had to wait for 2 hours before seeing a doctor. When they finally saw the doctor, he told them that the illness was called tetanus and was very serious. Their son needed injections, which were very expensive, but he did not have them in this hospital. They would need to take their son to Kathmandu, which was 4 hours away by bus. Sunita and her husband despaired, they only just had enough money for the bus fare, what about money for medicine? They did not know anyone in Kathmandu, where would they stay? They thanked the doctor and paid his fee and went to the bus stop to get the bus back to their village and think about what to do. Two days later their son died.

Discuss what were the causes of Sunita's son's death by playing the 'but why...?' game.

The 'but why...?' game
 Q: Why did Sunita's son die?
 A: Tetanus
 Q: But why did the tetanus bacteria attack Sunita's son and not someone else?
 A: Because Sunita did not have a TT injection.
 Q: But why did Sunita not have a TT injection?
 A: Because only the peon was at the health post.
 Q: But why was the peon alone in the health post?
 A: Because the doctors are absent.
 Q: So what are the other reasons why Sunita's son died?
 A: Because Sunita used an old blade to cut the cord
 Q: But why did Sunita use an old blade?
 A: Because she did not have a new one
 Q: But why did Sunita not buy one?
 A: Because she was busy working in the fields
 Q: But why was Sunita busy working in the fields?
 A: Because they need food to eat
 Q: So what are the other reasons why Sunita's son died?
 A: The hospital did not have the medicines
 Q: Why did the hospital not have the medicine?
 A: Because it is expensive
 Q: But why are life saving drugs so expensive?
 A: Because it has taken a long time to make them
 Q: Let's go back again for a minute. Are there any other reasons why Sunita's son died?
 A: Because they did not go straight to Kathmandu
 Q: But why did Sunita and her husband not go straight to Kathmandu?
 A: Because they did not have the money.

Continue with the game until you have at least 3-4 causes of Sunita's son's death

Write the causes of death on a sheet of newsprint.

Read through all the answers on the newsprint.

There are many reasons why Sunita's son died.
 The reasons are not always medical.
 A chain of events led to the death of Sunita's son.
 The causes of death here are social, economic, political etc.

b) to introduce how MIRA will work in the community

Ask, are there any of the reasons why Sunita's son died, which we could have helped with?

Look at the example in the box below.

Cause of death	Possible solution	Better solution
Tetanus	Establish MIRA clinics.	MIRA is working with the health post staff to try and improve this situation. Find out when and where TT injections are available? During NID and ANC? Take TT injection during pregnancy.
Old blade	MIRA supplies blades to pregnant women.	Are razor blades available in the bazaar? Make sure pregnant women buy one. Are SDKs available in the bazaar, SHP? If no, how do we ensure a supply?
Lack of knowledge	MIRA organises training for the women's group.	MIRA and women's group organise mass communication activities.

Explain, how MIRA Makwanpur will work.

MIRA's will not build our own clinics, as when we leave, who will run the clinics?
MIRA will work with you to identify the biggest maternal and neonatal problems in the community which lead to death.
This is operational research, which gives us an opportunity to analyse the situation with the community and plan accordingly at the local level.

If the women of the group want more information on tetanus, link up with the health post staff, (ANM, MCHW or TBA) to arrange a session.

Meeting 2b (For groups of more than 10 women)

Purpose

- a) to discuss why mothers and newborn's die
- b) to introduce how MIRA will work in the community

Methodology

Experience sharing, discussion

Materials needed

Newsprint, markers

Time taken

2 hours

Activities

- a) to discuss why mothers and newborn's die

Ask, does anyone have any experience of a mother dying while she was pregnant, or during birth? Or of a baby being born dead or dying soon after birth?

Probe, by giving examples.

Write the examples on a sheet of newsprint.

Explain, that there are many reasons why mothers and newborn babies die. The reason is not always due to a disease, there are many different causes of death – social, economic etc.

- b) to introduce how MIRA will work in the community

Ask, are there any of these deaths we have just written on the newsprint, which we could have done something about?

Ask, what type of things do we need in this community to stop mothers and baby's from dying?

Write the examples on a sheet of newsprint.

Go through each example and discuss whether this solution is suitable or not for this community.

Look at the example in the box below.

Cause of death	Possible solution	Better solution
Tetanus	Establish MIRA clinics.	MIRA is working with the health post staff to try and improve this situation. Find out when and where TT injections are available? During NID and ANC? <u>Take TT injection during pregnancy.</u>
Old blade	MIRA supplies blades to pregnant women.	Are razor blades available in the bazaar? Make sure pregnant women buy one. Are SDKs available in the bazaar, SHP? If no, how do we ensure a supply?
Lack of knowledge	MIRA organises training for the women's group.	MIRA and women's group organise mass communication activities.

Explain, how MIRA Makwanpur will work.

MIRA's will not build our own clinics, as when we leave, who will run the clinics?
MIRA will work with you to identify the biggest maternal and neonatal problems in the community which lead to death.
This is operational research, which gives us an opportunity to analyse the situation with the community and plan accordingly at the local level.

If the women of the group want more information on tetanus, link up with the health post staff, (ANM, MCHW or TBA) to arrange a session.

Meeting 3

Purpose

a) to find out how women understand maternal and neonatal problems

Methodology

Open questions, story telling

Materials needed

Newsprint, markers, story card

Time taken

1.5 - 2 hours

Activities

a) to find out how women understand maternal and neonatal problems

Tell the story of Janaki

The story of Janaki

Not so long ago there was a young health worker named Janaki, who lived in a small village in the Terai. After making a list of the health problems in her village, Janaki realised that one of the biggest problems was that women did not eat well during pregnancy. They ate very little and were very thin. Many of their babies were born small and thin and many died. Some mothers also died when giving birth as they were so weak and lost lots of blood.

Janaki began to call women together on Tuesday afternoons to teach them about eating good food during pregnancy. She told them about vitamins and minerals and which foods contained iron. She used pictures and drawings and asked the mothers to bring different vegetables from the bazaar.

As the months went by, nothing changed. Mothers came to the meetings but when they were pregnant they did not eat more.

One night one of the mothers who came regularly to the meetings did not come as she was giving birth. She lost a lot of blood during childbirth, her baby was born dead and she died as well. Janaki felt terrible, she thought she was teaching well, so why did this woman die? She went to speak to a wise old woman, who everyone went to for advice. The wise old woman told Janaki: *'You have been telling women that eating more during pregnancy will make their babies big. But mothers here, do not want big babies, if a baby is too big, it will be difficult to give birth. In our community we like to give birth to babies who are strong (dhatu) not big.'*

So Janaki thought, which foods give strength to a woman during pregnancy? When a mother is pregnant, she needs to be twice as strong, as she has to share her strength with her baby in her stomach. If a mother is not strong, then she will find birth difficult. So we must eat foods, which give us lots of strength.

Next time Janaki sat with the women she spoke of foods which make your baby strong, not about foods which make your baby big and her class was very successful.

Discuss the following:

- What was Janaki trying to do?
- What was she doing wrong?
- Why did the mothers not follow her advice?
- What did the old woman tell her?
- Do we also feel the same about having big babies?
- Is it better to have a baby that is strong, than big?

Speak about 'learning together'

There are many different ways of learning. We can learn from the TV, from posters, from books, from the radio.

Mira wants to work with women's groups in the community.

Janaki was also trying to work with women's groups.

But she did not the women's problems and she did not listen.

We want to listen. We want to understand what the local problems are.

An outsider has to listen before understanding.

Meeting 4

Purpose

a) *to find out what kind of maternal and neonatal problems are in the community*

Methodology

Open questions, discussion, picture cards

Materials needed

Newsprint, markers, picture cards

Time taken

2 hours

Activities

a) *to find out what kind of maternal and neonatal problems are in the community*

Collect the women group's maternal and neonatal problems:

Place all the picture cards on the floor.

Ask each women to select one.

Ask each women in turn, to describe the problem which she sees in the picture, what it is called (if it has a particular name), what causes this problem, what to do when this happens, if you don't do anything what happens and is it common here?

Write down the descriptions in a table on newsprint (see example in the box).

If there are any problems other than what is shown in the picture cards, please add.

Problem	What is it called locally?	What causes this problem?	What to do when this happens?	If you don't do anything, what happens?	Does this problem occur here?

Meeting 5

Purpose

a) to discuss whether the maternal and neonatal problems in the last meeting are common in this community

b) to identify strategies to collect information from other women in the community on their maternal and neonatal problems

Methodology

Discussion

Materials needed

List of problems from the last meeting, newsprint, markers

Time taken

2 hours

Activities

a) to discuss whether the maternal and neonatal problems in the last meeting are common in this community

Remind the women of the list of problems, which was developed at the last meeting.

Ask, the women to think and discuss about the problems of their neighbours.

List any other problems.

b) to identify strategies to collect information from other women in the community on their maternal and neonatal problems

Discuss the following:

What information do we need? For the past 1-2 years?

How can we collect this information?

What material can help us to collect this information?

Collect the ideas from the women.

Select the appropriate idea.

If needed, practice.

Organise home visits or meetings.

Arrange time limit on collecting information (2-4 weeks) and supervision during this time.

You can lead a horse to water, but you can't make it drink

Meeting 6

Purpose

- a) to share the information collected from other women in the community*
- b) to decide what are the three most important maternal and neonatal health problems that need to be addressed in the community*

Methodology

Picture cards, presentation, discussion

Materials needed

Newsprint, markers, tape

Time taken

2-3 hours

Activities

- a) to share the information collected from other women in the community*

Attach each picture card to a sheet of newsprint.

Ask each woman in turn to talk about her interview/s and if a maternal and/or neonatal problem was identified to write a tick on the newsprint under the picture, which represents this problem.

If the problem is not represented by the picture cards, then the facilitator should write the problem on a separate sheet of newsprint and the women can tick underneath this

- b) to decide what are the three most important maternal and neonatal health problems that need to be addressed in the community*

Discuss the results shown on the newsprint.

Ask which three are the most important maternal and neonatal problems, to try to deal with in the community?

Discuss and arrive at a consensus of the three priority problems.

Discussion points:

What are the most frequent problems that we see on the newsprint?

What problems are directly related to maternal and neonatal health?

Can we deal with these problems in the community?

<p>REMEMBER A problem should be: frequent, severe and feasible</p>
--

Meeting 7

Purpose

a) to discuss possible strategies for addressing the priority problems.

Methodology

Discussion

Materials needed

Newsprint, markers

Time

1-2 hours

Activities

a) to discuss possible strategies for addressing the priority problems.

Remind the women of the three priority problems, which were identified in the last meeting.

With the first problem, ask, what could we do when this problem arises?

Discuss the different strategies for this problem. Probing maybe needed.

List the different strategies.

Explore, what resources the community has to deal with this problem?

List the resources (see box of possible resources).

Discuss, the strategies and the resources and make realistic strategies.

List the realistic strategies.

Repeat these steps for the second and third priority problems.

Fill out the table provided (see example box).

Possible resources

Who	What can they do
Mother's group	Inform Create awareness Demand Create pressure Contribute labour Provide local equipments Generate income to spend on health Plan, implement, monitor and evaluate the activities (attendance and participation)
MIRA	Facilitate Create awareness Provide tea money Mobilise group Co-ordinate and liaise with other organisations Strengthen the health institutions (training, essential drugs and equipment through DHO)
Community	Participate in the different strategies Support Suggest Provide public property, such as a stretcher, building, furniture, equipment, utensils Demand and create pressure
S/HP/PHC	Provide health service and treatment Provide medicine Refer Suggest and counsel Run outreach and immunisation clinic Mobilise group through FCHV Create awareness Organise health camp Provide training Co-ordinate and mediate
VDC	Create awareness Support economically Provide leadership Design and monitor strategies Suggest and provide feedback Strengthen the health committee
Other organisations	Construct physical infrastructure Provide medicines and equipment Mobilise group Organise health camp and clinics Support economically Provide training

Example

Prioritised problems	Possible strategies	Resources available	Realistic strategies
1. Retained placenta	<ul style="list-style-type: none"> - Immediately take the mother to nearest health facility - Get a stretcher - Street drama to create community awareness 	<ul style="list-style-type: none"> - Health facility - Mothers group - MIRA - MIRA - Families of mother's group members - MIRA - women's group 	<ul style="list-style-type: none"> - training of ANM - mother's group teaches other women about the danger of a retained placenta - MIRA provides seed money. With this the mother group buys a stretcher and starts an emergency fund. - MIRA organises street drama - Mother's group provides food and accommodation
2. cold baby	<ul style="list-style-type: none"> - Information for mother's about caring for a cold baby 	<ul style="list-style-type: none"> - MCHW and FCHV 	<ul style="list-style-type: none"> - ask FCHV or MCHW to inform mothers about cold babies at the regular meeting

2. cold baby (continued)	- FCHV training	- S/HP - MIRA	- MIRA gives additional FCHV training
3. vaginal discharge during pregnancy	- Information to mother's about vaginal discharge and related disorders - Health camp for women - Checkup and medicine	- MCHW and FCHV - Other organisations working in the health sector - S/HP - FPAN	- ask FCHV or MCHW to inform mothers about vaginal discharge at the regular meeting - Mother's group and local leaders lobby all health organisations to provide these services - attend FPAN clinic - attend ANC at the outreach clinic, S/HP or hospital.

The problems and their corresponding 'realistic' strategies will be discussed further and decisions made with the rest of the community in the 10th meeting

If needed this meeting can be repeated

The supervisors should try and attend this meeting

Meeting 8

Purpose

- a) to discuss which other community members should be involved in developing strategies.*
b) to discuss how the women could present their three maternal and neonatal problems to the other community members.

Methodology

Discussion

Materials needed

Newsprint, markers

Time

1-2 hours

Activities

- a) To discuss which other community members should be involved in developing strategies*

Ask, who should be involved in addressing these problems? (husbands, SHP staff, ward chairman etc)

Write a list on newsprint.

Ask, the women if they all agree with the list of people.

- b) To discuss how the women could present their three maternal and neonatal problems to the other community members*

Ask, what information do we need to present to the other community?

How the women selected the three problems.

What the are three problems.

What are the possible strategies to address these three problems.

Ask, what are the best ways of presenting this to other community members?

Verbal presentation of how the problems were selected?

Sociodrama to demonstrate barriers to solving one of the priority problems?

Discuss, who will be involved in and responsible for which part of the preparation?

logistics and invitations?

verbal presentation?

sociodrama?

Make a list of materials needed and respective responsibilities for what.

Meeting 9

Purpose

a) to prepare for the community members meeting

Methodology

Discussion, practice

Materials needed

Newsprint, markers

Time

2-3 hours

Activities

a) to prepare for the community members meeting

Discuss about preparing the logistic details.

Discussion points:

When will the community meeting take place?

Where will it take place?

Who will invite the participants?

How will they be invited? (verbally, by letter)

Who will be responsible for this?

Discuss about preparing the verbal presentations.

Discussion points:

Who can explain what the group did, at the community meeting?

Who can explain about the three problems, at the community meeting?

Who can explain about the strategies, at the community meeting?

What is the best way of presenting this information? (charts, drawings)

Should one woman explain all or should different women explain different things?

Discuss about preparing the socio-drama

What should the drama be about?

Who will write the story?

Who will perform as actors?

REMEMBER FOR THE SOCIO-DRAMA
The main theme must be the priority problems.
The scenario presented to illustrate the problems must be a real one.
The women do not have to be the only actors. The VDCf must consider participating.

REMEMBER
Practice makes perfect!

Meeting 10

(note, the supervisor should be present for this community meeting)

Purpose

- a) *the community members will learn about what the women have been doing*
- b) *the community members will learn about the three problems identified by the women*
- c) *the community members will learn about the possible strategies that the women have suggested to address the three problems*
- d) *to reach a consensus of the strategies*

Methodology

Presentation, sociodrama, discussion

Materials needed

Presentation materials

Time

3 hours

Activities

a) *the community members will learn about what the women have been doing*

The VDCf needs to open the meeting, briefly introduce MIRA Makwanpur, and introduce the women, their work and the purpose of this meeting to the community members.

b) *the community members will learn about the three problems identified by the women*

The women present how the information on the problems was collected.

The women need to present their three priority problems (verbal presentations OR socio-drama OR both).

c) *the community members will learn about the possible strategies that the women have suggested to address the three problems*

The women need to present their three problems and the possible strategies to address these problems.

Example

Prioritised problems	Realistic strategies
1. Retained placenta	<ul style="list-style-type: none"> - training of ANM - set up perinatal emergency fund - MIRA organises street drama - Local club provide actors - Mother's group provides food and accommodation
2. cold baby	<ul style="list-style-type: none"> - ask FCHV or MCHW to inform mothers about cold babies at the regular meeting - MIRA gives additional FCHV training
3. vaginal discharge	<ul style="list-style-type: none"> - attend FPAN camps - Mother's group and local leaders lobby all health organisations to provide these services - ask FCHV or MCHW to inform mothers about vaginal discharge at the regular meeting

d) Agree on the strategies

The VDCf needs to show the table of strategies on newsprint (such as the one in the box below).

Add any strategies that have been developed from the meeting and remove any strategies that are not considered suitable.

Reach a consensus on the strategies.

Develop a plan for each strategy. When will the strategy be implemented? Who will be responsible for each strategy?

Example

Prioritised problems	Realistic strategies	When the strategies will be implemented	Person responsible
1. Retained placenta	<ul style="list-style-type: none"> - training of ANM - set up perinatal emergency fund - MIRA organises street drama - Local club provide some actors - Mother's group provides food and accommodation 	<ul style="list-style-type: none"> - January 2002 - next mother's group meeting - December 2001 - December 2001 - December 2001 	<ul style="list-style-type: none"> - MIRA, DHO, ANM - VDCf, mother's group - MIRA - Local club - Mother's group
2. cold baby	<ul style="list-style-type: none"> - ask FCHV or MCHW to inform mothers about cold babies at the regular meeting - MIRA gives additional FCHV training 	<ul style="list-style-type: none"> - October mother's group meeting - MIRA and DHO confirm date, VDCf informs mother's group 	<ul style="list-style-type: none"> - VDCf, FCHV, mother's group - MIRA, DHO
3. vaginal discharge	<ul style="list-style-type: none"> - attend FPAN camps or clinic - Mother's group and local leaders lobby all health organisations to provide these services - ask FCHV or MCHW to inform mothers about vaginal discharge at the regular meeting 	<ul style="list-style-type: none"> - VDCf finds out time and venue of clinic - discuss how to take this strategy further in the next mother's group meeting - September mother's group meeting 	<ul style="list-style-type: none"> - VDCf - VDCf, mother's group, local leaders - Women's group, FCHV, VDCf

Thank the participants for their contribution and participation.

Close the meeting.

If the mothers are not confident conducting activities, the VDCf or supervisor should present.

REMEMBER The first few series of meetings are about strengthening the group and its capacity. Listen to the women's needs. If there is a need for literacy classes, link up with a literacy organisation, if there is a need for savings and credit, link up with a savings and credit organisation.