

Mamaniva Grandmother Project

World Vision Sierra Leone

Adult Education Tools

Photo taken in Victoria Community, Toma Section, Bum Chiefdom, Sierra Leone on 23 October 2013

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Introduction

Mamaniva's expected results:

Mamaniva as a showcase must show results and impact. These are current project performance indicators:

- % of newborns infants put to breast within an hour of birth
- % of Infants aged 0-5 months who were fed exclusively with breast milk (EBF)
- % of breastfed children aged (6-8months) who received appropriate complementary foods
- % of Breastfed children aged (9-24) Months who received appropriate complementary foods
- No of Relationships established and strengthened among key stakeholders
- % of Grandmothers in committees who have the knowledge to advice appropriately on pregnancy and caring for newborns
- No of Grandmothers who have the knowledge and skills on maternal and child Nutrition

Mamaniva activities so far:

So far, both qualitative and quantitative studies have been carried out, which show the current situation of the roles of family members, especially grandmothers, in child feeding. Child feeding practices have also been described.

Since the research took place, staff have been to all 16 Mamaniva villages to introduce community members to the programme. Staff have also attended training in several areas related to community health and child nutrition.

The training on adult education tools, which is described in this report, also provided staff the opportunity to begin the implementation phase of Mamaniva. Although, we started in 2 villages, staff can easily replicate the activities in the other fourteen. Since we did 3 sessions in each village for practice, staff will be able to replicate these sessions over the next 3 months.

- Session 1: Inter-generational meeting on the research results, particularly the roles of grandmothers: songs of praise for grandmothers
- Session 2: Critical incident stories and board game
- Session 3: Comparison stories and ball game

Thus, they are ready to go with Mamaniva activities until January 2013.

Adult Education Tools Training Team:

- **Dr. Nancy Drost, Facilitator**: She led the process with a bag of aids, and prizes for the best games!
- Joseph Simba, Mamaniva Coordinator: He is the big picture guy trying to figure out how
 we are going to practice everything we've learned during the training. He's always planning
 ahead.
- Rogers Joseph, Field Officer: He is friendly, outgoing, good-humoured and fun-loving, always telling jokes. He was particularly creative when it came to ideas for games.

- Alice Senesie, Field Officer: She is a kind and gentle, very likable, and friendly to community members. She feels positively about her opportunity with WV, is willing to learn as much as she can, demonstrated this by putting her all into the training programme.
- Mary Koroma, District Nutritionist: Her nutrition knowledge and knowledge of local nutrition practices was second to none. She has energy, intelligence and willingness to learn adult education methods. Once she got the hang of the concept, she had loads of ideas for games and activities.
- **Daniel Charley, District Adult Education Teacher**: An excellent team player. He dedicated himself to the process, providing a great example for others.
- Allieu Bangura, Health Sector Coordinator, World Vision Sierra Leone: He brought his
 extensive experience to bear on all our deliberations.
- Victor Kamara, Gender and Child Protection Coordinator, World Vision Sierra Leone: He endeared himself to Dodo by introducing the naming song. Killema!



Mary dancing with Grandmothers from Dodo

What we field-tested in Victoria and Dodo:

- 2 songs
- 3 games
- 1 skit based on a critical incident on exclusive breastfeeding
- 1 flannelgraph story based on a critical incident on complementary feeding
- 3 stories based on comparisons on health during pregnancy, exclusive breastfeeding and complementary feeding
- 1 picture featuring a GM
- 1 presentation on qualitative research findings

The Adult Education Tools training was a foundation for shifting the approach to GMs from one of "banking" or depositing information classroom style to one of facilitating problem-posing, asking questions and inspiring ownership of knowledge. The team discovered that learning happened, even though they did not deposit it! They discovered that facilitating learning through problem-posing is a creative and fun process.

This report functions both as a record of our workshop, and as a guide for further adult education tool development.

Nancy M. Drost, Ed.D., Workshop Facilitator, Accra, Ghana



The Road to Dodo

What is Adult Education with Grandmothers?

As her main resource, the facilitator, Dr. Nancy Drost, used the manual written by Dr. Judi Aubel, called *Change through Culture, Involving grandmothers to promote child nutrition, health and development: A guide for program planners and managers.* Draft no. 4 a, 25 September 2013, with special attention to pages 36-43.

Dr. Aubel says, "in GMP's work the following tools are often used:

- inter-generational forums
- · stories without an ending
- · songs and dancing
- games
- skits or role plays
- picture discussion cards."

Guided by adult education principles, we adapted the tools with content relevant to the Sierra Leonean context.

Tips for Adult Education with Grandmothers

Trainees made the following observations when they tried to use adult education methods with grandmothers:

- "We couldn't believe that the grandmothers would see the point of the flannelgraph figures.
 They had no problem getting the story."
- "We told stories and played games, and the grandmothers got the message. They were able to understand exactly what we wanted to get across to them without us having to lecture."
- ✓ Remember you are talking to grandmothers, and you are there because of them. *It's not about you*. Think about your own grandmother or an elderly person you love.
- ✓ Everyone should see you, sit, stand or move around so that all grandmothers can see you, not just a few. If you stand in the middle of a circle, or at one edge of a circle, most grandmothers are only going to see your back.
- ✓ If you're sitting, sit at the same level as the grandmothers. Sit with grandmothers as much as possible, so as not to appear as a "teacher" but as a "friend."

- ✓ Use a soft voice. Talk slowly and clearly.
- ✓ Smile.
- ✓ Applaud, congratulate, pat on the back, touch to show appreciation and affection.
- ✓ Keep the session moving animate!
- ✓ Tell the story or do the activity step by step. Don't give too much information at once. Let grandmothers slowly enjoy each part of the story or activity.
- ✓ Keep the messages positive. Don't say "don't do this" and "don't do that."
- ✓ Don't tell let the grandmothers figure it out themselves through discussion and sharing experiences.
- ✓ If you are using visual aids, keep the aids in a place so that grandmothers can continue to look at them during the story or activity. They need to see the aid to think about its meaning. It may take grandmothers a bit of time to understand and enjoy the visual.
- ✓ Avoid making judgements and any moral statements again, let the grandmothers figure it out themselves. Avoid bringing any religious references into the discussion because this can easily work against your message.
- √ Keep to time and keep it short. Intersperse activities with songs to keep things moving.
- ✓ Practice the activity before going out to meet the grandmothers groups. Especially practice any text that needs translation from English to Mende because it's very difficult to do on the spot.
- ✓ Avoid use of cameras during critical incidents or showing new visuals. You will distract the grandmothers from the activity that you want them to focus on.

What is Mamaniva?

English: Working with Grandmothers to help pregnant women, mothers and caregivers to improve the nutritional status of children.

Mende: Mu yengea ma mamani kor mu gbor konyahehEisia ma, ndole nyahegEisia ma, keh ndo mahun gbaiblesia kor wae mu ndegaa ti la mehen hindqe leh gulor ma.

Krio version also needs to be included.

Grandmothers made these comments about Mamaniva:

- "We are so happy about the Mamaniva activities because we grandmothers have been engaged for the very first time." (Other projects didn't involve grandmothers – all the other projects have been for the "young ones.")
- "I slept happily because my body felt light I'm happy because someone thinks that grandmothers are important."

Even after a couple of days' of working in Victoria and then Dodo, community members were greeting our vehicle with cheers: "Mamaniva!"

Mamaniva's Main Messages

These messages prepared by Dr. Carolyn MacDonald-Williamson from the qualitative research study by Dr. Judi Aubel, were considered by the team.

- 1. Clarify links between children's food, their growth and their health. Most respondents, men and women, believe that when children do not grow as quickly as others in their age group it is because of the will of God, witchcraft or because meals are not served on time. (It is because first the mothers didn't get the right quality and amount of food when they were pregnant with the child and/or that children are not getting the right foods particularly up to 2 years of age. That is exclusive breastfeeding for 6 months and then addition of quality and quantity of diverse foods from 6 months to 2 years).
- 2. Traditional attitudes and practices related to women's nutrition, such as the widely-supported tradition of "eating down during pregnancy in order to have a small baby" should be addressed in nutrition education activities with both with WRA and their senior advisors, the GMs. (Rather, mothers need to increase their food intakes during pregnancy especially animal source foods and iron-rich and try to have a healthy weight baby BIG BELLY not small!) There were a minority of respondents, in each of the three categories of interviewees, who believe that it is preferable for a woman to have a "big belly", as this denotes that the baby is larger and that the woman will have more strength to successfully deliver a healthy baby. Maybe work with this idea.
- 3. Support grandmother's role in care for the newborns. After delivery GMs in the family collaborate with the TBA to wash the baby and to provide initial care. Wherever the child is born, the GMs are there: to give herbs to "clean out the stomach"; to care for the umbilical cord with special herbs before it falls off; to give warm water to make the baby sleep; to massage the baby with herbs; and to monitor him/her to detect any health problems. (To change: the practice of herbs/water/pap/other than exclusively breast milk. To promote: Only breast milk and particularly mother's first milk colostrum is given to children. No herbs taken internally. No warm water taken internally. Water and herbs replace the best for the infant breast milk.) The best support a GM can be is to make sure that the infant gets to breast feed as often as possible during the first few weeks/on demand because the more the infant breastfeeds, the more milk the mother will produce!
- 4. Support GM's role on breast feeding. To promote: nothing other than breast milk for first 6 months. If GM sleeping with mother & infant best she can do is help mother to breastfeed child. No water, no early paps. BREAST MILK is has adequate water for the child, as well as adequate nutrients and energy. (To change the belief that breast milk doesn't provide adequate liquids/water for infants to 6 months). No 'paps' in first 6 months. During the study it was discovered that at between 2-3 months of age, virtually all children are given ngwoh bayei (which literally means rice water + salt) but which is often referred to as "the food of the gods", which suggests how important it is perceived to be. Breast milk is the closest thing we have to a nutrition 'magic bullet'. Perhaps the GM's can do some of the chores for the mothers while they breast feed infants so that children are not crying (vs. GM giving infants rice milk). It is easier GM's don't have to make anything but their role is impt because they are needed to do some chores that mothers would be doing.
- 5. Support GM's role in Complementary feeding. To promote: thick paps/benni that include not only energy foods, but also protein and fruits/vegetables. Should be some good recipes using locally available foods from PD/Hearth sessions, and/or from local nutrition advisors. Also, support GM's in providing frequent feedings to children snacks in between

meals – this is good! If feeding with hands – make sure that GM's wash with soap before preparation of food and feeding infants & young children with hands.

The messages were summarized and voted on by staff. The messages that got 5 votes were the ones that we worked on during the week.

- 1. Links between children's food, their growth and health (5 votes)
- 2. Women's nutrition during pregnancy (3 votes)
- 3. Only breast milk when baby is born, with specific emphasis on colostrum
- 4. Exclusive breastfeeding: no water, no ngwoh bayei (5 votes)
- 5. Complementary feeding at 6 months (thick paps, not only carbs but protein, fruits and vegetables; snacks; feeding with clean hands) (5 votes)

The team voted on messages 1, 4 and 5. It was our challenge during the week of adult education training, to design different ways to get these three messages across to grandmothers.

In order to discuss and affirm these messages, we used different types of stories, games and pictures.

At the end of the training, in addition to messages, we also discussed other elements of Mamaniva that could bring more unity and coherence to the programme, such as **standard**

- theme song
- recipe(s)
- slogans
- groups
- name tags
- meeting agenda
- recap questions.

Most of these still need to be fully developed.

Mamaniva Theme Song

The team should listen carefully to the various songs sung as Mamaniva meetings. One of these could be well adapted to the Mamaniva Theme Song, which should be sung at the beginning and end of each meeting with GMs.

Mamaniva's Favourite Recipe

With the assistance of the District Nutritionist and others, the team should devise a special Mamaniva recipe. This should be a complementary food and an interesting variation to the usual Bennimix. For example, adding a combination of fruits to the mix, such a papaya, bananas and a squeeze of citrus.

Mamaniva's Slogans

These slogans should be short and sweet and recited at the beginning and end of each meeting. GMs should memorize them. Here are some examples:

- Mamaniva cares for children!
- Mamaniva for the health of the children!
- Mamaniva says thank you to GMs!
- Mamaniva sey give the first bobby water to your pikin for make him grow fine!
- Mamaniva says breast feed exclusively/only for 6 months!
- ❖ Mananiva sey belly woman for eat well for make born fine pikin!
- ❖ Mananiva sey when 6 months give your pikin chop when he make him body fine!
- Mananiva sey give snacks between meals at 6 months!

Mamaniva Groups

In Sierra Leone, there are many groups in communities. Some of these groups – whether youth associations, farmers' groups, women's groups – are highly organized with executives, constitutions, and sub-committees. It is best to take a more informal approach to Mamaniva groups. Grandmothers enjoy being together and having a discussion, but then after about an hour, they are ready to go. Always remember to keep the group meetings informal, light and comfortable. Take a kind and gentle approach.

Name Tags



We used heavier paper and safety pins to make simple name tags. (We bought 60 safety pins for 6,000 leones – about \$1.50 – in Madina.) Grandmothers had no problem calling out their first names to be written on the tags. Grandmothers loved to be called by name, instead of staff pointing and saying "you, you," In this way, the staff became familiar with the grandmothers more quickly, and became acquainted with their personalities and strengths. This allowed staff to identify who they could count on as potential grandmother group leaders for Mamaniva.

Sample Mamaniva Meeting Agenda

- ✓ Greetings
- ✓ Prayers
- ✓ Introductions (Killy-ma song, name tags, ensure that GMs know team names)
- ✓ Recapping
- ✓ Mamaniva Slogan
- ✓ Mamaniva Song
- ✓ Purpose of today's meeting
- ✓ Activity #1
- ✓ Song and Dance
- ✓ Activity #2
- √ Feedback/Questions/Application
- ✓ Mamaniva Song to Depart

Meeting time should be between 1-2 hours, but closer to 1 hour.

Recaps

Tip: Start with easy questions about what happened, and then move into more analytical questions about what they learned. Keep the recap to about 5 minutes.

For example:

- Who can tell us what happened yesterday?
- Who can narrate the story?
- What was the favourite part of the story? Why?
- Who was your favourite character? Why?
- Can somebody tell us one thing that they learned yesterday?

INTER-GENERATIONAL FORUMS

As requested we used the method of inter-generational forum to communicating the qualitative research findings, particularly with regard to roles of each member of the household:

Women of reproductive age: --> implementers of all daily tasks to support family life

- domestic chores
- giving birth to children
- caring for husbands
- caring for children
- taking care of mother-in-laws
- income generating activities

Fathers of young children --> family provider

- providing resources for family functioning and well-being
- promoting family cohesion
- caring for their wives and children
- caring for parents and in-laws
- ensuring the security of the family

Grandfathers --> wise family advisor

- advisor on major family situations and decisions
- moral and cultural education of family members
- care of grandchildren over 5 years of age
- ensuring care and maintenance of the house and compound

Grandmothers --> experienced and authoritative advisor and coordinator of family life

- advising and caring for women during pregnancy and delivery
- caring for newborns
- advising and coaching on breastfeeding
- caring for young children
- food preparation and feeding of young children
- managing and participating in domestic tasks
- income generating activities
- family "bank" in times of need
- passing on traditional values and knowledge
- promoting family cohesion
- protecting the house and the family
- advisor to all family members on numerous issues

Youth -->apprentice

- carry out household chores
- assist caring for young children
- learn how to carry out all of the activities expected of adults later in life
- follow orders of parents and grandparents

From: Judi Aubel et al. June 2013. *An abundant and neglected resource – Grandmothers: Experience, caring and influence on the nutrition/health of women and children*. Qualitative formative research, Mamaniva Project, Sierra Leone.

Each of the different groups was asked to stand up as their roles were read. They were applauded for their contribution to the family.

Grandmothers were recognized last. Their list of accomplishments was longer that the rest. They were given special recognition, after which everyone was reminded of the special purpose of the Mananiva Project.

Afterwards, each group was asked to go off on their own and compose a special song for grandmothers. The grandmothers also prepared a response for each group. Most of the songs are represented below.

SONGS

These Songs of Praise for Grandmothers were sung in intergenerational forums in Victoria and Dodo.

Grandchildren's Song, Victoria

English:	Mende:
Grandmother, thank you for cooking cassava an	Ma ma bi sEi oo, supui yEgbei na va bi ngiya mu
soup for us.	me nga tangei na ma.
Grandmother thank you for the rice you gave us	Ma ma bi sEi, mbEina ba fe mu wE folo gbi nji mu

every day when our parents were not around. Grandmother, thank you for your kindness to us. Grandmother, may God help you and stay long with us.

Grandmother, thank you for the sweet soup you cooked for us today.

Grandmother, thank you for the fine cassava you gave us.

Grandmother, thank you for giving us food to eat.

Grandmother, thank you. May God bless you.

bondeisia te yE na.

Ma ma bi sEi, bi gbegbe yei nan va, mu ga ma. Ma ma ngewc I gbcc bi ma, I bi lembi mumahun.

Ma ma bi sEi supu nene na va bi ngili nga mo mu va.

Ma ma bi sEi tanga yegbe na va bi fe ni mu wE.

Ma ma bi sEi, mu agc va a mEhEn. Me va.

Ma ma bi sEi, ngewo I bi luba.

Youth's Song, Victoria

English:

If Grandmother was not at home, how would I go? I am a suckling mother.

I want to go and brush. If Grandmother was not at home, how would I go? I am a suckling mother.

I want to go to the farm. If Grandmother was not at home, how would I go? I am a suckling mother.

I want to go to the trade fair. If Grandmother was not at home, how would I go? I am a suckling mother.

I want to go to the market. If Grandmother was not at home, how would I go? I am a suckling mother.

Mende:

I NA WC MA MA I PEE IA, NGEI LII KOIMA ANGEA. X2

NGA LONGO NGI LI NDOIMEI, I NA WO MA DA I PEE LA, NGA LII KOIMA A NEGEA.

NDY LONG NGI LI NJOPOHUN, I NA WO MA MA I PEE LA NGA YEALII KOIMA NGEA.

NYA LONG NGI LI NDOWEHUN, I NA WO MA I PEE LA NGA LII KOIMA A NGEA.

NYA LONGO NGI LI HJOPOWSWA, I NA WO MA I PEE LA NGA YEA LII KOIMA A NGEA.

Daughters' Song, Victoria

English:

Let us thank our mothers for bringing up our children.

Let us thank our mothers for holding our children.

Let us thank our mothers for cleaning our children.

Let us thank our mothers for feeding our children.

Mende:

A MU SEIGBUA MAMANI MOA MU LENGA GBEAVA HUN

A NU SEIGBUA MAMANI MOA MU LENGA HOUVA OH

A MU SEIGBUA MAMAI MOA MU LENGA WAUA OH

A MU SEIGBUA MAMANI MAO MU LENGA GOUA

Grandmothers' Response Song, Victoria

English:

For Children:

Let's say thanks to our children. They play with

us. 2x

For Youths:

Mende:

For Children:

A MU SIEGBUA MU LENGA MAO HA TA MU YAA LOLI. 2X

For Youths:

Let's say thanks to our youths. They bring wood for us and brush our farm for us.

For Daughters:

Let's say thanks to our breastfeeding women. They gave birth to children and help in domestic works.

For Grandfathers:

Let's say thanks to grandfathers. They give advice to us and take care of the home.

A MU SEIGBUA MU GOGAA MAO TIA TA KCWII YAI MUE. 2X

For Daughters:

A MU SIEGBUA MU KOIMEI SIA MAO TIA TA NDEGAA LEY, A MU SEIGBUA MU KOIMEI SIA MOA TIA TA PELA YENGEI SIA WEI.

For Grandfathers:

A MU SEIGBUA MAADA NI MAO TIA TA MU LARHII A MU SIEBUA MAADA NI MAO TIA TA PELA MAHUGBE.

Grandchildren's Song, Dodo



Grandmothers, thank you because you always provide food for us to eat,
Grandmothers, thank you for washing us when our parents are not around,
Grandmothers, thank you for giving us extra when we are not fed enough,
Grandmothers, thank you for taking care of us when we use the latrine,
Grandmothers, thank you for washing and feeding us,
Grandmothers, may God bless you and may you stay long and continue to show us more love.

Youth's Song, Dodo



English:

Let us say thanks to grandmother 2x She makes us go to work, She helps to take care of the children, Mende:

A mu sei gbua ma ma ma 2x Ta mia a pie ma li ngenge mEi Ta mia a ndangaa mahuu gbe Let's say thanks to grandmothers 2x Let God give the grandmothers long life. A mu sei gbua ma ma ma 2x NgewC ie ndevuhun gua ve ma ma wE

Daughters' Song, Dodo



Old Men, Dodo



Grandmothers' Response, Dodo



English:

Let's say thanks to the men, let's say thanks to them 2x

Let's say thanks to the children, let's say thanks to them 2x

Let's say thanks to the youth, let's say thanks to them 2x

Mende:

A mu seigbua mu hinga mao mu seigbua tima, amuseigbua mu hinga mao mu siegbua tima A mu seigbua mu lenga mao mu seigbua tima, amuseigbua mu lenga mao mu siegbua tima A mu seigbua mu gCgamaoo mao mu seigbua tima, amuseigbua mu gCgamaoo mao mu

Let's say thanks to the breastfeeding women,	siegbua tima
let's say thanks to them 2x	A mu seigbua mu kCimeisia mao mu seigbua
They deliver children!	tima, amuseigbua mu kCoim ei sia mao
	museigbu tima.
	Tia Ta ndoi laye.

Other Songs by Grandmothers

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En	α	ıc	'n٠
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Let us say thanks to the grandmothers. They brought us good health.

Let us say thanks to the children. They brought these good things for us.

Let us say thanks to the youth. They brought these good things for us.

Let us say thanks to the grandfathers. They brought these good things for us.

Let us say thanks to the white people. They brought these good things for us.

Mende:

A mu sei gbua ma ma ni ma. Tia mia ti wa a kpeke yei ngi mu we.

A mu sei gbua ndeuga ma ni ma. Tia mia ti wa a kpeke yei ngisia mu we.

A mu sei gbua ke kEisia ma ni ma. Tia mia ti wa a kpeke yei ngisia mu we.

A mu sei gbua maada ni ma. Tia mia ti wa a kpeke yei ngisia mu we.

A mu sei gbua pu blesia ma. Tia mia ti wa a kpeke yei ngisia mu we.

Mende Song:

Chorus:

Hamu sieh gbuah mama ni ma wae Hamu sieh gbuah mama ni ma wae

Verse:

Hamu sieh gbuah mama ni ma wae tia ta mu lengesia mabah

Chorus

Verse:

Hamu sieh gbuah mama ni ma wae tia ta mu lengah ngor

Chorus

Verse:

Hamu sieh gbuah mama ni ma wae tia ta mu lengah wopo

STORIES

Critical Incident Stories

CI Story #1: Exclusive Breastfeeding, written by Alice and Charley

This is a story about a suckling mother by the name Yeama and her grandmother called Mama Fattou. They lived in a village called Victoria in the Bonthe District, Bum Chiefdom.

Yeama has a new-born baby about three months old. One day Yeama told her grandmother to take care of her daughter because she Is going to launder her baby's clothes by the waterside. The grandmother called Mama Fattou asked Yeama, "How am I going to take care of this baby when the

baby is just three months old. She needs to breastfeed anytime she wants to. You know we agreed that we should not give any other liquid, like water, or food like ngewo bayei to the baby except breast milk.

Yeama said, "But Mama Fattou, when the baby is crying, please give her same warm water so that she will stop crying." "No, no, Yeama, it is not good to give the baby warm water," said Mama Fattou. "All I will tell you is please don't stay long at the waterside." "Okay, Mama," answered Yeama.

Yeama departed to the waterside. Not too long after, the baby started crying. She cried and cried. Then Mama Fattou got confused and started rocking and singing to the baby, but the crying continued.

Mama Fattou decided to give the baby to her friend in the village by name of Bendu. And Mama Fattou went to call Yeama at the waterside. As she went, the baby continuously cried. Bendu looked at the baby and became impatient. Bendu gave some water to the baby. Instantly, the water goes up the baby's head and she starts coughing and vomiting.

Luckily, the baby's mother came together with the grandmother and met the baby vomiting. They cried out, "What is wrong with the baby?"

Bendu replied, "I just gave the baby some water – that's all."

- 1. What happened when the grandmother left the baby with her neighbour? (Review)
- 2. What happened to the baby? Why? What will the mother and grandmother do now?
- 3. What do you think the story is about?
- 4. Why do people give their babies water?
- 5. How could mothers avoid leaving their children with people who might not feed them properly?



Mary and Joseph Practicing their Skit

CI Story #2: Complementary Feeding, written by Allieu and Rogers

Mamie is a mother of two children: Nancy and Joe. Joe is the youngest at 6 months. Mamie has learned that breastfeeding is good for her baby. Her mother-in-law Mama Luba has been helpful in ensuring that Joe is exclusively breastfed up to six months, but now that he has turned six months old, she has been preparing pap for him. Mamie continues to breastfeed him, but Joe also enjoys

the paps that Mama Luba prepares for him. She makes paps with benni, groundnuts, fish, vegetables, and fruits. Every day she tried a new type of pap, and Joe enjoys the variety. With all that good food, Joe is growing well, a happy and playful baby.

One day, Mama Luba received a message that her daughter-in-law in the city has had a baby. Quite suddenly, she leaves to attend to the new mother and baby. Mamie is confused. Mama Luba was making the food for Joe and now she is gone. What is she going to do? Mama Luba did not show her how to make the pap that Joe likes. So she asks for advice from her friend Yena. Yena says, "Mamie, making pap is easy. Just use rice flour, and add a bit of palm oil and salt. Joe will like it." Well, Mamie did what Yena said, and fed Joe pap with rice flour and a bit of palm oil and salt. Joe spit it out. He didn't like it. Even when he was forced to eat it, he cried and cried. Where was the delicious pap that Mama Luba made for him? Joe began to lose weight; he lost interest in playing, and looked sad. He wasn't growing anymore.

Mamie's husband, Baggie, becomes alarmed, noticing that Mamie isn't feeding Joe the same way that Mama Luba did. He sends for his mother, Mama Luba to come back.

- 1. How does Joe look before the grandmother leaves? (Review)
- 2. How does Joe look after the grandmother leaves? (Review)
- 3. Do you think that Yena gave Mamie good advice?
- 4. What do you think happens when Mama Luba comes back?
- 5. How do you see the role of the GM in the story?
- 6. Which foods are good to give children at 6 months of exclusive breastfeeding?



Joseph with Flannelgraph showing Mamie Louba, Mamie, Joe, Yena and Baggie

Comparison Stories

Nutrition and Child Health and Growth

Comparison Story #1: Nutrition and Pregnancy (written by Alice and Charley)

My name is Jattu. I am pregnant. I don't eat enough iron or Vitamin A rich food because I didn't want my belly and my baby to get big. I always did hard work at home because I didn't I am Fatmata. I am a pregnant woman. I eat a lot of food and drink a lot of water, and have a big belly. I eat enough iron rich food, including some animal protein like meat, fish and chicken.

want anyone to think that I was lazy. I started to feel abdominal pains and some bleeding during the pregnancy. During labour, it was not easy for me to deliver. However, after two days of hard labour, I finally gave birth to a baby girl. My baby was so small and I didn't have enough breast milk. I wonder how I will manage because this small baby cries all the time.

I usually eat other foods like fruits, such as banana, pineapples, oranges, mangoes and some green leafy vegetables, like potato leaves, greens, and lots of other foods. In fact, I eat groundnuts, eggs, some beans and cassava leaves.

My grandmother Mama Jenneh always advises me to rest and tells the bigger children to help me do the domestic work. She tells me not to overwork myself. They help me to sweep, fetch wood, pound rice and uproot the cassava in the farm. They sometimes help me to prepare the family meal.

My husband Tommy sometimes helps me too — to fetch wood, pound rice and uproot the cassava in the farm. I usually prepare nice sauce with enough oil. Pa Tommy also encourages me to eat almost all of the food mentioned and tells me to rest for a few hours during the day. During labour, it was not much difficult for me to deliver. I did not experience any abdominal pain or bleeding. I was so energetic and delivered safely. I had enough breast milk and energy. The nurses love to see my baby and play with it because she is so lovely.

Questions:

- 1. What did Jattu do during her pregnancy? What did she eat? What work did she do?
- 2. What did Fatmata do during her pregnancy? What did she eat? What work did she do?
- 3. Who has the easiest delivery? Jattu or Fatmata?
- 4. Who was able to recover from delivery faster? Jattu or Fatmata?
- 5. How is the experience of breastfeeding for both women?
- 6. How is the experience of being a new mother for both women?
- 7. If you were Jattu's mother, how would you advise her?
- 8. Is there any relationship between the food the women ate, their own health and the health of their babies?

Comparison Story #2: Nutrition and Breastfeeding (Written by Mary)

Sarah has a 4-month old baby. Sarah squeezed her first breast milk on the ground.

Sarah does not have time to breastfeed her baby Esther because of her work in the home and in the garden.

Sarah feeds her baby Esther 3-4 times per day and rushes to the garden to do her work.

Because the baby is so rushed to feed, he only feeds at the nipple and doesn't take benefit from the breast. Baby cries a lot and does not sleep.

Sarah also notices that he doesn't urinate too

Mary has a 3-month old baby, Naomi. Naomi got the first breast milk (colostrum).

Mary takes time to sit and feed her baby Naomi. She gives Naomi the first breast and Naomi feeds on it until she empties it. Then Mary transfers Naomi to the other breast. Grandmother also helped Mary in the feeding by doing some house work and making sure that she feels comfortable and relaxed.

Mary feeds her child 7-8 times a day and on demand. Naomi is satisfied with the breast mild

much in his nappies and she doesn't understand	and grows well.
why.	The nurses are happy to hold Naomi.
Baby's weight is not increasing, the nurse says.	
Sarah is so stressed because of her work, but	
now the nurses are also giving her worries	
because of the baby.	

Questions:

- 1. How does Sarah feed her baby?
- 2. How does Mary feed her baby?
- 3. What did Sarah do with the "first milk," the colostrum? What did Mary do?
- 4. Are there benefits to having baby drink the first milk?
- 5. What are the differences between how Sarah and Mary feed their babies?
- 6. Who helps Mary breastfeed?
- 7. What do the nurses say about the growth of Sarah's baby? Mary's baby?
- 8. How does Sarah feel?
- 9. How does Mary feel?
- 10. If you were Sarah's mother, how would you advise her?
- 11. Is there a relationship between the amount of breast milk and the health and growth of the baby?

Comparison Story #3: Complementary Feeding (Written by Joseph and Rogers)

My name is Nancy. My first-born baby is Vandi and he is above 6 months old. I live with my husband and no one else to support me. I have no one to show me how to prepare pap. The pap that I prepare is just rice flour, palm oil and salt. The child is not growing well and is sick frequently. He is dull, weak and only plays a little. Vandi is short. The little hair he has is not growing well on his head. I wonder why this is happening.

My name is Kardie. I am so glad because my 6 months old child Tom eats well because my mother Seibatu taught me how to prepare his food. As I also like to cook, when preparing my child's food, I often put benni, pounded fish, palm oil and groundnuts. I always give snacks to my child – snacks between meals like banana, orange, pawpaw and others.

My child loves the food I prepare for him. He is active and loves to play. When I took him to the clinic the nurses told me that Tom is growing above average for his age. My husband and I are very proud of him.

Questions:

- 1. What is Nancy's problem?
- 2. Why do you think she has this problem?
- 3. Do you think that Kardie is a good mother? Why or why not?
- 4. What food does she give baby Tom? Do you agree with her food choices for Tom?
- 5. What are the differences between how Vandi and Tom look and behave?
- 6. If you were Nancy's mother, how would you advise her?
- 7. What foods do you think are good to give baby at 6 months of age?
- 8. Is there a relationship between the type of food given to the children and their heath and growth?

GAMES

1. Board Game



This game was pre-tested successfully.

Objective: To discuss various issues related to the qualitative research findings.

Questions and tasks given in the four types of cards were developed by everyone on the team.

Surprise Cards:

Demonstrate how you pamper your grandchild.

Then move ahead 5 spaces.

Demonstrate how to make Bennimix. Then move ahead 10 spaces.

You made a delicious pap with fruits and vegetables, and your grandchild of 8 months ate a whole bowl full.

Congratulations! Move ahead 10 spaces.

You encouraged your son to buy good food for your pregnant daughter-in-law. Very good!

Move ahead 10 spaces.

You encouraged your daughter to keep on exclusively breastfeeding. Well done! Move ahead 15 spaces.

Problem Solving Cards:

My 4-month old grandchild cries a lot. What should I do?

- a. Continue exclusive breastfeeding on demand OR
- b. Introduce warm water and other foods? Explain which opinion you agree with and why.

I have prepared a healthy pap for my 7-month old grandchild. Is it made from

- a. rice, palm oil and salt OR
- b. is it Bennimix?

Explain which opinion you agree with and why?

My grandchild has been breast fed for 6 months and is now ready to eat his first pap.

Do I advise my daughter to feed him

- a. by hand OR
- b. by cup and spoon?

Explain which opinion you agree with and why?

My grandchild has diarrhea. Do I advise my daughter to

- a. administer ORS at home OR
- b. go to the clinic?

Explain which opinion you agree with and why?

My grandchild is over 6 months and refuses to eat complementary food. What should I do?

- a. Advise my daughter to continue to breastfeed her OR
- b. Advise her to try other recipes that my granddaughter might like?

Demonstrate how your grandchild cries. Move ahead 15 spaces.

Show how you dance for your grandchild. Then move ahead 5 spaces.

Show how you sing to your grandchild. Then move ahead 10 spaces.

Advice Cards – The District Nutritionist says:

All pregnant women should reduce their workload and take lots of rest during pregnancy.

What is your opinion on this advice? Is this advice followed in your community?

Encourage your daughter to practice exclusive breastfeeding for 6 months. What is your opinion on this advice? Is this advice followed in your community?

Make sure that the baby drinks all the first milk (colostrum) – do not discard it. What is your opinion on this advice? Is this advice followed in your community?

After 6 months include animal proteins as part of the baby's diet.

What is your opinion on this advice? Is this advice followed in your community?

Wash your hands before feeding the baby. What is your opinion on this advice? Is this advice followed in your community? After 6 months, give your baby nutritious

Explain which opinion you agree with and why?

My daughter does not get enough food at home. She has a 3-month old baby who she is breastfeeding.

- a. Do I encourage her to continue breastfeeding OR
- b. Do I encourage her to stop breastfeeding and give the baby other foods?

Explain which opinion you agree with and why?

My daughter has a baby of less than 6 months and her nipples are bleeding.

- a. Should I encourage her to continue breastfeeding OR
- b. Should I encourage her to stop breastfeeding and give the baby other foods?

Explain which opinion you agree with and why?

My daughter is pregnant.

- a. Should I encourage her to eat a lot to have a big belly? OR
- b. Should I encourage her to eat only a little to have a small belly?

Explain which opinion you agree with and why?

Role of Grandmother Cards:

Is this true? What are your experiences and opinions about the Grandmother role?

"It is most often the Grandmother who feeds the first pap to a child, because many young mothers don't know how to feed a young baby."

Is this true? What are your experiences and opinions about the Grandmother role?

"Grandmothers are more attentive to whether children have eaten enough and often they prepare special snacks for them to be sure that they are not hungry."

Is this true? What are your experiences and opinions about the Grandmother role?

"Grandmothers are the ones who know the newborn." After birth and during the first weeks of life, it is the GMs who are closest to the baby and the mother during the day and also at night. Is this true? What are your experiences and opinions about the Grandmother role?

"Grandmothers have a number of strategies they use to get children to eat, including singing to them, promising to take them for a walk, promising to carry them on their back, etc."

snacks, such as mango, orange, groundnut cake and benni cake.

What is your opinion on this advice? Is this advice followed in your community?

Women should breastfeed day and night and whenever the baby wants to feed. What is your opinion on this advice? Is this advice followed in your community?

Breastfeeding women should eat and drink a lot to produce enough breastmilk. What is your opinion on this advice? Is this advice followed in your community?

All women should eat well when they are pregnant to be strong for delivery.

What is your opinion on this advice? Is this advice followed in your community?

Is this true? What are your experiences and opinions about the Grandmother role?



When we played the board game, we didn't pursue start to finish, although we could have done so. It was non-competitive without prizes. Throwing the dice and landing on a colour allowed the GMs to answer a question from the colour category. Playing the game was fun to GMs, even if there wasn't a goal other than answering the questions.



2. Lucky Dip

(Idea from Charles)

This game was pre-tested successfully.

Objective: Same as Board Game. In addition, could be used for review of previous sessions or to start a discussion about the topic of a new session.

You can use the same cards for Lucky Dip as you do for the Board Game, or make another set. If you have many GMs, you'll need more cards than those included in this guide.

Depending on the colours of your cards, you can cut up pieces of paper with those same colours. We used red, green, blue and yellow for the cards. We cut up 8 pieces of paper of each colour to put in the Lucky Dip bag.

This game allowed women to sit in their places, rather than get down on the ground to play the board game.



3. Ball Toss

This game was pre-tested successfully.

This is a good game for review of a previous lesson(s), or can also function as an energizer.

Objective: Review the facts or good practices

Instructions:

Blow up a big beach ball or use a smaller soft ball. Show GMs how to pass and toss the ball. Ensure that they understand that it cannot hurt them.

Explain that someone will toss the ball to one of them, and that they will have to quickly answer the question and throw the ball to another GM who will give her response to the same question.

There should be many options for answers to the question. If someone says that wrong answer, pause the game and ask if everyone agrees.

These are some options for the ball toss.

- · Complementary food options
- Breastfeeding advice
- Tips to a healthy pregnancy
- Healthy baby tips

Toss about 5 times for each question and then move on.

Keep this game light, fun and quick. Keep smiling.



4. The Unity Game

(Idea jointly devised by Mary and Rogers)

This was developed by the team, but not pre-tested. We observed that some GMs know the correct practices for infant feeding and care, and some do not, or are not sure. This game allows for discussion of new and old practices, and creates a space for a unified way ahead without implying blame or shame.

Objective: To be in agreement and unified in healthy practices for baby feeding and care.

Take a bunch of sticks (any portable size) to represent firewood.

In Mende culture, firewood represents "life;" a bundle of bound firewood represents "unity."

Instructions:

Take the bundle and break the string that binds it. The sticks are all scattered.

Tell GMs that when we have different ideas about how to care for babies and children, we are not unified. We need to aim to be unified in how we attend to babies and advise young mothers.

Some of the practices that cause disunity are the following:

- Washing the baby's stomach at birth by feeding herbs and water
- Giving warm water and ngoh byai, interrupting 6 months' exclusive breastfeeding
- Discarding colostrum

Before mentioning these practices, ask GMs what different practices exist on baby feeding and care – What are the differences between how they carry out these tasks? Do they see certain practices as outdated or harmful? Are these still practiced?

Identify one practice that they will all agree to change, so that all GMs are unified on the feeding and care of babies. Once they have discussed and agreed, have them pick up one piece of firewood and add it to the bundle. Have one or two GMs tie up the bundle to symbolize their unity on the issue. Label the bundle. Remind them of their promise to abide in the unity of their commitment to follow healthy practices.

5. Match Maker Game

(Idea from Mary, District Nutritionist)

This was developed by the team, but not pre-tested. The team observed that during the "thank you songs" for grandmothers, the WRAs were reluctant to sing their song. In turn, GMs were reluctant to sing their reply to WRAs. We were not entirely sure of the reason for this reluctance, but believe that it may be related to a tenuous relationship between the two groups.

Objective: To get GMs and their "daughters" (WRA) to talk about issues of baby feeding and care in a non-threatening and fun environment.

Instructions:

Take a bundle of sticks, enough so that each participant can take one, and mark them with different colours. You can use markers (black, blue, green, red) or pieces of coloured paper taped on. The numbers need to be divisible by two.

WRAs, including pregnant women, and GMs pick the colours they want.

Based on their colours, they match up. In groups of two, they are asked to discuss a topic related to child care and feeding.

The topic for discussion should be covered beforehand in the lesson for the day.

After they have some time to discuss, they are asked to share how they felt talking together as WRAs and GMs, without necessarily being directly related to each other. Ask them if there are ways that WRAs and GMs could improve on how they communicate with each other. Ask for positive stories about good relationships between GMs and WRAs.

6. How many sticks?

(Idea from Mary, District Nutritionist)

The District Nutritionist recommended time spent discussing cooking methods and time with GMs. This is because most women just put their food under a roaring fire and leave it. More attention needs to be paid to cooking time to avoid nutrient loss.

Objective: To discuss cooking methods, saving energy, and saving nutrients.

Instructions:

Split the GMs into 2-3 groups, depending on size. Give each group a bundle of sticks.

Using their bundle of sticks, ask GMs how many sticks it takes to make:

- Bennimix
- Eggs
- Potato Leaf stew
- Rice
- Others

Each group should give their answer to each of the questions one by one. Discuss the answers and any differences. Come to a consensus on the number of stick, based on an explanation of why only a certain number of sticks is necessary.

7. How old?

(Idea from Mary, District Nutritionist)

Feeding within the first 2 years is essential for health and growth. However, the issue of child feeding and when to introduce what food is complicated. WRAs inability to effectively move through the feeding transitions in the first two years causes stunted growth and illness.

Objective: To discuss what foods should be introduced to children at specific months / ages.

Instructions:

Use 24 sticks, representing the first 24 months of the child's life.

In a facilitated process in plain view (either on the ground or on a low-lying table), ask GMs to help you arrange the sticks according to "milestones" in feeding – what types of food get introduced when in the first two years.

For example, you want to promote exclusive breastfeeding for the first six sticks. However, GMs may have different ideas. Listen to all their ideas, but in the end emphasize the majority opinion – that only breast milk is best for the first six months.

You may want to divide up the next 18 months into quarters, asking GMs what types of solid foods to introduce at six months, 9 months, 12 months, etc.

At each interval, come to a consensus about which foods are best. Don't forget to include breast feeding, which should continue for the first two years.

To assist GMs in their thinking, you may want to have visuals available, i.e. fruits, vegetables, meat, fish, chicken, etc. – actual items or pictures.

At the end, you will have a "calendar" made from sticks to remind them of foods to be given to children in their first two years.

8. Grandmother, give me a blessing

In this area of West Africa, it is common for children to carry their grandmother's stool, sit with them, give them company, and ask them to tell a story. Grandmothers love telling stories and being listened to. At the end, the grandchild will ask for a piece of advice or a "blessing." Then the grandchild will give a little gift to the grandmother in appreciation for the "blessing." The most common gifts requested by grandmothers are kola and snuff, but other gifts are fine too (soap, pomade). Giving gifts to grandmothers is important because it makes them feel loved and appreciated.

Objective: to emphasize that the greatest "blessing" a grandmother can give her grandchild is to ensure that they get the food they need to grow well and be healthy.

Instructions:

Have grandchildren with their mothers parade into the meeting space with their grandmothers. The children should carry their grandmothers' stools.

They should all sit together (grandmother, their daughters, their grandchildren). Grandchildren say together, "Grandmother, tell me a story." Have some grandmothers volunteers to tell stories about their memories of when they were young: how they would play, what they would eat, what they did when they were children.

After 2-3 stories, children are prompted to say, "Thank you for your story. Now, Grandmother, give me a blessing."

Grandmothers can agree that one of them will give a blessing collectively to their grandchildren, or several can offer advice or blessings.

The facilitator says, if we want our grandchildren to grow up big and strong, like your blessing says, what do we need to do ensure their growth and health?

They may come up with various responses, but prompt them to include these messages:

- Feed expectant mothers good food and ensure that they get enough rest, so they get "big bellies." A big belly means that she is strong and will have a healthy baby.
- Help breast feeding mothers to breastfeed in a relaxed and concentrated way. Help do some of her work, or encourage husbands and other children to help out. Ensure that she is eating and drinking to promote production of breast milk.
- At six months, help mothers to prepare healthy paps for baby. Give baby snacks.
- Wash hands before feeding baby.

At the end of the session, distribute small gifts to the grandchildren to give to their grandmothers. Children should say thank you to grandmothers for all their "blessings" to them, for taking care of them and giving them good food to eat.

Playing this game takes some organization and coordination in the community beforehand, but it is worth doing. It will be very memorable for everyone involved. Maybe do around a special holiday or on a Grandmother's Day.

9. Changes

It is important for everyone in the community to realize that changes are constantly taking place as we do research and learn new information about how things work. Also, customs and traditions change as other things replace them. There are good aspects of traditions, but there are also harmful aspects of traditions. Customs and practices come and go, as they are seen to be relevant in the community. This is also relevant for customs around pregnancy and infant feeding.

Objective: To remind grandmothers that things change, but their love for the grandchildren, and their grandchildren's love for them stays the same.

Instructions:

The communities which participated in the research can remember when the team came to do their investigation. How do they understand the research activity? What was its purpose? We presented to the community one aspect of the research that was related to the roles that different family members play. Now it's time to present some of the findings related to child feeding, growth and health. At the same time, we need to get across the idea of change and its causes by using our adult education problem posing approach.

- 1. Ask grandmothers if things are the same as they were when they were children.
- 2. Ask them to list specifically what things have changed. These are some of the things they might say:
 - a. There are cell phones now, so that we can talk to our relatives any time we want
 - b. Girls go to school, just like boys, so they have a change for a different life
 - c. There are more clinics and nurses to help us when we are sick
 - d. There are more vehicles and roads to help us get to markets
 - e. There is World Vision and NGOs to assist us with our development
 - f. We seem to have less food than before
 - g. Times are harder
 - h. The weather is changing.
- 3. Now ask them what they think causes these changes. They might say things like:
 - a. War
 - b. Development
 - c. Government and NGOs
 - d. Research, information, education
 - e. Technology (towers)
 - f. Forgetting old values and family structures.
- 4. Ask GMs if all the changes are good. If they say no, ask which changes are good and which are not so good.
- 5. Now ask GMs if there have been changes or new ideas about infant and child feeding. What are the nurses and health workers telling them that may be different from previous their understanding?
 - a. Using herbs to clean stomach
 - b. Feeding infants water
 - c. Feeding infants ngoh byai
 - d. Other examples
- 6. Ask them why they think there are changes recommended on these practices. What practices are discouraged by the health workers? What practices continue to be encouraged by the health workers?
- 7. Finally, what changes do they agree that they should promote in unity?
- 8. Grandmothers are encouraged to sing a song about that change and their unified stance. Emphasise that changes can be good. Some changes can save lives and make life better.

10. Put another stick on the fire

In Sierra Leone, grandmothers like to stay warm. They sit close to the fire in the evening. In the morning, relatives often assist them to sit in a sunny place for a while until grandmothers get warmed up for the day. Therefore, sticks of firewood are important for grandmothers because they keep the fire burning, keeping them warm. As a gesture of love and care, children bring sticks of firewood when they see their grandmothers. In fact, most children are expected to bring something to make grandmother more comfortable every time they come to visit.

Objective: To show the positive reciprocal relationship between grandchildren and grandmothers.

Instructions:

- 1. Grandmothers sit in a circle. A pile of firewood is outside the circle.
- 2. Grandmothers are asked to share stories of what changes they have made to their practices with their daughters and grandchildren since attending the Mamaniva group. These may be some of their answers:
 - a. I encourage my daughter to continue to breastfeed even if she is tired. I encourage her husband and older children to help her with her chores so she is more rested.
 - b. I used to give my grandbaby water, but now I don't. I realize that breast milk contains everything a baby needs.
 - c. I didn't use herbs when my last grandchild was born. I now realize that herbs are too hard on the baby's stomach, so have stopped.
 - d. I made sure that my daughter gave every last drop of first milk colostrum to my new grandchild. I know that the first milk is special milk.
- 3. Every time a grandmother makes a contribution, put a piece of firewood in the middle of the circle.
- 4. After as many contributions as the grandmothers have to offer, draw their attention to the large pile of firewood in the middle. Ask them what they think the pile of firewood means. These are some possible answers:
 - a. Once lit, the firewood will keep us warm. We can feel warm inside and outside knowing that we have done the right things for our grandchildren.
 - b. The firewood will make a good fire which will last for a long time. The fire means that we love our grandchildren and do the right things for them.
 - c. Firewood is life. We give life to our grandchildren by doing things that make them healthy and grow fast.
- 5. After all the answers, light one stick and hold it up. The stick on fire represents the love of grandmothers for their children. Ask them to sing a song about the fire and the love they have for children.

Pictures

Most of these photos were taken in Dodo. They need to be blown up and laminated for use by the team.

Show the picture, and ask the grandmothers questions related to the picture. This allows them to reflect on the lives and situations of grandmothers in other places.



Wise Grandmother

This grandmother is smiling a little. She looks very wise.

What words of wisdom do you think she would like to share with you about how she helps take care of her grandchildren? They are toddlers aged 1 and 3, named Alusine and Miriama.



Grandfathers helping out

We don't often think of grandfathers helping out with very small children. What do you see here? What do you think of these grandfathers? Would you encourage grandfathers in your village to spend more time with babies and small children? Why or why not?



Grandmothers Together

These two grandmothers are friends from different villages. They have just met in town. The GM with the blue head tie has a daughter-in-law who just gave birth to a baby boy.

What do you think she is telling her friend about how she is helping her daughter-in-law care for the baby?



Surprise for Grandmother

This grandmother looks surprised and happy.

What do you think has happened to make her so happy?

Now that she has heard the news, what will she do next?

What makes you happy? What can your daughters and grandchildren do to make you happy?



Grandmother is eager to hear the news!

This grandmother is leaning in to hear the news!

Her daughter in another town has just had a baby. She has been informed that she needs to travel to help out.

What will she take with her in her travel bag?

What is the first thing that she will do when she arrives and sees mother and baby?

How will she help out?

How long will she stay?

What advice will she give the new mother?



Proud Grandmother

This grandmother is thinking carefully about what she wants to say next. Who do you think she is talking to? Her son whose wife has just had a baby. What do you think she is going to say to him?

How will she advise him to care for his wife?

How will she advise how to care for his new baby?

Will she encourage him to make some changes in his activities? Which ones? According to her, what makes a good father?



Grandmothers with Grandchildren

Here are two grandmothers. One has a toddler, and the other has a baby.

How old is the baby?
What is he doing?
Do you think that he is healthy or sick?
Why does the grandmother have him?
Where is his mother?

Appendix 1 -- Ratio of Preparation Time to Delivery of an Adult Education Session

Mamaniva team will need about 2-4 days to prepare a 2-hour session for delivery.

Drawing on your 2-year plan for Mamaniva sessions, for each session you will have to:

- Meet as a team to prepare agenda
- Choose a topic and the content
- Search for relevant materials on the subject, read, become familiar with topic
- Make a "lesson plan:" learning objectives
- Write your stories, plan your games
- Arrange for or design and develop your visual aids
- Translate materials
- Rehearse and practice
- Inform communities of your schedule for meetings
- Make all logistical arrangements
- Prepare advances

There are 16 Mamaniva villages, all in Toma section. If you plan to visit one village per day, you will be able to do – at best – one session per month.

Appendix 2- Checklist for trainers' self-evaluation

Ask yourself these questions. Do I:

- Know the information well?
- Relate the information to what grandmothers already know?
- Ask questions and lead discussions to encourage grandmothers to participate?
- Make training plans and materials before training sessions?
- Cover the most important things and leave out things that are not important?
- Speak and write so that people can understand?
- Give examples or tell stories to make ideas clear?
- Answer questions and give criticism with patience and good humour?
- Reinforce and repeat the most important points?

Adapted from: WHO/UNICEF Nutrition Support Programme. 1989. *Nutrition Learning Packages*. Geneva.

As a test to the first point, *Do I know the information well*?, the facilitator asked the staff the following questions:

- What foods are good for a mother who is breastfeeding?
- How often should a mother breastfeed her baby?
- What should a mother in your community do if she thinks she does not have enough breast milk?
- How can a mother know whether her baby is getting enough breast milk?

Not all the staff had the right or complete answers and needed to be informed by the District Nutritionist. This showed the staff that they need to do their homework before going to the community.

Appendix 3 - Insights from de-briefings on pre-testing activities

After 3rd session in Victoria (October 24, 2013)

- When women received their name tags and were called by name every time, they felt that they belonged
- During the recap of the second day, women were able to recite everything they heard when the stories were told; most gave appropriate answers
- Willingness of GMs to play because they never did it (played a board game) before
- They couldn't wait to get started after they got their beads as place markers. They were very well engaged and waited their turn.

Improvements from the 2nd session:

- Agenda was planned and followed
- Introduction was clear
- This time everyone could see; everyone was included
- The seating arrangement and positioning of the facilitator was optimal
- Focal point (Facilitator Joseph) was clear and commanded attention; intonation normal and calming
- The placement of the game on the ground on mats made it possible for everyone to see. The facilitators and the players sat low on the ground, while the others sat on their benches and waited their turn or listened to the responses.

Further improvements needed:

Activities too long: introduction, recap and game, especially conclusion to game

Tip: An activity goes on too long if:

- It exceeds the time allotted
- You lose your crowd people don't pay attention, dozing, not responding, sneaking away, roaming around, other observers (those standing around) disrupt.



Rogers, Field Officer

After first session in Dodo (October 25, 2013):

- Good use of Mende language by Joseph and Rogers
- We saw that in questioning GMs and allowing them to discuss, they understood much better than if we "pushed" them.
- The facilitator placed himself so that everyone felt included.
- The facilitator's intonation was calm and clear, not excited and jumbled.
- Stories were narrated so that the communities understood them the first time.
- Team is starting to feel more confident; facilitation is more free and flowing.
- Community is very cooperative.
- We learned that "animation" means to keep things moving!

Appendix 4 - Workshop Evaluation



Adult education tools learning curve: red buttons shows before and green buttons after the training

- On a learning curve, the remaining four participants said that their learning about adult education tools went from between 30-50% to 80-90%.
- These were the things that helped or showed them that adult education approaches could be successful:
- On-site, on-the spot correction by the trainer
- Everyone sits at the same level
- GMs willingly and happily participated in the board game, even though we didn't think that they would and even if they did, we didn't think that they would get much out of it
- Just present scenarios no need to make judgement or conclusions
- People heard the stories and were able recount them and answer all the questions appropriately
- The "comparison stories" really worked
- We didn't think that anyone would be able to related to the pictures on the flannelgraph, but they had no problem in doing so
- We never thought that we would see Grandfathers sing to Grandmothers!
- Working with grandmothers requires patience.



Joseph, Project Coordinator

Appendix 5 – What Mamaniva team wants to see in their workshop report

- All activities should be represented
- Other stories to adapt
- Description of the process the ways we approached planning these are the things that we need to put in place
- Photos of staff and participants
- Describe trainees, their background and contributions
- Participant Certificates (still need to be done)



Alice, Field Officer and Charley, District Adult Education Teacher

Appendix 6 - Recommendations for next steps

World Vision need to do everything it can to make the project succeed – it is crucial for child survival. There are 16 Mamaniva villages. If staff plan to visit one village per day, you will be able to do – at best – one session per month. Therefore, Mamaniva needs support to develop 24 lesson plans (one per month for 2 years) – this includes the technical information, the content and process, including visual aids.

1. Topics and Message Development: WV/Mamaniva nutritionists should assist in prioritizing messages and providing a list of 24 topics for sessions.

- 2. Curriculum Development: sessions need to be planned carefully in advance of going to meet grandmothers. Sessions should be prepared 2-3 months at a time for the sake of consistency of themes and messages.
 - a. One suggestion is to have a curriculum development workshop with district health and education people, using some existing and some new audio-visual aids. Because of schedule conflicts, sessions could be held in the evenings.
 - b. Another suggestion is to have someone come every 2-3 months to assist with curriculum development and pre-testing sessions.
- 3. Training: the team needs more training on nutrition issues and a refresher on adult education tools.
- 4. Nutritionist: WV needs a nutritionist to be closely involved with Mamaniva.
- 5. Links to PD Hearth should be created
- 6. Links to the Ministry and Mamaniva need to be formalized, articulated more specifically
- 7. Integration with other ADP activities: GMs who are still active want to be involved with related activities, especially those with income generating potential.

Appendix 7 - Plays to be adapted from Farm Radio International

http://www.farmradio.org/

Package 30, Script 8 October 1993

Breastmilk Can Protect Your Baby from Sickness

Content: Colostrum in breastmilk helps protect newborns from germs that cause tetanus, whooping cough, pneumonia, diphtheria, and stomach upsets.

Mother: (*shyly*) I'm pregnant.

Doctor: (*laughing*) Yes, I can see that. There's no problem, is there? Have you just come for a check-up?

Mother: No, you see, I've heard there is something I should give my baby, right from the start, something that will protect him.

Doctor: (interjecting) Or her!

Mother: (*laughing*) Or her -- something that will protect him or her from germs and diseases, something that's very important.

Doctor: You're right. There is something and it IS very important.

Mother: What is it?

Doctor: It's called colostrum. It's vital for your baby. You must give it as soon as he -- or she -- is born.

Mother: (worriedly) But how much does it cost? Is it easy to get?

Doctor: It's free.

Mother: Free! Where do I get it?

Doctor: (*laughs*) You have it already -- or you will soon. It's in your breastmilk. It will protect your baby as soon as it's born and as it grows. It will help protect the baby from germs that cause tetanus, whooping cough, pneumonia, diphtheria and stomach upsets.

Mother: Colostrum! In my breastmilk!

Doctor: Yes, your own breastmilk. It will protect her or him from viruses like those that cause influenza, measles and chicken pox.

Mother: Breastmilk! (loudly and with conviction)

Announcer: Yes, breastmilk. Breastfeed your baby from the beginning. It's safe, it helps fight diseases, it contains everything a growing baby needs, and it's free.

Package 69, Script 1 December 2003

A healthy diet for babies and young children

Notes to broadcaster

The following six spots focus on different aspects of a healthy diet for young children. The spots tell a story that unfolds over time, but each has a separate message. They can be used together in a series or they can stand alone and be played separately, at different times of the day, week or month.

Several of the spots are based on key messages called Facts for Life from UNICEF about child nutrition and health (see information sources at the end of script). You might want to consider creating other spots using basic nutrition guidelines from UNICEF or from another national or local health organization.

Three voices are needed for the different characters in the series, the mother, the doctor, and the young daughter, Rosa.

Characters:

Host Doctor

Mother and her baby

Rosa: young girl, about seven years old

Spot 1: Weigh your baby every month

Host: Welcome to our program! Today we begin a new series that focuses on a most precious resource — our children. Every child has the right to survive and to thrive. Yet around the world every day, millions of children are deprived of the love, care, nurturing, health, nutrition and protection that they need to survive, to grow, to develop and to learn.

Over the next few [programs/days/week], we will talk about some of the issues that affect children in our own communities, especially good nutrition, the importance of education, HIV and AIDS, children's rights, and appropriate work and workloads.

We begin the series today with some basic information about feeding your children at different stages of their lives.

Sound of baby crying

Doctor: Shall we begin the examination, Mrs. Petros?

Mother: Yes, Doctor.

Fade out sound of baby crying

Doctor: Okay then. Please put little Sara on the scale so I can weigh her. [*Pause*] Hmmm. [*Pause*] How old is she now? If I remember correctly, she's six months.

Mother: Yes. Is everything okay?

Doctor: You know you didn't bring Sara to see me last month. You missed a month.

Mother: That's because it's harvest time...I've been so busy...[*Pause*] Is something wrong with my baby?

Doctor: Sara hasn't gained weight since the last time I saw her. She should be gaining weight every month.

Mother: [*Upset*] Oh no...what can I do?

Doctor: You must continue to breastfeed. But you must also start feeding her different foods, in addition to breastmilk.

Mother: Will she be okay?

Doctor: It will take her a while to get strong again. That's why you must bring her every month. That way, if we see a problem we can try to fix it immediately.

Host: A young child should grow well and gain weight rapidly. Have your child weighed every month, from birth to age two. If your child has not gained weight for about two months, something is wrong.

Musical break

Spot 2: Feed different foods to your baby after six months

Sound of baby crying

Mother: [Calling out] I'm home, Rosa! Come quickly and help me.

Rosa: Hello Mother...I guess you've come from the market...so much food!

Mother: I had to buy these foods for your baby sister. She's not growing the way she should be, and the doctor says she's not eating enough.

Rosa: [*Upset*] But Mama — you are feeding her your breastmilk all the time.

Mother: Yes, and she still needs breastmilk. But she's six months old now. Sara also needs lots of other foods so she will grow.

Rosa: All these foods? Eggs, cheese, millet...

Mother: Yes...

Rosa: ...carrots, sweet potatoes...Does Sara really need so many different foods?

Mother: If we want her to grow strong and healthy — yes! But just in small servings to start. Now, I must start cooking these vegetables. [Sound of pots and pans banging together]

Host: Your baby needs only your breastmilk until the age of six months. After six months she needs a variety of other foods, as well as breastmilk. Remember to begin with small meals and introduce only a few new foods at a time. Start with the traditional cereal porridge. Soon you can add other things to the porridge for a more complete food. Add milk, or a small amount of beans and a little oil, or peanut paste, or boneless fish, or cooked egg yolk. Your baby can also eat pureed fruits and vegetables beginning around six months. Mix them in with the porridge too if you like. Remember, feed your baby a variety of nutritious foods. The more variety the better!

Musical break

Spot 3: Feed your baby five times a day, in addition to breastfeeding

Sound of baby crying

Mother: [*Upset*] Doctor, I've done everything you suggested. I've been feeding Sara all of the good nutritious foods you suggested. I cook everything well, and I mash it...but...Sara is still so small.

Doctor: So you think that she's still not gaining weight?

Mother: I don't think so.

Fade out sound of baby crying

Doctor: Let's see. Let me weigh her again. [Pause] Hmmm.

Mother: Am I right?

Doctor: You are right. She's gained a little, but not as much as she should have. Are you still

breastfeeding?

Mother: Yes.

Doctor: And you're giving her other nutritious foods?

Mother: Yes.

Doctor: And you feed her five small meals a day?

Mother: [Surprised] Five meals a day?

Doctor: Sara's a year old now. She should be eating four or five small meals a day.

Mother: But that sounds like so much!

Doctor: Don't feed her big meals — her stomach is still small. But feed her four small meals every day.

Host: Beginning at six months of age, your baby needs a few small meals a day. Start with two to three meals and gradually increase the number of meals so that by two years of age, your baby is eating five times a day, in addition to breastfeeding.

Musical break

Spot 4: Save green leafy garden vegetables for your family

Rosa: Hello mother! Are you coming from the garden?

Mother: Yes. And I'm going to take these onions to market.

Rosa: What about the spinach you harvested, and the other leafy greens?

Mother: Those I'm saving for us to eat. Dark green leafy vegetables are especially good for you and your baby sister to eat. They are full of nutrients such as vitamins and minerals.

Rosa: But you could make a lot of money from selling the green leafy vegetables.

Mother: I could make some money, yes. But if I sell my leafy greens, the people who buy them will be healthy — but not my own children!

Host: Don't sell all of your green leafy vegetables. Save some for your family! They will help keep your children healthy and strong. And remember — the most nutritious vegetables are fresh vegetables! Eat them soon after harvest.

Musical break

Spot 5: Children need the 'eyesight vitamin'

Doctor: Children six months and older need to get the 'eyesight vitamin' from the foods they eat. Children who don't get enough of the 'eyesight vitamin' are sick more often and can become blind.

The eyesight vitamin can be found in eggs, milk, cheese, red palm oil, mangoes, papayas, sweet potatoes, carrots, and dark green leafy vegetables.

If you can't get these foods, you will need to see a health worker. Next time you see a health worker, check to make sure that your children are getting enough vitamin A, the eyesight vitamin, in the foods they eat.

If not, the health worker may be able to provide vitamin A capsules for your children.

Vitamin A is the 'eyesight vitamin'.

Musical break

Spot 6: Buy healthy treats for your kids

Rosa: Sometimes when we go to market, my mother has a little extra money to spend.

Mother: Rosa asks me if I will buy her a treat — usually she wants a soda pop or a sweet.

Rosa: [Groaning] But my mother says it has to be a healthy snack!

Mother: I buy Rosa a nutritious treat that will help her body to grow. Some fresh fruit or some roasted nuts.

Rosa: Or roasted corn on a stick. And fruit juice!

Doctor/Host: If you have a little bit of extra money to buy a snack for your kids — don't buy them sweets or soda pop. Buy them a healthy snack that will make their bodies stronger.

Musical break

Host: We've learned some simple but important information today about feeding children — from birth and up. If we nurture and care for our children in their early years, they are more likely to grow healthy and become creative and productive members of our communities.

Thanks for listening. I'm your host, [______]. Tune in next [time/week/month], for a story about girls' equal right to a healthy diet.

- END -

My grandmother, the home garden manager

Message: Grandmothers have a special and often critical role in making household decisions, including those that relate to family nutrition and health. In particular, their contribution to household food security and nutrition should be acknowledged and respected, to contribute to their own sense of confidence and empowerment.

Program (narrated story): A young girl tells, in her own way, the special role her grandmother has in providing nutritious food for her family. She explains the complicated tasks that her grandmother manages including the following: identifying the type and quantity of foods that each member of her family needs and which foods she can grow in her garden; planting in succession so that there is a new crop to harvest at all times; planning crop rotation; and processing foods in a way that best preserves nutrients. This story can be told by the young girl or through dialogue between the girl and her grandmother.

Package 57, Script 6 October 2000

Nutrition - Advice to an Expectant Mother

Main message of this broadcast: A good diet — both for expectant mothers and their children — is essential for healthy children. This drama explains why, and gives some suggestions for a nutritious diet.

Characters:

Narrator: Host of radio program.

Elizabeth: Young woman, recently married and moved to her husband's village.

Mrs. Nyanga: Elizabeth's mother.

Narrator: After walking all morning, Elizabeth has finally arrived at her mother's village. This is the first time Elizabeth has visited her mother as a married woman. Elizabeth

is eager to tell her mother, Mrs. Nyanga, all the news from her husband's village. Listen to the happy reunion between mother and daughter.

Mrs. Nyanga: Elizabeth, is that you? Oh, I am so happy, my daughter has come to visit her old mother. How are you my child? Is your husband treating you well? Are you being good to your new family? Are they pleased with you?

Elizabeth: [LAUGHING] Greetings mother! So many questions! I am fine and happy to see you looking so well! Yes, my husband and family are well and send you their greetings. They wanted me to bring you these vegetables from their garden.

Mrs. Nyanga: What lovely tomatoes. Your new family must be pleased with you. Come here, daughter, and let me look at you.

MUSICAL PAUSE.

Yes, you are carrying a child! I am sure of it! My daughter has become a woman!

Elizabeth: Mother! How can you say this ... I have only been married a few months! How can you tell if I am pregnant? Even I do not know if this is true. Please do not say such things!

Mrs. Nyanga: A mother can tell. I know. Come here daughter and sit with me. I want to hear all your news about your new home. Suzanne, bring us some tea for my pregnant daughter and me.

Elizabeth: [LAUGHING] Mother, you have not changed at all. It is as if time stood still!

Mrs. Nyanga: Yes, yes Elizabeth. Before you tell me your news I must tell you some things. I am concerned for your child.

Elizabeth: Mother, stop I ...

Mrs. Nyanga: No, listen. I am speaking to you — mother to mother. Except I am old and you must listen while I still breathe.

Elizabeth: Yes, of course mother.

Mrs. Nyanga: First, I want to make this clear. You must not fast for the next few years.

Elizabeth: What do you mean mother?

Mrs. Nyanga: We have many different occasions for fasting. [GIVE EXAMPLES OF LOCAL RELIGIOUS OR CULTURAL OCCASIONS FOR FASTING.] It is not good to go without food when you are pregnant. This practice will harm your unborn child. Also, after your child is born you must continue eating very well, every day. You will be breast feeding. Your baby will need the food that you put into your body to give it its own food from your breast.

Elizabeth: Breast feeding? But mother, now they have all these baby food formulas in town. We women do not need to breast feed after the first few months!

Mrs. Nyanga: Elizabeth, you have seen your younger brothers and sisters grow. Did I not breast feed each one? And for nearly two years as well?

Elizabeth: Yes ... but ..

Mrs. Nyanga: And you have seen Mrs. Haile and her children?

Elizabeth: You mean the shopkeeper's wife? As babies, her children were always sick. Even now, her eldest Sarah does not look well.

Mrs. Nyanga: You speak the truth Elizabeth. And one reason her children are always sick is because Mrs. Haile did not breast feed her children for very long. Because they have money she thought it would be better to use these special baby formulas. You see, with these special formulas you must always use water. If the water is bad then the child will be sick. It is better to feed your children from your own breast for as long as you can. This is natural food. But, as a mother to be, you must eat a good meal every day as often as possible. Remember, you are eating for two people.

Elizabeth: It is hard to do this when you have a husband and family to feed, mother.

Mrs. Nyanga: Yes, I agree that it can be difficult. But think how much harder it is to care for your children when they are always sick. Is it not better to prevent the problem and save money? Your children are your future.

Elizabeth: You are right mother. I will learn from your example and breast feed all my children as long as possible. I understand now that fasting is not a good idea while I am pregnant or have a new baby.

Mrs. Nyanga: Yes, Elizabeth this is very important what I am telling you. I want to have healthy grandchildren! Now listen — there is more you must know.

Elizabeth: You have given this much thought, mother!

Mrs. Nyanga: I have lived many years and had many children who are healthy and strong. I also watch my neighbours and know what is not good for children.

Elizabeth: Mother, how can you tell what is good and not good for other children?

Mrs. Nyanga: Look at our neighbours' children, Elizabeth. Do you see the little ones?

Elizabeth: Yes.

Mrs. Nyanga: Do you see how tall they are? They are a good height for their age and they look like healthy six year olds — always smiling with lots and lots of energy. Sometimes too much ... they are always chasing my chickens!

Elizabeth: [LAUGHING] I remember doing this as a child.

Mrs. Nyanga: Yes, you children were also energetic and healthy because I fed you well. We had a kitchen garden so that even when times were difficult I was always able to give you vegetables and fruit.

Elizabeth: I remember having many colours of food on my plate. Even when we didn't have much food there was always some green leafy vegetables on our plates.

Mrs. Nyanga: I believe that our kitchen garden is the reason we are all so healthy. Now, do you see the children across the way?

Elizabeth: Yes, they are sitting outside under the shade the children — why are they not playing?

Mrs. Nyanga: I will tell you. This house — the family has lots of money. But the mother! She takes this money and instead of buying vegetables and fruits for her family she buys sodas and biscuits. This woman! She spends all the money on food that her children like to eat. But, this food does not give the children strength to grow. They need grains, and fruits and vegetables [NAME STAPLE FOODS OF YOUR COUNTRY LIKE ... RICE OR MAIZE, ETC.] — not sugary foods. Children cannot grow healthy and strong on sugar. If they eat these things every day they will become weak and their teeth will fall out.

Elizabeth: Their teeth will fall out?

Mrs. Nyanga: I am telling you the truth. Your uncle was very fond of soda and he lost many of his teeth before he was even married!

Elizabeth: [LAUGHING] I always thought uncle's teeth fell out from too much work!

Mrs. Nyanga: This is serious, Elizabeth! You can tell many things about the health of a child from their appearance and how active they are. Food can even affect their ability to learn. If a child is weak, they also do poorly in school.

Elizabeth: Yes, I remember when I went to school, if I missed the first meal in the morning I could not think properly and do my math!

Mrs. Nyanga: Yes, and this is another important point to remember. Now, many of these schools are serving children the morning or afternoon meal. It is common for mothers to think that this food that their children get is enough. So when the children come home they do not feed them — just the adults.

Elizabeth: How is this possible?

Mrs. Nyanga: Well many mothers feel that there is not enough food and the child has already eaten at school. I am telling you — children need lots of food, both girls and boys. They need food to give them energy to grow and be strong. Many times children become sick because they are not being fed like the adults even though there is plenty of food.

Elizabeth: You are right mother. I will take what you have told me today and when I have my children I will remember your words!

Mrs. Nyanga: I think that this will be sooner than you think now my daughter ... tell me your news

MUSICAL BREAK.

Narrator: Mrs. Nyanga and Elizabeth spoke well into the night about many matters. Mothers, what would you advise your daughters before they become mothers? A healthy diet is the most important factor in having healthy strong children. What are you feeding your families?