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# BREASTFEEDING COUNSELLING A TRAINING COURSE



# **DIRECTOR'S GUIDE**

WORLD HEALTH ORGANIZATION CDD PROGRAMME
UNICEF

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# 1.1 Why this course is needed

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Breastfeeding is fundamental for the health and development of children, and important for the health of their mothers.

The Programme for the Control of Diarrhoeal Diseases has long recognized the need for the promotion of exclusive breastfeeding in the first 4-6 months of life, and sustained breastfeeding together with adequate complementary foods up to 2 years of age or beyond, to reduce diarrhoeal morbidity and mortality.

Workers concerned with nutrition, and with maternal and child health, also recognize the importance of improved infant feeding practices. In 1991, UNICEF and WHO jointly launched the Baby Friendly Hospital Initiative, which aims to improve maternity services so that they protect, promote, and support breastfeeding, by putting into practice the "Ten steps to successful breastfeeding". Many maternity facilities throughout the world are now striving to achieve "Baby Friendly" status.

The International Code of Marketing of Breastmilk Substitutes has been in place for more than a decade, and much effort to protect breastfeeding from commercial influences has followed. One requirement for being "Baby Friendly" is that a facility shall not accept or distribute free samples of infant formula.

However, even mothers who initiate breastfeeding satisfactorily, often start complementary feeds or stop breastfeeding within a few weeks after delivery. All health workers who care for women and children after the perinatal period have a key role to play in sustaining breastfeeding. Many health workers can not fulfil this role effectively because they have not been trained to do so. Little time is assigned to breastfeeding counselling and support skills in the curricula of either doctors, nurses or midwives.

Hence there is an urgent need to train health workers who care for mothers and young children, in all countries, in the skills needed to both support and protect breastfeeding. The purpose of "Breastfeeding counselling: A training course" is to help to fill this gap. The materials are designed to make it possible for trainers even with limited experience of teaching the subject to conduct up-to-date and effective courses.

# 1.2 The meaning of the word `counselling'

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The word 'counselling' is new to many people, and it can be difficult to translate. Some languages use the same word as 'advising'. However, counselling is different from simple advising. When you advise someone, you may tell the person what you think he or she should do. When you counsel a mother, you do not tell her what to do. You help her to decide what is best for her. You listen to her, and try to understand how she feels. You help her to develop confidence, so that she remains in control of her situation. Counselling is also important in other situations where personal behaviour affects health, for example for family planning, or for patients with HIV infection. Discuss with your colleagues what is the appropriate word to use in your situation.

### 1.3 Aims of the course

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The aims of the course are to enable health workers to develop the clinical and interpersonal skills needed to support optimal breastfeeding practices, and where necessary to help mothers to overcome difficulties.

# 1.4 Target group

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The course is for health workers who care for mothers and young children in maternity facilities, hospitals and health centres. This includes midwives, community health nurses, paediatric nurses, and doctors, particularly those who are working at the first level of health care.

In some situations, obstetricians, paediatricians, and staff of programmes such as Control of Diarrhoeal Diseases and Acute Respiratory Infections, immunization, nutrition, and family planning might find the course useful, and it will help them to understand how they can support breastfeeding in their programmes.

### 1.5 Course structure

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The training is for 24 participants, and 6 trainers, and takes 40 hours. It can be conducted intensively over 5 days or it can be spread out less intensively over a longer period, for example 2 days for 2 weeks, or 1 day a week for 5-6 weeks. If trainers or participants come from outside the area, it is usually necessary to hold an intensive course. If trainers and participants all come from within the same district or institution, it may be easier to hold a part-time course over a longer period.

There are 33 sessions, structured around four 2-hour clinical practice sessions, during which participants practise clinical and interpersonal skills with mothers and babies. Participants learn the skills in the preceding classroom sessions, in a sequence of lecture, discussion, demonstration, and exercise.

The training is conducted partly with the whole class together and partly in smaller groups of 8-10 participants with 2 trainers or 4-5 participants with 1 trainer.

An additional 40 hours, or 5 days is necessary for the preparation of trainers. This usually takes place in the week preceding a 5-day course for participants, and enables trainers to become familiar with the course materials, and learn how to conduct the different kinds of session. In this guide, future trainers are referred to during the preparation as `trainees'.

### 1.6 Where to hold a course

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It is essential that a course takes place near one or several health facilities where participants can observe mothers and babies. Maternity, inpatient and outpatient services should be within easy reach of the classrooms.

Ideally a course should be residential, with classrooms and accommodation at the same site, so that you can use the evening for discussions and for watching instructional videotapes.

### 1.7 The materials

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### • Director's Guide

This present document contains guidelines on how to plan and conduct a course. It includes a course outline, instructions for necessary preparations and a description of the facilities, materials, and equipment needed.

# • Trainer's Guide

The Trainer's Guide is a comprehensive manual covering all 33 sessions of the course. It is an essential tool for the trainer, and contains all the information needed, with detailed instructions on how to conduct each session. It describes the teaching methods used, and includes all exercises together with suggested answers. It also contains practical guidelines, summary boxes, forms, lists, and checklists; and the stories used during the course. At the back is a short list of key textbooks, and a list of papers which are additional sources of information about points made in the presentations.

### • Participants' Manual

The Participants' Manual follows the same pattern as the Trainer's Guide covering all 33 sessions. It contains the key information presented in the lectures and other sessions that it is useful for participants to remember. It contains the practical guidelines, summary boxes, forms, lists and checklists. It also contains the exercises but without answers. For the written exercises, participants write answers in their manuals in pencil. They can correct them if necessary when they receive individual feedback from the trainer, or answer sheets for the session. It contains a glossary of terms used during the course, and a Clinical Practice Progress Form, which enables trainers to follow participants' progress, and to make sure that they have sufficient clinical practice.

### Answer Sheets

These contain the suggested answers for the exercises. The trainers give the relevant sheets to participants at the end of each session. Answer Sheets enable participants to study questions further and correct for themselves exercises that they were not able to complete in class.

# • Overhead transparencies and slides

There is a set of fifty overhead transparencies, printed on acetate sheets. They are the visual aids for the Sessions 1, 3, 11, 26, 28, and 31.

There is also a set of fifty 35 mm slides. They are the visual aids for Sessions 5, 8, 14, with two optional slides for Session 27.

# Overhead figures

This is a flipchart containing the figures of the 50 overhead transparencies. In circumstances where it is difficult to project overhead transparencies, trainers can use the flipchart to show the figures to the participants. Trainers also use the flipchart while preparing the sessions which contain overheads.

# • Forms, lists, checklists, and story cards

Three forms, four lists and checklists, and two sets of story cards are needed during the course. These are included where applicable in the Trainer's Guide, with short comments to guide discussion. They are also available on card to use separately in practice sessions.

# • Reference materials

The following booklets and papers are given to each participant as part of the course materials:

Helping Mothers to Breastfeed (Revised Edition, African Medical and Research Foundation, 1992 or an adapted version).

Protecting Infant Health: A Health Workers Guide to the International Code of Marketing of Breastmilk Substitutes (Updated 1993, IBFAN Penang).

Protecting, Promoting and Supporting Breastfeeding: The Special Role of Maternity Services. A joint WHO/UNICEF Statement, 1989.

Annex to the Global Criteria for Baby Friendly Hospitals: Acceptable Medical Reasons for Supplementation.

Annex on Breastfeeding and Maternal Medication: Recommendations for drugs in the Essential Drug List.

# 1.8 Acknowledgements for the slides

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We would like to thank the following people and institutions for permission to use their slides:

- 5/1 Lea Jamieson, Breastfeeding Workshops, King's College Hospital, London
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- 27/2 Dr Rukhsana Haider, ICDDR,B, Dhaka, Bangladesh

### 2. PLANNING AND ADMINISTRATION

Careful planning and strong administrative support are essential both before and during any training course. The following sections describe how to organize the different parts of "Breastfeeding counselling: A training course".

- 2.1 Selecting participants
- 2.2 Selecting trainers
- 2.3 Deciding where to hold a course
- 2.4 Arranging for clinical practice sessions
- 2.5 Course announcement
- 2.6 Planning the timetable
- 2.7 Opening and closing ceremonies
- 2.8 Obtaining course materials
- 2.9 Funds required

Section 6 contains checklists which systematically lists all the arrangements you have to think of. Use these checklists regularly to be sure that you have not forgotten any essential steps in the planning process. As Course Director, you may not be directly responsible for all of the items of the checklists, but you can ask questions to ensure that appropriate arrangements are being made, or you can assign someone responsibility for making them.

Arrangements may not be listed in the exact order in which they will be made. Space has been left for you to list any additional reminders you may wish to include.

# 2.1 Selecting participants

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Try to ensure that appropriate and motivated participants come to the course. This will make the training successful, and may stimulate the interest of others in breastfeeding, so that they will also want to acquire the skills and do the work.

The number of participants who can be invited for a course depends on:

- your budget;
- classroom and residential accommodation;
- the number of trainers available (you need one trainer for each 4-5 participants);
- the number of mother and infant pairs who can be seen on an average day in the health facility where you will conduct the clinical practice sessions (you need about 10 mother-infant pairs per day per group of 4-5 participants).

It is recommended that you do not invite more than 20 participants to a course.

You may plan to train a number of people from a certain area, or to train all appropriate health workers in a given area or institution with a series of several courses. You may ask health facilities in an area each to select 1-3 participants to attend the course.

If possible, try to include one or more of the staff of the health facility in which the clinical practice sessions will be conducted.

The success of a course depends on the presence of motivated, enthusiastic trainers. There should be one trainer for each group of 4-5 participants. When you select trainers, try to be sure that they will be interested and available to conduct other training courses in future, and that they will be given support to do so. It is important that the experience gained by teaching a course is not wasted.

# • *Profile of a trainer*

Trainers are ideally people who are already involved in the promotion of breastfeeding and who have some previous training experience. They should:

- believe that breastfeeding is important;
- have some knowledge of breastfeeding, for example they should have attended a 2-4 weeks course on the subject, or have worked in the specialty in some capacity;
- be interested in becoming a trainer, and have some training experience and skills;
- be committed to helping health workers to learn about breastfeeding;
- be willing and able to attend the entire course, including the preparation for trainers.

# • Inviting trainers

Invite trainers early and confirm their availability, so that you know how many participants you can invite.

Include in the invitation the same information as in course announcement for participants. Provide additional information on the preparation for trainers. Give the exact dates, and make it clear that you expect them to attend the entire course including the preparation. Explain that the preparation is necessary for the trainers to become familiar with the contents and methods of the course, even if they have a good knowledge of breastfeeding. Give any additional administrative details such as arrangements about finance and accommodation.

If trainers live near to where the course will be held, it might be useful to involve them early in the preparations for the course.

# 2.3 Deciding where to hold a course

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### • Classroom facilities

You need one large classroom to accommodate the whole class, including trainers and visitors, but which can also be used for a group of 8-10 participants. There should be at least one extra classroom where a second group of 8-10 participants can work.

Each classroom should be large enough for 2 groups of 4-5 participants to work in at the same time without disturbing each other. If this is not possible, then you need one or two additional rooms or areas for the small groups sessions.

The classrooms should be in a place where the participants are not disturbed by too much background noise.

# • Classroom furniture

Ideally each of the two larger classrooms should have 2 flipchart stands, or one flipchart stand and a large blackboard. If sufficient flipchart stands are not available, make sure that it is possible to post up sheets from the flipcharts on the wall.

You need at least one table for each small group of 4-5 participants to work on, and additional table space to lay out the materials used during the course.

### • Clinical practice facilities

To learn basic breastfeeding counselling skills, participants need to observe and talk to at least 6 mothers and preferably more. Participants should talk to mothers during the postpartum period and also to mothers who bring their children for treatment, for growth monitoring or immunization or who come for family planning advice. Accordingly, the course should take place in or near a facility with a busy maternity ward and if possible, with paediatric inpatient and outpatient health services.

For 20 participants, approximately 50 mother-child pairs should be available for each clinical practice session. If there is no single health facility in an area large enough to provide this number of mothers, you may be able to use another nearby health facility for part of the clinical practice sessions.

If the health facility is not near to the classrooms, you need to make transport arrangements to ensure that the participants can commute between the classrooms and the health facility in the most efficient way, with minimal loss of time.

### • Accommodation and meals

For a residential course, it is necessary to arrange for suitable accommodation near the classroom and the health facility. Unsatisfactory accommodation can hinder participants' learning.

Arrangements also need to be made for meals. This should include midday meals and refreshments, such as coffee and teas, near the classrooms.

# • Clerical and logistical support

Make sure that clerical and support staff will be available at the site to make photocopies and to prepare for example the evaluation questionnaires and certificates, and to make transport arrangements. They should be able and willing to help with anything that requires their attention.

# 2.4 Arranging for clinical practice sessions

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One of the first things to plan, is where to hold clinical practice sessions. Visit one or more possible health facilities to find out if they are appropriate and to talk to the staff.

- *Visit the health facility*
- Talk to the director, and explain what the training consists of, what your needs are, and what you want to do.
- Ask if he or she would be willing for the training to take place in the facility. Ask for the director's ideas about using the facility.
- If the director agrees in principle, visit the wards and the outpatient department. Check the approximate number of mother and baby pairs you could expect to see on an average day.
- Talk to the staff, and try to find out if they are interested in helping with the course. If possible they should:
  - be committed to breastfeeding and have some knowledge of the subject;
  - be willing to share their experience with members of the course;
  - be willing to learn more from their contact with members of the course.
- Identify an area or room near to each clinical area where trainers and participants can have discussions away from mothers' hearing.
- If the facility is suitable and the staff are interested and willing to help, arrange to make another visit nearer the time of the course to hold a meeting with the staff, to prepare them.
- Ask which times of day are most suitable for holding clinical practice sessions. This depends on when mothers and babies are likely to be available, and convenience for the facility routine.
- Prepare the facility staff

It is important to prepare the staff of the health facility, because you will need their help during clinical practice sessions. If necessary, arrange to give a short training session, so that staff understand the purpose of the course more clearly.

### At the meeting explain:

- about the course generally.
- that you need their help to:
  - -- prepare mothers and ask their permission before the participants arrive;
  - -- introduce participants to mothers to whom they can talk, and whom they can observe breastfeeding.
- that participants need to practise their counselling skills with mothers in as many of these situations as possible:

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after a normal delivery,
after a Caesarian section,
with a breastfeeding difficulty,
with a breast condition,
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with a low-birth-weight baby or twins, with a sick child, who have brought their baby for immunization or growth monitoring, who have come for family planning, at an antenatal clinic.

If possible, you also want participants to observe mothers expressing breastmilk and babies being fed with a cup.

- that you would like a responsible member of the ward staff to be available when you are there, in case a mother needs a specific intervention. Interventions will only take place with the permission and knowledge of ward staff. This will also enable staff to follow the mother up.
- the times that you would like to bring participants to the facility. Check that these are appropriate and convenient, and that mothers are expected to be available at that time. Try to find a time each day at which mothers will be available both in the wards and in outpatient facilities.

Leave some copies of reference materials (such as the Joint WHO/UNICEF Statement *Protecting, Promoting and Supporting Breastfeeding* or the book *Helping Mothers to Breastfeed*) for staff to read if they want to.

• *Involve the facility staff in the course:* 

Try to include a member of the staff as a full participant on the course. You may wish to invite other staff to attend some of the presentations if they have time.

Invite the staff who help you to attend the discussions, and give them feedback on the clinical practice.

Make sure that all trainers are aware of the importance of this.

# 2.5 Course announcement

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You need to inform people about the course, for example, regional health offices, and hospitals and health centres, that might send participants. Prepare a course announcement to send to them.

The announcement should describe clearly what the training aims to accomplish, and who will benefit from it. This helps to create appropriate expectations, which helps to ensure that suitable and motivated participants are selected for the course.

The announcement should include:

- Name of the authority responsible for organizing the course
- Aims of the training
- Who should attend and the number of participants to be selected by each facility
- Outline of the course contents
- Description of the main skills that will be taught
- Dates of the course and the place where it will be held

- Accommodation, travel and financial arrangements
- How to register participants and before which date
- That a personal invitation will be sent to all participants who are selected

An example of a Course Announcement is given in Section 6 of this guide.

Decide whom you will send the announcement to, and ask them to suggest suitable participants for the course.

When you have selected the participants send a personal invitation to each of them, with similar information, and other relevant details.

# 2.6 Planning the timetable

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An important responsibility of the Course Director is to plan timetables for both the preparation of trainers and the course for participants. You must decide the priorities for each group, and adapt the timetables to the local situation.

Section 6 includes examples of timetables for a continuous 5-day course, both for participants, and for the preparation of trainers. Notice that the order of the sessions is similar to the Trainer's Guide, but there are some differences. You do not have to follow the exact order of the Sessions 1-33.

• Plan a timetable for participants

# Remember these points:

- Decide the times of the clinical practice sessions. You should have discussed and agreed these with the health facility staff. Other sessions fit round the clinical practices.
- Keep the subject matter in a logical order, for example "How breastfeeding works" needs to be conducted before "Positioning a baby at the breast".
- Keep the sessions which prepare participants for a clinical practice before that clinical practice, (as indicated by the similar titles of class and clinical sessions).
- Avoid having a clinical practice session on the first day of a course, as the participants have not acquired sufficient new skills.
- Use a variety of teaching methods during each day. Mix up lecture presentation, discussion, exercises, and clinical practice.
- In the early afternoon, hold sessions which require active participation, to keep participants alert.

Three of the sessions are 'additional'. They contain important information, and should be included as part of the course. However, they are not essential for the development of skills. If there are time constraints, these are the sessions which can most easily be

moved to an evening session, or conducted separately. Alternatively, ask participants to study the material for these sessions individually during or after the course.

Parts of Sessions 20, 26 and 27 are 'optional'. They cover information and skills which are useful in some situations, but not in others. The Course Director decides if they are useful on this occasion. Most of the exercises contain optional questions. Participants who go through the material fast can answer these questions. Participants who work more slowly can leave them out, or study them later.

There are two videos of about 30 minutes each, recommended in relation to Sessions 10 and 26.

# • Plan a timetable for the preparation of trainers

This timetable is not the same as the one for participants. During the preparation, trainees need time to discuss the course content and structure, and to practise different teaching techniques. Although trainees usually work more quickly than participants, it is not possible to complete all sessions and exercises in the ordinary way.

The example of a timetable for the preparation of trainers in Section 6 includes an extra session on the first day to introduce the course, and time to start preparing sessions for the second day; on the third day there is an evaluation of progress; and on the last day, time is allowed to divide sessions among trainees for them to teach during the following week. To allow for this, trainees are asked to study the additional sessions in their own time. Clinical Practice 2 and 3 are combined, so that there are three clinical practice sessions taking a total of only 5 hours. Session 30, 'Changing practices', is not included as it does not need preparation.

The Course Director adapts this timetable in the same way that you adapt the timetable for participants. Remember these points:

- First arrange the times which are convenient for clinical practice sessions.
- Make sure that you include several sessions of each kind, so that all trainees can practise each kind.
- Allow time for the sessions that are most difficult to teach, for example those on counselling skills.

Be ready to change your timetable during the preparation according to trainees progress, and to help them with particular difficulties.

# 2.7 Opening and closing ceremonies

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It is usual to have opening and closing ceremonies for the course for participants. You may want to invite outside speakers for the ceremonies, and you may want someone special to give participants their certificates. It is important to involve representatives from the government and from key institutions, to inform them about the training and to obtain or acknowledge their support for breastfeeding activities.

Decide whom to invite in good time. Send an invitation with a short description of the course and the participants. Make it clear whether or not you want those whom you invite to give a speech. If you do wish them to speak, stress the exact time that will be available. Send them relevant information that it would be appropriate for them to mention, for example, about local infant feeding data, the reasons for the course, and global initiatives to promote breastfeeding. Offer to provide additional information or a speech outline if required.

If possible, contact the persons who accept the invitation personally and try to ensure that they fully understand the context in which they make their speech before the course starts. It is important that your course schedule does not get disrupted by lengthy or irrelevant speeches, particularly on the first day.

# 2.8 Obtaining course materials

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In Section 6 of this guide, you will find a series of checklists of the materials and equipment that you need to conduct a course. The course materials are listed in the **CHECKLIST OF COURSE MATERIALS.** In most cases you will obtain these from WHO or UNICEF. There is a short list of **Additional resources recommended** that should also be available from WHO or UNICEF, though they are not automatically included in the course materials.

The items in the CHECKLIST OF EQUIPMENT AND STATIONERY and the CHECKLIST OF ITEMS FOR DEMONSTRATIONS should be obtained locally if possible.

It is essential to have life size baby dolls and model breasts for some demonstrations. Baby dolls can often be obtained locally, but sometimes they are difficult to find. You may be able to arrange for someone who teaches or who sells handicrafts to make dolls and breasts for you from cloth.

Alternatively, for the purpose of this course, you can make suitable dolls and model breasts from locally available materials. The boxes **HOW TO MAKE A MODEL DOLL** and **HOW TO MAKE A MODEL BREAST** (see next page) describe one way to produce these items yourself. Prepare a doll and a breast before the course and make time during the preparation of trainers for them to make their own models. It is important for trainers to be able to do this. Remember, they do not have to be perfect.

The CHECKLIST OF BACKGROUND INFORMATION AND RESOURCES lists the information and other resources that must be obtained locally. You may need to start looking for this information some time before a course.

At the end of Section 6 is a list USEFUL BOOKS ON BREASTFEEDING which are good sources of further information. These are books that you may consider buying if funds are available. If any of these books, or any of the additional sources of information listed at the back of the Trainer's Guide are available, display them during the course. However, do not have so many books and references that you overload participants.

### HOW TO MAKE A MODEL DOLL

Find any large fruit or vegetable, a towel or other strong thick cloth, and some rubber bands or string.

Put the fruit or vegetable in the middle of the cloth, and tie the cloth around it to form the baby's 'neck' and 'head'.

Bunch the free part of the cloth together to form the baby's legs and arms, and tie them into shape.

If the cloth is rather thin, you may like to stuff some other cloth inside to give the doll more of a 'body'.

### **HOW TO MAKE A MODEL BREAST**

Use a pair of near skin-coloured socks, or stockings, or an old sweater or tee shirt. Make the cloth into a round bag shape, and stuff it with other cloth or foam rubber to make it breast shaped. Stitch a 'purse string' around a circle in the middle of the breast to make a nipple. Stuff the nipple with foam or cotton. Colour the areola with a felt pen. You can also push the nipple in, to make an 'inverted' nipple.

If you wish to show the inside structure of the breast, with the lactiferous sinuses, make the breast with two layers, for example with 2 socks. Sew the nipple in the outer layer, and draw the lactiferous sinuses and ducts on the inside layer, beneath the nipple. You can remove the outer layer with the nipple to reveal the inside structure.

# 2.9 Funds required

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Make sure that enough funds are available to cover the following:

Participants travel and per diem

Trainers' travel and per diem and special compensation if required

Payment for clerical support staff

Travel to and from the health facility if necessary

Stationery, equipment, and items for demonstrations

Refreshments

Accommodation and meals (if not covered by per diem)

# 3.1 General plan

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Preparation of trainers takes place in the week before the participants' training. It takes 5 days, with homework, and is conducted by the Course Director.

This preparatory period is extremely important. The course materials are not self instructional and participants need the guidance of well-trained and supportive trainers. Also, it is hoped that trainers will teach on other courses and that some of them will become Course Directors. Training them is as important as training participants.

During the preparatory period, trainees work through the course under the supervision of the Course Director. They familiarise themselves thoroughly with the materials and they practise teaching the sessions following the Trainer's Guide. Trainees make sure that their knowledge of breastfeeding is up-to-date, and develop their clinical practice and teaching skills. The Course Director is available during the whole period to explain how to teach the course, and to discuss points that are not clear.

### 3.2 Different kinds of session

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There are several different kinds of session, and trainees should practise leading each kind.

# • Presentations

Seven sessions are presentations in lecture form with slides or overhead transparencies. In the course for participants, each of these is conducted by one of the trainers, for the whole class together.

There are four sessions, and parts of two others, which are demonstrations of clinical skills related to breastfeeding. These also are given by one of the trainers for the whole class together.

# • Group work

Fourteen sessions are conducted in groups of 8-10 participants each with two trainers. These include demonstrations of counselling skills, discussion, exercises, reading, and role-play.

Two entire sessions and parts of three others are conducted in small groups of 4-5 participants each with one trainer. These small group sessions are for discussions, and for practising clinical, history taking, and counselling skills.

Session 30, 'Changing practices' is discussed in a different kind of small group without trainers.

# • Clinical practice

There are four 2-hour clinical practice sessions. The clinical practice itself is conducted in small groups of 4-5 participants each with one trainer. The whole class meets together for the first 20 minutes to prepare, and if possible for the last 20 minutes to discuss the session, led by one trainer.

# 3.3 Methods used to prepare trainers

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Three methods are used to demonstrate and practise teaching procedures:

- 1. The Course Director acts as a trainer. You demonstrate appropriate behaviours when giving a presentation, when leading discussions, facilitating exercises or when conducting a clinical practice session.
- 2. A trainee practises the role of a trainer giving a presentation, leading a discussion, facilitating an exercise, or conducting a clinical practice, while other trainees play the role of participants. The trainee thus both practises herself and demonstrates the role for other trainees.
- 3. One trainee acts as a 'participant' doing a written exercise and another acts as a 'trainer' providing individual feedback on her answer, while others observe them. Again, the 'trainer' is both practising this teaching procedure herself and demonstrating for other trainees.
- Practise different kinds of session

Arrange for each trainee to practise each kind of teaching technique. Each trainee should have the opportunity to:

- give a presentation with overheads or slides
- demonstrate clinical skills
- demonstrate counselling skills
- conduct group work with 8-10 participants
- conduct group work with 4-5 participants
- facilitate a written exercise
- lead a clinical practice

Use the **TRAINING PRACTICE CHART** in Section 6 to help you to assign different types of session to each trainee (see also Section 3.7).

# Practise individual feedback

An important task of trainers is to provide individual feedback, for both the written exercises and the clinical practice sessions. Giving individual feedback is not an easy technique to learn. It is very useful for trainees to see it being modelled and for them to participate in the process so that they understand what is involved.

When giving individual feedback, a trainer identifies points that the participant has and

has not understood about an exercise, and makes sure that the participant understands the main points. For written exercises, the trainer follows the suggested answers in the Trainer's Guide. If the participant's answer is correct, the trainer gives praise. If the participant's answer is not correct, the trainer discusses the question and helps the participant to think of a better answer. The trainer should not tell the participant the suggested answer too quickly, but use the opportunity to clarify some of the teaching that the exercise is about.

To practise the technique, one trainee plays the part of a participant doing a written exercise, while the other trainee gives individual feedback on her answer. They sit in front of the class, positioned as a trainer and participant would be, for others to observe and learn from their performance.

The questions and comments of the 'participant' trainee will probably not be characteristic of actual participants in a course, who may be more reticent and less well informed. Ask someone to act as participant with such characteristics as:

- fear of showing the trainer her work;
- confusion over the relationship of a previous exercise with the exercise being discussed:
- unwillingness to discuss an exercise at all;
- the tendency to say that she understands when she clearly does not.

This will give trainees a more realistic, if exaggerated idea of the difficulties they may face

Remind trainees to speak quietly when they give feedback during the course. They should try to avoid disturbing people who are still working; try not to let other participants overhear the answers before they have thought about an exercise themselves; and try to give the participant who is getting the feedback some privacy.

# 3.4 Introducing materials and methods

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There is no formal opening ceremony during the preparatory week, but it is important for the Course Director to introduce the course to trainees.

# • *Introduce the preparation*

"Next week, on (dates), we will be conducting Breastfeeding counselling: A training course, which will be attended by (number) (midwives and/or general practitioners). The (number) of you have been selected to be trainers to help participants to learn the information and skills covered in the course materials. This week is your week to prepare."

# • *Introduce yourself and the trainees*

Write the name that you wish trainees to call you in large letters on a blackboard or flipchart. Ask the trainees to introduce themselves, and to write the names they wish to be called by on the list also. They may wish also to give other identifying information.

### Distribute materials

Give trainees each a copy of the *Trainer's Guide*, the *Participants' Manual*, the *Overhead figures*, the timetables for the course and for the preparation of trainers, and the reference materials.

# • Explain the course structure and timetable

Ask trainees to look at their copy of the timetable for the participants' course.

Explain how the course is arranged around 4 clinical practice sessions, each of which is preceded by lectures, discussions, demonstrations and exercises, to prepare participants for the clinical practice.

Explain how training is conducted partly with the whole class together, and partly in groups of 8-10 participants with two trainers or small groups of 4-5 participants with one trainer.

# • Explain what will happen this week

Ask trainees to look at the timetable for the preparation of trainers, and explain how it is arranged.

Tell them that they will go through most of the sessions, partly as 'participants' and partly as 'trainers'.

# • *Explain the objectives of the preparation*

- To learn how to use the course materials, especially the Trainer's Guide.
- To become familiar with the information in the materials, and to discuss any points that are not clear.
- To practise the clinical and counselling skills that they will teach.
- To learn how to interact with participants.
- To practise the different teaching techniques, and to prepare to teach the different kinds of session.

# • *Explain the principles of the course methods*

The teaching methods used in the course are based on these principles:

- Instruction should be performance based.

Instruction should teach participants tasks that they will be expected to do on the job.

This course is based on experience of what health workers need to be able to do to help mothers to breastfeed.

Active participation increases learning.

Participants learn how to do a task more quickly and efficiently if they actually do it, than if they just read or hear about it. Active participation keeps students more interested and alert.

This course involves the participants actively in discussions, exercises, and clinical practice.

- Immediate feedback increases learning

Feedback is information given to a participant about how well she is doing. It is most helpful if it is given immediately.

If a participant does an exercise correctly, praise her. She will be more likely to remember what she has learned.

If a participant does not do an exercise correctly, help her to clear up her misunderstandings before they become strong beliefs, or before she becomes more confused.

In this course, trainers give immediate individual feedback on each exercise, and also after each talk a participant has with a mother in a clinical practice.

- Motivation is essential for instruction to be effective.

Most participants who come to a course are motivated and they want to learn.

Trainers help to maintain this motivation if they:

- -- provide immediate feedback;
- -- make sure that participants understand each exercise;
- -- encourage them in discussions;
- -- praise them for their efforts.

### • Review the Trainer's Guide and the other materials

Ask trainees to look at the Trainer's Guide and at the Participants' Manual and to compare the two. Make these points:

- -- Each contains a list of contents, an Introduction and notes for Sessions 1-33.
- -- The Participant's Manual contains the essential information that a participant needs to be able to remember or refer to. It contains the exercises but without answers.
- -- The Trainer's Guide contains the same information, plus some further information to help to answer questions, and also detailed guidance on how to conduct the session, and answers to the exercises.
- -- At the end, the Participants' Manual has a Glossary, and a Clinical Practice Progress Form, to help trainers to follow the participant's progress.
- -- At the end, the Trainer's Guide has a list of references.

Review the structure of a session in the Trainer's Guide.

Look at the beginning of a session, and point out the boxes for Objectives, Session Outline and Preparation. Tell trainees that they should look at these sections some time before they conduct a session, so that they can make all necessary arrangements.

Look at the end of a session, and explain that for some sessions there are summaries, and for some there are sections of 'Recommended reading', which refer to the reference materials.

Ask trainees to look at page 17 in the Trainer's Guide, and to look at the box WHAT THE SIGNS USED IN THE GUIDE INDICATE. Explain that these signs are used throughout the guide, and they will soon become familiar.

Find in the guide an example of each sign in turn.

Ask trainees to look at that example, to see how the sign is used.

### WHAT THE SIGNS USED IN THE GUIDE INDICATE

- □ an instruction to you, the trainer.
- what you, the trainer, say to the participants.
- that you ask participants for their help.
- -> that you should write on a board or flipchart.
- a general instruction, for example how to do a task or a series of major points.

Explain that if trainees follow the instructions in the Trainer's Guide carefully, they will be able to conduct efficient and interesting sessions.

Explain that the Trainer's Guide is their most essential tool for teaching the course. Suggest that they write their names clearly on their copy, and keep it with them at all time. They can write notes in the Guide which may be useful for training in future.

Show trainees all the other materials, including the flipchart of Overhead figures, the forms and checklists, Answer Sheets, and story cards. Explain briefly what each is for.

- *Summarise the main duties of a trainer:* 
  - to give the presentations (lectures and demonstrations);
  - to conduct the sessions in groups of 8-10 participants which involves:
    - -- leading and summarizing discussions
    - -- demonstrating counselling skills
    - -- facilitating exercises;
  - to conduct sessions in groups of 4-5 participants which involves:
    - -- leading and summarizing discussions
    - -- coordinating pair practice
    - -- helping participants to practise skills;
  - to prepare participants for and to conduct the clinical practice sessions;
  - to make sure that participants have the forms and other items when needed;
  - to be available to participants to answer questions between sessions;
  - to be ready to discuss participants' personal experiences of breastfeeding if they wish. Using counselling skills can be important for this.
- Read the introduction to the Trainer's Guide

Ask trainees to read the Introduction to their guide, (pages 1-17), which explains what a trainer has to do, and gives some guidance on how to do it.

Allow 1/2 hour for this.

If trainees read slowly, suggest that they start at page 7, and look at pages 1-6 later.

Discuss the main points, and answer any questions that the trainees have.

# 3.5 Practising the sessions

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# • Assign sessions to trainees

On or before the first day of the preparation, assign sessions to trainees for them to practise teaching. Use the **TRAINING PRACTICE CHART** in Section 6 to help you.

On the left of the TRAINING PRACTICE CHART is a list of the different kinds of session, and on the right are columns - one column for the Course Director, and one for each of the trainees.

Write the name of each of the trainees at the top of one of the columns.

In the column for the Director are the numbers of the sessions that it may be most helpful for you to conduct as a demonstration.

When you have decided which sessions you will not include in the preparation for trainers, or that you will ask trainees to study privately, cross out the numbers for those sessions from the list on the chart.

Fill in the numbers for the remaining sessions under the names of the trainees, so that each of them has at least one of each kind of session to practise. If there are not enough sessions, assign one session to two or more trainees, and ask them each to practise part of it. Make sure that the sessions for each trainee are spread out through the week. A trainee should not have to prepare for more than one session on any one day. If it is necessary to practise a second session in a day, it should be one which does not require preparation - for example, facilitating an exercise.

For the first few practices, select trainees who are more experienced, or those whom you expect to be the best model for the less experienced trainees.

# • *Conduct the preparation*

On the first day of the preparation, conduct the main sessions from the first day of the course. The Course Director acts as the principle trainer on the first day. You conduct one or two sessions on other days also, depending on the experience of the trainees. For the first clinical practice session, the Course Director models the trainer's role with the whole group of trainees, following the instructions in the Trainer's Guide.

From the second day trainees lead the sessions that you assign to them. They prepare the evening or the day before. The Course Director makes sure that all the necessary materials are available, and gives help as required.

At the end of the first day, tell trainees which sessions to prepare for the other days.

They should read the *Preparation* box for their sessions, and make sure that they have any materials that they need, and that they know if they have to ask others to help with any of the demonstrations.

Trainees conduct their sessions as described in the guide, with other trainees as 'participants'. For the written exercises, each trainee writes the answers to the exercises in their copy of the Participants' Manual. The trainee who leads the session practises giving individual feedback to one of the 'participants' in front of the others, (see Section 3.3).

# • Discuss the teaching practise

After each session trainees discuss and comment on the teaching. Points to consider include:

- Did the trainee follow the Trainer's Guide accurately?
- Did she include all the main points?
- Did she explain points clearly?
- Did she involve the class in discussion?
- Did she answer questions clearly?

The class should also consider general points about the trainees teaching technique, and her attitude and mannerisms. For example, did she speak clearly and naturally, did she face the class.

Ask the class first to point out and praise what she did well, and then to suggest what she could do differently.

It is very important for the Course Director to praise a trainee who has followed the material and conducted a session well. But it is also important to help trainees to improve their teaching skills. It is helpful to discuss ways to improve with the whole group, because then everybody learns. However, if you feel that some points may embarrass a trainee, you may need to discuss them privately.

As Course Director, you should also encourage discussion of your own technique after you have demonstrated a session. Show that you welcome suggestions about how to conduct the session better.

Discuss difficulties the trainees had doing the exercises and discuss how they can help participants if they have similar difficulties.

### • *Help trainees who have difficulty*

Sometimes a trainee shows that she finds it particularly difficult to teach a session. This might be for example because of lack of confidence, or because she was unable to prepare well enough the evening before. If this happens, discuss her performance with her privately and not with the whole group. It might also be useful to help her to prepare for her next session, so that she can develop more confidence.

About half way through the preparatory course, review the trainees' progress in developing their teaching techniques. Allow at least one hour to discuss how to be a more effective trainer. During this time, you do not discuss course content.

Ask trainees to look again at pages 7-17 in the Trainer's Guide. Discuss each technique in turn.

- Ask trainees to say which techniques have been used so far, for example, involving the class to discuss questions in a presentation; developing lists and schema on a flipchart during group work; demonstrating counselling skills.
- Discuss which techniques were practised well, and why they were successful. Discuss which were not practised well, and how they could be improved.
- Identify techniques which trainees have not used so far, and make sure that they will practise them at some time later in the course.
- Ask trainees which skills they find difficult, and which they would like to practise
  more, or to discuss more. Perhaps it would help to demonstrate or model some skills
  again.
- Ask trainees for their ideas about how to handle some particular situations. For example, in groups discussions, how can a trainer help a participant to become more willing to offer suggestions or to ask questions? How can a trainer control a talkative participant in order to allow others to talk more?
   Recommend that trainees try to practise some of these teaching techniques during the remaining sessions.

### 3.7 Conclusion

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• Assign sessions to trainees

Decide which trainee or trainees will be responsible for conducting each session.

Try to give them all an equal share, allowing for their different strengths.

Give trainees an opportunity to discuss their assignments. They may want to conduct the same ones that they practised during the preparation. Allow them to do this if they feel strongly about it, but encourage them to conduct at least some different sessions.

Decide which trainees should work together, balancing their strengths such as:

- personality (for example, pair a shy with an outgoing trainee)
- language fluency
- motivation to be a trainer
- previous experience of training
- knowledge of breastfeeding

### • *Review the timetable*

Ask trainees to look at the timetable for the participants' course, and read it through. Go through all the sessions, and check who is responsible for conducting each one. Make sure that trainees all agree with what you have asked them to do. Give them the information in writing.

- *Make the following clear:*
- who is responsible for supplying materials, stationery, and equipment. Appoint someone whom trainees can contact if they need something.
- who is responsible for the course evaluation, and how it will be conducted.
- that you will be holding daily trainers meetings of about half to one hour, which are very important for the success of the course. Discuss an acceptable time (usually at the end of the day).
- which pairs of trainers will work together for the sessions with 8-10 participants.
- who is responsible for assigning participants to trainers. Explain that the list will be prepared on the first morning of the course, after participants register.
- Thank them for their efforts

Thank the trainees, now train<u>ers</u>, for all their hard work during the preparation. Encourage them to continue working hard during the course itself, and promise to help them in any way that they need.

### 4. DIRECTOR'S ROLE DURING THE COURSE Back to CONTENTS

As Course Director you have overall responsibility for planning and preparing the participants' course, for preparing the trainers, for making sure that the course runs according to the planned timetable, and for ensuring that any necessary adjustments are made smoothly. You should be present throughout the course to help where needed.

You do not normally teach the sessions, though you may give one or two of the lectures. However, there are some special situations in which the Course Director is one of the trainers and does do some of the training, for example when a group of 10 participants is trained by two trainers.

Your specific responsibilities during the course include:

- 4.1 Opening and closing the course
- 4.2 Introducing the materials
- 4.3 Supervising trainers
- 4.4 Holding daily trainers' meetings
- 4.5 Monitoring and evaluating the course

You are responsible for the Opening and Closing Ceremonies (see Section 2.7).

The Opening Ceremony should include a speech about the importance of breastfeeding for the health of mothers and children in general, and its importance in this country in particular. This speech will usually be by an invited person of some importance.

After the Opening Ceremony, the Course Director introduces the course to participants. Then you introduce the materials.

The Closing Ceremony may include speeches about the usefulness of the course, lessons learned, and future expectations. Make sure that someone is ready to thank the trainers, visitors, and participants for their interest, commitment and hard work.

Arrange for an appropriate person to give participants their course completion certificates.

### • *Introduce the course*

- Welcome participants.
- Introduce yourself, write your name on a board, and explain how you would like participants to address you.
- Explain the aims of the course (see Section 1.3).

  These are to enable health workers to develop the clinical and interpersonal skills needed to support optimal breastfeeding practices, and where necessary to help mothers to overcome difficulties.
- Explain how important it is for both hospital and primary health care workers to have the necessary skills to help mothers, especially in communities which are changing, and where traditional sources of help may not be so easily available.
- Describe the principle training methods used during the course.
- Explain that participants will practise the skills that they learn with real mothers and babies. This may be different from other courses that participants have attended.
- Challenge participants to participate and to learn as much as possible.
- *Ask participants and trainers to introduce themselves* 
  - Ask participants to introduce themselves and to describe briefly the work that they do with breastfeeding mothers.
  - Make sure that they all have name tags, and suggest that they write on them the name by which they would like to be called.
  - Introduce all the trainers and describe their role during the course.

- *Explain the structure of the course* 
  - Make sure that participants all have a copy of the course timetable. Ask them to look at it.
  - Explain when the sessions start and end each day, and the times of breaks, and arrangements for refreshments and meals.
  - Go through the timetable and point out the four clinical practice sessions, and the other sessions that prepare participants for clinical practice.
  - Explain that participants will work part of the time in groups of 4-5 with one trainer, and that they will belong to the same group for most of the course. For some sessions, two groups will work together in a larger group of 8-10 participants with two trainers. You will tell them which group they belong to by the end of the day.
  - Tell them where different sessions will be held, and if necessary how to get from one place to another.

# 4.2 Introducing the materials

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- Make sure that each participant has a note book or pad of paper, a folder, a pen, pencil and eraser.
- Make sure that each participant has a copy of these course materials:

Participants' Manual

Card with the LISTENING AND LEARNING SKILLS and CONFIDENCE AND SUPPORT SKILLS lists and the COUNSELLING SKILLS CHECKLIST Evaluation Questionnaire (if used)

- Make sure that each participant has a copy of these reference materials:

Helping Mothers to Breastfeed

Protecting, Promoting, and Supporting Breastfeeding: The Special Role of Maternity Services

Protecting Infant Health: A Health Workers' Guide to the International Code of Marketing of Breastmilk Substitutes

Annex to the Global Criteria for Baby Friendly Hospitals: Acceptable Medical Reasons for Supplementation

Annex on Breastfeeding and Maternal Medication: Recommendations for Drugs in the Essential Drugs List

- Explain that the Participants' Manual contains:
  - -- Key information summary boxes, and practical guidelines from the presentations and other sessions
  - -- Copies of forms, lists, and checklists
  - -- Exercises that participants will do, but without answers

- -- A glossary of terms used in the materials
- -- A Clinical Practice Progress Form, which will enable the trainer to help each participant to complete the necessary clinical practice.
- Explain that they will use the manual both as a work book during the course, and as a reference during and after the course.
  - During some sessions, you will ask them to keep their manuals closed while you discuss a topic.
  - During other sessions, you will ask them to read from the manual.
  - They should keep the manual with them at all times except during clinical practice sessions.
- Ask them to look at the card with the LISTENING AND LEARNING SKILLS and the CONFIDENCE AND SUPPORT SKILLS lists and the COUNSELLING SKILLS CHECKLIST.
- Explain that these are key summaries from the Participants' Manual. They need to take this card instead of the manual when they go for clinical practice. They may like to cut it up, so that they can use the lists separately.
- Explain that the reference materials, including the book *Helping Mothers to Breastfeed*, are additional sources of information during and after the course. You will recommend that they read certain chapters and sections of the book, and also the other reference materials after some sessions.
- Tell participants that you will give them other forms for doing exercises and clinical practices as the need arises during the course. You will give them Answer Sheets after they have done each exercise.
- Explain how to fill in the Evaluation Questionnaire (if used, see Section 4.5).

# 4.3 Supervising trainers

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During the course, you should be present at all times, to help where needed. Make sure that trainers know which tasks are assigned to them. Make sure that they have the necessary materials, and offer to help them as needed.

Spend time with each of the trainers, observing them as they work.

Make sure that they follow the sessions according to the instructions in the Trainer's Guide, and that they cover all the major points described.

Make notes on good techniques that you observe trainers using, and parts of the training that seem to be successful. Make notes on techniques and parts of training that they could improve. Give feedback later to each trainer about her performance.

Remember that your main role is to be supportive, to help trainers develop confidence and skill. Reinforce and praise good performance, and try to suggest improvements in a way which is helpful and supportive.

As far as possible, give feedback in the trainers' meeting, because other trainers will also

learn from what you say. However, if you feel that some comments will embarrass a trainer, you may need to give them privately.

# 4.4 Holding daily trainer's meetings

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For the smooth running of a course, it is essential for the Course Director and the trainers to meet every day both during the course, and at the end of the course. The daily meetings are held usually at the end of the day.

During these meetings you discuss:

- the sessions held during the day
- the progress of groups and individuals
- trainers' performance
- how to handle problems
- plans for the next two days
- Ask trainers to report on the sessions held during the day

Ask each trainer to describe her impression of the sessions, and how participants reacted to them.

Give your impression of the sessions.

Discuss any problems, and decide if any action is needed.

• Ask trainers to report on the progress of groups and individuals

Ask each trainer to describe the progress that her group made with the exercises. Ask which questions participants found most difficult, and which seemed most useful.

Ask trainers to report on their clinical practice sessions. Were there enough mothers and babies? How did participants perform? Check that participants are filling in the Clinical Practice Progress Form and that trainers are using them to follow progress.

Ask if any participants are finding the course difficult, or are not enjoying it. Discuss what to do about any problem.

• Discuss trainers' performance

Ask trainers to discuss the teaching techniques that they have tried. Which techniques are useful and which are not useful? Which are difficult? Ask for any practical ideas which other trainers could use, for example, for clinical practices.

Give trainers feedback on their performance:

- Praise what they did well.

For example, praise them for conducting a session accurately, as described in the Trainer's Guide; or for giving a presentation in an interesting and lively way; or for helping participants who had difficulty understanding a session; or for interacting well with participants between sessions.

- Suggest how they could improve.
   For example, it might be better to give participants more time to ask questions.
   Perhaps there were some major points that they did not make clearly.
   Perhaps they should speak more quietly when they give individual feedback.
   Perhaps the trainers talked to each other all the time between sessions.
- Remember to praise a trainer whose performance has improved, following previous feedback.

# • Discuss how to handle problems

Ask trainers if they have had any problems that they would like help with. Ask other trainers for their ideas about what to do. Give your suggestions, and be prepared to take responsibility for helping. These are some suggestions about common situations:

- If a problem arises in a group, which the trainers of that group cannot solve, they should talk to you, the Course Director.
- If discussions get off the subject or continue too long, suggest that you continue them later, for example during free time, or over meals.
- If some participants do not understand the materials, or do not complete the exercises as quickly as others:
  - avoid doing exercises for them;
  - praise small successes;
  - make sure that they understand the concepts, even if they do not complete the exercises:
  - suggest which exercises they should try to complete, and which they can leave out:
  - encourage them to finish the exercise later and self correct them from the Answer Sheets. Offer to discuss with them anything that they do not understand afterwards.
- Discuss plans for the next two days
- Look at arrangements for the next day.

  Check that tasks are assigned, and that all the trainers know what they have to do.

  Check that they have all the materials and equipment they need.
- Look ahead to the day after next, and check the arrangements.
- Make any adjustments that seem necessary from experience of the course.
- Make any necessary administrative announcements, for example about supplies, room changes, or transport arrangements.

The Evaluation Questionnaire has already been mentioned as part of the materials that you may need to introduce to participants.

Using a questionnaire is a useful way to ask participants for their opinions about the course, and about specific sessions. There is an example of a questionnaire in Section 6.10. You will need to review and revise this questionnaire to make sure that it is appropriate for evaluating the course that you plan. For example, you may need to change the order of the sessions, or to leave some out.

- Explain the evaluation to participants
- Explain why you are asking them to fill in the questionnaire. You want their ideas about how to make the course better in future.
- Explain how the questionnaire is arranged, and what they need to do: For example, if it similar to the questionnaire in Section 6.10:
  - -- fill in the front page, of general comments, at the end of the course.
  - -- fill in other pages session by session, or not less often than day by day, while they can still remember the session.

If it is possible to provide a separate sheet for each day, you can ask participants to hand in their evaluations at the end of each day. Then you can discuss the results of each day in Trainer's Meetings.

### 5. PLANNING COURSE FOLLOW-UP ACTIVITIES Back to CONTENTS

It is important to plan some follow-up activities to find out whether participants apply the skills that they learned in the course. If they are not applying them, try to find out why.

The follow-up should help you to decide

- whether the training was effective
- what you or others can do to help participants apply the skills.

The follow-up method that is appropriate and the persons to carry it out vary from course to course and place to place. You need to develop a plan, perhaps with the assistance of the trainers, that will be most appropriate for the participants from this course. It is recommended that a follow-up plan contains at least these 2 basic steps:

• Ask each participant at the end of the training to write a plan or list of actions that she will undertake to apply the skills that she learned.

She can prepare this plan in her own time, and finalise it during Session 30 'Changing Practices'.

Trainers can help participants with this task if necessary to make sure that plans are useful and realistic. Each participant should give a copy to the Course Director (or whoever is in charge of the follow-up activities) and keep a copy for herself. The

document will be a guide and reminder to the participant when she returns to her job.

• Visit each participant in her workplace several months later.

Observe the participant's work and discuss which actions in her plan she has been able to do. Congratulate her for those that she has done.

If she has not done what she planned, discuss why. Help her to find ways to overcome any problems that prevent her from applying her skills.

# 6. CHECKLISTS, FORMS AND TIMETABLES

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In the following pages, you will find all the checklists and forms and examples referred to in the preceding pages.

# 6.1 Checklist for planning and administration

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# **Initial planning**

- 1. \_\_ Decide course schedule. (For example, a 5 or 6 day course or 1 day meeting each week for 5 or 6 weeks).
- 2. \_\_ Choose course site. This must include classrooms and a health facility where the clinical practice sessions can be conducted. Ideally these should be at the same site. Make sure that the following are available:
  - a. \_ reliable transportation to and from participants' lodging to course site and return
  - b. \_ easy access from the classroom to the health facility for clinical practice
  - c. \_ a large room which can seat all participants and trainers for sessions with the whole class together, including guests invited to opening and closing ceremonies; and which can be 'blacked-out' for showing slides. This room will also be used for one group of 8-10 participants, or two groups of 4-5 participants
  - d. \_ at least one other room large enough for one group of 8-10 participants or for two groups of 4-5 participants to work in without disturbing each other; 1-2 additional rooms for small groups if necessary
  - e. \_ adequate lighting and ventilation, and wall space to post up large sheets of paper in each of the two larger rooms
  - f. \_\_ at least one table for each group of 4-5 participants and additional table space for materials
  - g. \_ freedom from disturbances such as loud noises or music

- h. \_ arrangements for providing refreshments
- i. \_room for at least one clerical or logistic support staff
- j. \_a place where supplies and equipment can be safely stored and locked up if necessary

When you have chosen a suitable site, book it in writing and subsequently confirm the booking some time before the course, and again shortly before the course.

- 3. \_\_ Choose lodging for the participants. Ideally the course should be residential. If lodging is at a different site from the course, make sure that the following are available:
  - a. reliable transportation to and from the course site
  - b. \_ meal service convenient for the course timetable

When you have identified suitable lodging, book it in writing and subsequently confirm the booking some time before the course, and again shortly before the course.

- 4. \_\_ Visit the health facility or health facilities that you will use for clinical practice sessions.
  - a. \_\_ confirm the hours during which it is possible to go into the wards or outpatient facility
     (if you plan to visit more than one facility, it is important to make sure that you can visit them at the same time)
  - b. \_\_ make arrangements for transporting participants and trainers to the health facility
- 5. Decide exact dates of the course and the preparatory period for trainers.
  - a. \_ allow 5-6 days for the preparation of trainers, plus 1-2 days off
  - b. \_ allow 5-6 days for the course itself
- 6. Arrange for responsible authority (for example Ministry of Health, National Breastfeeding Programme, Paediatric Association) to send a letter to the district/regional office or to health facilities asking them to identify participants. This letter should:
  - a. \_ explain that "Breastfeeding counselling: A training course" will be held, and explain the aims of the course
  - b. \_describe the site and dates of the course
  - c. \_ state the total number of places for participants on the course (15-20), and suggest the number of places to offer to participants from each facility (this

depends on how many facilities are involved)

- d. \_ state clearly that participants should be health workers who care personally for mothers and babies
- e. \_ explain the duration of the course and that individuals should arrive in time to attend the entire course
- f. \_ give the date by which course participants should be selected and to whom to send the names of nominated participants
- g. \_ say that a letter of invitation will be sent to participants once they are selected
- 7. \_ Select and invite trainers. It is necessary that:
  - a. \_ there is at least one trainer per 4-5 participants
  - b. \_\_ trainers are able and willing to attend the entire course, including the preparatory period prior to the course
- 8. \_\_ Identify suitable participants, and send them letters of invitation.

  The letter states:
  - a. \_ the aims of the training and a description of the course
  - b. the desired times of arrival and departure times for participants
  - c. \_ that it is essential to arrive in time and to attend the entire course
  - d. administrative arrangements, such as per diem, accommodation, and meals
- 9. \_\_ Arrange to obtain enough copies of the course materials (see CHECKLIST OF COURSE MATERIALS, Section 6.3).
- 10. \_\_ Arrange to obtain necessary supplies and equipment (see CHECKLIST OF EQUIPMENT AND STATIONERY, Section 6.4).
- 11. \_\_ Arrange to obtain the items needed for demonstrations (see CHECKLIST OF ITEMS FOR DEMONSTRATIONS, Section 6.5).
- 12. \_\_ Arrange to obtain the necessary background information for the country or the region (see CHECKLIST OF BACKGROUND INFORMATION AND RESOURCES, Section 6.6).
- 13. \_\_ Arrange to send materials, equipment and supplies to the course site.

# At the course site, before the course begins

Note: Someone should arrive at the course site early to ensure that arrangements described below are made. This can be either you or one of the trainers, if they

are involved in the preparations already. Plan to arrive at least a day or two before the preparatory period for trainers and continue with the organization during the preparatory week. During the course you need to work with local staff to ensure that arrangements go well and that the trainers' and participants' work is not unduly interrupted.

- 14. \_\_ Arrange to welcome trainers and participants at the hotel, airport and/or railway station, if necessary.
- 15. \_\_ Make arrangements for typing and copying of materials during the course (for example timetables, lists of addresses of participants and trainers, course evaluation questionnaires).
- 16. \_\_ Make arrangements for meals and refreshments.
- 17. \_\_ Arrange for trainers and participants to visit the health facility for clinical practice sessions.
  - a. \_\_ check and confirm the exact times that you want to make the four clinical practice visits
  - b. \_ check and confirm other arrangements:
    - -- which wards you wish to visit on which days
    - -- how many mothers you hope to be available, in which situations
    - -- where you will hold discussions
  - c. \_ hold discussions with health facility staff to prepare them
- 18. \_\_ Make arrangements to reconfirm or change airline, train, or bus reservations for trainers and participants, if necessary.
- 19. \_\_ Finalise plans for opening and closing ceremonies with relevant authorities. Check that invited guests are able to come.
- 20. Prepare timetables for preparation of trainers and for course for participants. Examples are in Sections 6.8 and 6.9.
- 21. \_\_ Adapt the Evaluation Questionnaire, and make enough copies for each trainer and participant.

# **During the preparation of trainers:**

- 22. \_ Provide a timetable for the preparatory period on the first day.
- 23. \_\_ By end of the preparation, assign pairs of trainers to work together during the course.
- 24. By end of preparation, assign sessions to trainers, for them to conduct.
- 25. \_ Organise course materials, supplies and equipment, and place them in the

appropriate rooms at the course site.

# **During the course**

- 26. \_\_ After registration, assign groups of 4-5 participants to one trainer. Post up the information in writing where everyone can see it. Announce which groups will work together to make up groups of 8-10 participants with two trainers.
- 27. Provide all participants and trainers with a Course Directory, which includes names and addresses of all participants, trainers and the Course Director.
- 28. \_\_ Arrange for a course photograph, if desired, to be taken in time to be developed before the closing ceremony.
- 29. \_ Prepare a course completion certificate for each participant.

# BREASTFEEDING COUNSELLING: A TRAINING COURSE

# **MATERNITY HOSPITAL, 5-9 JULY 1994**

Course organizers: National Breastfeeding Committee

Course director: (name)

# Aims of the training:

To enable health workers to develop skills to support optimal breastfeeding practices, and to help mothers to overcome difficulties.

#### Who should attend

Midwives, nurses, general duty doctors and other health staff who care for breastfeeding mothers and infants in health centres and small hospitals. Twenty participants will be selected.

Please select .... (number) candidates from your facility.

# **Outline of course**

The training is full time for 5 days (40 hours). There are four 2-hour clinical practice sessions in which participants practise clinical and interpersonal skills with mothers and babies. Each is preceded by classroom sessions in which skills are developed, through lectures, demonstrations, and exercises.

# Main skills taught

- Health care practices that help and hinder breastfeeding;
- Assessment of a mother-baby pair;
- Basic counselling skills;
- Helping with breastfeeding difficulties and special situations.

# Date and place

5-9 July 199-, at the Midwives Training School at the Maternity Hospital.

# Accommodation

The course is residential in the Midwives Training School. Accommodation and meals will be available from 4 July till 10 July.

Participants should arrive by 8 am on 5 July and are free to leave after 5 pm on 9 July.

Travel costs will be refunded.

### **Registering for the course**

Send the names of the candidates who wish to apply to the Course Director before 5 May 199-.

Address:

When participants have been selected, a personal invitation will be sent to your institution to forward to them.

# For each participant and trainer:

#### **Course texts**:

Participants' Manual Answer Sheets

# **Checklists:**

Listening and Learning Skills ) together on one card Confidence and Support Skills )
Counselling Skills Checklist ) 1 card each

#### Forms:

B-R-E-A-S-T-Feed Observation Form(4 each) Breastfeeding History Form (4 each) Assessing and Changing Practices Form

# **Course documents:**

Course timetable Evaluation questionnaire

# **References:**

Helping Mothers to Breastfeed (AMREF 1992 or adapted version)
Protecting Infant Health: A Health Workers Guide to the
International Code of Marketing of Breastmilk Substitutes
IBFAN/IOCU, 1993

Protecting, Promoting and Supporting Breastfeeding: The Special Role of Maternity Services, A joint WHO/UNICEF Statement Annex to the Global Criteria for Baby Friendly Hospitals: Acceptable Medical Reasons for Supplementation Annex on Breastfeeding and Maternal Medication: Recommendations for drugs in the Essential Drugs List

- One of each item for each person unless indicated otherwise.
- Include a few spares of references to give to health facility and major speakers.
- Recommended total for 20 participants and 5 trainers: 30 sets.

### For each trainer and director:

#### **Course texts:**

Trainer's Guide Overhead figures (flipchart)

# **Story Cards:**

Set of Histories Set of Counselling Stories

#### **Checklist:**

Clinical Practice Discussion Checklist

### **Course document:**

Timetable for preparation of trainers

Recommended total for 5 trainers and 1 director: 10 sets

# For each course

#### **Course text:**

Two Course Director's Guides

### Visual aids:

Set of fifty Overhead transparencies (acetates) Set of fifty 35 mm slides

Two Posters of "Ten steps to successful breastfeeding" (in local language if available)

Videotape: *Helping a mother to breastfeed* 

# **Additional resources recommended:**

*Infant Feeding: The Physiological Basis*, Bulletin of the World Health Organization, supplement to volume 67, 1989 (available from WHO).

Facts about infant feeding (newsletter from WHO)

Videotape: Feeding low-birth-weight babies IBFAN/UNICEF (enquire from local UNICEF office)

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Items needed	Number needed
Overhead projector Slide projector Blacking out arrangements VCR and monitor (optional)	1 (2 if possible, one in each large room) 1 1 (largest room only)
Photocopying equipment Photocopying paper Equipment for typing	
Flipchart stands or blackboards Flipchart pads Markers - black blue red green Chalk Chalk erasers	2 per group of 8-10 participants 8 4 4 4 2 boxes 2
Name tags and holders Large pads or notebooks of ruled paper Folders No 2 pencils Ballpoint pens - blue Erasers Highlighters Hand-held staplers Staples Scissors Pencil sharpeners Masking tape	30 30 30 60 60 30 10 (for trainers) 3 1 box 3 pairs 6 6 rolls

Item	Number needed
For several sessions Life size baby dolls ) make yourself if Model breasts ) necessary Growth charts (as locally used if possible) Disposable syringes of 5 ml, 10 ml and 20 ml.  For Session 20 Examples of containers to collect breastmilk	4 4 80 2 of each size
Examples of containers to collect breastmilk (wide necked with lid, e.g. jam jars) If used locally: Breast pumps If warm bottle method demonstrated: Locally available glass bottle, at least 700 ml size with a wide neck (2-4 cm diameter)	<ul><li>2 or more</li><li>1 of each model used</li></ul>
For Session 26 Examples of commonly available cups, as small as possible and easily cleaned, suitable for use with LBW babies Teaspoon For Session 27	2 or more 2 or more
Fine feeding tubes (nasogastric) Tape for dressings (e.g. zinc oxide to hold feeding tube to breast) Short length of fine tubing (about 5 cm) to attach to adaptor of syringe Dropper suitable for milk Cup or other container for milk	2 1 roll 1 1 1
For Session 33 Cans of commonly used formula, milk powder, or other products used as breastmilk substitutes, marked with current prices. (Empty cans are suitable. Keep them to use at other courses.)	6 tins

# For Session 2

Local infant feeding data Information on breastfeeding promotion activities

# **For Session 8**

Baby Friendly Hospital policy if available

# For Session 20

A mother who is willing to demonstrate expressing milk

# For Session 26

% babies born with low birth weight in the country

# For Session 32

Local labour laws and maternity entitlements Information about facilities such as creches for breastfeeding babies

# **For Session 33**

Status in this country of the Code of Marketing of Breastmilk Substitutes Copies of local code if available

Examples of local formula advertisements, e.g. in magazines

Examples of promotional items such as calenders, posters, gifts given to health workers

Minimum wages for female labour, urban and rural

# 6.7 Training practice chart

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Kind of session		Name of trainee			
	Director				
Presentation	3				
Sessions 1, 2, 3, 8, 14, 26, 31					
Demonstration of clinical skills	4, 10				
Sessions 4, 10, 19, 20 and parts of 26, 27					
Demonstration of counselling skills	6				
Sessions 6, 11, 17					
Group work with 8-10 participants					
Sessions 16, 21, 22, 28, 32, 33					
Group work with 4-5 participants					
Sessions 18, 25, and parts of 8, 31, 10					
Facilitating a written exercise	5				
Sessions 7, 12, 15, 23 and parts of 5, 16, 26, 28					
Leading a clinical practice	first				
(first, second, third practice sessions)					

# **BREASTFEEDING COUNSELLING: A TRAINING COURSE**

(08.30)	Opening Ceremony Introduction of	Listening and learning (60 mins)	Building confidence and giving support (60 mins)	"Not enough milk" (70 mins)	Sustaining breastfeeding (60 mins)
(09.30)	why breastfeeding is important (60 mins)	Listening and learning exercises (60 mins)	Building confidence exercises (60 mins)	Increasing breastmilk and relactation (60 mins)	Counselling practice (75 mins)
Coffee	,				
(11.00)	Introduction of participants	Clinical Practice 1	Clinical Practice 2	Clinical Practice 3	Clinical Practice 4
(11.30)	Local breastfeeding situation (30 mins)	Listening and learning  Assessing a breastfeed	Building confidence and giving support  Positioning a baby at the breast	Taking a breastfeeding history	Counselling mothers in different situations
(12.00)	How breastfeeding works	Clinical Practice 1 continued (total 120 mins)	Clinical Practice 2 continued (total 120 mins)	Clinical Practice 3 continued (total 120 mins)	Clinical Practice 4 continued (total 120 mins)
	(60 mins)	(10121 120 111110)	(1010)	(1010 120	(1010 120 11)
Lunch					
(14.00)	Assessing a breastfeed (60 mins)	Positioning a baby at the breast (60 mins)	Refusal to breastfeed (60 mins)	Expressing breastmilk (40 mins) Crying (30 mins)	Commercial promotion of breastmilk substitutes (60 mins)
(15.00)	Observing a breastfeed (60 mins)	Breast conditions (60 mins)	Taking a breastfeeding history (50 mins)	"Not enough milk" and Crying exercises (50 mins)	Changing practices (90 mins)
Tea					
(16.30)	Health care practices (90 mins)	Breast conditions exercise (30 mins) Breast examination (30 mins)	History practice (70 mins)	LBW and sick babies (75 mins)	Plenary and closing (60 mins)
Evening		Video (30 mins)	Women's nutrition, health and fertility (60 mins)	Video (30 mins) Women and work (60 mins)	

# **BREASTFEEDING COUNSELLING: A TRAINING COURSE**

(08.30)	Welcome and introduction (30 mins)	Why breastfeeding is important (practice 1) (60 mins)	Building confidence and giving support (practice 4) (60 mins)	Taking a breastfeeding history (practice 10) (50 mins)	Increasing breastmilk and relactation (practice 16) (60 mins)
(09.30)	Introduction of materials and course methods (60 mins)  Read introduction	Listening and learning (part demo, part practice) (60 mins)	Building confidence exercises (practice 5) (60 mins)	History practice (practice 11) (70 mins)	Counselling practice (practice 17) (75 mins)
	(30 mins)				
Coffee					
(11.00)	How breastfeeding works (demo) (60 mins)	Listening and learning exercises (practice 2) (60 mins)	Breast conditions (practice 6) (60 mins)	Clinical Practice 2 (practice 12) (120 mins)	Clinical Practice 3 (practice 18) (120 mins)
(12.00)	Local breastfeeding situation (demo or practice) (30 mins)  Discussion (30 mins)	Clinical practice 1 (demo) (60 mins)	Breast conditions exercise (practice 7) (30 mins)	Continued	Continued
Lunch					
(14.00)	Assessing a breastfeed (demo) (60 mins)	Health care practices (60-90 mins) (practice 3)	Breast examination (practice 8) (30 mins) Discussion	"Not enough milk" (practice 13) (70 mins)	Sustaining breastfeeding (practice 19) (60 mins)
(15.00)	Observing a breastfeed (demo) (60 mins)	Continued Discussion	Refusal to breastfeed (practice 9) (60 mins)	Crying (30 mins) (practice 14)  "Not enough milk" and Crying exercise (50 mins)	Commercial promotion of breastmilk substitutes (practice 20) (60 mins)
(16.30)	Assign tasks to trainees. Trainees start to prepare for next day. Make dolls and breasts	Positioning a baby at the breast (60 mins) (demo)	Discussion on progress and teaching methods	Continued  Expressing breastmilk (practice 15) (30 mins)	Discussion Assign sessions for course
Evening		Video	Women's nutrition, health and fertility (private study)	LBW and sick babies (private study)	Women and work (private study)

To enable us to improve the training for others in the future, please fill out this questionnaire.

- 1. Briefly describe your responsibilities in relation to breastfeeding mothers and babies. In what type of setting do you work (e.g. private practice, health centre, hospital)?
- 2. Did you find any aspect of the training especially difficult?
- 3. For each activity listed below, tick one box to show whether you thought that the time spent on the activity was too short, adequate, or too long.

Type of activity	Time spent was				
	Too short	Adequate	Too long		
Presentation					
Demonstration of clinical skills					
Demonstration of counselling skills					
Group work with 8-10 participants					
Group work with 4-5 participants					
Written exercises					
Clinical practice					

- 4. What additional support, if any, do you think you may need after this training to enable you to improve counselling for breastfeeding mothers in your own facility?
- 5. How could the content and/or management of this training course be improved for future participants?

Title of session	Very useful	Useful	Somewhat useful	Not useful	Comments
Session 1 Why breastfeeding is important					
Session 2 Local breastfeeding situation					
Session 3 How breastfeeding works					
Session 4 Assessing a breastfeed					
Session 5 Observing a breastfeed					
Session 6 Listening and learning					
Session 7 Listening and learning exercises					
Session 8 Health care practices					
Session 9 Clinical Practice 1					
Session 10 Positioning a baby at the breast					
Session 11 Building confidence and giving support					
Session 12 Building confidence exercises					
Session 13 Clinical Practice 2					
Session 14 Breast conditions					
Session 15 Breast conditions exercise					
Session 16 Refusal to breastfeed					
Session 17 Taking a breastfeeding history					
Session 18 History practice					
Session 19 Breast examination					

Title of session	Very useful	Useful	Somewhat useful	Not useful	Comments
Session 20 Expressing breastmilk					
Session 21 "Not enough milk"					
Session 22 Crying					
Session 23 "Not enough milk" and Crying exercise					
Session 24 Clinical Practice 3					
Session 25 Counselling practice					
Session 26 Low-birth-weight and sick babies					
Session 27 Increasing breastmilk and relactation					
Session 28 Sustaining breastfeeding					
Session 29 Clinical Practice 4					
Session 30 Changing practices					
Session 31 Women's nutrition, health and fertility					
Session 32 Women and work					
Session 33 Commercial promotion of breastmilk substitutes					

These books are useful sources of further information. Exhibit any that are available during the course.

- \*\*\* Recommend for all health workers who care for mothers and children, including midwives, nurses and doctors
- \*\* Strongly recommended for trainers
- \* Useful for trainers

Other books are recommended for medical and nursing libraries

- \*\*\* Royal College of Midwives, *Successful breastfeeding*. Second Edition 1991, Churchill Livingstone. Royal College of Midwives, 15 Mansfield Street, London W1M OBE, UK.
- \*\* Infant feeding: the physiological basis. Edited by James Akré. Bulletin of the World Health Organization, Supplement to Volume 67, 1989, available from WHO, Geneva.
- \*\* Lawrence, Ruth A. *Breastfeeding: A guide for the medical profession*. Third Edition 1989. The C.V. Mosby Company, 11830 Westline Industrial Drive, St. Louis, Missouri 63146, USA.
- \*\* Armstrong, H. *Training guide in lactation management*. 1992, IBFAN and UNICEF. UNICEF, Programme Publications, 3 United Nations Plaza, New York, N.Y. 10017, USA.
- \*\* Cunningham, A.S. *Breastfeeding, Growth and Illness, an Annotated Bibliography*. UNICEF, Programme Publications, 3 United Nations Plaza, New York, N.Y. 10017, USA.
- \* Renfrew, M., Fisher, C. and Arms, S. 1990 *Bestfeeding getting breastfeeding right for you*. 1990, Celestial Arts Publishers, PO Box 7327, Berkeley, California 94707, USA, or Dept B., Airlift Book Co., 26/28 Eden Grove, London N7 8EF, UK.
- \* Riordan, Jan and Auerbach, Kathleen G. *Breastfeeding and human lactation*. 1993, Jones and Bartlett Publishers Inc, One Exeter Plaza, Boston, MA 02116, USA.
- \* La Leche League International, *The breastfeeding answer book.* 1992, LLI, 9616 Minneapolis Avenue, PO Box 1209, Franklin Park, Illinois, IL 60131-8209, USA.

\* van Esterik, P. *Women, work and breastfeeding.* 1992, Cornell International Monograph Series Number 23, Division of Nutritional Sciences, Cornell University, Ithaca, New York 14853, USA.

Lauwers, J. and Woessner, C. *Counselling the nursing mother*. 1983 (updated from time to time), Avery Publishing Group, 89 Baldwin Terrace, Wayne, New Jersey, NJ 07470, USA.

Briggs, Gerald G., Freeman, Roger K. and Yaffe, Sumner J. *Drugs in pregnancy and lactation*. Third edition, 1990, Williams and Wilkins, 428 East Preston Street, Baltimore, Maryland, MD 21202, USA.

Atkinson, S.A., Hanson, L.A. and Chandra, R.K. *Human lactation 4: Breastfeeding, nutrition, infection and infant growth in developed and emerging countries.* 1990, ARTS Biomedical Publishers and Distributors Ltd, PO Box 9037, Station B, St John's, Newfoundland A1A 2X3, Canada.

Jelliffe, D.B and Jelliffe, E.F. *Programmes to promote breastfeeding*. 1989, Oxford University Press, Walton Street, Oxford OX2 6DP, UK.

Minchin, M. *Breastfeeding matters*. 1989, George Allen & Unwin or from Alma Publications, 5 St George's Road, Armadale, Vic. 3143, Australia.

van Esterik, P. *Motherpower and infant feeding*. 1989, Zed Books Ltd., 57 Caledonian Road, London, N1 9BU, UK.

La Leche League International, *The womanly art of breastfeeding*. P.O. Box 1209, Franklin Park, Illinois, 60131-8209, USA.

Winikoff, B., Castle, M.A. and Laukaran, V.H. *Feeding infants in four societies. Cause and consequences of mother's choices.* 1988, Greenwood Press Inc, 88 Post Road West, Westport, Connecticut 06881, USA.

Effective care in pregnancy and childbirth. Edited by Chalmers, I. Eakin, M. and Keirse, M. 1989, Oxford University Press, Walton Street, Oxford, OX2 6DP, UK.