Session 9: Designing an emergency IYCF Counselling Programme - INSTRUCTIONS

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| Duration | 55 minutes (5 minutes intro, 20 minutes groupwork, 20 minutes group presentations (5 mins/group), 10 minutes plenary discussion and feedback)​ |
| Activity Type | Small groupwork |
| Purpose | 1. To build on learning from the session and explore how to design a contextually appropriate IYCF counselling programme in an emergency, recognising which are acceptable compromises and adaptations to make to non-emergency IYCF counselling programmes. 2. To become familiar with the Operational Guidance: Breastfeeding Counselling in Emergencies (OG-BFC/E) document as a key global guidance document |
| Materials | * Activity Materials \_Designing a Counselling Programme \_Case Study * A. Activity Materials \_ Designing a Counselling Programme \_Group1\_Recipients * B. Activity Materials \_ Designing a Counselling Programme \_Group2and3\_Timing and Frequency * C. Activity Materials \_ Designing a Counselling Programme \_Group4\_Mode * Training Aid: Operational Guidance on Counselling in Emergencies (ENG only) * 4 sets of flipchart paper and marker pens |
| Preparation | Print out 8 copies of:   * Activity Materials \_ Designing a Counselling Programme \_Case Study   Print out 3 copies of:   * A. Activity Materials \_ Designing a Counselling Programme \_Group1 \_Recipients * C. Activity Materials \_ Designing a Counselling Programme \_Group4\_Mode   Print out 6 copies of:   * B. Activity Materials \_ Designing a Counselling Programme \_Group2and3\_Timing and Frequency |
| Trainer Instructions | It is possible to run this activity with one trainer, however it is recommended to have more than one trainer to move between the groups and support their discussions as needed. |

# INSTRUCTIONS

* 1. SAY: We learned that, despite the perceived difficulty of establishing breastfeeding counselling services in emergencies it IS possible to establish or to re-establish breastfeeding counselling services and to improve breastfeeding practices, even in the midst of a crisis. ​
  2. EXPLAIN the purpose of the activity (above)
  3. ARRANGE participants into 4 groups
  4. PROVIDE each group with the following materials:
* 2 copies of the Activity Materials \_ Designing a Counselling Programme \_Case Study
* 3 copies of the relevant Activity Materials per group

1. Group 1: A. Activity Materials \_ Designing a Counselling Programme \_Group1 \_Recipients
2. Groups 2: B. Activity Materials \_ Designing a Counselling Programme \_Group2and3\_Timing and Frequency
3. Groups 3: B. Activity Materials \_ Designing a Counselling Programme \_Group2and3\_Timing and Frequency
4. Group 4: C. Activity Materials Designing a Counselling Programme \_Group4\_Mode
   1. Focus each group on their assigned questionTIME the groupwork (25 minutes total), giving participants several updates on the time and encouraging them to move towards writing their answers on the flipchart after the first 15 minutes have passed.
   2. TIME the presentations (5 minutes per group)
   3. ASK participants to reflect on all four presentations and provide feedback as needed, using the discussions points below (10 minutes total)

# POSSIBLE ANSWERS

## Group 1:

* It Is not possible to reach all caregivers
* Compromise: prioritise using the Simple Rapid Assessment (SRA) tool
* Consider including mothers-In-law In IYCF counselling sessions (or other activities), as many are part of the IDP population (hint: " Many are women, children and the elderly") and they are Identified as key Influencers
* Groups of concern mentioned in the case study: newborns (4% pregnant - some will give birth soon), survivors of SGBV, caregivers with signs of extreme distress, caregivers or infants who are temporarily disabled (Injured). With the poor sanitation conditions, infectious disease outbreaks are a risk and we may expect to see some unwell (severely Ill) mothers as well.

## Group 2:

* The priority is to ensure groups requiring immediate help and high-risk groups are counselled on time.
* Requiring Immediate help: caregivers currently experiencing IYCF difficulties
* Lifestages to prioritise: the time around birth, especially In the Immediate postnatal period (note the high prevalence of difficult births, little breastfeeding support in maternity settings, and nearby BMS distributions)
* Also consider prioritising around 3 - 4 months, as mothers are introducing foods too early as they worry they do not have enough milk.

## Group 3:

* When counselling a caregiver with existing challenges or concerns, counselling is provided as frequently as needed (depending on the case)
* Adaptation: more frequent follow-up than in non-emergency settings

## Group 4:

* Consider providing both remote and In-person counselling
* Given the overcrowded conditions and the fact that breastfeeding in front of men Is not culturally acceptable to many, consider setting up Mother Baby Areas within the makeshift camps and other overcrowded areas.
* Make use of the network of highly skilled lactation consultants, by connecting caregivers experiencing more complex IYCF difficulties with these counsellors. (Internet and smartphone usage Is high)