## STEPS TO CONDUCTING PERSONALISED SUPPORT GROUPS FOR ACTION

### 4 STEPS FOR CONDUCTING PERSONALISED SUPPORT GROUPS FOR ACTION

<table>
<thead>
<tr>
<th>Steps</th>
<th>Things the volunteer should do:</th>
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| 1. Personalise (Mtazano) | ▪ Show genuine interest in each group member.  
 | ▪ Ask about health issues group members face. |
| 2. Discuss and Brainstorm solutions (Jadili na chemsha bongo) | ▪ Ask group members what small practices they can try so that they overcome the health issue they’ve identified. If group members struggle to identify practices they can try, refer to your menu of practices and, based on the health issues group members have already reported, choose 3-4 small, doable actions (SDAs).  
 | ▪ Present 3-4 SDAs to the group. Explain what each SDA means. |
| 3. Teach back and Commit (Unaweza nieleza ulivyo elewa na utayali) | ▪ Ask group members to identify benefits of practising each of the SDAs.  
 | ▪ Have group members teach back what they perceive each SDA to be so that you are sure they understand the 3-4 SDAs.  
 | ▪ Have the appropriate group members to commit to practising 2-3 SDAs—either from what group members themselves identify as practices they can try or from your menu of practices. It is likely that group members will commit to different SDAs. This is perfectly fine.  
 | ▪ Help group members identify any challenges with the 2-3 SDAs they’ve committed to try by asking: What makes it hard to practise these new behaviours?  
 | ▪ Ask group members: Who can support you as you try these practices?  
 | The SDAs should be specific to relevant group members. For example, if babies’ crying is a problem for parents of children less than 6 months old, ask parents of children less than 6 months old to commit to 2-3 SDAs related to crying.  
 | ▪ Ask all other group members what they can do to support these parents as they try 2-3 SDAs.  
 | ▪ Have all who are willing to raise their hand and/or say aloud what SDAs they’re committing to.  
 | ▪ Record each group member’s new SDA in your counter book. |
| 4. Tell others (wambiye na wengine) | Have everyone who is willing to do so commit to telling others what they have learnt today. Have everyone invite their neighbours to the next meeting. |
### Example: 4 Steps for Conducting Personalised Support Groups for Action

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<tr>
<th>Steps</th>
<th>Things the Volunteer Should Do</th>
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<tbody>
<tr>
<td>1. Personalise</td>
<td>“Karibu! We’re very glad you have come to the support group. We’re certain that you’ll find today’s meeting beneficial! Let’s start by discussing some of the health challenges you or your children have had recently. What health issues are you facing?” [Group responds that their infants cry a lot.]</td>
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<tr>
<td>2. Discuss and Brainstorm solutions</td>
<td>“What are some of the things you can do to help calm your baby?” Group responds: breastfeed the baby, give gripe water, give traditional medicines. [Volunteer refers to his menu of practices and chooses 3-4 small, doable actions (SDAs) that are beneficial to the child.] “You are right that breastfeeding the baby can really calm her down. In addition to breastfeeding, you can: ▪ Check to see if the baby is wet ▪ Avoid giving traditional medicines, herbal treatments, or gripe water (it contains alcohol and damages the baby’s brain) ▪ Calm the baby by rocking her to sleep, holding her on your tummy or lap, and rubbing her back ▪ Take the baby to the health facility worker if you think she might be sick.”</td>
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<tr>
<td>3. Teach back and Commit</td>
<td>“What do you think the benefits are of: ▪ Breastfeeding the crying baby? ▪ Checking to see if the baby is wet? ▪ Avoiding traditional medicines and treatments and gripe water? ▪ Rocking or holding the baby? ▪ Taking the baby to the health facility when sick?” “What does it mean to: ▪ Breastfeed the crying baby? ▪ Check to see if the baby is wet? ▪ Avoid traditional medicines and treatments and gripe water? ▪ Rock or hold the crying baby? (Can you demonstrate how this is done?) ▪ Take the baby to the health facility when sick?” [Volunteer clarifies any misperceptions about the SDAs.] “Now that we’ve talked about the things you can do to comfort your crying baby, can those of you who have babies commit to trying 2 or 3 of these actions? Which ones will each of you commit to?” [Have group members individually commit to trying 2 or 3 small, doable actions. Let each individual pick the 2 or 3 actions that he or she thinks they can try.] “What do you think might make it hard to practise these new behaviours? Who can support you as you try these practices?” [Volunteer, help individuals resolve any challenges caregivers may face.] “For everyone else who doesn’t have a young child, what can you do to support these parents as they try 2-3 SDAs?” [Have all who are willing raise their hand and/or say aloud what SDAs they’re committing to.] [Record each group member’s new SDA in your counter book.]</td>
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<td>4. Tell others</td>
<td>“Can each of you tell your friends and family what you have learnt today? Can you invite their neighbours to the next meeting?”</td>
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### 5 STEPS FOR FOLLOWING UP ON PERSONALISED SUPPORT GROUPS FOR ACTION

<table>
<thead>
<tr>
<th>Follow-up Support Groups</th>
<th>Things the volunteer should do:</th>
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| 1. Teach back and Follow up | - Have group members teach back what they know about the SDAs discussed in the last meeting.  
- Ask if support group members were able to try the SDAs. |
| 2. Congratulate | Congratulate support group members as a whole for making an effort to try a new SDA. Avoid congratulating only those individuals who successfully practised SDAs. |
| 3. Resolve barriers | Resolve barriers for group members who weren’t able to adopt the new SDA |
| 4. Share successes | - Have group members share their experience trying the new SDAs.  
- Help those who weren’t able to adopt the new SDA resolve any challenges they face. |
| 5. Repeat | Start with a *new practice* using the same participatory approach, including teach back. |

### EXAMPLE: 5 STEPS FOR FOLLOWING UP ON PERSONALISED SUPPORT GROUPS FOR ACTION

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<tr>
<th>Follow-up Support Groups</th>
<th>Things the volunteer should do:</th>
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| 1. Teach back and Follow up | “Last week we talked about things parents can do to calm their babies. What does it mean to:  
- Breastfeed the crying baby?  
- Check to see if the baby is wet?  
- Avoid traditional medicines and treatments and gripe water?  
- Rock or hold the crying baby? (Can you demonstrate how this is done?)  
- Take the baby to the health facility when sick?”  
- Were you able to try any of the new behaviours you committed to? Which behaviours?” |
| 2. Congratulate | “I want to congratulate all of you for making an effort to try these new practices. It’s not easy to do something new!” |
| 3. Resolve barriers | “What were some of the challenges you faced since our last support group when you tried these new practices?”  
[Volunteer: help resolve barriers.] |
| 4. Share successes | “Who can tell me about their experience trying a new behaviour?  
For those of you who weren’t yet able to try the practices you said you’d try, what can we do to help?” |
| 5. Repeat | “We’ve now worked on calming the crying baby and we made great progress! Today, let’s talk about your children (those more than 6 months old) eating eggs, fish, and dagaa.”  
[Volunteer uses the same participatory approach, including teach back]. |
SUPERVISORY SUPPORT AND CAPACITY BUILDING

CSO staff, do the following:

1. Prepare for support group
   - Help volunteers secure buy-in from community.
   - Plan for cooking or other hands-on demonstration.

2. Observe volunteers facilitating groups
   - Use checklists.
   - Help volunteers point out the benefits of new, small, do-able actions.

3. Coach volunteers
   - Build volunteers’ skills, especially to:
     1. personalise
     2. discuss and brainstorm, and
     3. teach back.

4. Conduct role plays & field practice
   - Help volunteers reflect using job aids and checklists.

5. Continue to monitor; repeat process monthly
   - Have volunteers and support group members observe household practices between support groups.
   - When possible, have group members bring evidence of behaviour change to the next meeting (e.g., soap).