

Calcium and
Iron Folic Acid
Supplementation
for Pregnant
Women

# A Trainer's Guide for HEALTHCARE PROVIDERS AND COMMUNITY HEALTH WORKERS

# **Acknowledgments**

With funding support from the Micronutrient Initiative, Cornell University prepared these training materials about calcium and iron-folic acid (IFA) supplementation based on the Kenya Ministry of Health behavior change communication package of tools for IFA supplementation. The national IFA supplementation package includes training materials and counseling cards for health care providers as well as behavior change materials for women and families. The Micronutrient Initiative provided technical and financial support for the development of the national IFA supplementation package and the Centre for Behavior Change and Communication (a Kenyan organization and subsidiary of Essence International) contributed behavior change communication expertise. These integrated calcium and IFA training materials were prepared to train antenatal care providers from health facilities participating in in a district-wide cluster-randomized trial conducted by Cornell University with funding from the Micronutrient Initiative.



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# Training schedule

Time	Session
9:00-9:30	1. Welcome, introductions, and expectations
9:30-9:50	Pretest
9:50-10:20	2. Introduction to the training and MICA study
10:20-10:40	Tea Break
10:40-11:30	3. Rationale and indication for integrated prenatal calcium and IFA supplementation
11:30-12:00	4. Balancing the diet in pregnancy with integrated Ca and IFA supplementation
12:00-1:00	5. Preeclampsia and anemia in pregnancy
1:00-2:00	Lunch
2:00-2:20	6. Counseling skills
2:20-3:00	7. Calcium and IFAS counseling cards
3:00-3:30	8. Using the counseling cards: Role Play
3:30-3:45	Tea Break
3:45-4:15	9. Breakout sessions: Role of participants in the MICA trial
4:15-4:30	10. Post-test and closing

# Session 1: Welcome, introductions, expectations, and pretest

# **Objectives**

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

• Assess their level of knowledge on calcium and IFA supplementation

#### Materials:

- Flip chart, markers
- Flip chart prepared with "Parking Lot" across the top
- Handout 1.1: Pretest

Time: 50 minutes

#### Instructions

- 1. Welcome participants. Introduce the trainers.
- 2. Divide participants into pairs and ask them to introduce each other and discuss their expectations for this workshop. Explain that after a couple of minutes they will introduce their partner to the group and list one of their expectations that they share. Write down all expectations that are mentioned. Ask participants to only list expectations that have not been mentioned by others.
- 3. Explain that we would like this training to be very participatory, we will use discussion and role play to try to help you feel ready to carry out this new life-saving intervention. Feel free to ask questions, contribute ideas, share experiences, or let us know if there are any problems. Point to the flipchart paper on a wall titled Parking Lot and explain that it is for any issues that arise during the training to address later.
- 4. Pass out the pretest (Handout 1.1) to all participants and explain that they have 20 minutes to complete the test. Explain: The pretest is not an examination and we are aware that most of the content is new information from current research. The purpose of the training is to bring the information to you.
- 5. Collect the pretests. During the first tea break, mark the pretest using the Pretest Answer sheet (refer to Annex 1). Identify areas of strengths and weaknesses to inform areas to lay emphasis during the training.

# **Handout 1.1: Pretest**

			ID CC	DDE: /	_ / HW
	Name:	Facility:			_
	Title:	Date: _			_
	e respond to the following questions about calcium and	IFAs pills			
01	Which micronutrient pill can help prevent anemia?			Vitamin A	
				Calcium	
				IFA	
				Zinc	
				Don't know	
02	Which conditions can calcium supplementation in			Anaemia	
	pregnancy help prevent? (check all that apply )			High blood pressure	e
				Malaria	
				Preeclampsia	
				Sepsis	
				Don't know	
03	How many calcium pills should the client take every da	y?		pills per day	,
04	How many IFAS pills should the client take every day?			pills per day	,
05	Can an IFAS tablet be taken at the same time as a calciu tablet?	ium		No	
				Yes	
				Don't know	
06	At what times of day is it recommended the client take	!		Morning	
	calcium pills? (check all that apply )			Midday	
				Evening	
				Don't know	
07	Is it preferable that calcium pills are taken with food?			No	
				Yes	
				Don't know	
08	If the client forgets to take one calcium pill in the early			No	
	morning, and remembers at 9:00am, should she take a calcium pill when she remembers?			Yes	
	cases p.m. men and remembers.			Don't know	

09	Some women may experience minor side effects from calcium or IFAS. What are common side-effects associated with these tablets? (check all that apply)	☐ Black stools
		☐ Constipation
		☐ Diarrhoea
		☐ Fainting
		☐ Fever
		☐ Nausea
		☐ Skin rash
		☐ Don't know
10	For most women who experience side effects, if they	☐ No, they will remain
	continue to take the pills, will the side effects go away?	☐ Yes, they will go away
		☐ Don't know
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.
	1.	
	2.	
	3.	

# Session 2: Introduction to the training and MICA study

# **Learning objectives**

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

- Understand the purpose and significance of the training
- List activities that will be involved in the training

#### Materials:

- Flipchart with participants' expectations
- Flipchart with training objectives
- Handout 2.1:Purpose of the training
- Handout 2.2: Training schedule/Program of events

Time: 30 minutes

#### Instructions

- 1. Refer to the flip chart prepared in the previous session with participants' expectations and compare their expectations to the training objectives. Introduce the training objectives, and compare them with the expectations of the participants.
- 2. Ask for volunteers (from communities where TIPs was conducted to discuss what they know about the MICA study so far and the purpose of the study.
- 3. Discuss the purpose of the training. Refer to handout 2.1
- 4. Ask participants to write three factors that might affect adherence to supplements and satisfaction with supplementation among pregnant women and pass it to the person on their right. Then ask participants to read out what they have on the pieces of paper passed to them. Note participants responses on the flipchart entitled "Challenges" (which will be used in session 7).
- 5. Explain to participants that studies have been conducted to examine these issues. Then mention the following key findings from TIPs (if not yet discussed).
  - Number of pills/too many pills
  - Side effects
  - Other people will discourage her
  - Having to take pills with meals
  - Difficult to remember
  - Lack of time/busy
  - Difficult to take when outside of home or travelling
  - Some women fear medication
  - Other people may think these pills are ARVs (stigma)
- 6. Describe the modules and activities that will be involved in the training. Refer to the program of events (Handout 2.2)

# **Handout 2.1 Training objectives**

The objectives of the course are to:

- Increase knowledge on nutrition during pregnancy
- Increase knowledge of strategies for addressing anaemia during pregnancy;
- Increase knowledge of strategies for preventing preeclampsia/eclampsia;
- Improve knowledge of IFAS during pregnancy
- Increase knowledge of calcium supplementation during pregnancy
- Increase knowledge on strategies for supporting women to adhere to health recommendations

# Specifically for healthcare providers

- Develop skills to be able to counsel pregnant women on calcium and IFAS
- Build counseling skills to help women overcome barriers to calcium and IFAS adherence
- Become aware of their roles in the MICA trials

# Specifically for community health workers

- Develop skills to support pregnant women to adhere to their calcium and IFAS
- Be able to share information on the safety and benefits of calcium and IFAS
- Become aware of their roles in the MICA trials

# Handout 2.2 Training schedule

Time	Session
9:00-9:30	1. Welcome, introductions, and expectations
9:30-9:50	Pretest
9:50-10:20	2. Introduction to the training and MICA study
10:20-10:40	Tea Break
10:40-11:30	3. Rationale and indication for integrated prenatal calcium and IFA supplementation
11:30-12:00	4. Balancing the diet in pregnancy with integrated Ca and IFA supplementation
12:00-1:00	5. Preeclampsia and anemia in pregnancy
1:00-2:00	Lunch
2:00-2:20	6. Counseling skills
2:20-3:00	7. Calcium and IFAS counseling cards
3:00-3:30	8. Using the counseling cards: Role Play
3:30-3:45	Tea Break
3:45-4:15	9. Breakout sessions: Role of participants in the MICA trial
4:15-4:30	10. Post-test and closing

# Session 3: Rationale and indication for integrated prenatal calcium and IFA supplementation

# **Learning objectives**

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

 Describe the rationale for recommendations for prenatal integrated calcium and IFA supplementation

### **Materials:**

- Pens
- Sticky notes

Time: 50 minutes

#### Instructions

Read out objectives of the session

- 1) Ask selected participants to describe the usual diet of their ANC clients
- 2) Divide participants into four groups. Ask each group to identify possible nutrients that might be lacking in diets of most of their ANC clients and the possible health effects. Ask each group to select someone to present their conclusions to the whole team on behalf of their group.
- 3) Ask for volunteers to name the commonest nutritional deficiency seen among their ANC clients. Emphasize that many studies show that anaemia is very common.
- 4) Ask for volunteers to list the commonest causes of maternal mortality they have seen in their practice. Emphasize that hypertensive disorders is a leading killer and often missed.
- 5) Ask participants to return to their groups and discuss what micronutrient supplements can impact illness and death during pregnancy and why.
- 6) Ask each group to select another person to present to the whole team.

Take home message:

- Preeclampsia is a major but silent killer
- The burden of anaemia in pregnancy is huge
- Evidence has shown that calcium and IFA supplementation can prevent these conditions

# Session 4: Balancing the diet in pregnancy with integrated Ca and IFA supplementation

# **Learning objectives**

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

- Describe the burden of Ca inadequacy and iron deficiency in pregnancy
- List local sources of dietary iron and calcium
- Describe why dietary modification advice is unlikely to be sufficient in balancing the diet in pregnancy

#### Materials:

- Diet flip-chart
- Prepared flip charts
- Pen
- Sticky note
- Counselling cards

Time: 30 minutes

#### Instructions

- 1. Read out objectives of the session
- Divide participants into 6 groups (with both healthcare workers and CHWs) and assign a number (1-6) to each group. Explain that each group has been assigned a number and should go to the flipchart with their group number. Each flipchart has a question that they should discuss as a group and then write their responses on the flipchart.

The flipcharts with the following questions should be prepared beforehand:

- 1)Describe the usual diet of pregnant women in your community.
- 2) What are the components of a balanced diet for pregnant women?
- 3) What are the main nutrients in the diets of pregnant women?
- 4) What are the main micronutrients that are missing from the diets of pregnant women?
- 5) What foods that are available in this community are good sources of calcium?
- 6) What foods that are available in this community are good sources of iron?
- 3. After 5 minutes, ask participants to move to the flipchart to their right and add any other information to that question.
- 4. After 3 minutes, ask participants to gather around flipchart #1 and discuss the information presented on the flipchart. Ask if any other participants have anything to add.
- 5. As a group, move to flipchart #2 and review the responses. Ask if any other participants have anything to add. Emphasize the need for diversity and quantity of dietary intake. Emphasize the importance of minerals to good health.
- 6. As a group, move to flipchart #3 and review the responses. Ask if any other participants have anything to add. Ask participants to mention main nutritional contributions of common local diet

- 7. As a group, move to flipchart #4 and review the responses. Ask if any other participants have anything to add.. Emphasize that minerals e.g. iron and calcium are unlikely to be obtained in sufficient quantities from diets because of the increased requirements during pregnancy and the relatively small quantities present in most food sources.. Emphasize that it is hard to eat enough of these dietary sources to meet requirements in pregnancy.
- 8. As a group, move to flipchart #5 and review the responses. Ask if any other participants have anything to add
- 9. As a group, move to flipchart #46 and review the responses. Ask if any other participants have anything to add
- 10. Ask participants to suggest ways of helping pregnant women to get the required amount of iron and calcium for normal functioning. Emphasize that supplementation is usually the most reliable options in this circumstance. Refer to counselling cards 4-5.

# Session 5: Preeclampsia and anaemia in pregnancy

# **Learning objectives**

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

- Describe causes and risk factors for preeclampsia and anaemia in pregnancy
- Describe common signs and symptoms of preeclampsia
- Describe common signs and symptoms of anaemia in pregnancy

#### **Materials:**

- Flip chart
- Counselling cards

Time: 60 minutes

#### Instructions

- 1. Read out the session objectives
- 2. Ask participants if they have seen cases of anaemia in pregnancy in their current practice
- 3. Ask some participants to describe how they knew those were cases of anaemia
- 4. Ask participants if they have seen cases of preeclampsia in their current practice
- 5. Ask some participants to describe how they knew those were cases of preeclampsia
- 6. Ask two participants to tell a story about a case study of preeclampsia that they have seen and the outcome of the cases
- 7. Describe the common symptoms, signs and complications of preeclampsia and anaemia in pregnancy that have not been mentioned so far. Ask participants to refer to counselling cards 6-7.
- 8. Emphasize that calcium supplementation is not a treatment for preeclampsia. It is a preventive measure.

# **Session 6: Counselling skills**

### **Learning objectives**

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

- Differentiate between advice, education, and counselling
- List skills needed for effective counselling
- Describe the purpose of the Calcium and IFAS Counselling Cards

#### Materials:

- Flipchart, markers
- Handout 6.1 Definition of Counselling and Effective Counselling Skills
- Calcium and IFAS Counselling Cards

## Time: 20minutes

## Instructions

- 1. Present the following:
  - In order to facilitate counselling pregnant women on calcium and IFAS, there are counselling cards that you can use with your clients.
  - Counselling cards can save time and ensure comprehensivenessand pictures can improve women's understanding and interest.
  - High-quality counselling can create an environment that encourages women to share and ask questions.
  - The quality of counseling can be more important than quantity of information shared with clients. The goal is to identify key messages and clear ways of presenting them, so it should not take more time than necessary.
  - It is important for women to be counselled with empathy.
  - You will be provided with a supplement calendar and poster to give to each client.
- 2. Ask participants the following question: What is the difference between advice, education and counselling?

Write the responses on a flipchart. Compare the responses with the information in **Handout 6.1**: **Definition of Counselling and Effective Counselling Skills** 

- 3. Explain that the difference between advice, education and counselling
  - Giving **advice** is directive. Often, when you advise people, you tell them what you think they should do.
  - Education is often providing information from an expert to a passive receiver.
  - Counselling is not directive or judgemental. It is empathetic interpersonal communication between a client and a provider to help the client learn how to use information to make a choice or solve a problem. The goal of counselling is to effectively communicate behaviours the client can practice to improve nutrition and health status. When you counsel, you listen to and help every person decide what is best for them from various options or suggestions, and you help them to have the confidence to carry out their decisions. You listen to them and try to understand how they feel.

- 4. Explain that in talking with pregnant women in this community, many reported not asking health care providers questions or sharing concerns unless it was very serious, and they often leave their visit without understanding the benefits of IFAS or what it is for. Explain that by improving counselling skills, we can help women to better understand the importance of taking these pills.
- 5. Ask: What skills are needed to provide effective counselling? Write the responses on a flipchart. Pass out Handout6.1: Definition of Counselling and Effective Counselling Skills and compare the information to participants' responses.
- 6. **Distribute counselling cards to all participants**. Ask participants to refer to their counselling cards and turn to page 2. Present the following information:
  - These counselling cards are designed to help healthcare providers communicate effectively about calcium and IFAS to pregnant mothers.
  - The counselling cards can be used both for individual or group counselling. Today we will be focusing on individual counselling.
  - The side of the card with illustrations or pictures is intended to be viewed by clients, while the other side with text is to be viewed by the healthcare provider.
  - Individual counselling of mothers on calcium and IFAS is very important for improving adherence.
- 7. Present the following counselling tips:
  - Maintain eye contact with the client during counselling.
  - Build on what the client knows.
  - Use the key messages in the cards to reinforce or correct the clients' responses as needed.
  - Review the key points with the client to ensure she has understood the messages correctly.
  - Counselling will vary depending on whether it is the client's first visit or return visit.

# Handout 6.1: Counselling goals and skills

The difference between advice, education and counselling:

- Giving advice is directive.
- **Education** is providing information from an expert to a passive receiver.
- **Counselling** is not directive or judgemental. It is empathetic interpersonal communication between a client and a provider to help the client learn how to use information to make a choice or solve a problem.

## Goals of counselling

- To effectively communicate behaviours the client can practice to improve nutrition and health status
- To help the client try small do-able actions to improve a particular behaviour
- To judge when the client should be referred for further clinical assessment the following question: What skills are needed to provide effective counselling?

# **Effective Counselling Skills**

- Using helpful non-verbal communication
- Using responses or gestures that show interest
- Showing respect and empathy (that you understand the client's feelings)
- Asking open-ended questions
- Reflecting back what the client says
- Avoiding words that sound judgmental
- Accepting what a client thinks and feels
- Recognizing and praising what a client is doing correctly
- Giving practical help
- Giving a little relevant information at a time
- Using simple language
- Making one or two suggestions and not giving commands

# **Session 7: Calcium and IFAS Counselling Cards**

# **Learning objectives**

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

- Explain how to use the counselling cards
- Identify qualities of effective counselling

#### Materials:

- Calcium and IFAS Counselling Cards
- Handout 7.1: Counselling skills checklist
- Completed flipchart from session 2 on adherence challenges
- Prepared flipchart entitled "Solutions"

### Time:40 minutes

#### Instructions

- Ask participants to turn to page 4 of their counselling cards.
   Explain that the large pictures will face the client and have a key message for each card.
- 2. Ask participants to turn to page 5. Explain that this is the side for them to refer to during the counselling session. The key message is there for them as well as counselling suggestions that are in the green box labelled 1 and key information to share with the client in the yellow box labelled 2. The information in box 2 is the most important information to share with the client.
- 3. Ask participants to turn to page 7. Explain that the dark green box labelled 3 has a key question that can be asked before moving to the next topic. These questions can encourage clients to talk and think about the information you are sharing with them.
- 4. With another facilitator role playing the client, demonstrate how to use the counselling cards

(referring to the content in boxes 1 and 2) using the balanced diet (pages 4-5) and pregnancy problem cards (pages 6-7).

5. Pass out handout 7.1 and review it with participants. Ask participants to use the list to describe what skills were used in the demonstration and any that were not.







6. Explain that although most women in this area have not heard of preeclampsia, *presha* is well understood. Women are also familiar with weak or low blood and anaemia. While reducing the risk of preeclampsia may not be motivating, women want to have a healthy pregnancy and many women are concerned about getting a balanced diet, which calcium and IFAS can help with.

## Counselling card: Regimen

- 7. Ask participants to turn to page 8 in their counselling cards. Ask: What do you see in this picture?
- 8. Explain that it is important for pregnant women to take a calcium tablet two times a day, at different times, with food.

  For example, she could take one with breakfast and one with the evening meal. She will also need to take one IFAS tablet a day. Many women find that taking the IFAS tablet at night reduces the side effects she expereinces, but pregnant woman can choose when would be the best time for the IFAS pill.
- 9. Present the following important reminders:
  - It is important that women do not share tablets. If they know other pregnant women who would like tablets, they should encourage them to come to the health facility where they will be given their own supplies for free
  - It is important to keep tablets away from children.
  - If a client forgets to take a calcium tablet, she can take it when she remembers. But not take two calcium tablets at once.
  - She can take the calcium tablets before, during, or after meals, whichever works best for her.
  - When sharing this information with clients, be sure to ask them if they have any questions.

# Counselling card: Make a plan to help you remember to take your tablets and calendar

- Explain that healthcare providers and community health workers can help women select strategies to help them remember to take their pills.
- 11. Ask participants to turn to page 10, and ask: What do you see in this picture?
- Pass out copies of the calendars. Explain that these will be given to health facilities to give to women as part of the ANC visit.
- 13. Present the following information:
  - This calendar can help clients remember to take their tablets. It includes 5 months, and key messages.
  - The picture of the white tablet shows when she should take calcium and the picture of the red tablet shows when she should take IFAS.
  - The pictures of morning and evening can help her remember when to take the tablets.





- Each time she takes a tablet, she can tick the picture of that tablet. She should only tick the tablet if she took it.
- 14. Ask: What are ways you could suggest to your clients to help them remember to take their tablets? Encourage several participants to respond. (Be sure participants mention putting the tablets where they can see them.)

Counselling card: Ask someone close to you to help remind you and encourage you to take the tablets everyday

- 15. Ask participants to turn to page 12. Explain: For some women, asking someone to help, remind, and encourage them can make it easier for them to take their calcium and IFAS tablets. When counselling clients, you can ask them if there is someone at home or near their home who they could ask to help, remind and encourage them take these tablets. Explain that many women who participated in TIPs study about calcium and IFAS reported being reminded and encouraged by their husbands, members of their families, and other people who were close to them.
- 16. Hold up the poster. Explain that these will be given to health facilities to give to women when they come for their ANC visit. Clients can share these posters with the person they identify to help, remind, and encourage them to take their pills.

# Counselling card: Take calcium and IFAS with meals to reduce chances of experiencing side effects

- 17. Ask: What are common side effects some women experience when taking calcium and IFAS? Encourage several participants to respond. Be sure the following are mentioned: constipation, nausea, diarrhoea, or black stools, and mention them if not.
- 18. Ask participants to turn to page 14 of their counselling cards.

  Explain that some women have side effects from taking
  calcium and IFAS tablets. The side effects are not harmful and most women are able to keep
  taking their pills. If women experience constipation, nausea, diarrhoea, or black stools, they
  should not worry.
- 19. Ask: What advice would you give a client who complained of side effects? After participants respond, present the following:
  - Women can keep taking the tablets and usually the side effects will go away.
  - Taking the tablets with food can help reduce side effects.



- If a client is troubled by side effects, she can come to the facility and talk to an ANC healthcare provider.
- 20. Explain that in TIPs, we found that most women who experienced mild side effects were able to continue to adhere to their calcium and IFAS tablets. Counselling women about possible side effects and explaining what is normal and what they can do if they experience them can help women adhere.

# Counselling card: Early and regular ANC visits are important for a healthy and safe pregnancy



21. Explain that it is important for women to come back in one month for another ANC visit. Ask: How do you encourage your clients to come back for follow-up visits? Encourage several participants to share their ideas and experiences.

# **Counselling overview**

- 22. Explain: When women do not adhere to their pills, it is usually not because they do not know. In TIPs we found that women were able to learn their regimen easily. However, they still faced barriers to successfully adhering to their regimen. Of course, taking so many pills can be challenging for anyone, therefore being supportive rather than being critical is the appropriate approach to help pregnant women overcome these barriers. Earlier we discussed things that could make it difficult for pregnant women to adhere to these calcium and IFAS pills. Display flip chart. Ask if any other challenges should be included. Note any responses on the challenges flip.
- 23. Ask: How would you counsel women to overcome or address these challenges? Post a flipchart with the title "Solutions" and note all responses next to the corresponding challenge.
- 24. Explain that in TIPs we found, that women found it easier to adhere when they placed the bottle in a location that would remind them, had a family member help remind and encourage them, and they used the calendar. This is why we have created a calendar for women and the poster to encourage support from their husband and families. When you counsel women you can motivate them and help them feel like they are able to adhere to the regimen. Through counselling we need to do more than tell them to take their pills, we need to help motivate and encourage them, as well as identify potential barriers and help them to find solutions to those problems.

# Handout 7.1 Counselling skills checklist

Skills &	Did the counsellor?	٧
techniques		
Establish a	Greet the client (shake hands if appropriate)?	
relationship	Offer the client a seat?	
	Introduce herself/himself to the client?	
Question	Ask open-ended questions?	
	Ask questions that show interest, concern, and care rather than	
	interrogation?	
	Ask if the client has any questions?	
Listen well	Lean forward to listen carefully?	
	Make eye contact to show interest and care?	
	Wait after asking questions to allow the client to respond or ask	
	questions?	
Empathize	Accept what the client thinks and feels?	
	Treat the client with respect and acceptance?	
Provide	Use simple language?	
information	Give a little relevant information at a time?	
	Make one or two suggestions without giving commands?	
Clarify	Summarize what the client said to ensure understanding?	
	• Use phrases likes, "Are you saying that?" "Did I understand you	
	correctly when you said" and "Correct me if I am wrong"?	
Find	Help the client find practical and realistic solutions?	
solutions	Motivate the client to try solutions?	
Summarize	Summarize the practices the client has agreed to do/try?	
	Review key messages	
	Praise and reaffirm things the client is doing right?	
Follow up	Discuss appropriate follow up with the client?	
	Encourage the client to adhere to the follow-up plan?	

# **Session 8: Using the Counselling Cards**

# **Learning objectives**

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

- Use the counselling cards to counsel pregnant women on calcium and IFAS
- Evaluate the quality of a counselling session using an counselling skills checklist

#### Materials:

- Handout 8.1: Key Calcium and IFAS Messages
- Handout 8.2: Counselling role plays
- Counselling cards, calendar, and AP poster for the "counsellor" to use in the role play
- Flipchart prepared with the title: Tips for improving counselling skills

#### Time: 30 minutes

#### Instructions

- 1. Review Handout 8.1: Key Calcium and IFAS Messages
- 2. Divide participants into groups of three to four with one health care provider in each group.
- 3. Ask the groups to role-play counselling the client in Handout 8.2: Case Study#1 using the counselling skills we have discussed today. Explain that the healthcare provider in each group should role-play the counsellor, a community health worker should role-play the client, and the others should act as observers. The "counsellor" should give the "client" appropriate IFAS messages (refer to Handout 6.2) and use the counselling cards. The role play should start with the calcium and IFAS only, assuming that the other parts of her consultation have been conducted. The observers should use Handout 5.4. Counselling Skills Checklist. Give the groups 10 minutes for the role-play.
- 4. Have all facilitators move around the groups to observe the role-plays and provide feedback as needed.
- 5. After 10 minutes, ask the observers to take 3 minutes to give feedback to the "counsellors" for ways to improve their counselling.
- 6. Ask the groups to role-play counselling the client in Handout 8.2: Case Study#2. Have the observer and client switch roles, but have the health care provider stay in the role of the "counsellor." Set a time limit of 5 minutes for this role-play.
- 7. Have all facilitators move around the groups to observe the role-plays and provide feedback as needed.
- 8. After 5 minutes, ask the observers to take 3 minutes to give feedback to the "counsellors".
- 9. At the end of the exercise, ask each group to write down four observations from their role-plays that could help them (and others) improve their counselling skills.
- 10. Ask each group to present their suggestions and write them on a flip chart. Share any suggestions for improvement based on facilitators' observations during the role play.

# **Handout 8.1: Key Calcium and IFAS Messages**

- Calcium and IFAS keep you and your baby safe and healthy
- Calcium and IFAS help you to have the balanced diet needed for a safe pregnancy and a healthy baby
- Taking calcium and IFAS every day during pregnancy can protect you from serious problems in pregnancy
- Take calcium twice and IFAS once every day for the rest of your pregnancy
- Make a plan to help you remember to take your tablets
- Ask someone close to you to help remind you and encourage you to take the tablets everyday
- Take calcium and IFAS with meals to reduce chances of experiencing side effects
- Early and regular Antenatal Care (ANC) visits are important for a healthy and safe pregnancy

# **Handout 8.2: Counselling Role Plays**

# Case Study #1

Julia is a mother of three children and is currently pregnant with her fourth child. She is 5 months pregnant and has come to the ANC clinic accompanied by her mother-in-law. This is her first ANC clinic visit during this pregnancy, and the only reason that made her come to the clinic was to get a Mother Child Health (MCH) Booklet. Julia is 32 years old and is looking forward to delivering a healthy baby like the rest of her three children. She has been instructed to wait and see the nurse for her first ANC profile. She has been waiting in line for over one hour since it is an ANC clinic day with many clients waiting to see the two nurses on duty. Julia wants to get home to her family and responsibilities. Julia will answer questions if she is asked, but she is not comfortable bringing up issues on her own. If asked, she will tell the nurse about the dizziness she has been feeling, and her worries that she is not eating very well during this pregnancy. She would also tell the nurse that her mother-in-law would discourage her from taking the IFAS pills.

# Case Study #2

Joyce is 20 years old and pregnant for the first time. She is coming to the clinic for the second time. In her previous visit to the clinic, she met with the nurse who counselled her together with several other women on many pregnancy-related issues, including HIV and malaria, birth-planning, among others. She received a 2-week supply of separate iron and folate supplements, and had been taking the tablets as prescribed, that is, daily intake of 3 ferrous sulphate tablets and 1 folate tablet. After a week of taking the IFA supplements, she started experiencing nausea with occasional diarrhoea. Her stool had also turned black, so she decided to stop taking the supplements. She has come to the clinic today to receive an insecticide treated net and medication for malaria prevention.

# Session 9: Breakout sessions: Roles in the MICA Trial

# **Learning objectives**

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

- Describe their roles in the MICA trial
- Identify potential challenges to their roles and solutions to overcome them
- Explain how CHWs and health care providers can work together to support women adhere to calcium and IFAS.

#### Materials:

• Flipchart, markers

Time: 30 minutes

#### Instructions

1. Divide participants into two groups. One with health care providers and one with community health workers. Divide HCW further into two groups and CHWs into 3 groups.

Facilitators will work with each group to answer the following questions

- a) How can participants work with the research team to ensure success of the project?
- b) What specific roles can training participants play in the study?
- c) What roles have they played in previous studies?
- d) How can they fit these additional responsibilities into their current job duties?
- e) What will be challenging for them in playing the needed roles in this study?
- f) How can these challenges be overcome?

In addition, explain the following to the healthcare worker group:

- Overview of research project so they are prepared for observations, recruitment and exit interview activities
- How many pills will be given and why
- The use of bags
- How pill stocks in clinics will be maintained.
- Ask for their input on how to help the study run smoothly.
- Ask each HCW group to select a representative to present their conclusions to the whole HCW team. Ask each CHW team to select 2 representatives to present their conclusions to the whole CHW team. Allow a chance for participants to ask questions that are remaining at the end of the workshop.

# Session 10: Post-test and closing

# **Objectives**

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

• Assess their level of knowledge on calcium and IFA supplementation

#### Materials:

Handout 10.1: Post-test

• Handout 10.2: Training evaluation

Buttons

Certificates

Time: 30 minutes

#### Instructions

- 1. Pass out copies of the post-test and training evaluation to each participant. Explain that the training evaluation is completely anonymous and we would really appreciate their honest feedback and critique so that we can improve this workshop in the future. Explain that they will have 20 minutes to complete the test.
- 2. Round of applause for the participants! Pass out certificates and buttons to each participant.
- 3. Thank participants for their participation and officially close the workshop.

# Handout 10.1: Post-test

		ID C	ODE: / / HW
	Name: Facil	ity:	
	Title: Date	e:	
Dlass	and the state of t	:11	
01	e respond to the following questions about calcium and IFAs Which micronutrient pill can help prevent anemia?	pilis.	Vitamin A
			Calcium
			IFA
			Zinc
			Don't know
02	Which conditions can calcium supplementation in		Anaemia
	pregnancy help prevent? (check all that apply )		High blood pressure
			Malaria
			Preeclampsia
			Sepsis
			Don't know
03	How many calcium pills should the client take every day?		pills per day
04	How many IFAS pills should the client take every day?		pills per day
05	Can an IFAS tablet be taken at the same time as a calcium tablet?		No
			Yes
			Don't know
06	At what times of day is it recommended the client take		Morning
	calcium pills? (check all that apply )		Midday
			Evening
			Don't know
07	Is it preferable that calcium pills are taken with food?		No
			Yes
			Don't know
08	If the client forgets to take one calcium pill in the early		No
	morning, and remembers at 9:00am, should she take a calcium pill when she remembers?		Yes
	•		Don't know

09	Some women may experience minor side effects from	☐ Black stools
	calcium or IFAS. What are common side-effects associated with these tablets? (check all that apply)	☐ Constipation
		☐ Diarrhoea
		☐ Fainting
		☐ Fever
		☐ Nausea
		☐ Skin rash
		☐ Don't know
10	For most women who experience side effects, if they	☐ No, they will remain
	continue to take the pills, will the side effects go away?	☐ Yes, they will go away
		☐ Don't know
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.
	1.	
	2.	
	3.	

# **Handout 10.2: Training evaluation**

Please respond to the following questions about the training workshop. Your input is very valuable so we may learn how to improve training on prenatal calcium and IFA supplementation in the future. We ask that you do not record your name on this form. Your responses are completely confidential.

01	Overall, how satisfied do you feel with this training workshop?		Not satisfied
			Somewhat satisfied
			Very satisfied
02	How beneficial is this training session in helping you with your		Very beneficial
	work?		Somewhat beneficial
			Not beneficial
03	How well has this training prepared you to adequately counsel		Not very prepared
	pregnant women about calcium and IFAs supplementation?		Somewhat prepared
			Very prepared
04	How satisfied are you with the following aspects of the training?		
а	Organization of the training		Not satisfied
			Somewhat satisfied
			Very satisfied
b	Location		Not satisfied
			Somewhat satisfied
			Very satisfied
С	Topics		Not satisfied
			Somewhat satisfied
			Very satisfied
d	Trainers		Not satisfied
			Somewhat satisfied
			Very satisfied
05	What is the most important thing we can do to improve the training	ng w	orkshop?
0.6			
06	What else do you want to tell us?		

# Annex 1: Pre/post-test Answer Key

1	Which micronutrient tablet can help prevent anaemia?	Vitamin A
		Calcium
		IFA
		Zinc
		Don't know
2	Which conditions can calcium supplementation in	Anemia
	pregnancy help prevent? (Circle all possible answers)	High blood pressure
		Malaria
		Preeclampsia
		Sepsis
		Don't know
3	How many calcium tablets should the client take every	
	day?	<b>2</b> tablets per day
4	How many IFAS tablets should the client take every day?	
		<b>1</b> tablets per day
	Can an IFAS tablet be taken at the same time as calcium?	No
		Yes
		Don't know
6	At what times of day is it recommended the client take calcium tablets? (circle all that apply )	Morning
	calcium tablets: (circle all that apply )	Midday
		Evening
		Don't know
7	Is it preferable that calcium tablets are taken with food?	No
		Yes
		Don't know
8	If the client forgets to take one calcium tablet in the early	No
	morning, and remembers at 9:00am, should she take a calcium tablet when she remembers?	Yes
		Don't know

9	Some women may experience minor side effects from calcium or IFAS. What are common side-effects associated	Black stools			
	with these tablets? (Circle all that apply)	Constipation			
		Diarrhoea			
		Fainting			
		Fever			
		Nausea			
		Skin rash			
		Don't know			
10	For most women who experience side effects, if they continue to take the tablets, will the side effects go away?	No, they will remain			
		Yes, they will go away			
		Don't know			
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.			
	1. Calendar				
	2. Asking someone to remind and encourage them				
3. Putting the pills in a place they can easily see them					
4. Taking them with meals					



Calcium and
Iron Folic Acid
Supplementation for
Pregnant Women

# A Trainer's Guide for HEALTHCARE PROVIDERS AND COMMUNITY HEALTH WORKERS

Three calcium administrations

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## Training schedule

Time	Session
9:00-9:30	1. Welcome, introductions, and expectations
9:30-9:50	Pretest
9:50-10:20	2. Introduction to the training and MICA study
10:20-10:40	Tea Break
10:40-11:30	3. Rationale and indication for integrated prenatal calcium and IFA supplementation
11:30-12:00	4. Balancing the diet in pregnancy with integrated Ca and IFA supplementation
12:00-1:00	5. Preeclampsia and anaemia in pregnancy
1:00-2:00	Lunch
2:00-2:20	6. Counselling skills
2:20-3:00	7. Calcium and IFAS counselling cards
3:00-3:30	8. Using the counselling cards: Role Play
3:30-3:45	Tea Break
3:45-4:15	9. Breakout sessions: Role of participants in the MICA trial
4:15-4:30	10. Post-test and closing

## Session 1: Welcome, introductions, expectations, and pretest

## **Objectives**

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

Assess their level of knowledge on calcium and IFA supplementation

#### Materials:

- Flip chart, markers
- Flip chart prepared with "Parking Lot" across the top
- Handout 1.1: Pretest

Time: 50 minutes

- 1. Welcome participants. Introduce the trainers.
- 2. Divide participants into pairs and ask them to introduce each other and discuss their expectations for this workshop. Explain that after a couple of minutes they will introduce their partner to the group and list one of their expectations that they share. Write down all expectations that are mentioned. Ask participants to only list expectations that have not been mentioned by others.
- 3. Explain that we would like this training to be very participatory, we will use discussion and role play to try to help you feel ready to carry out this new life-saving intervention. Feel free to ask questions, contribute ideas, share experiences, or let us know if there are any problems. Point to the flipchart paper on a wall titled Parking Lot and explain that it is for any issues that arise during the training to address later.
- 4. Pass out the pretest (Handout 1.1) to all participants and explain that they have 20 minutes to complete the test. Explain: The pretest is not an examination and we are aware that most of the content is new information from current research. The purpose of the training is to bring the information to you.
- 5. Collect the pretests. During the first tea break, mark the pretest using the Pretest Answer sheet (refer to Annex 1). Identify areas of strengths and weaknesses to inform areas to lay emphasis during the training.

## Handout 1.1: Pretest

			ID CC	DDE: /	/ HW
	Name:	Facility:			
	Title:	Date: _			
	e respond to the following questions about calcium and	IFAs pills			
01	Which micronutrient pill can help prevent anaemia?			Vitamin A	
				Calcium	
				IFA	
				Zinc	
				Don't know	
02	Which conditions can calcium supplementation in			Anaemia	
	pregnancy help prevent? (check all that apply )			High blood pressure	
				Malaria	
				Preeclampsia	
				Sepsis	
				Don't know	
03	How many calcium pills should the client take every da	y?		pills per day	
04	How many IFAS pills should the client take every day?			pills per day	
05	Can an IFAS tablet be taken at the same time as a calc	ium		No	
	tablet?			Yes	
				Don't know	
06	At what times of day is it recommended the client take	!		Morning	
	calcium pills? (check all that apply )			Midday	
				Evening	
				Don't know	
07	Is it preferable that calcium pills are taken with food?			No	
				Yes	
				Don't know	
08	If the client forgets to take one calcium pill in the early			No	
	morning, and remembers at 9:00am, should she take a calcium pill when she remembers?			Yes	
				Don't know	

09	Some women may experience minor side effects from calcium or IFAS. What are common side-effects associated	☐ Black stools
calcium or IFAS. What are common side-e with these tablets? (check all that apply)		☐ Constipation
	with these tablets? (check all that apply)	☐ Diarrhoea
		☐ Fainting
		☐ Fever
		□ Nausea
		☐ Skin rash
		☐ Don't know
10	For most women who experience side effects, if they	☐ No, they will remain
	continue to take the pills, will the side effects go away?	☐ Yes, they will go away
		☐ Don't know
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.
	1.	
	2.	
	3.	

## Session 2: Introduction to the training and MICA study

## **Learning objectives**

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

- Understand the purpose and significance of the training
- List activities that will be involved in the training

#### **Materials:**

- Flipchart with participants' expectations
- Flipchart with training objectives
- Flipchart entitled "Challenges"
- Handout 2.1:Purpose of the training
- Handout 2.2: Training schedule/Program of events

#### Time: 30 minutes

- 1. Refer to the flip chart prepared in the previous session with participants' expectations and compare their expectations to the training objectives. Introduce the training objectives, and compare them with the expectations of the participants.
- 2. Ask for volunteers (from communities where TIPs was conducted) to discuss what they know about the MICA study so far and the purpose of the study.
- 3. Discuss the purpose of the training. Refer to handout 2.1
- 4. Ask participants to write three factors that might affect adherence to supplements and satisfaction with supplementation among pregnant women and pass it to the person on their right. Then ask participants to read out what they have on the pieces of paper passed to them. Note participants responses on the flipchart entitled "Challenges" (which will be used in session 7).
- 5. Explain to participants that studies have been conducted to examine these issues. Then mention the following key findings from TIPs (if not yet discussed).
  - Number of pills/too many pills
  - Side effects
  - Other people will discourage her
  - Having to take pills with meals
  - Difficult to remember
  - Lack of time/busy
  - Difficult to take when outside of home or travelling
  - Some women fear medication
  - People think these pills are ARVs
- 6. Describe the modules and activities that will be involved in the training. Refer to the program of events (Handout 2.2)

## **Handout 2.1 Training objectives**

The objectives of the course are to:

- Increase knowledge on nutrition during pregnancy
- Increase knowledge of strategies for addressing anaemia during pregnancy;
- Increase knowledge of strategies for preventing preeclampsia/eclampsia;
- Improve knowledge of IFAS during pregnancy
- Increase knowledge of calcium supplementation during pregnancy
- Increase knowledge on strategies for supporting women to adhere to health recommendations

## Specifically for healthcare providers

- Develop skills to be able to counsel pregnant women on calcium and IFAS
- Build counselling skills to help women overcome barriers to calcium and IFAS adherence
- Become aware of their roles in the MICA trials

## Specifically for community health workers

- Develop skills to support pregnant women to adhere to their calcium and IFAS
- Be able to share information on the safety and benefits of calcium and IFAS
- Become aware of their roles in the MICA trials

## Handout 2.2 Training schedule

Time	Session
9:00-9:30	1. Welcome, introductions, and expectations
9:30-9:50	Pretest
9:50-10:20	2. Introduction to the training and MICA study
10:20-10:40	Tea Break
10:40-11:30	3. Rationale and indication for integrated prenatal calcium and IFA supplementation
11:30-12:00	4. Balancing the diet in pregnancy with integrated Ca and IFA supplementation
12:00-1:00	5. Preeclampsia and anaemia in pregnancy
1:00-2:00	Lunch
2:00-2:20	6. Counselling skills
2:20-3:00	7. Calcium and IFAS counselling cards
3:00-3:30	8. Using the counselling cards: Role Play
3:30-3:45	Tea Break
3:45-4:15	9. Breakout sessions: Role of participants in the MICA trial
4:15-4:30	10. Post-test and closing

# Session 3: Rationale and indication for integrated prenatal calcium and IFA supplementation

## **Learning objectives**

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

 Describe the rationale for recommendations for prenatal integrated calcium and IFA supplementation

#### **Materials:**

- Pens
- Sticky notes

#### Time:50 minutes

#### Instructions

Read out objectives of the session

- 1)Ask selected participants to describe the usual diet of their ANC clients
- 2) Divide participants into four groups. Ask each group to identify possible nutrients that might be lacking in diets of most of their ANC clients and the possible health effects. Ask each group to select someone to present their conclusions to the whole team on behalf of their group.
- 3) Ask for volunteers to name the commonest nutritional deficiency seen among their ANC clients. Emphasize that many studies show that anaemia is very common.
- 4) Ask for volunteers to list the commonest causes of maternal mortality they have seen in their practice. Emphasize that hypertensive disorders is a leading killer and often missed.
- 5) Ask participants to return to their groups and discuss what micronutrient supplements can impact illness and death during pregnancy and why.
- 6) Ask each group to select another person to present to the whole team.

Take home message:

- Preeclampsia is a major but silent killer
- The burden of anaemia in pregnancy is huge
- Evidence has shown that calcium and IFA supplementation can prevent these conditions

# Session 4: Balancing the diet in pregnancy with integrated Ca and IFA supplementation

## **Learning objectives**

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

- Describe the burden of Ca inadequacy and iron deficiency in pregnancy
- List local sources of dietary iron and calcium
- Describe why dietary modification advice is unlikely to be sufficient in balancing the diet in pregnancy

#### Materials:

- Diet flip-chart
- Prepared flip charts
- Pen
- Sticky note
- Counselling cards

Time: 30 minutes

#### Instructions

- 1. Read out objectives of the session
- 2. Divide participants into 6 groups (with both healthcare workers and CHWs) and assign a number (1-6) to each group. Explain that each group has been assigned a number and should go to the flipchart with their group number. Each flipchart has a question that they should discuss as a group and then write their responses on the flipchart.

The flipcharts with the following questions should be prepared beforehand:

- 1)Describe the usual diet of pregnant women in your community.
- 2) What are the components of a balanced diet for pregnant women?
- 3) What are the main nutrients in the diets of pregnant women?
- 4) What are the main micronutrients that are missing from the diets of pregnant women?
- 5) What foods that are available in this community are good sources of calcium?
- 6) What foods that are available in this community are good sources of iron?
- 3. After 5 minutes, ask participants to move to the flipchart to their right and add any other information to that question.
- 4. After 3 minutes, ask participants to gather around flipchart #1 and discuss the information presented on the flipchart. Ask if any other participants have anything to add.
- 5. As a group, move to flipchart #2 and review the responses. Ask if any other participants have anything to add. Emphasize the need for diversity and quantity of dietary intake. Emphasize the importance of minerals to good health.
- 6. As a group, move to flipchart #3 and review the responses. Ask if any other participants have anything to add. Ask participants to mention main nutritional contributions of common local diet

- 7. As a group, move to flipchart #4 and review the responses. Ask if any other participants have anything to add. Emphasize that minerals e.g. iron and calcium are unlikely to be obtained in sufficient quantities from diets because of the increased requirements during pregnancy and the relatively small quantities present in most food sources. Emphasize that it is hard to eat enough of these dietary sources to meet requirements in pregnancy.
- 8. As a group, move to flipchart #5 and review the responses. Ask if any other participants have anything to add
- 9. As a group, move to flipchart #6 and review the responses. Ask if any other participants have anything to add
- 10. Ask participants to suggest ways of helping pregnant women to get the required amount of iron and calcium for normal functioning. Emphasize that supplementation is usually the most reliable options in this circumstance. Refer to counselling cards 4-5.

## Session 5: Preeclampsia and anaemia in pregnancy

## **Learning objectives**

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

- Describe causes and risk factors for preeclampsia and anaemia in pregnancy
- Describe common signs and symptoms of preeclampsia
- Describe common signs and symptoms of anaemia in pregnancy

#### **Materials:**

- Flip chart
- Counselling cards

### Time:60 minutes

- 1. Read out the session objectives
- 2. Ask participants if they have seen cases of anaemia in pregnancy in their current practice
- 3. Ask some participants to describe how they knew those were cases of anaemia
- 4. Ask participants if they have seen cases of preeclampsia in their current practice
- 5. Ask some participants to describe how they knew those were cases of preeclampsia
- 6. Ask two participants to tell a story about a case study of preeclampsia that they have seen and the outcome of the cases
- 7. Describe the common symptoms, signs and complications of preeclampsia and anaemia in pregnancy that have not been mentioned so far. Ask participants to refer to counselling cards 6-7.
- 8. Emphasize that calcium supplementation is not a treatment for preeclampsia. It is a preventive measure.

## **Session 6: Counselling skills**

#### **Learning objectives**

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

- Differentiate between advice, education, and counselling
- · List skills needed for effective counselling
- Describe the purpose of the Calcium and IFAS Counselling Cards

#### **Materials:**

- Flipchart, markers
- Handout 6.1 Definition of Counselling and Effective Counselling Skills
- Calcium and IFAS Counselling Cards

#### Time:20minutes

#### Instructions

- 1. Present the following:
  - In order to facilitate counselling pregnant women on calcium and IFAS, there are counselling cards that you can use with your clients.
  - Counselling cards can save time and ensure comprehensiveness and pictures can improve women's understanding and interest.
  - High-quality counselling can create an environment that encourages women to share and ask questions.
  - The quality of counselling can be more important than quantity of information shared with clients. The goal is to identify key messages and clear ways of presenting them, so it should not take more time than necessary.
  - It is important for women to be counselled with empathy.
  - You will be provided with a supplement calendar and poster to give to each client.
- 2. Ask participants the following question: What is the difference between advice, education and counselling?

Write the responses on a flipchart. Compare the responses with the information in **Handout 6.1**: **Definition of Counselling and Effective Counselling Skills** 

- 3. Explain that the difference between advice, education and counselling
  - Giving **advice** is directive. Often, when you advise people, you tell them what you think they should do.
  - **Education** is often providing information from an expert to a passive receiver.
  - Counselling is not directive or judgemental. It is empathetic interpersonal communication between a client and a provider to help the client learn how to use information to make a choice or solve a problem. The goal of counselling is to effectively communicate behaviours the client can practice to improve nutrition and health status. When you counsel, you listen to and help every person decide what is best for them from various options or suggestions, and you help them to have the confidence to carry out their decisions. You listen to them and try to understand how they feel.

- 4. Explain that in talking with pregnant women in this community, many reported not asking health care providers questions or sharing concerns unless it was very serious, and they often leave their visit without understanding the benefits of IFAS or what it is for. Explain that by improving counselling skills, we can help women to better understand the importance of taking these pills.
- 5. Ask: What skills are needed to provide effective counselling? Write the responses on a flipchart. Pass out Handout6.1: Definition of Counselling and Effective Counselling Skills and compare the information to participants' responses.
- 6. **Distribute counselling cards to all participants**. Ask participants to refer to their counselling cards and turn to page 2. Present the following information:
  - These counselling cards are designed to help healthcare providers communicate effectively about calcium and IFAS to pregnant mothers.
  - The counselling cards can be used both for individual or group counselling. Today we will be focusing on individual counselling.
  - The side of the card with illustrations or pictures is intended to be viewed by clients, while the other side with text is to be viewed by the healthcare provider.
  - Individual counselling of mothers on calcium and IFAS is very important for improving adherence.
- 7. Present the following counselling tips:
  - Maintain eye contact with the client during counselling.
  - Build on what the client knows.
  - Use the key messages in the cards to reinforce or correct the clients' responses as needed.
  - Review the key points with the client to ensure she has understood the messages correctly.
  - Counselling will vary depending on whether it is the client's first visit or return visit.



## Handout 6.1: Counselling goals and skills

The difference between advice, education and counselling:

- Giving **advice** is directive.
- **Education** is providing information from an expert to a passive receiver.
- **Counselling** is not directive or judgemental. It is empathetic interpersonal communication between a client and a provider to help the client learn how to use information to make a choice or solve a problem.

## Goals of counselling

- To effectively communicate behaviours the client can practice to improve nutrition and health status
- To help the client try small do-able actions to improve a particular behaviour
- To judge when the client should be referred for further clinical assessment the following question: What skills are needed to provide effective counselling?

## **Effective Counselling Skills**

- Using helpful non-verbal communication
- Using responses or gestures that show interest
- Showing respect and empathy (that you understand the client's feelings)
- Asking open-ended questions
- Reflecting back what the client says
- Avoiding words that sound judgmental
- Accepting what a client thinks and feels
- Recognizing and praising what a client is doing correctly
- Giving practical help
- Giving a little relevant information at a time
- Using simple language
- Making one or two suggestions and not giving commands

## **Session 7: Calcium and IFAS Counselling Cards**

## **Learning objectives**

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

- Explain how to use the counselling cards
- Identify qualities of effective counselling

#### **Materials:**

- Calcium and IFAS Counselling Cards
- Handout 7.1: Counselling skills checklist
- Completed flipchart from session 2 on adherence challenges
- Prepared flipchart entitled "Solutions"

#### Time:40 minutes

#### Instructions

- Ask participants to turn to page 4 of their counselling cards.
   Explain that the large pictures will face the client and have a key message for each card.
- 2. Ask participants to turn to page 5. Explain that this is the side for them to refer to during the counselling session. The key message is there for them as well as counselling suggestions that are in the green box labelled 1 and key information to share with the client in the yellow box labelled 2. The information in box 2 is the most important information to share with the client.
- 3. Ask participants to turn to page 7. Explain that the dark green box labelled 3 has a key question that can be asked before moving to the next topic. These questions can encourage clients to talk and think about the information you are sharing with them.
- 4. With another facilitator role playing the client, demonstrate how to use the counselling cards(referring to the content in boxes 1 and 2) using the

balanced diet (pages 4-5) and pregnancy problem cards (pages 6-7).

5. Pass out handout 7.1 and review it with participants. Ask participants to use the list to describe what skills were used in the demonstration and any that were not.







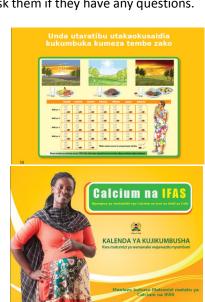
6. Explain that although most women in this area have not heard of preeclampsia, *presha* is well understood. Women are also familiar with weak or low blood and anaemia. While reducing the risk of preeclampsia may not be motivating, women want to have a healthy pregnancy and many women are concerned about getting a balanced diet, which calcium and IFAS can help with.

## Counselling card: Regimen

- 7. Ask participants to turn to page 8 in their counselling cards. Ask: What do you see in this picture?
- 8. Explain that it is important for pregnant women to take a calcium tablet three times a day, at different times, with food. For example, she could take one with breakfast, one with lunch and one with evening meal. She will also need to take one IFAS tablet a day. Many women find that taking the IFAS tablet at night reduces the side effects she expereinces, but pregnant woman can choose when would be the best time for the IFAS pill.
- 9. Present the following important reminders:
  - It is important that women do not share tablets. If they know other pregnant women who would like tablets, they should encourage them to come to the health facility where they will be given their own supplies for free
  - It is important to keep tablets away from children.
  - If a client forgets to take a calcium tablet, she can take it when she remembers. But not take two calcium tablets at once.
  - She can take the calcium tablets before, during, or after meals, whichever works best for her.
  - When sharing this information with clients, be sure to ask them if they have any questions.

# Counselling card: Make a plan to help you remember to take your tablets and calendar

- Explain that healthcare providers and community health workers can help women select strategies to help them remember to take their pills.
- 11. Ask participants to turn to page 10, and ask: What do you see in this picture?
- 12. Pass out copies of the calendars. Explain that these will be given to health facilities to give to women as part of the ANC visit.
- 13. Present the following information:
  - This calendar can help clients remember to take their tablets. It includes 5 months, and key messages.
  - The picture of the white tablet shows when she should take calcium and the picture of the red tablet shows when she should take IFAS.



- The pictures of morning, midday and evening can help her remember when to take the tablets.
- Each time she takes a tablet, she can tick the picture of that tablet. She should only tick the tablet if she took it.
- 14. Ask: What are ways you could suggest to your clients to help them remember to take their tablets? Encourage several participants to respond. (Be sure participants mention putting the tablets where they can see them.)

Counselling card: Ask someone close to you to help remind you and encourage you to take the tablets everyday

- 15. Ask participants to turn to page 12. Explain: For some women, asking someone to help, remind, and encourage them can make it easier for them to take their calcium and IFAS tablets. When counselling clients, you can ask them if there is someone at home or near their home who they could ask to help, remind and encourage them take these tablets. Explain that many women who participated in TIPs study about calcium and IFAS reported being reminded and encouraged by their husbands, members of their families, and other people who were close to them.
- 16. Hold up the poster. Explain that these will be given to health facilities to give to women when they come for their ANC visit. Clients can share these posters with the person they identify to help, remind, and encourage them to take their pills.

# Counselling card: Take calcium and IFAS with meals to reduce chances of experiencing side effects

17. Ask: What are common side effects some women experience when taking calcium and IFAS? Encourage several participants to respond. Be sure the following are mentioned: constipation, nausea, diarrhoea, or black stools, and mention them if not.



Nitamkumbusha na

kumhimiza kutumia Calcium na IFAS

Calcium na IFA

- 18. Ask participants to turn to page 14 of their counselling cards.

  Explain that some women have side effects from taking
  calcium and IFAS tablets. The side effects are not harmful and most women are able to keep
  taking their pills. If women experience constipation, nausea, diarrhoea, or black stools, they
  should not worry.
- 19. Ask: What advice would you give a client who complained of side effects? After participants respond, present the following:

- Women can keep taking the tablets and usually the side effects will go away.
- Taking the tablets with food can help reduce side effects.
- If a client is troubled by side effects, she can come to the facility and talk to an ANC healthcare provider.
- 20. Explain that in TIPs, we found that most women who experienced mild side effects were able to continue to adhere to their calcium and IFAS tablets. Counselling women about possible side effects and explaining what is normal and what they can do if they experience them can help women adhere.

## Counselling card: Early and regular ANC visits are important for a healthy and safe pregnancy



21. Explain that it is important for women to come back in one month for another ANC visit. Ask: How do you encourage your clients to come back for follow-up visits? Encourage several participants to share their ideas and experiences.

### **Counselling overview**

- 22. Explain: When women do not adhere to their pills, it is usually not because they do not know. In TIPs we found that women were able to learn their regimen easily. However, they still faced barriers to successfully adhering to their regimen. Of course, taking so many pills can be challenging for anyone, therefore being supportive rather than being critical is the appropriate approach to help pregnant women overcome these barriers. Earlier we discussed things that could make it difficult for pregnant women to adhere to these calcium and IFAS pills. Display flip chart. Ask if any other challenges should be included. Note any responses on the challenges flip.
- 23. Ask: How would you counsel women to overcome or address these challenges? Post a flipchart with the title "Solutions" and note all responses next to the corresponding challenge.
- 24. Explain that in TIPs we found, that women found it easier to adhere when they placed the bottle in a location that would remind them, had a family member help remind and encourage them, and they used the calendar. This is why we have created a calendar for women and the poster to encourage support from their husband and families. When you counsel women you can motivate them and help them feel like they are able to adhere to the regimen. Through counselling we need to do more than tell them to take their pills, we need to help motivate and encourage them, as well as identify potential barriers and help them to find solutions to those problems.

## Handout 7.1 Counselling skills checklist

Skills &	Did the counsellor?	٧
techniques		
Establish a	• Greet the client (shake hands if appropriate)?	
relationship	elationship • Offer the client a seat?	
	• Introduce herself/himself to the client?	
Question	• Ask open-ended questions?	
	<ul> <li>Ask questions that show interest, concern, and care rather than</li> </ul>	
	interrogation?	
	• Ask if the client has any questions?	
Listen well	• Lean forward to listen carefully?	
	<ul><li>Make eye contact to show interest and care?</li></ul>	
	Wait after asking questions to allow the client to respond or ask	
	questions?	
Empathize • Accept what the client thinks and feels?		
	• Treat the client with respect and acceptance?	
Provide	• Use simple language?	
information • Give a little relevant information at a time?		
	<ul> <li>Make one or two suggestions without giving commands?</li> </ul>	
Clarify	<ul> <li>Summarize what the client said to ensure understanding?</li> </ul>	
	<ul><li>Use phrases likes, "Are you saying that?" "Did I understand you</li></ul>	
	correctly when you said" and "Correct me if I am wrong"?	
Find	<ul><li>Help the client find practical and realistic solutions?</li></ul>	
solutions	<ul><li>Motivate the client to try solutions?</li></ul>	
Summarize	<ul><li>Summarize the practices the client has agreed to do/try?</li></ul>	
Review key messages		
	<ul><li>Praise and reaffirm things the client is doing right?</li></ul>	
Follow up	• Discuss appropriate follow up with the client?	
	• Encourage the client to adhere to the follow-up plan?	

## **Session 8: Using the Counselling Cards**

## **Learning objectives**

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

- Use the counselling cards to counsel pregnant women on calcium and IFAS
- Evaluate the quality of a counselling session using an counselling skills checklist

#### Materials:

- Handout 8.1: Key Calcium and IFAS Messages
- Handout 8.2: Counselling role plays
- Counselling cards, calendar, and AP poster for the "counsellor" to use in the role play
- Flipchart prepared with the title: Tips for improving counselling skills

#### Time:30 minutes

- 1. Review Handout 8.1: Key Calcium and IFAS Messages
- 2. Divide participants into groups of three to four with one health care provider in each group.
- 3. Ask the groups to role-play counselling the client in Handout 8.2: Case Study#1 using the counselling skills we have discussed today. Explain that the healthcare provider in each group should role-play the counsellor, a community health worker should role-play the client, and the others should act as observers. The "counsellor" should give the "client" appropriate IFAS messages (refer to Handout 6.2) and use the counselling cards. The role play should start with the calcium and IFAS only, assuming that the other parts of her consultation have been conducted. The observers should use Handout 5.4. Counselling Skills Checklist. Give the groups 10 minutes for the role-play.
- 4. Have all facilitators move around the groups to observe the role-plays and provide feedback as needed.
- 5. After 10 minutes, ask the observers to take 3 minutes to give feedback to the "counsellors" for ways to improve their counselling.
- 6. Ask the groups to role-play counselling the client in Handout 8.2: Case Study#2. Have the observer and client switch roles, but have the health care provider stay in the role of the "counsellor." Set a time limit of 5 minutes for this role-play.
- 7. Have all facilitators move around the groups to observe the role-plays and provide feedback as needed.
- 8. After 5 minutes, ask the observers to take 3 minutes to give feedback to the "counsellors".
- 9. At the end of the exercise, ask each group to write down four observations from their role-plays that could help them (and others) improve their counselling skills.
- 10. Ask each group to present their suggestions and write them on a flip chart. Share any suggestions for improvement based on facilitators' observations during the role play.

## **Handout 8.1: Key Calcium and IFAS Messages**

- Calcium and IFAS keep you and your baby safe and healthy
- Calcium and IFAS help you to have the balanced diet needed for a safe pregnancy and a healthy baby
- Taking calcium and IFAS every day during pregnancy can protect you from serious problems in pregnancy
- Take calcium thrice and IFAS once every day for the rest of your pregnancy
- Make a plan to help you remember to take your tablets
- Ask someone close to you to help remind you and encourage you to take the tablets everyday
- Take calcium and IFAS with meals to reduce chances of experiencing side effects
- Early and regular Antenatal Care (ANC) visits are important for a healthy and safe pregnancy

## **Handout 8.2: Counselling Role Plays**

## Case Study #1

Julia is a mother of three children and is currently pregnant with her fourth child. She is 5 months pregnant and has come to the ANC clinic accompanied by her mother-in-law. This is her first ANC clinic visit during this pregnancy, and the only reason that made her come to the clinic was to get a Mother Child Health (MCH) Booklet. Julia is 32 years old and is looking forward to delivering a healthy baby like the rest of her three children. She has been instructed to wait and see the nurse for her first ANC profile. She has been waiting in line for over one hour since it is an ANC clinic day with many clients waiting to see the two nurses on duty. Julia wants to get home to her family and responsibilities. Julia will answer questions if she is asked, but she is not comfortable bringing up issues on her own. If asked, she will tell the nurse about the dizziness she has been feeling, and her worries that she is not eating very well during this pregnancy. She would also tell the nurse that her mother-in-law would discourage her from taking the IFAS pills.

## Case Study #2

Joyce is 20 years old and pregnant for the first time. She is coming to the clinic for the second time. In her previous visit to the clinic, she met with the nurse who counselled her together with several other women on many pregnancy-related issues, including HIV and malaria, birth-planning, among others. She received a 2-week supply of separate iron and folate supplements, and had been taking the tablets as prescribed, that is, daily intake of 3 ferrous sulphate tablets and 1 folate tablet. After a week of taking the IFA supplements, she started experiencing nausea with occasional diarrhoea. Her stool had also turned black, so she decided to stop taking the supplements. She has come to the clinic today to receive an insecticide treated net and medication for malaria prevention.

## Session 9: Breakout sessions: Roles in the MICA Trial

## **Learning objectives**

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

- Describe their roles in the MICA trial
- Identify potential challenges to their roles and solutions to overcome them
- Explain how CHWs and health care providers can work together to support women adhere to calcium and IFAS.

#### **Materials:**

Flipchart, markers

#### Time:30 minutes

#### Instructions

1. Divide participants into two groups. One with health care providers and one with community health workers. Divide HCW further into two groups and CHWs into 3 groups.

Facilitators will work with each group to answer the following questions

- a) How can participants work with the research team to ensure success of the project?
- b) What specific roles can training participants play in the study?
- c) What roles have they played in previous studies?
- d) How can they fit these additional responsibilities into their current job duties?
- e) What will be challenging for them in playing the needed roles in this study?
- f) How can these challenges be overcome?

In addition, explain the following to the healthcare worker group:

- Overview of research project so they are prepared for observations, recruitment and exit interview activities
- How many pills will be given and why
- The use of bags
- How pill stocks in clinics will be maintained.
- Ask for their input on how to help the study run smoothly.
- Ask each HCW group to select a representative to present their conclusions to the whole HCW team. Ask each CHW team to select 2 representatives to present their conclusions to the whole CHW team. Allow a chance for participants to ask questions that are remaining at the end of the workshop.

## Session 10: Post-test and closing

## **Objectives**

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

• Assess their level of knowledge on calcium and IFA supplementation

### **Materials:**

Handout 10.1: Post-test

• Handout 10.2: Training evaluation

Buttons

Certificates

Time: 30 minutes

- 1. Pass out copies of the post-test and training evaluation to each participant. Explain that the training evaluation is completely anonymous and we would really appreciate their honest feedback and critique so that we can improve this workshop in the future. Explain that they will have 20 minutes to complete the test.
- 2. Round of applause for the participants! Pass out certificates and buttons to each participant.
- 3. Thank participants for their participation and officially close the workshop.

## Handout 10.1: Post-test

			ID CC	DDE: /	/ HW
	Name:	Facility:			
	Title:	Date: _			
Pleas 01	se respond to the following questions about calcium and Which micronutrient pill can help prevent anaemia?	IFAs pills		Vitamin A	
01	which micronathene pin can help prevent anaema:			Calcium	
				IFA	
				Zinc	
				Don't know	
02	Which conditions can calcium supplementation in		_	Anaemia	
02	pregnancy help prevent? (check all that apply )			High blood pressure	
				Malaria	•
				Preeclampsia	
				Sepsis	
				Don't know	
03	How many calcium pills should the client take every da	v2		Don't know	
03	now many calcium phis should the chefit take every da	y:		pills per day	
04	How many IFAS pills should the client take every day?			pills per day	
05	Can an IFAS tablet be taken at the same time as a calc	ium		No	
	tablet?			Yes	
				Don't know	
06	At what times of day is it recommended the client take	1		Morning	
	calcium pills? (check all that apply )			Midday	
				Evening	
				Don't know	
07	Is it preferable that calcium pills are taken with food?			No	
				Yes	
				Don't know	
08	If the client forgets to take one calcium pill in the early			No	
	morning, and remembers at 9:00am, should she take a calcium pill when she remembers?			Yes	
				Don't know	

09	Some women may experience minor side effects from calcium or IFAS. What are common side-effects associated	☐ Black stools
calcium or IFAS. What are common with these tablets? (check all that approximately common to the common of the com		☐ Constipation
	with these tablets? (check all that apply)	☐ Diarrhoea
		☐ Fainting
		☐ Fever
		☐ Nausea
		☐ Skin rash
		☐ Don't know
10	For most women who experience side effects, if they	☐ No, they will remain
	continue to take the pills, will the side effects go away?	☐ Yes, they will go away
		☐ Don't know
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.
	1.	
	2.	
	3.	

## **Handout 10.2: Training evaluation**

Please respond to the following questions about the training workshop. Your input is very valuable so we may learn how to improve training on prenatal calcium and IFA supplementation in the future. We ask that you do not record your name on this form. Your responses are completely confidential.

01	Overall, how satisfied do you feel with this training workshop?	☐ Not satisfied
		☐ Somewhat satisfied
		☐ Very satisfied
02	How beneficial is this training session in helping you with your	☐ Very beneficial
	work?	☐ Somewhat beneficial
		☐ Not beneficial
03	How well has this training prepared you to adequately counsel	☐ Not very prepared
	pregnant women about calcium and IFAs supplementation?	☐ Somewhat prepared
		☐ Very prepared
04	How satisfied are you with the following aspects of the training?	
а	Organization of the training	☐ Not satisfied
		☐ Somewhat satisfied
		☐ Very satisfied
b	Location	☐ Not satisfied
		☐ Somewhat satisfied
		☐ Very satisfied
С	Topics	☐ Not satisfied
		☐ Somewhat satisfied
		☐ Very satisfied
d	Trainers	☐ Not satisfied
		☐ Somewhat satisfied
		☐ Very satisfied
05	What is the most important thing we can do to improve the training	ng workshop?
06	What else do you want to tell us?	

## Annex 1: Pre/post-test Answer Key

1	Which micronutrient tablet can help prevent anaemia?	Vitamin A
		Calcium
		IFA
		Zinc
		Don't know
2	Which conditions can calcium supplementation in	Anaemia
	pregnancy help prevent? (Circle all possible answers)	High blood pressure
		Malaria
		Preeclampsia
		Sepsis
		Don't know
3	How many calcium tablets should the client take every	
	day?	<b>3</b> tablets per day
4	How many IFAS tablets should the client take every day?	
		<b>1</b> tablets per day
	Can an IFAS tablet be taken at the same time as calcium?	No
		Yes
		Don't know
6	At what times of day is it recommended the client take	Morning
	calcium tablets? (circle all that apply )	Midday
		Evening
		Don't know
7	Is it preferable that calcium tablets are taken with food?	No
		Yes
		Don't know
8	If the client forgets to take one calcium tablet in the early	No
	morning, and remembers at 9:00am, should she take a calcium tablet when she remembers?	Yes
		Don't know
1		

9	Some women may experience minor side effects from calcium or IFAS. What are common side-effects associated	Black stools	
	with these tablets? (Circle all that apply)	Constipation	
		Diarrhoea	
		Fainting	
		Fever	
		Nausea	
		Skin rash	
		Don't know	
10	For most women who experience side effects, if they	No, they will remain	
	continue to take the tablets, will the side effects go away?	Yes, they will go away	
		Don't know	
11.	Name three strategies that can help women adhere to their	calcium and IFAS tablets.	
	1. Calendar		
	<ul><li>2. Asking someone to remind and encourage them</li><li>3. Putting the pills in a place they can easily see them</li><li>4. Taking them with meals</li></ul>		