



Facilitator's Guide for Father-to-Father Support Groups Infant and Young Child Feeding and Gender in Ghana



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ABOUT SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a sevenyear USAID-funded cooperative agreement to strengthen global and country efforts to scale up highimpact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

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Introduction

Undernutrition is a key cause of poor child growth and development, including early cognitive development. Child growth, beginning during the mother's pregnancy and continuing until the child is 2 years old, sets the stage for later life. Losses in physical and brain development resulting from undernutrition during this period—the first 1,000 days—cannot be corrected later. Children who suffer from abnormally slow growth do not perform well in school and are at risk of becoming less productive adults, which can affect their lifetime earnings. Slow economic development in northern Ghana can be attributed, in part, to child undernutrition.

Men and women have a shared responsibility to prevent child undernutrition. As head of the household, men play an important role in ensuring that pregnant women have access to the right foods. After a child is born, to ensure proper growth, men can ensure that young children are fed properly, which includes frequent meals, adequate quantity and density of food, diverse foods, and continued breastfeeding.

This facilitator's guide is adapted from the Infant and Young Child Feeding Project and the Infant and Young Child Nutrition (IYCN) men's group package. It is a reference for male group leaders of the Father-to-Father Support Groups (FTFSGs) to facilitate group meetings at the community level.

The guide provides step-by-step guidance for facilitating all 15 sessions of the infant and young child feeding and gender curriculum. The annexes in this document include a facilitator training agenda and a monthly meeting report template.

This *Facilitator's Guide* should be used with the accompanying illustrated job aid, *Father-to-Father Counselling cards*. They will enable men to adopt new behaviours to ensure improved child nutrition.

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Using This Guide to Conduct a Father-to-Father Support Group Meeting

This guide provides instruction for the Father-to-Father Support Group (FTFSG) meetings. The 15 session topics can be completed in 15 meetings and each session should last one hour. Sessions can be longer if participants agree, but they should be limited to two hours.

This guide gives step-by-step instructions for each session, including when to use the accompanying counselling cards. These materials make the sessions more lively and interesting.

The main goal of these sessions is to get men to try the recommended behaviours at home and support their family members to do so. The sessions will also improve nutrition around the first 1,000 days—from pregnancy through a child's second birthday. At the end of each session, ask for volunteers to try some of the behaviours discussed. At the next meeting, let participants talk about their experiences trying the new behaviours. If they were challenged, ask the group to help them find ways to address the problems. Remember to also help them celebrate what worked well!

Before Starting Each Session

Make sure you are prepared by doing the following:

- 1. Identify a good location for the meeting.
- 2. Read through the facilitator's guide and accompanying counselling card(s) to get familiar with your session.
- 3. Have the reporting tools (see annex 2) ready to capture attendance and contact details.

Basic Tips for Facilitating Each Session

Your role as a facilitator is to ensure that group members discuss and learn from one another. Following are some tips that may help your session go well:

- 1. Greet and welcome group members.
- 2. Update the attendance list.
- 3. Review the last topic discussed and ask participants about their experiences trying out the new practices at home.
- 4. State the objectives of the new session.
- 5. Do NOT lecture—instead, encourage members to talk freely about their experiences.
- 6. Do NOT ask 'yes' or 'no' questions. Ask questions, such as: What do you think about that? To encourage the discussion, say 'Would you like to say something about this topic?'
- 7. Keep the group focused on the main topic by politely reminding them of the topic if they start to discuss something else.
- 8. Wrap up each session by repeating the key messages and asking if anyone has questions about the topic.
- 9. Ask each participant: from what they learned today, what can they do at home to better support their family? Write down each commitment for follow up.

Sessions

The 15 session topics in this guide are—

- Session 1: Understanding Gender
- Session 2: Gender Roles: Changing What Society Expects of Us
- Session 3: Gender Roles: Division of Labor and Child Care in the Home
- Session 4: Effective Communication in the Home
- Session 5: Healthy and Unhealthy Relationships
- Session 6: Fatherhood Roles
- Session 7: Family Care
- Session 8: Basic Hygiene
- Session 9: Poor Child Health
- Session 10: What Your Family Eats
- Session 11: Understanding Maternal and Child Nutrition
- Session 12: Supporting Good Infant Feeding Practices During the First Six Months
- Session 13: Complementary Feeding for Children Older Than Six Months
- Session 14: What to Do If Your Child Falls Ill
- Session 15: Men's Role in Health Promotion

Objectives:

- To understand the differences between sex and gender.
- To understand the term 'gender equality.'
- Discuss issues related to gender equality.

Material:

• Counselling card 1—Understanding Gender

Step 1: Welcome everyone to the meeting and ask participants to introduce themselves.

Step 2: Introduce the purpose of the group and what they will be doing.

Say: The Father-to-Father Support Group will help male caregivers of children under 2 years learn about and discuss the importance of infant and young child nutritional practices during the first 1,000 days—from pregnancy until the child turns 2—and the critical role men play in caring for a child.

After each session, each of you will be encouraged to try a new behaviour at home, then come back to the group and discuss what worked and what was challenging. The group is here to support everyone.

Each session will last about one hour, but as a group, we can agree to extend the discussion as we go along. We will meet at the same place and same time that we designate today. There are 15 sessions and you are all encouraged to come to each session.

We will use illustrated counselling cards to help with our discussions.

Step 3: Agree on group rules and a meeting schedule.

Start the 'rules' discussion by saying:

It is important that everyone feels comfortable to talk freely in this group. Anything confidential said in the group should not be repeated to others outside the group.

It is important to respect others when talking.

It is important to come on time.

Remember, this group is meeting to learn and discuss new topics and to support each other as we try new behaviours at home to improve the health of our children and families.

Ask: What time is best to meet? At what location? Agree as a group.

Step 4: Define gender equality.

Ask participants what they can see on the card. What do you think about these pictures? (Wait a few moments for participants to answer.)

Say:

- Sex refers to the biological and physiological differences that define a man and woman.
- <u>Gender</u> refers to the social norms about roles and relations between men and women or boys and girls. These norms vary in communities and societies, and they change over time.
- Gender norms influence roles, behaviour, attitude, and ability.
- **Ask:** What does 'gender equality' mean to you?

After some discussion, explain gender equality using the following definition:

<u>Gender equality</u> is the enjoyment by women and men of social-valued goods, opportunities, resources, and rewards. It means giving both men and women/girls and boys the same opportunities, power, rights, responsibility, social status, access to resources, and benefits.

- **Ask:** Do you think gender inequality exists in this community? What are some examples of gender inequality in this community (considering men/women and considering girls/boys)?
- **Ask:** What are some ways that fathers can promote gender equality in their homes? Is it possible to practice gender equality in the home/community?

Allow some time for discussion.

- Say: Fathers can promote gender equality in their homes—
 - Show respect to their wives.
 - Solve problems in an open and respectful ways.
 - Support their partners with household chores.
 - Shop for the home and helping with child care.
 - Support the education of girls.
 - Make decisions with your wife.
 - Prevent fighting and violence at home.

Step 5: Summarize key messages.

Review the ways that fathers can promote gender equality. Use the examples participants mentioned in discussions, as well as the list above.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years if they will agree to practice one key behaviour that demonstrates gender equality and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experiences in the next session.

Session 2: Gender Roles—Changing What Society Expects of Us

Time: 60 minutes

Objectives:

• To identify the differences between roles of men and women.

Material:

• Counselling card 2—Gender Roles: Changing What Society Expects of Us

Step 1: Review the last session on understanding gender.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Please share your experience.
- How many of you were not able to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's session is Gender Roles—Changing What Society Expects of Us.

Show counselling card 2 to the participants and ask them to describe what they see on the card.

Ask: Do you think the man is acting the way he is expected to act in this community? Why or why not? Is the woman? Why or why not?

Step 3: Group activity.

Put participants into two groups. Ask group 1 to list or discuss male behaviours that are acceptable in the community and group 2 to list or discuss women's behaviours that are acceptable in the community. Instruct the groups to discuss the reasons they listed these behaviours. If the behaviours listed below are not mentioned, mention them and ask the participants who typically does these activities—

- cooking, upkeep, and maintenance, including repairing household items
- shopping for food, clothes, and household items
- cleaning the house
- farming
- trading
- collecting water
- collecting fuel wood
- taking care of the animals
- washing clothes
- child care
- family safety
- elder care

- paying bills and handling household finances
- school-related activities (transportation, homework, attending meetings at school, etc.).
- **Ask:** What happens if a man or woman in this community does things that are not considered a man's role or a woman's role? Why do you think that happens?
- **Say:** The rules created by society that define how men and women are expected to act are called 'gender norms.' These rules or norms prevent women and men from stepping outside their typical roles.

Step 4: Group discussion—how to change gender roles.

- **Ask:** Are there any examples in this community of men performing roles that are considered typically 'women's' roles? Are there any examples of women performing roles that are considered typically 'men's' roles? How does the community react?
- **Say:** It is sometimes difficult for men and women to step outside the gender norms, but it is possible.
- **Ask:** What can be done to allow men and women to take on roles that may be outside these gender roles? What are some ways the community may benefit from changing some of these roles?

Step 5: Summarize the key messages for this lesson.

Say:

- Society creates rules for how men and women should behave. These rules are called gender norms.
- These rules or norms prevent women or men from stepping out the gender norms.
- For example, society expects—
 - Women to be dependent, weak, shy, caring, and to be homemakers.
 - Men to be tough, strong, superior, confident, and not to cry.
- People who act outside the gender norms/box are sometimes harassed, teased, abused, ignored, or called names.
- Gender norms are what society expects from men and women, but sometimes they are not realistic. Changing them may help improve society.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to try practicing a new behaviour at home that is not typically a male role, and ask them to remember what went well or what challenges they faced for the next meeting. Tell them we will discuss their experience in the next session.

Objectives:

- To identify ways men can share labour in the home.
- To identify the benefits of men sharing responsibility in the home.

Material:

- Counselling card 3A—Gender Roles: Division of Labour and Child Care in the Home
- Counselling card 3B—Men, Women, and Caregiving

Step 1: Review the last session on gender roles.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Please share your experience.
- How many of you were not able to practice the behaviour, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is on division of labour and childcare in the home.

Step 3: Group discussion using counselling card 3A.

Show counselling card 3A to participants.

- **Ask:** What do you see on this card? How do they think these roles affect the health and well-being of the family?
- **Say:** Gender roles are the roles of men and women, based on their sex. They are defined by social and cultural norms in a society.

Both men and women can play roles that improve the health and well-being of a family. Some roles are tied to improving the economic conditions of the home (productive roles) and other roles are tied to having and taking care of children (child care).

Step 4: Group Activity 1: Brainstorming and encouraging discussion.

Draw two circles, one representing men and one representing women. Add responsibilities for each of them based on the following questions.

- Ask: Who is the best person to take care of each of the following?
 - a. babies

- b. elderly persons
- c. large animals
- d. plants
- e. houses
- f. small animals
- g. clothing
- h. market/shopping
- i. garden tools
- j. managing money at home
- k. any other persons or tasks that men and women care for or do.

Agree to what the participants say, and ask them to explain and give an example.

- **Say:** Men and women must come together to provide care and protection for the family. A father and mother should work closely to best support the well-being of their family.
- **Ask:** What are some *productive* roles that men or women do in the home?

If they do not name the following, add—

- Say: Productive roles that men or women may perform include—
 - growing crops
 - raising animals
 - doing paid work to provide food, clothing, and shelter for the family.
- Ask: What are some of the child care roles that are usually done in the home?

If they do not name the following, add—

- Say: Both men and women can have child care roles—
 - feed children
 - bath children
 - dress children.

Step 5: Group discussion: Norms that limit role changing.

Ask: Are there norms in the community that prevent men from supporting their spouses with many of the child care roles? What are some of those norms or rules?

Step 6: Group activity 2.

Divide participants into three groups and ask each group to discuss a different topic for 10 minutes.

Group 1: What things in the home are men good at caring for?

Group 2: What things in the home are women good at caring for?

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Group 3: What things in the home are both men and women good at caring for?

Ask each group to tell other participants about their discussion.

Ask: What were the reasons your group thought the way you did?

Ask: What are some ways that men can help women with the child care roles in the home?

If they do not name the following, add—

Say: Other ways fathers can help women in child care roles, include—

- Help collect firewood for cooking.
- Look after the animals at home.
- Bath and dress children.
- Hold the baby when mother is busy cooking.

Step 7: Group discussion using counselling card 3B—Men's roles in child care.

Show counselling card 3B to participants.

Ask: How does the family benefit when men are more involved in child care?

If they do not name the following, add—

Say: Other benefits of men being involved in child care include—

- Children are well cared for.
- Creates a bond between the father and children.
- The family has adequate food.
- Children are well clothed.
- The family has adequate shelter.
- The family is healthier.
- Children feel loved and are happy.
- **Ask:** What are some ways men and women can help encourage fathers to support their partners in household roles?
- **Ask:** What are some ways this community can help encourage fathers to support their partners in household roles?
- **Ask:** Why do you think it is important for men to care for the health of their children and families, particularly how mothers, babies, and young children eat? Encourage participants to discuss. What opportunities are there for men to get more involved in caring for others?

Step 8: Summarize the key messages from this session.

• Gender roles are the roles of men and women, based on their sex, that are defined by society. It is common to attribute to women the task of caring for people, animals, and plants, as well as daily

housework. On the other hand, men are assigned to caring for objects, such as repairing the roof, etc. (depending on the local culture). It is important to stress that many of these ideas about caregiving come from learned behaviour and societal expectations.

- Both men and women have productive and caring roles to play in the home.
- Examples of productive roles are growing crops; raising animals; and doing paid work to provide food, clothing, and shelter for the family.
- Examples of child care roles are child feeding, watching the child, playing with the child, and bathing and dressing the child.
- The roles played by men and women in the home provide food, clothing, shelter, health, love, and happiness for the children.
- Fathers can support women with their productive roles—
 - Help collect firewood for cooking.
 - Look after the animals at home.
 - Bath and dress the children.
 - Hold the baby when mother is busy cooking.
- Because of societal norms in some countries, women are often the primary caregivers for children and many fathers often play less of a caregiving role.
- When fathers are involved in caregiving, the heavy burden on women is reduced and mothers can have time for other activities, such as paid work, which can improve household finances.

Step 9: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to practice a child care role at home that they don't typically do, and to note what went well or what challenges they faced. Tell them that we will discuss their experience in the next session.

Objectives:

• Understand what effective communication is in the home.

Material:

• Counselling card 4—Effective Communication in the Home

Step 1: Review the last session on division of labour and child care.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

- **Say:** Today's discussion is effective communication in the home. We are going to talk about effective communication between husbands and wives and between parents and children.
- Ask: Have you heard anything about this topic? Please share what you know about it.

Encourage discussion.

Step 3: Role playing effective communication—divide participants into four groups.

Say:

- Group 1 will develop a role play on an example of *effective* communication between family: husband, wife, and children.
- Group 2 will develop a role play showing an example of *poor* communication within the family: husband, wife, and children.
- Group 3 will develop a role play showing an example of *poor* communication between the husband and wife.
- Group 4 will develop a role play showing an example of *effective* communication between the husband and wife.
- Say: Take 10 minutes to develop your role play.

Ask each group to perform their role play.

Sit everyone together to debrief.

Ask: What did you learn from each group performing their role play?

- **Ask**: What were the causes of *poor* communication between the family members? Is this something you see in your community? How could this be improved?
- **Ask:** What were the causes of *effective* communication between a husband and wife? Do you see examples of this in your community or in your own homes?

Step 4: Discuss card 4—effective communication in the home.

Ask participants to describe what they see happening in the illustrations.

- Ask: What about the pictures describe either effective or ineffective communication and why?
- Ask: How do the illustrations relate to what you demonstrated in the role plays?
- **Ask:** What are some of the things that prevent fathers from communicating effectively with family members? How can these be addressed?

Step 5: Ways fathers can communicate more effectively.

- **Ask:** What are some of the things fathers can do to communicate more effectively?
- Say: Using counselling card 4, add to their list—
 - Share feelings through sadness, joy, etc.
 - Speak slowly when talking.
 - Use simple words and do not shout.
 - Use words of praise for your child, like good, wonderful, and wow.
 - Do not use put-down words, like stupid, foolish, and lazy.
 - Talk to your child from the day they are born by touching, singing, and reading to your child.
 - Speak with respect and patience.
 - Listen attentively and show that you are listening by nodding your head.

Step 6: Summarize key messages.

Effective communication between family members—father, mother, and children—makes a good relationship and helps parents know their children's needs.

Step 7: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to try to practice effective communication at home, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Objective:

• Identify healthy and unhealthy behaviours in relationships.

Material:

• Counselling card 5—Healthy and Unhealthy Relationships

Step 1: Review the last session on effective communication.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Could you please share your experience?
- How many of you were not able to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

- **Say:** Today's discussion is on healthy and unhealthy relationships. This topic builds on the last topic discussed and we will continue the discussion about how to improve family relationships.
- Ask: What does the idea of 'healthy and unhealthy relationships' mean to you?

Encourage discussion.

Show participants counselling card 5—Healthy and Unhealthy Relationships

Ask: What do you see happening in this card? Does this look like any relationships in this community? How?

Step 3: Show counselling card 5 again.

Ask: What signs do you see that indicate an unhealthy relationship?

Encourage discussion.

Summarize participants' ideas and say: The signs of an unhealthy relationship are-

- Keeping secrets from your partner.
- Shouting when talking to your partner.
- Disgracing your partner in public.
- Trying to harm or beat your partner when angry.
- Not sharing family money.
- Not talking often with your partner at home.
- Ask: Would you add anything to this list?

Encourage participants to add to the list and show the counselling card again.

Ask: What signs indicate a healthy relationship?

Encourage discussion.

Summarize participants' ideas and say: The signs of a healthy relationship are—

- You are happy when you are with your partner.
- You spend time conversing with your partner, children, and good friends.
- You make decisions with your partner.
- You and your partner trust and respect one another.
- You can talk without getting angry easily.
- You and your partner share the day-to-day managing of the home (help with buying foodstuffs, cleaning the house, washing clothes, etc.).

Ask: What would you add to this list?

Encourage participants to add to the list.

Step 4: Group discussion.

Ask: What are some of the things men can do to ensure they have healthy relationships at home?

Step 5: Summarize the key messages in this session using card 5.

The signs of a healthy relationship are-

- You are happy when you are with your partner.
- You spend time conversing with your partner, children, and good friends.
- You make decisions with your partner.
- You trust and respect each other.
- You can talk without getting angry easily.
- You and your partner share in the day-to- day managing of the home (helping with buying of foodstuffs, cleaning the house, washing clothes, etc.).

Step 6: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to try to practice ways to ensure they have a healthy relationship at home, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Session 6: Fatherhood Roles

Time: 60 minutes

Objective:

• To identify roles father's play in protecting the health of their family.

Material:

• Counselling card 6—Fatherhood Roles

Step 1: Review the last session on healthy and unhealthy relationships.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were not able to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is the role fathers play in protecting the health and life of their family.

Step 3: Group discussion.

Ask: How would you describe a good father?

Make note of participant responses.

Ask: Who would be willing to volunteer to tell us about his experience living with his father growing up? How did you communicate? What types of things did he do at home?

Make note of participant responses.

- **Say:** Children learn from their parents (father and mother) at home by observing. Fathers who support mothers in child care probably learned from their fathers when they were young.
- Ask: Are there any questions?

Step 4: Group discussion about fathers' roles in child care.

Ask: What are some of the roles fathers play in child care in the home?

Show participants counselling card 6.

- Ask: How would you describe what you see in this card? Does this happen in this community?
- Say: Fathers can support their partners—
 - Advise the children.
 - Make decisions about the children with your partner.

- Protect your children.
- Provide food, clothing, and shelter.
- Provide support with child care and household work.
- Take children to the hospital/clinic when sick.
- Accompany your partner to the clinic for antenatal care and delivery.
- Help children with their schoolwork.
- **Ask:** Are there other ways fathers can help their partners take care of their children?

Step 5: Summarize key messages.

- Children learn from their parents (father and mother) at home by observing. Fathers who support mothers in child care probably learned from their fathers when they were young.
- In the home, parents can train both the boy and girl children to support in—
 - care for their younger siblings
 - household chores like sweeping, cooking, washing, etc.
- Fathers who support their partners make the family happy.
- Fathers can support their partners—
 - Advise their children.
 - Make decisions about the children with their partner.
 - Protect their children.
 - Provide food, clothing, and shelter.
 - Provide support with child care and household work.
 - Take children to the hospital/clinic when sick.
 - Accompany your partners to the clinic for antenatal care and delivery.
 - Help children with their schoolwork.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to try to practice helping with child care at home, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Objectives:

- To identify the various family types.
- Discuss how the various family types contribute to the well-being of the child.

Material:

• Counselling card 7—Family Care

Step 1: Review the last session on fatherhood roles.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

- Say: Today's discussion is family care.
- **Say:** There is no single family model. Although some cultural models associate family with the relationships between father, child, and mother, different family structures can provide a child with an equally healthy development. Grandparents, aunts, uncles, neighbors, and friends, in addition to parents, all contribute to families and to the support and care of children and each other.

Step 3: Group discussion.

Show participants counselling card 7.

- Ask: In your opinion, what makes a good father?
 - Ask participants to discuss the types of families in their community that a child may belong to.
 - Ask participants to brainstorm on the role families play in the social and emotional development of the child.
 - Ask participants what they consider to be a good family life.
 - Ask participants what fathers can do to ensure their children enjoy a good family life.

Step 4: Summarize the key message for this lesson.

- Children are cared for within families.
- A child may belong to a family made up of his/her parents, foster parents, grandparents, uncles, and aunts.

- The family provides social and emotional growth as the child grows up.
- Families change over time. These changes affect people's roles and the child's development. For example, when a father leaves the home to work, the burden of child care will be on the mother and other family members.
- There is no family model that is better than another. All families are different.

Fathers can play a role in the social and emotional development of their children-

- Spend more time with their babies/children.
- Keep their children physically close to them.
- Talk, read, and sing to their babies/children.
- Play with their children.

Step 5: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to practice any of the activities discussed at home, and ask them to remember what went well or what challenges they faced for the next meeting. Tell them we will discuss their experience in the next session.

Session 8: Basic Hygiene

Time: 60 minutes

Objective:

• To understand the importance of good hygiene in the household.

Material:

• Counselling card 8—Basic Hygiene

Step 1: Review the last session on family care.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is basic hygiene.

Step 3: Group discussion with counselling card.

Ask: What is good hygiene to you? Why do you think good hygiene is important?

Show participants counselling card 8.

- **Ask:** What do you see in this picture that is an example of good hygiene?
- **Say:** Basic hygiene in the household is important for the healthy growth of children and other household members.

Practicing good hygiene can help reduce illnesses, such as diarrhea and malaria.

Step 4: Discuss men's roles in basic hygiene.

Ask: What are some of the things men in this community do to ensure good hygiene is practiced in the home?

Complete their responses by adding the following:

- **Say:** Fathers can promote basic hygiene within their households by doing the following:
 - Ensure safe disposal of faeces—animal and human—from the compound.
 - Ensure a tippy tap is built in the home near the latrine and where cooking is done; encourage hand washing with soap.
 - Make it a habit for you and your child to wash hands with soap before eating and feeding, and after using the bathroom.
 - Save some money to build a sanitary latrine to keep your family healthy.

- Provide a clean play space for children.
- Treat water by boiling to kill germs and drink only filtered water.
- Use and maintain latrines and avoid open defecation.
- Ensure that food is prepared under hygienic conditions.
- **Ask:** Why are some fathers not involved in promoting the health of their family members? What can be done to change that?

Step 5: Summarize key messages.

Say: Both men and women are responsible for the health of family members.

Men and women should always remember the four key hygiene behaviours:

- 1. Adults and children use latrines.
- 2. Wash hands in the four critical moments: before eating; before preparing food or feeding children; after using the toilet; and after cleaning children's faeces.
- 3. Always drink potable water that has been boiled.
- 4. Always keep children in safe and clean play spaces to avoid contaminants.

Step 6: Develop household action plan and close.

Ask for volunteer fathers to think about those four practices and choose one that should be enforced in their household. Ask them to try to practice any of the basic hygiene practices identified as weak in their home, and ask them to remember what went well or what challenges they faced for the next meeting. Tell them we will discuss their experience in the next session.

Objectives:

- To understand the causes and effects of poor child health.
- To understand a father's role in protecting his child's health.

Material:

• Counselling card 9—Keep Your Child in a Clean Environment

Step 1: Review the last session on basic hygiene.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were not able to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is the role fathers play in protecting the health of their family. Childhood illnesses can be caused by many different factors, some of which are related to cultural and gender norms. For example, sometimes when a child is sick, a woman may wait until the father returns home to get authorization and/or money for transport to take the child to the doctor. Because women probably do not have the power to make decisions, and some men are not involved in their children's health, this delay may mean that a child does not get the needed care in a reasonable time; and, possibly, will suffer more serious health consequences than if care had been sought earlier.

Step 3: Group discussion with counselling card 9.

Show counselling card 9 to participants.

Ask: What do you see happening in this picture?

Step 4: Small group activity.

Divide participants into groups of three or four and ask them to discuss the following topics for 10 minutes.

- Select one childhood illness: for example, measles, malaria, diarrhea, etc.
- What are the typical causes of this illness? How can this illness be prevented?
- When a child becomes sick with this illness, what effect does the illness have on the child's mother and family?
- What are the ways fathers can support the family when the child becomes sick, or can help prevent the child from becoming sick?

Ask each group to take three minutes to tell the group what they discussed.

Say: Both parents (mother and father) and all caregivers are responsible for the health of a child.

A father's role in child health care includes—

- Keep money at home for the health needs of your children and show your partner where it is kept.
- Encourage your partner to take sick children to the hospital/clinic.
- Practice the key hygiene behaviours: use a latrine, wash hands, drink clean water, and create clean play spaces.
- Provide money for buying nutritious foodstuffs.
- Ensure relationships in the home are healthy to help child growth.
- Help mothers clean the home and weed around the house to keep the compound free of trash and human and animal faeces.
- Ensure that children sleep under treated bed nets.
- Involve your partner in decisions affecting your children's health.
- Share information on child health with your partner.

Step 5: Summarize key messages.

The health of a child is the responsibility of both parents and caregivers. Fathers can play many roles in protecting the child's health.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to practice any of the activities discussed to protect their child's health at home, and ask them to remember what went well or what challenges they faced for the next meeting. Tell them we will discuss their experience in the next session.

Objective:

• To understand the importance of good nutrition in the home.

Material:

• Counselling card 10—Your Family Should Eat a Variety of Foods

Step 1: Review the last session on poor child health.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is about what your family eats.

Step 3: Group discussion with counselling card.

Ask: What does good nutrition mean to you? When you are going to eat, how do you choose your food? Can anyone tell us what he ate for lunch yesterday and why did he eat this food?

Show participants counselling card 10.

- **Say:** Family members—children, pregnant and lactating mothers, adolescents, and adults—should eat from all parts of a diverse diet:
 - carbohydrates and starchy roots: cassava, potatoes, plantain, yam, rice, maize, millet
 - protein from animal and plant sources: beef, fish, poultry, milk, eggs
 - legumes: groundnuts, beans, dried coconut, shea butter
 - fruits and vegetables: oranges, bananas, carrots, cabbage, green-leafy vegetables.
- Ask: Which foods are available locally? How often does your family eat foods from these groups?
- **Ask:** Are there any community norms that prevent you or your family from eating any of these foods? Religious norms? If yes, which ones? What can be done to address those norms?
- **Ask:** What role do you play in deciding what your family eats? What role can you play in improving the way your family eats?
- **Say:** Fathers can support the family to eat well by doing the following;
 - Plan with your partner the foods/meals the family will eat.

- Help buy the foodstuffs.
- Support mothers by taking care of the baby when the mother is cooking.
- Give pregnant and breastfeeding mothers and growing children enough meat and fish.

Step 4: Summarize key messages.

Both parents and caregivers are responsible for the health of a child. Fathers can play many roles in protecting the child's health.

Family members—children, pregnant and lactating mothers, adolescent and adults—should eat from all parts of a diverse diet:

- carbohydrates and starchy roots: cassava, potatoes, plantain, yam, rice, maize, millet
- protein from animal and plant sources: beef, fish, poultry, milk, eggs
- legumes: groundnuts, beans, dried coconut, shea butter
- fruits and vegetables: oranges, bananas, carrots, cabbage, green-leafy vegetables.

Eating from a diverse diet gives the body all the nutrients needed to grow well.

Fathers can support the family to eat well-

- Plan with your partner the foods/meals the family will eat.
- Help buy the foodstuffs.
- Support mothers by taking care of the baby when the mother is cooking.
- Ensure pregnant mothers and growing children are consuming protein daily by eating meat, fish, beans, and nuts.

Step 5: Develop household action plan and close.

Ask for volunteer fathers with children under 2 years to agree to try to practice any of the activities discussed to help their family eat foods from a diverse diet, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Session 11: Understanding Maternal and Child Nutrition

Time: 60 minutes

Objective:

- To understand the importance of proper child feeding during early childhood.
- To understand the importance of maternal nutrition during pregnancy and lactation.

Material:

• Counselling card 11—Understanding Maternal Nutrition

Step 1: Review the last session on what your family eats.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is understanding maternal and child nutrition

Step 3: Group discussion about maternal nutrition.

Show counselling card 11.

- **Ask:** Describe what you see in this picture.
- **Say:** It is important that pregnant mothers eat foods from all parts of a diverse diet. This will ensure that your baby grows well and your wife stays healthy during and after the pregnancy.
- Ask: What are some of the foods pregnant and lactating women currently eat in this community?
- **Ask:** Is there any type of food that pregnant and lactating woman should not eat according to your beliefs? What are these?
- Say: Fathers should encourage pregnant mothers to—
 - Eat protein-rich foods for energy, strengthening the body, and healing the body: lean meat, poultry, eggs, beans, and milk.
 - Eat foods rich in iron to fight illness and avoid anemia: red meat, fish, green-leafy vegetables, and eggs.
 - Consume foods rich in vitamins C and D for healthy growth of the baby: citric fruits, carrots, sweet potatoes, milk, and liver.
 - Consume foods rich in calcium for building strong teeth and bones for the mother and baby: eggs, and milk.

- Eat foods rich in folic acid: spinach, oranges, beans, nuts, and liver.
- Avoid anemia by taking iron, folic acid, and deworming tablets.
- Drink enough water and avoid drinking alcohol and coffee.
- Consume less salt.

Step 4: Group discussion on child malnutrition.

Ask: What are some of the causes of child malnutrition?

Show counselling card 11 again.

- **Say:** Because a breastfeeding child receives all its nutrients from its mother, it is important that pregnant and lactating mothers practice good nutrition. A child can become malnourished if the mother does not eat foods from a diverse diet and does not take iron and folic acid during pregnancy or while breastfeeding.
- Ask: What are some of the roles men can play in helping pregnant mothers eat good foods?
- Say: Fathers can help pregnant mothers eat good foods—
 - Provide money to buy a variety of foods.
 - Help pregnant mothers to buy foodstuffs for the home.
 - Help mothers by taking care of the baby while she is cooking.
 - Make sure that the pregnant mother has one handful of extra food of different types in each meal.
 - Make sure the pregnant mother rests for two to three extra hours during the day, and avoids carrying heavy loads and doing strenuous household chores.
 - Help your wife get iron-folic acid (IFA) tablets and deworming tablets from the health worker.
 - Purchase iron-rich foods—such as small fish, meat, lentils, dark green-leafy vegetables, or liver—to fulfill her iron requirement.

Step 5: Summarize key messages.

Say: Pregnant and breastfeeding mothers must eat from the four food groups to make sure their babies grow well. They must go to the hospital for antenatal care and take IFA, as prescribed by the health provider.

Fathers have an important role to play to make sure pregnant mothers and mothers of breastfeeding children get food from the four food groups.

As fathers, you can help your pregnant wife, or your child under 2 years, eat good foods-

- Provide money to buy a variety of foods, or provide these foods when shopping: dark green-leafy vegetables, lentils, small fish, meat, and/or liver.
- Make sure your wife rests for two to three extra hours during the day, and avoids carrying heavy loads and doing strenuous household chores.
- Help your wife gets IFA tablets and deworming tablets from the health worker.
- Help the family live in a safe environment: build a latrine and tippy tap, create a safe place for children, clean up after the animals, and provide wood for boiling water.

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Step 6: Develop household action plan and close.

Ask for fathers with a pregnant or breastfeeding spouse to try to practice any of the activities discussed, such as helping their family eat foods from a diverse diet or attending antenatal care, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Session 12: Supporting Good Infant Feeding Practices during the First Six Months

Time: 60 minutes

Objective:

• To identify ways men can support infant feeding during the first six months.

Material:

- Counselling card 12A—During the First Six Months, Give ONLY Breastmilk
- Counselling card 12B—Exclusive Breastfeeding During the First Six Months
- Counselling card 12C—Hand Expressing Breastmilk and Cup Feeding

Step 1: Review the last session on understanding maternal and child nutrition.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is on supporting good infant feeding practices during the first six months.

Step 3: Group discussion with counselling cards.

Show counselling card 12A.

- **Ask:** Describe what you see in this picture.
- **Say:** Babies should consume only breastmilk for the first six months. Water is not necessary, and may make your child ill.

Step 4: Small group activity.

Divide participants into three groups to discuss the following questions for 10 minutes.

Ask group 1 to discuss what support fathers can provide at home to ensure that:

- Give only breastmilk to the child as soon as possible after delivery, within 60 minutes.
- Give no beverages, including water, to the child.
- Give colostrum (the first breastmilk) to the child.

Ask group 2 to discuss what support fathers can provide to women to ensure that-

- Only breastmilk is given to the child during the first six months; it contains all the water needed to quench the baby's thirst.
- Expressed milk is properly stored in a cup with a cover and given to the child when the mother is away.

Ask group 3:

• What support can men give to their partners to enable them to breastfeed properly?

Step 4: Group discussion.

Ask each group to present what they discussed in their groups.

- **Ask:** In this community, what are some of the myths and attitudes people have about fathers supporting breastfeeding?
- Ask: What can fathers do to address these myths and attitudes?

Step 5: Summarize key actions fathers can take to support breastfeeding.

Show counselling cards 12B and 12C.

- Say: Fathers can support mothers to breastfeed exclusively for the first six months—
 - Feed the baby using breastmilk expressed from the mother and stored in a cup with a cover.
 - Make sure your wife eats different types of food every day to be strong and to get the vitamins she needs.
 - Advise the mother to give only breastmilk to the baby and help her to breastfeed the baby immediately after birth.
 - Help your wife with the household work so that she has more time to breastfeed the baby.
 - Take mother and baby to the clinic, church, mosque, or community event.
 - Provide money for the family.
 - Care for the baby when the mother is resting or busy with other work.
 - Help mothers cook for the family.
 - Advise partners to take their babies for weighing at the clinic.
 - Make sure the child receives all immunizations.
 - Avoid pregnancy during the first two years after delivery.

Step 6: Summarize key messages.

Both parents—mother and father—should help feed infants during the first six months.

Babies should only consume breastmilk for the first six months. Water is not necessary and may make your child sick.

Step 7: Develop household action plan and close.

Ask for volunteer fathers with a child under 6 months old to agree to try to practice any of the activities discussed to help ensure their children are exclusively fed with breastmilk, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

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Session 13: Complementary Feeding for Children Older Than Six Months

Time: 60 minutes

Objectives:

- To understand when to introduce complementary foods.
- To understand the importance of complementary foods to the child.

Material:

- Counselling card 13A—Complementary Feeding 6-9 Months
- Counselling card 13B—Complementary Feeding 9-12 Months
- Counselling card 13C—Complementary Feeding 12-23 Months

Step 1: Review the last session on good infant feeding practices.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is on complementary feeding. We have already talked about breastfeeding for the first six months. Now, we will talk about complementary feeding for children aged 6–23 months.

Step 3: Group discussion with counselling cards.

Ask: What is complementary feeding?

Show counselling cards 13A, 13B, and 13C.

- **Say:** Complementary feeding is giving family foods and other liquids to children from ages 6–23 months, in addition to the breastmilk.
- **Say:** What you see in these illustrations are examples of good complementary feeding for children of different ages.
- Ask: What are the types of foods you give children older than 6 months in your household?
- **Say:** Children who are 6–23 months must be both breastfed and given complementary foods.
 - Give local foods, like porridge made from corn, millet, and wheat. Thicken the porridge as the baby grows older.

- Give mashed potato, yam, or rice; add green-leafy vegetables, fish, eggs, milk, and groundnuts to make it rich.
- Give healthy snacks one to two times a day (banana, pawpaw, mango, and watermelon).
- When the baby is—
 - 6 months old: feed 2–3 tablespoons of porridge at each meal; give 2 meals each day; and breastfeed.
 - 8–9 months old: feed 1/2 cup of porridge at each meal; give 3 meals each day; and breastfeed.
 - 10–12 months old: feed 3/4 cup of porridge at each meal; give 3 meals and 1 snack; and breastfeed.
 - 13–23 months old: eat the family food 3 times a day and 1 snack; and breastfeed.
- **Ask:** When is the right time to give babies family food?
- **Say:** Give babies family foods, such as mashed potato, yam, rice, mashed green-leafy vegetables, fish, eggs, milk, and groundnuts. Also, give them finger foods, such as banana, pawpaw, pear, and watermelon.

Step 4: Group discussion about father's roles in complementary feeding.

Ask: What are some ways fathers can support by providing family foods or complementary food for their babies?

Step 5: Summarize key messages.

Babies who are 6–23 months old must be both breastfed and given complementary foods.

Fathers have an important role to play to make sure children 6–23 months are given complementary foods.

- Feed baby with nutrient-rich foods from the four food groups.
- Cook food with iodized salt to ensure baby has enough iodine.
- Feed baby with patience; sing and talk to the baby while feeding.
- Wash cooking utensils and cups in clean water to avoid germs.
- Never feed your baby with a bottle because it can carry germs, which may give your baby a disease.
- Wash your hands and the baby's hands with soap and clean running water before preparing food and feeding.
- To prevent anemia, deworm every six months, starting when the child is 12 months old.
- Always buy iodized salt from the market for your family to keep them healthy.
- When you go to the market, buy nutritious snacks for your young child, such as seasonal fruits.
- Buy mangoes, papaya, sweet potatoes, pumpkins, carrots, and milk instead of biscuits, chocolates, or sweets, which lessen the child's appetites for nutritious food.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with a child 6–23 months old to try to practice any of the activities discussed to help ensure their children are fed with complementary foods, and ask them to remember what went well or what challenges they faced for the next meeting. Tell them that we will discuss their experience in the next session.

Time: 60 minutes

Objectives:

- To identify danger signs when a child falls ill.
- To understand a father's role in taking care of children when they are ill.

Material:

• Counselling card 14—What to Do When Your Child Falls Ill.

Step 1: Review the last session on complementary feeding.

Ask:

- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

Say: Today's discussion is on what to do when your child falls ill.

Step 3: Group discussion with counselling card 14.

Ask:

- Could any father who recently had an ill child please share his experience? How did you know your child was ill?
- What are some of the signs of illness in a child? What does a child do differently when he/she is ill?

Using counselling card 14, summarize typical signs of child illness.

Say: Diarrhea, vomiting, fever, and malaria are common child symptoms and illnesses.

Step 4: Group discussion on what to do when a child falls ill.

Ask: Has any father experienced any of these illnesses with their child? If so, what was their experience?

Allow other participants to share their experience.

- Ask: What foods are typically given to children when they fall ill?
- **Say:** It is important to make sure that when children are sick, they get proper nutrition. This should include the following:
 - Breastfeed the baby often and express milk if the baby cannot suckle.
 - Give complementary foods to avoid loss of weight if the child is older than 6 months.

- Feed children small amounts of food at a time.
- Give the child foods he/she likes most.
- Give the baby more foods and liquids—coconut water, orange juice—if the child is older than 6 months.
- If the child is older than 6 months, give extra solid food each day after the illness to help the child gain weight.
- Feed the child with patience and love.
- Seek medical attention for a sick child.
- After the illness, give the child one extra meal to regain lost weight.
- Ask: What are some of the things fathers can do to make sure sick children get proper nutrition?

Step 5: Summarize key messages.

Say: Diarrhea, vomiting, fever, and malaria are examples of symptoms and illnesses in children. Pay attention to your sick child, and take the baby to the nearest health service immediately and give the baby only medicine prescribed by the health worker.

Fathers can support feeding ill children by doing the following—

- Support the mother to breastfeed the baby often and encourage the mother to express milk if the baby cannot suckle.
- Give complementary foods to avoid loss of weight if the child is older than 6 months.
- Feed children small amounts of food.
- Give the child foods they like best.
- Give baby more foods and liquids—coconut water, orange juice—if the child is older than 6 months.
- If the child is older than 6 months, give extra solid food each day after an illness to help the child gain weight.
- Feed the child with patience and love.
- After the illness, give one extra meal to the child to regain lost weight.

Step 6: Develop household action plan and close.

Ask for volunteer fathers with a child under 2 years old to try to practice any of the activities to help their child if he/she falls ill, and ask them to remember what went well or what challenges they faced for the next meeting. Let them know we will discuss their experience in the next session.

Time: 60 minutes

Objective:

• To understand what role men can play in the health of their family members.

Material:

• Counselling card 15—Men's Role in Health Promotion

Step 1: Review the last session on what to do when your child falls ill.

- Ask:
- How many of you practiced any of the behaviours discussed in the last session? Would you please share your experience?
- How many of you were unable to practice, and what challenges did you face?
- What are some things we can do to support those who could not practice the key behaviours?

Step 2: Introduce today's session.

- **Say:** Today's discussion is a summary of the things men can do to promote the health and nutrition of their family.
- **Ask:** What did you learn about the roles men can play in promoting their children's and their family's health and nutrition?

Encourage discussion.

Say: Health promotion is making decisions and taking actions to improve life. With health promotion, you can prevent illnesses with some small, key actions.

Step 3: Group brainstorming.

Divide participants in 4–5 small groups. Ask each group to discuss the following question (take 10 minutes):

• What roles can fathers play in promoting the health and nutrition of their families, especially young children?

Each group should remember their answers.

Step 4: Each group presents what they discussed.

Say: Both men and women are responsible for ensuring the health and nutrition of family members—including babies, young children, adolescents, and pregnant and lactating women.

Step 5: Group discussion using a counselling card.

Show participants counselling card 15.

Ask: What do you see in these pictures?

Ask: Is what you see realistic in this community? Why or why not?

Ask: What are some of the ways men can promote the health of their families?

Complete their list by adding the following ways men can promote their families' health-

- Provide money for hospital expenses when a family member is sick.
- Provide the family food from all parts of a diverse diet.
- Help wives get IFA tablets from the health facility, and take them to the clinic at least four times during pregnancy.
- Take children to the hospital/clinic when they are sick.
- Support mothers with child care and household chores and encourage them to rest.
- Support the family by cleaning and weeding around the house.
- Encourage the family to practice the four key hygiene behaviors.
- **Ask:** What are some of the things that might help you continue some of these practices we discussed during the past weeks? How can you be helpful to each other?

Step 5: Summarize key messages.

Say: Both men and women are responsible for ensuring good nutrition and protecting the health of family members—including babies, young children, adolescents, and pregnant and lactating women. Making behaviour changes is possible and it will ensure your family is happy, healthy, and successful!

Step 6: Wrap up and close.

Thank the participants for their participation in the Father-to-Father Support Group. Ask them to share their experiences with you. How has this group and the lessons learned impacted them and their families?

Let them know this was the last and final facilitated session, but they can meet on their own. Encourage them to continue to practice the behaviours to ensure they have healthy, happy families.

Annex 1: Facilitator Training Agenda

Father-to-Father Support Group Infant and Young Child Feeding and Gender Facilitator Training Agenda

| DAY ONE | | | | | | | | | |
|---------------|---|---|--|--|--|--|--|--|--|
| Time | Sessions | Торіс | | | | | | | |
| 8:00-8:10am | Opening of training programme | | | | | | | | |
| | Review of training objectives and agenda | | | | | | | | |
| | Introduction to FTFSG's purpose and the facilitator's role in improving nutrition | | | | | | | | |
| | Overview of FTFSG materials—facilitator's guide, counselling cards | | | | | | | | |
| 8:10-8:45am | Introduction to Good Facilitation Skills | | | | | | | | |
| | Description of a good facilitator | | | | | | | | |
| | How to handle challenging situations | | | | | | | | |
| | Quick tips on how to prepare for each session | | | | | | | | |
| 8:45-9:00am | Tea break | | | | | | | | |
| 9:00-10:00am | Session 1 | Understanding Gender | | | | | | | |
| 10:00-11:00am | Session 2 | Gender Roles: Changing What Society Expects of Us | | | | | | | |
| 11:00-12:00pm | Session 3 Gender Roles: Division of Labour and Child Care In the Home | | | | | | | | |
| 12:00-12:30pm | Lunch break | | | | | | | | |
| 12:30-1:30pm | Session 4 | Effective Communication in the Home | | | | | | | |
| 1:30-2:30pm | Session 5 | Healthy and Unhealthy Relationships | | | | | | | |
| 2:30-3:30pm | Session 6 | Fatherhood Roles | | | | | | | |
| 3:30-4:00pm | Session 7 | Family Care | | | | | | | |
| 4:00-4:15pm | Tea break | | | | | | | | |
| 4:15-4:45pm | Session 8 | Basic Hygiene | | | | | | | |
| 4:45pm | Closing | | | | | | | | |

| DAY TWO | | | | | | | | |
|---------------|----------------------------------|---|--|--|--|--|--|--|
| Time | Sessions Lessons/Topic | | | | | | | |
| 9:00-9:15am | Recap of day one topics | | | | | | | |
| 9:15-10:15am | Session 9 | Poor Child Health | | | | | | |
| 10:15-11:15am | Session 10 What Your Family Eats | | | | | | | |
| 11:15-11:30am | Tea break | | | | | | | |
| 11:30-12:30pm | Session 11 | Understanding Maternal and Child Nutrition | | | | | | |
| 12:30-1:30pm | Session 12 | Supporting Good Infant Feeding Practices during the First Six Months | | | | | | |
| 1:15-1:45pm | Lunch break | | | | | | | |
| 1:45-2:45pm | Session 13 | Complementary Feeding for Children Older than 6 Months | | | | | | |
| 2:45-3:45pm | Session 14 | What to Do If Your Child Falls Ill | | | | | | |
| 3:45-4:00pm | Tea break | | | | | | | |
| 4:00-5:00pm | Session 15 | Men's Role in Health Promotion | | | | | | |
| 5:00-5:30pm | Summary of day's lessons | | | | | | | |
| 5:30pm | Closing of training programme | | | | | | | |

Annex 2: Monthly Report Template

Checklist for monthly reporting

FATHER-TO-FATHER SUPPORT GROUP MEETING

| DISTRICT: | COMMUNITY:FILLED BY: | | | | | | | | | | | | | |
|----------------|----------------------|---|---|---|---|---|---|---|----|----|----|----|----|----|
| NAME OF FATHER | 1 | 2 | 3 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
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