

Engaging Men to Improve Maternal and Newborn Health

FACILITATOR'S GUIDE 3-DAY TRAINING



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OVERALL AGENDA

Training of Trainers Workshop for Engaging Men to Improve Maternal and Newborn Health

THREE-DAY TOT WORKSHOP PLAN

DAY ONE		
Time	Activity or Session	√ for skip*
8:00 – 8:30	Introductions	
8:30 – 10:30	Session 1: Basic Concepts	
10:30 – 10:45	Break	
10:45 – 12:30	Session 2: Behaviors of Men and Social Norms	
12:30 – 1:30	Lunch	
1:30 – 2:30	Session 3: Selecting the Change Agents	
2:30 – 3:30	Session 4: Responsibilities of the Change Agents	
3:30 – 3:45	Break	
3:45 – 5:00	<i>Session 4 continues</i>	
DAY TWO		
8:00 – 8:30	Review of previous day	
8:30 – 10:30	Session 5: Practicing Negotiation for Behavior Change	
10:30 – 10:45	Break	
10:45 – 12:30	Session 6: Training Change Agents to Do Follow-Up Visits and Solve Problems	
12:30 – 1:30	Lunch	
1:30 – 3:30	Session 7: Supportive Supervision of Change Agents	
3:30 – 3:45	Break	
3:45 – 4:15	Session 8: Change Agent Record-Keeping and Interpreting Data	
4:15 – 5:00	Session 9: Organizing and Evaluating Activities for Community Awareness	
DAY THREE		
8:00 – 8:30	Review of previous day	
8:30 – 10:30	Session 10: Planning Training of Change Agents	
10:30 – 10:45	Break	
10:45 – 12:30	<i>Session 10 continues</i>	
12:30 – 1:30	Lunch	
1:30 – 3:30	Session 11: Materials for Change Agents	
3:30 – 3:45	Break	
3:45 – 4:45	Session 12: Next Steps and Closing	

* Use this column to mark sessions that are skipped or covered quickly if the pre-test or a training needs assessment shows that trainees have a complete understanding of a topic.

MATERIALS NEEDED FOR THE WORKSHOP:

Blank flip chart paper – 40 to 50 sheets

Large yellow sticky notes – 1 package

Marking pens in black, green, blue, brown

Masking tape – 2 rolls

Blank sheets of printer paper – 50 or fewer sheets

Specific flip charts are required for different sessions and will need to be prepared in advance. Please, review the session instructions ahead of time to learn what to prepare.

PLEASE READ ALL INSTRUCTIONS BELOW FOR ALL SESSIONS *BEFORE* STARTING THE WORKSHOP!

DAY ONE

INTRODUCTIONS (30 MINUTES)

- a. Icebreaker chosen by the facilitator or led by a workshop participant (**15 minutes**)
- b. Each participant introduces himself/herself (**15 minutes**)

SESSION 1: BASIC CONCEPTS (2 HOURS)

Materials:

Flip chart prepared with the overall workshop objectives

Flip chart prepared with the definition of *gender equity and gender equality* (keep covered until needed)

Flip chart with objectives for engaging men in maternal child health (MCH) behavior change

Flip chart with the Nicaragua results (outcome indicators)

Session Objectives:

At the end of this session, participants will be able to:

1. Describe the roles men currently play related to MCH
2. Articulate the difference between gender equity and gender equality
3. Explain what we mean by engaging men in MCH behavior change

1. Reflection and writing (30 minutes)

- a. Give each participant two large yellow sticky notes. Ask them to think about the men (husbands and fathers) in the target population. What specific positive roles do these men play in the health of their wives and children? Participants will **write** one idea on their first sticky note, using large letters. (**5 minutes**)
- b. When they finish, have them put the notes on a wall space one-by-one, with each participant reading aloud his or her idea. (**5 minutes**)
- c. The facilitator will ask two participants to come forward and group like responses into categories. (Example: growing food for the family, buying food, paying for health care, etc. would fall under the “Provision” category. Other possible categories may include Care-giver, Decision-Maker, etc.) The facilitator will quickly write headings to post at the top of each category on the wall. (**5 minutes**)

- d. Ask the participants to **write** ideas on the second sticky note of how men may have a negative influence on the health of their wives and children. They should be realistic, giving ideas from experience in the project to date rather than stereotyping. *(5 minutes)*
- e. Repeat the process of reading and categorizing the notes. (A category should emerge for Impeding Access to Health Services.) *(10 minutes)*

2. Drawing (35 minutes)

- a. Divide the participants into two groups; give each a flip chart and markers. Ask them to **draw** the perceived gender roles in the target population. Have one group draw the local expectations in relation to pregnancy, and have the other group draw the gender roles in relation to post-delivery. What is the husband's role and what is the woman's role? *(15 minutes)*
- b. When the drawings are done, have participants tape them to the wall. Have both groups gather close to the drawings. They can ask the other group for explanation of anything that is not clear in the drawing. *(10 minutes)*
- c. **Ask:** What are desired practices that the project is promoting for women during pregnancy? For example, to eat more variety and work less during pregnancy or attend four ANC consults. For post-delivery, desired practices include seeking post-natal care, breastfeeding on demand, eating more, and so on. **Ask:** Considering the roles shown in the drawings, do the men have anything to do with these desired practices? Keep the discussion focused on current roles. **Ask:** Do the men even know about the desired practices? Have the participants return to their seats. *(10 minutes)*

3. Discussion using flip charts (15 minutes)

Write the words *gender equality* on the top of a flip chart. Ask the participants to define this term. Write their ideas on the flip chart. Now, ask them if they are familiar with the term *gender equity*. How is it different from *gender equality*? Show the definition on the prepared flip chart.

FLIP CHART

Gender equity refers to fairness and justice in the distribution of benefits and responsibilities between women and men. The concept recognizes that women and men have different needs and strengths and that these differences should be identified and addressed to rectify the imbalance between the sexes.

Gender equality is the absence of discrimination on the basis of a person's sex in providing opportunities, in allocating resources and benefits or in access to services.

WHO Gender Mainstreaming Strategy, 2009

4. Presentation by facilitator (40 minutes)

- a. **Ask:** Why might it be important to involve men if we want to improve maternal and newborn health? List ideas on a flip chart as participants give their ideas. Ideas may include the following: men often control family resources needed for transportation or medical expenses, men are the decision-makers in the household, men make decisions about what a woman may do and where she can go, women are expected to give the man the best food and do the work he demands, men expect women to do all the child care and housework, and so on. *(15 minutes)*

Explain: Usually, when we think of MCH practices or behaviors we are thinking of what the woman should do, as we just discussed using the drawings. The concept of engaging men focuses on the responsibilities of men as fathers and husbands, beyond the usual gender roles we wrote on the sticky notes. This concept was introduced in Nicaragua Child Survival Health Grants Program and improved project outcomes. Show the flip chart with the Nicaragua results. *(10 minutes)*

- b. Explain that this workshop aims to help participants gain facilitation skills to train change agents/counselors in how to support men to try new behaviors. Show the flip chart with the objectives for this workshop. *(5 minutes)*

FLIP CHART

Workshop Objectives

By the end of this workshop, participants will be able to:

1. Demonstrate facilitation skills needed to train volunteers to promote change among men
2. Practice key methods including negotiation for behavior change and supportive supervision
3. Describe the concepts behind engaging men in improving maternal and newborn health and the process for working with men
4. Plan the steps for selecting and training volunteer change agents and for developing materials they will use

- c. Show the flip chart with the outcomes for engaging men in MNCH behavior change and ask a different participant to read each outcome. Explain that the purpose of this workshop is to prepare the participants to train the volunteers who will have a key role in implementing the initiative Engaging Men to Improve Maternal and Newborn Health. *(5 minutes)*

FLIP CHART

Outcomes of applying the methodology for Engaging Men in MNCH Behavior Change:

1. Understand how men perceive their role from their point of view.
2. Increase men's comfort with seeing themselves as responsible, caring partners.
3. Facilitate a supportive environment at different levels (household, community and facility) for men to practice and adopt desired MNCH behaviors.

- d. Distribute the workshop agenda and review each day quickly. *(5 minutes)*

COFFEE BREAK *(15 minutes)*

SESSION 2: BEHAVIORS OF MEN AND SOCIAL NORMS (1 HOUR AND 45 MINUTES)

Materials:

Flip chart papers, each prepared with titles Pregnancy, Delivery, Post-Partum or Post-Delivery, Newborn Care

Session Objectives:

At the end of this session, participants will be able to:

1. Create a preliminary list of male behaviors that could support maternal and newborn practices that the project is promoting
2. Explain how social norms influence practices of men and women and what is needed to change social norms

1. Group work creating lists on flip charts (45 minutes)

- a. Before implementing this activity the facilitator needs to request a list of key behaviors the project wants to promote. Subsequently, divide the participants into groups of four or five. Give each group one of the prepared flip chart papers and markers. Ask each group to think about the desired practices the project is promoting for the stage on the group's flip chart. What are some of the barriers women face in adopting these practices? Groups should bring up barriers they learned about through formative research and work with the women, not just speculation.
- b. **Ask:** In what ways can the husbands and fathers support adoption of these desired practices? Have groups list these on their flip charts. Put the finished flip charts on the wall separated with some distance.
- c. Have the participants walk around the flip charts to read and add ideas to them.

List of desired behaviors the priority group should practice

Desired MNH practices	Barriers	How Men Could Help
1.		
2.		
3.		

2. Presentation by facilitator (30 minutes)

When participants have returned to their seats, explain that many behaviors, including gender roles and health practices, costumes and traditions are what we call *social norms*. People do these things because that is what other people around them expect. These roles or behaviors are learned from childhood through reinforcement of what is acceptable or not. **Ask:** How does a child learn it is not acceptable to throw stones at passing people? Participants may say that he doesn't see anyone else doing this or that people scowl at him or admonish him. Explain the following scenario: Mary wants very badly to go to school, but her parents don't think it's important for a girl. When Mary's parents realize that every other girl in the community is going to school, and other parents tell them it is good for girls, they decide to let Mary go. **Ask:** Is it difficult for one person or family to adopt a new practice that is different than the social norm? Why?

3. Discussion (30 minutes)

Ask: What are some social norms you have seen change since you were a child? How do we get social norms to change for the better? Write participants' ideas on a flip chart. Ideas might include the following: getting community or religious leaders to support the change, giving all people knowledge of the importance of changing, using peer pressure,

having some people model the new social norm and tell others positive results. In summary, explain that we need to have the majority accept the new social norm, leaders to endorse the change and a way for people to learn or see the benefits of changing. In this workshop, we will now learn the process for bringing about a change in a social norm, that is, how men can adopt new behaviors to improve the lives and health of their wives and children.

LUNCH (1 hour)

SESSION 3: SELECTING THE CHANGE AGENTS (1 HOUR)

Materials:

Blank sheets of printer paper

Blank flip chart

Session Objectives:

At the end of this session, participants will be able to:

1. Identify what men need in order to be able to change behaviors
2. Define criteria for selection of change agents
3. Determine the process for selecting change agents

1. Discussion (60 minutes)

- a. **Ask:** If we want men to change some practices or adopt new behaviors that will help improve the health of their wives and children, what will they require to be able to make these changes? Allow a few minutes for participants to brainstorm at their tables. Identify and write specific desired behaviors to adopt, then think through the influencing factors tied to each. (e.g. if the desired behavior is that men encourage wives to breastfeed exclusively, they may need information about the advantages. If the desired behavior is that men accompany their wives for delivery, they may need information, but they may also need skills to ask negotiate for time off work or to save money for transport.) Write their ideas on a flip chart. Discuss each of the following topics: **(15 minutes)**

Information: What kind of information? Where will they get this information? Do they already know it?

Support and guidance: Who could give them this support?

Solutions to barriers to change: Who could help them come up with strategies to overcome barriers?

- b. **Ask:** Does it seem like we will need someone to work directly with the men to provide information and support and help find solutions? Can our existing Community Health Workers take on this role? Why or why not? What would be the advantage of having another person who focuses only on the men? What kind of person should this be? Use a flip chart to write down the following characteristics: male, same age as the target men, empathetic, possibly the same socio-economic level, someone they know and trust. Explain that we are going to call this person a Change Agent. *(10 minutes)*
- c. **Say:** Let's think again about our target communities. How will we go about finding men to be volunteer change agents? *Allow 10 minutes for discussion.*

When participants agree that the volunteers should be selected by the community, explain that we will need one volunteer Change Agent for every ten men in the target group. The primary target group is husbands of pregnant women. **Ask:** How will we know how many pregnant women are in the community? Participants may say that the project may already have CHWs keeping a census of pregnant women and possibly maps of where they live. **Ask:** If these records are not available, how is a census made? What is the advantage of also making a map? Who could help with a census and mapping? Participants may say that current CHWs or TBAs and community leaders could help. Explain that we need this information before we can decide how many Change Agents we need for each community.

- d. Divide participants into three or four groups. Give each group a piece of printer paper and ask them to list as quickly as possible the desirable criteria for a change agent. Criteria may include the following: literate, responsible, willing, permanent resident, not shy, already practices some of the behaviors, and so on. *(5 minutes)*

At the end of 5 minutes, put a blank flip chart on the wall and ask each group, in turn, to read one of their criteria and write it on the flip chart. Continue until all identified criteria are on the flip chart. **Ask:** Does everyone agree on these criteria? Are there criteria for people who would not be good change agents? Participants may identify attributes such as alcoholic, abuses wife, and so on. *(10 minutes)*

- e. **Ask:** What would be the best process for conveying the selection criteria to community leaders? Participants may suggest having community leaders generate their own list and add to it, if needed. *(5 minutes)*
- f. Explain that the Change Agent volunteers will have to agree to attend training, make home visits every two weeks to ten households, keep simple records and participate in organized community activities. *(5 minutes)*

SESSION 4: RESPONSIBILITIES OF THE CHANGE AGENT VOLUNTEERS (2 HOURS AND 15 MINUTES)

Materials:

Flip chart prepared with the steps in the process that change agents follow
Flip chart prepared with the list of materials that a change agent needs to use
Examples of change agent materials from another country, if possible
One of the eight posters used for diagnosis
Handout with steps for negotiation for behavior change

Session Objectives:

At the end of this session, participants will be able to:

1. Describe the behavior change process the change agents will use
2. Define the role of a change agent to create a job description
3. Explain negotiation for behavior change

1. Presentation by the facilitator followed by discussion (15 minutes)

- a. Explain that once we have decided which behaviors to promote to target men, we have to prepare the volunteer changes agents for their role, which primarily involves one-on-one contact with the target males. Show the flip chart with the following steps that make up the change agent's role: **(10 minutes)**
 1. Identify the target men (ten per volunteer).
 2. Make **initial contact** with the family and explain the initiative so the wife understands it will help her. This may be done in a meeting with several women rather than through individual home visits.
 3. Make a **second visit** to meet with the man alone to assess which behaviors the man is already practicing and which ones he is not (conduct the diagnosis.) This could be combined with the initial home visit, talking first to the wife and other family members and then to the man by himself.
 4. Make a **third visit** in order to explain to the man the rationale for male support for improving MNCH. At this visit, use the "negotiation for behavior change" processes to ask the man which of the behaviors on the list he is willing to adopt. Write an agreement with him.
 5. Make **subsequent visits** once or twice a month to see whether the man is following through with his commitment and to help him come up with solutions to barriers that are holding him back from change.

6. Give positive reinforcement to the man and to others who are helping him change, including family and friends.
 7. *Coordinate with health providers, health volunteers, and community leaders to plan and conduct learning events for men, for couples and for other community members.
 8. Keep records of contacts with the men and their behavior changes and other activities.
- * In explaining Step 7, tie the discussion back to the discussion about social norms from Session 2.
- b. Answer any questions the participants have about change agents' responsibilities. Explain that, in another session, we will talk about the tools a volunteer will need to have. (5 minutes)

2. Role play (15 minutes)

Ask three participants to come forward. Cover the flip chart. One of the participants will play the role of someone who was elected by community leaders to be a volunteer but was not at the community meeting. One of the other participants will play the role of a project staff member, and the other will play a community leader. They have come to tell the volunteer of his election, explain what he will be expected to do and ask for his willingness and commitment. (5 minutes)

When the role play is complete, ask the other participants what they could add to the explanation or to motivate the man to accept the role of change agent. (10 minutes)

3. Discussion (15 minutes)

- a. **Identifying target men:** Explain that target men are those with a pregnant wife, with a wife who has just delivered or with a newborn under one month old. **Ask:** How will the target men be identified? Participants may recall the census that was previously discussed or may say the men are already being maintained by another health volunteer. **Ask:** For how long will a change agent work with each man? Participants should respond that the period should last at least until his wife has delivered and received post-partum and newborn care consultations. **Ask:** How will the change agent replace that man among his ten target men? Participants may recognize that the census has to be continually updated to capture new pregnancies. **Ask:** Who will be responsible for this? Participants should recognize that this may vary if the project already has a system for maintaining an active census.. Explain that the change agents will have to coordinate among themselves who will take on newly identified men as the project progresses over the years. (10 minutes)

- b. **Selecting behaviors:** Explain that **project staff** will select the project behaviors and field test them with a limited number of men to see if they are feasible to adopt before training volunteer change agents or identifying the target men.
- c. Present on a flip chart the content of the toolkit that a change agent will use. If possible, hold up examples of the materials from Nicaragua or another country. Explain that participants will have the opportunity in a later session to look closely at the materials and propose adaptations. *(5 minutes)*

FLIP CHART

Toolkit for change agents

- Census of the men
- Plan of what to do during the different visits (steps)
- Diagnosis chart
- Technical charts (ANC, MALARIA, etc.)
- Posters/flip charts for counseling

Reminder cards for men to record their behaviors

Report form or register of activities

COFFEE BREAK *(15 minutes)*

4. Presentation with discussion *(15 minutes)*

- a. **Making the initial contact:** This involves explaining the initiative to the family and ensuring that the wife understands how the initiative will help her and the newborn. **Ask:** What do you think will happen during the first visit to each target man? How will the change agent introduce himself? Who will be present? How will the change agent verify the wife's pregnancy? Explain that, in Nicaragua, some women felt uncomfortable or threatened when their husbands began to help around the house or with the children.

Explain that it may be possible to combine the first and second visits, if the home is far away or it is difficult to find the men at home. The change agent would meet first with the wife and other family members and then meet one-on-one with the man.

5. Role plays (20 minutes)

- a. Invite two participants to the front to role play what the change agent will say to explain the initiative to the woman. **(10 minutes)**
- b. **Conducting the diagnosis during the second visit: Ask:** What happens during the second visit when the change agent wants to talk to the man? How will the change agent arrange to talk to the man alone?

Invite four or five people to do a quick role play of this visit. One participant will play the change agent, one will play the man and the rest will play other family members. The change agent only has to proceed as far as explaining the purpose of the visit to the man alone. **(10 minute)**

6. Explanation of poster (10 minutes)

After the role play is finished, show the participants the poster for the diagnosis. Explain that once the change agent is alone with the man, he shows a series of posters depicting the possible behaviors and asks the man whether or not he is already doing each. Since the posters depict behaviors related to pregnancy, delivery and care of the newborn, the change agent must select only those relevant to the family situation. For example, if the wife is very close to delivery, he will focus on what was done during the pregnancy, but he cannot yet ask about the pending delivery or care of the newborn. If the couple already has children, the change agent could ask about what the man did during the previous delivery and with that newborn. The change agent will mark the responses on small photocopies of the posters with the name of the man and the date. **Ask:** Why is it important for the change agent to maintain a very neutral, non-judgmental tone and expression while conducting this diagnosis? When the change agent is finished with the diagnosis, he sets a time and day for a return visit and asks the man to reflect on the behaviors shown in the diagnosis.

7. Introducing the concept of negotiation for behavior change — Discussion (30 minutes)

- a. **Say:** Now, we are going to talk about the behavior change methodology called “negotiation for behavior change.” **Ask:** Are any of you familiar with this methodology? Explain that negotiation for behavior change is a counseling technique to be used with individuals. Distribute the handout with the steps. Invite a male participant to the front of the room to represent the target man. Demonstrate negotiation for behavior change including all the steps on the handout:

Handout

- Discuss the actual situation based on the diagnosis that was done during the first or second visit.
 - Read all the behaviors relevant to that man and identified during the diagnosis he has not practiced, for example, enabling his wife to go to ANC.
 - Use the flip charts to explain the importance of the relevant behaviors. For example, explain the benefits of ANC and the risks of not going.
 - Reinforce the perception others may have if he practices behavior associated with a “good man,” “good father” or “responsible husband.”
 - Ask the man if he is willing to help his wife to have a safe delivery and a healthy newborn.
 - Show him the list of practices related to ANC (for example, accompanying her to ANC or caring for the children while she goes with someone else, etc.). Ask which ones he is willing to adopt.
 - Write down which ones he chooses and tell him he can contact you at any time to talk more before the next visit.
 - Confirm a date (within two weeks) when you will come back to visit to see how he is doing.
- b. Explain that during the follow-up visits, the change agent will assess how the man is doing at adopting the chosen behaviors, give him encouragement and help him figure out solutions to barriers that are preventing him from adopting the behavior. The change agent may talk to other family members to enlist their support for the changes or express appreciation for support already being given.

8. Daily evaluation (5 minutes)

Give each participant a half sheet of paper on which to complete each of these statements:

1. The most interesting thing I learned today was_____.
2. Something I didn't understand well is _____.
3. Something I would like to discuss or learn more about tomorrow is_____.

END OF DAY ONE

DAY TWO

REVIEW (30 MINUTES)

Materials:

Flip chart with objectives for each session on Day 1

Flip chart with objectives for each session on Day 2

Ask participants to write down one thing they learned yesterday. Select a few participants to read what they wrote. Show the session objectives for the Day 1 sessions and ask whether the participants think they were achieved. If the daily evaluation from yesterday revealed some things that were not well understood, read those and ask a participant to explain, or you can explain. Show the session objectives for Day 2 and ask different participants to read them aloud.

SESSION 5: PRACTICING NEGOTIATION FOR BEHAVIOR CHANGE (1 HOUR AND 45 MINUTES)

Materials:

Flip chart with the steps for negotiation for behavior change

Handout of supervision checklist

Session Objectives:

At the end of this session, participants will be able to:

1. Describe how to provide information to the families
2. Practice how to do the diagnosis during the first visit
3. Practice counseling skills during the second and subsequent visits
4. Practice active listening during the home visits

1. Role playing in pairs (45 minutes)

FLIP CHART

Steps in the negotiation for behavior change process:

1. **Greet the family and get permission to enter into dialogue with the man.**
2. **Establish good relationships:**
 - Establish rapport with the man. Explain the purpose of this visit. Look for a place to talk where there is privacy.
 - Establish eye contact while conversing.
3. **Refer back to the diagnosis conducted during the previous visit.** Is the diagnosis ongoing as each stage of the pregnancy progresses, in order to focus on different behaviors at different stages (prenatal, birth, postnatal/newborn)?
4. **Give feedback on what the household is doing well and what areas might need improvement.** Encourage change agents to use wording like “improve” so as to not imply that they are doing badly or failing at something (even though that might be the case).
5. **Read out loud the behaviors the man mentioned he is not doing, then ask him why he is not doing them. Encourage the Change Agent to advise the man to find solutions that might make the unselected behaviors easier to try. Finally, ask him what behavior he would like to try.**
6. **Provide necessary information for the man to make decisions.**
7. **Ask if the information is clear, and ask if he has any doubts regarding the information you shared by doing the following:**
 - Ask questions about the information you just shared with him.
 - Don't prompt the answer. If he doesn't remember, explain again with patience. Encourage him to ask any questions he may have and respond to all of them.
 - Encourage him to make a decision and agree on the behavior to practice.
6. **As needed, make additional suggestions and mention the positive benefits.**
7. **Ask the man to commit to trying one specific new (and improved) practices.**
8. **Together explore some difficulties that he might face and how to overcome them. Ask him to repeat what he has agreed to try and the general steps he plans to follow to do it.**
9. **Congratulate the man on his progress.**
10. **Promise to follow up with a date and time for the next visit sometime during the next two weeks.**

- a. Explain that today we are going to practice negotiation for behavior change. Divide the participants into pairs and ask them to practice the steps of negotiation for behavior change with each other. Each one should take a turn in the change agent role. They may use as examples any of the behaviors listed on the flip chart of behaviors from Day 1. Post the flip chart of the steps for negotiation for behavior change in a place where all can see it as they practice. **(40 minutes)**
- b. Reconvene the group and discuss any questions or concerns. **(5 minutes)**

2. Review of supervision checklist (10 minutes)

Hand out the supervision checklist and allow five minutes for participants to read it. **Ask:** Are there any questions about the checklist? Provide clarification, as needed.

3. Role play followed by discussion (45 minutes)

- a. Divide the participants into groups of three. Each member of the group will have a turn playing the change agent, the man or the staff member who is there to supervise. **(30 minutes)**
- b. When they have finished, ask if they feel they can train volunteers to do negotiation for behavior change. **Ask:** What are some difficulties the volunteers might encounter? How much supervision might volunteers need to learn to do this well? **(15 minutes)**

Handout: Observation Checklist: Contact #3		
How did the change agent do? Check yes or no for the following actions:	YES	NO
1. Greet the man in a friendly way and establish confidence.		
2. Ask about current practices identified on the diagnosis and listen to what he says.		
3. Identify key problems, if any, and select the most important one to work on.		
4. Reinforce the positive benefits of adopting new behaviors related to this problem.		
5. The change agent and the man discuss potential solutions together		
6. Identify and agree upon potential solutions together		
7. Remind him of the one(s) chosen and help him to think of possible barriers and how to overcome them.		
8. Congratulate the man for being willing to try new behaviors.		
9. Make an appointment for the follow-up visit.		
Name one or more things the agent did well:		
What do you recommend the agent work on to improve the next time? Name one important thing:		

BREAK (15 minutes)

SESSION 6: TRAINING CHANGE AGENTS TO DO FOLLOW-UP VISITS (1 HOUR 45 MINUTES)

Materials:

None

Session Objectives:

By the end of this session, participants will be able to:

1. Demonstrate how to help a man solve barriers
2. Practice a training methodology for follow-up visits

1. Role playing (1 hour)

Have the participants return to the pairs in which they practiced negotiation for behavior change. This time, they will practice the follow-up visit. The person playing the man must present a barrier as to why he is not following through on his commitment to one of the behaviors. For example, one might say, “I promised to take my wife to all four ANC visits, but now, I am going to have to go to the city to work for the next 5 months.” The change agent will have to help him think of a solution to ensure that the wife goes for antenatal care. Considering another example, a man might say, “I promised I would bring all the harvest in from the field so she wouldn’t have to carry a heavy load, but it is too much for me by myself and I cannot make two trips before dark each day.” During the role play, the facilitator will have to circulate and listen to ensure that the “change agents” are truly helping the man think of solutions by asking questions to make him think instead of simply giving him a solution. When all participants have practiced both roles, have them reconvene in the large group.

2. Discussion (45 minutes)

- a. **Ask:** How confident are you that you can teach the volunteer change agents to help with problem-solving? What kinds of barriers do you think men will face in adopting the new behaviors? Would it be helpful before training the change agents to do some formative research on attitudes of men and women regarding men adopting the new behaviors? On other types of barriers men might face?
- b. **Ask:** How will the change agents keep track of their follow-up visits? Why is it important for them to remember what behavior the man is trying and what barriers he experienced? When will they know it is time to suggest that the man try another behavior? Explain that we will talk more about record-keeping later today.

LUNCH (1 hour)

SESSION 7: SUPPORTIVE SUPERVISION OF CHANGE AGENTS (2 HOURS)

Materials:

Laptops

Session Objectives:

By the end of this session, participants will be able to:

1. Describe how to how assess change agent performance and give feedback
2. Create a supervision checklist for follow-up visits and group sessions
3. List possible ways to motivate change agents to ensure retention
4. Role play problem solving with change agents

1. Discussion (30 minutes)

- a. Explain that whether we call it supervision or monitoring, we need to continually assess the performance of change agents since the effectiveness of the initiative depends largely on their work. In a previous session today, we discussed some information that change agents might be collecting, for example, how many men they report as adopting new practices. **Ask:** Besides their reports, what might be other ways for conducting supervision? Participants may suggest that supervisors accompany change agents on home visits and to community activities they organize and periodic meetings with all change agents in a community to discuss progress and problems.
- b. Discuss whether the project currently has issues with retaining volunteers. **Ask:** What might be some reasons that change agents will want to quit? Participants may identify reasons such as change agents feeling demoralized when men don't accept their counseling, realizing that the work is taking much time with little personal benefit, other demands for their time, discomfort with their role as a change agent or with the other change agents, and so on.

2. Group work (45 minutes)

- a. Divide the participants into three groups as follows:

Group one will develop supervision checklists to use when accompanying change agents on the initial and follow-up home visits. They can also improve on the distributed checklist for observing “negotiation for behavior change.”

Group two will discuss and list ways to motivate change agents to continue.

Group three will prepare a role play showing different problems a change agent tells the supervisor and how the supervisor might help the change agent solve them:

(a) when the change agent goes on the home visits, he never finds the man at the appointed time; (b) a man's wife seeks out the change agent at church to tell him her husband is not practicing the behavior ; or (c) the change agent has become confused about which flip charts to use for counseling about danger signs for pregnancy versus for post-partum.

3. Presentation of group work (20 minutes)

Groups one and two will have 10 minutes each to present their work and answer questions.

4. Role plays (10 minutes)

Group three will have 10 minutes to present the three role plays and receive suggestions on how the supervisors can be more helpful.

5. Summary (15 minutes)

The facilitator will summarize the importance of supportive supervision to ensure success and answer any remaining questions.

BREAK (15 minutes)

SESSION 8: CHANGE AGENT RECORD-KEEPING AND INTERPRETING DATA (1 HOUR)

Session Objectives:

By the end of this session, participants will be able to:

1. Decide what information is needed from change agents for monitoring their own work for project monitoring and planning
2. Draft a register for change agent use

1. Questioning for reflection (20 minutes)

Explain that we now know each change agent will be responsible for ten men whose wives are pregnant. Change agents will work with these men over some months until each newborn is a month old. **Ask:** What information will change agents need to keep track of for each man? Participants may identify the visits they make to each man, the behaviors the man chooses to try at each stage, the barriers they help the man solve, behaviors the man abandoned and the wife's stage (pregnant, delivered, newborn). **Ask:** Why should they track these things? How will they use this information? Will the project need to compile and use any of this information? Why? Considering the literacy level of the change agents, what kind of register could we design for them to use? Write participants'

ideas on a flip chart. For example, participants may suggest a register that is totally pictorial, semi-pictorial and/or mobile-phone based.

2. Group work (30 minutes)

Divide participants into work groups. Ask each group to draft a register for the change agent to use. *(15 minutes)*

When they have finished, have each group present their version. At this time, they do not need to consolidate, but they can use these ideas to make a final version when the initiative starts. *(15 minutes)*

3. Questions and answers (10 minutes)

Ask: What kinds of information will staff members need to collect to monitor the performance of the change agents? To monitor progress in changing behaviors? Coverage of men? How can the staff members obtain this information from the change agent without over-burdening him with reporting? How will the project use this data? (Use and share the project's targets)

SESSION 9: ORGANIZING AND EVALUATING ACTIVITIES FOR COMMUNITY AWARENESS (45 MINUTES)

Session Objectives:

At the end of this session, participants will be able to:

1. Decide what kind of sensitization to gender equity will be needed by different audiences
2. List different kinds of activities that can be used to reach these audiences in order to influence attitudes and social norms
3. List criteria for determining whether community events are successful

1. Explanation followed by brainstorming (25 minutes)

- a. Explain that in a session on Day 1, we discussed social norms and that in order for men to make changes, social norms have to change. For example, if the man is to start carrying water to relieve his wife's workload during pregnancy, he is more likely to succeed in doing this if his friends and neighbors also understand why doing so is a good thing and if other men are also carrying water. In this way, it becomes acceptable for men to carry water. Therefore, the social norm, i.e., that only women carry water, changes. **Ask:** How do we make sure a man's friends, neighbors and other people coming to the well know why carrying water is a good thing for a man

to do to help his pregnant wife? Allow the participants to brainstorm at their tables for 5 minutes, then have them report their ideas.

- b. Write all ideas on a flip chart. Examples of responses might include the following:

Radio spots

Giving messages at existing meetings (VSL, farmers' groups, women's groups, churches, etc.)

Get pastors involved in explaining during sermons

Have CHWs and TBAs tell groups and individuals that they work with

Health workers can advise patients

Hold fun events such as sporting events and talk to the men about their responsibilities at intermission

Posters in public places, buses

Messages sent to mobile phones

- c. **Ask:** Who will organize these activities, especially the group events? Stress coordination between existing CHWs, community leaders and the change agents.

2. Questions followed by group work to brainstorm ideas, then questions for discussion (20 minutes)

- a. **Ask:** When we convene a group meeting or an event for the community, e.g., inviting all fathers of newborns to a meeting to learn how to care for the baby, how do we determine whether the event was successful or not? Why do we want to know this? Is it good enough if 3 out of 20 invited come? Is it good enough if the participants sit quietly for two hours listening?

Have the participants work with those at their tables to determine criteria for evaluating the success of a meeting or event. They should consider how they will collect information to improve subsequent events. For example, they may suggest visiting invited men who did not attend to learn why they didn't come. After 15 minutes, have them share their ideas with everyone. Keep notes of ideas on a flip chart.

- b. **Ask:** What would be the advantage of conducting some sensitization activities and events prior to when the change agents start visiting homes? What kinds of messages would we want to give during these activities or events? Participants may mention the general concepts behind male responsibility in caring for his wife and child, why everyone needs to participate to reduce maternal and newborn morbidity and mortality, what a responsible husband is, reasons why certain roles don't have to be gender-specific, and so on.

When finished, explain that we will continue to talk more about training the change agents tomorrow and learn about tools they can use in their work.

3. Daily Evaluation (5 minutes)

Give each participant a half sheet of paper on which to complete each of these statements:

1. The most interesting thing I learned today was_____.
2. Something I would like to discuss or learn more about tomorrow is_____.

Preparing for tomorrow's review:

Select three participants who will lead a 20-minute review on the last morning. They will need to prepare by looking back at the agenda, flip charts and notes to summarize the steps in the process of the change agent's work. They can prepare summary flip charts, documents to show on the projector, or some other way of presenting this to their colleagues. They should try to make their presentation participatory.

END OF DAY TWO

DAY THREE

REVIEW (30 MINUTES)

The pre-selected participants will lead their colleagues through a review of the roles and responsibilities of the change agents and the steps they follow to persuade men to adopt new behaviors. *(20 minutes)*

When they have finished, the facilitator will clarify any questions from the daily evaluation from yesterday. *(10 minutes)*

SESSION 10: PLANNING TRAINING OF CHANGE AGENTS (4 HOURS INCLUDING BREAK)

Materials:

Copies of the change agent training plan for each participant

Laptops

Session Objectives:

At the end of this session, participants will be able to:

1. Describe the training plan for change agents
2. Plan the methodologies to use for training the change agents

1. Working groups (reading, group discussion, writing training plans) (4 hours)

- a. Divide the participants into five working groups. Distribute copies of the change agent training plan; allow participants 10 minutes to read through the plan. They may also want to look back over the agenda for this workshop. **Ask:** Considering the context here and the base level of understanding of the potential change agents, which topics do you think need more emphasis? Which ones need more or less time? Have each group come to agreement and note changes on their copies of the training plan. *(1 hour)*
- b. Ask each group to focus on a different day of the plan. Group 1 will take Day 1, and so on. Their assignment is to decide which training methods they will use for the training. Remind them to think back over this workshop for ideas. The first step is to summarize methods and materials for each session. Once they finish with the task, have each group present their ideas to the rest of the participants and receive feedback. *(1 hour)*
- c. Have the groups write an expanded training plan with the details of content and methods for their assigned days. They may choose to divide sessions among group

members. They may use the rest of the morning for this, including the coffee break time, until 12:00. The facilitator will circulate continually between the groups to discuss their plans and ideas. *(2 hours)*

2. Summary discussion in large group (30 minutes)

Reconvene for the last half hour before lunch. If groups have not finished, they may have time in the afternoon or after the workshop. **Ask:** Which will work better here: training the change agents for five days straight or for one or two days per month? Maybe one day per week for five weeks? Allow them to discuss among themselves. If they know the population estimate for the number of expected pregnancies in the target area, can they estimate the number of change agents they will need? Note that they may work only in a limited target area with the initiative. **Ask:** Who can help with training change agents?. Allow enough time to discuss what would motivate someone to be (and remain) as change agent, or how staff can help sustain their involvement.

LUNCH (1 hour)

SESSION 11: MATERIALS FOR THE CHANGE AGENTS (2 HOURS)

Materials:

Examples of the Nicaragua materials for diagnosis and for behavior change, with English translations

8 posters for diagnosis

A set of 12 reminder materials

Session Objectives:

At the end of this session, participants will be able to:

1. Decide how to adapt the materials for the local context
2. Explain how and when the change agents will use these materials
3. Describe the process for pre-testing the adapted materials

1. Review of actual BCC materials used (30 minutes)

- a. Show the Nicaragua BCC materials and explain how the change agents used them.
- b. Allow participants to pass the materials and translations around to look at them closely.
- c. When they are finished, ask participants to explain again how each of the materials is used by the change agent.

2. Materials adaptation in small groups (60 minutes)

- a. Divide the participants into working groups. **Ask:** How will the materials have to be adapted for this context aside from the obvious need to change to images of local people? Assign a group to look closely at one part of the materials and make a list of adaptations needed. *(30 minutes)*
- b. When they finish, lay the materials and adaptation lists on the tables and invite everyone to circulate to read the suggestions. They may add other ideas to the lists. Allow time for discussion to arrive at consensus about what adaptations are needed. *(20 minutes)*
- c. Discuss whether the project or another in the country has any existing materials or images that can be used. *(10 minutes)*

3. Pre-testing new or adapted materials (30 minutes)

Explain that when we adapt materials or create new materials for use in the communities, we must pre-test the material. **Ask:** Why should we do this? Participants may respond that this is to make sure the images are understood, the message is clear and that the size and colors are suitable to the use (e.g., small fonts for counseling and large fonts for groups). **Ask:** Who can explain how to pre-test materials? Participants may suggest taking the material to a group of community members and asking them what they see, what they understand is being conveyed, whether they can see it clearly, whether they approve of the images and colors used, etc. Ask participants to share any experiences they have had with pre-testing materials and what they learned. **Ask:** How long might the process of adaptation and pre-testing take? How can we save time with the process?

BREAK (15 minutes)

SESSION 12: NEXT STEPS AND CLOSING (1 HOUR)

Materials:

Blank flip charts

Workshop evaluation forms

Session objectives:

At the end of this session, participants will be able to:

1. Plan next steps for preparing to train the change agents
2. Identify who will be responsible for carrying out different activities in the plan
3. Set dates for selecting and training change agents

1. Discussion of next steps (45 minutes)

Allow the project manager to lead this session. He or she will have the participants list on flip charts concrete steps for next steps after the workshop and list exactly who will take responsibility for each step or activity.

2. Final workshop evaluation (15 minutes)

Distribute the workshop evaluation form and ask participants to fill it out. When they have finished, ask them how they feel about their capacity to train the change agents. Thank them for their participation and wish them success.

