

4M:
**My health,
My choice,
My child,
My life**

Developing a national network of Mentor Mothers to support women living with HIV through pregnancy

by Angelina Namiba

Volume 2

SECTIONS E AND F: RESOURCES and USEFUL REFERENCES

This volume is to be used with Volume 1, which is available for download once you complete this form: <https://tinyurl.com/4mmanualpermissionsform>

All the resources in this section are for your use in your own mentor mother training programme. Most will need to be adapted for your own context. Please always cite this manual (as below) when making use of these materials and/or reporting about them, in accordance with standard international copyright law.



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E List of Resources

Some resources are powerpoint presentations. These are available for download on the Salamander Trust website. The relevant link to each powerpoint is found in the exercise where it is offered for use (in Volume 1 of this manual).

Some resources are mini-guides which can be downloaded from the i-Base website. Some resources are leaflets from the British HIV Association. These may be updated at times by the relevant organisations. Again, see links to all these in the relevant session(s) in volume 1.

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1 Qualities of a Good Leader

Qualities of a Good Leader

Here are some of the qualities of a good leader. This manual needs 3 good lead trainers (see below for more info about this).

1. Liberates

- Does not blame people for mistakes
- Encourages people closest to the job to take their own decisions
- Listens to their staff
- Encourages full and open communication
- Operates systems based on trust, rather than suspicion
- Encourages staff to develop new ideas.

2. Encourages and supports

- Accepts responsibility for the actions of their staff
- Gives praise where it is due
- Recognises, and acts to minimise, other people's stress
- Supports staff when they need support
- Regularly meets with individuals to clarify direction
- Makes people feel important and shows that they have faith in them

3. Achieves Purpose

- Agrees demanding targets with individuals or teams
- Achieves results
- Consults those affected before making decisions
- Is willing to take unpopular decisions in order to move forward
- Seeks out future challenges / opportunities
- Regularly communicates an inspirational view of the future
- Constantly seeks to improve the way things are done.

4. Develops Peoples and Teams

- Encourages other people to learn
- Encourages people to work together as a team
- Regularly meets with the team, as a whole, to review progress
- Takes time to develop and guide their staff
- Deals effectively with breaches to standards of behaviour
- Treats other people's mistakes as learning opportunities

5. Example

- Actively encourages feedback on their performance
- Communicates an air of enthusiasm
- Works on their own learning
- Practises what he/she preaches
- Openly admits mistakes
- Sets a good example to others by his/her behaviour

6. Relationships built on Trust

- Does not put self-interest before the interests of staff
- Keeps promises and does what s/he says s/he will do
- Is in touch with, and sensitive to, people's feelings
- Is calm in a crisis, and when under pressure
- Is honest and truthful
- Does not take personal credit for other people's work
- Is always fair

2 Lead Trainer Skills Set Form

SAMPLE Lead Trainer Skills Set Form 4M Training of Trainers

Aims of the training:

This form is to assess your suitability as a lead trainer for the forthcoming Mentor Mothers Training of Trainers workshop for your region. On successful completion, it is intended that trainees will be recognised as qualified facilitators of the **Pregnancy Journey whilst living with HIV** workshop with peers living with HIV. Therefore, we ask you to fill in this form to access your skills and experience relevant to this Lead Trainer role.

Training dates:

Venue:

Name:	Email:
Date of diagnosis (if applicable):	Mobile:
Area where you live (E.g. Leeds, London, Luton):	
Please tell us about your experiences of facilitating 3-4 key workshops with/for women living with HIV: (eg year and duration of each workshop & session focus)	
Please tell us about your experience of either facilitating workshops or presenting on: <i>(Please refer only to the areas you will be facilitating for this training) – again please describe year(s), session duration(s)</i>	
<ol style="list-style-type: none">1. Group Facilitation Skills2. Linking Peer Support to the National Standards of Peer Support3. General workshop facilitation with people living with HIV4. Creative writing5. Sexual Health & Reproductive Rights for women living with HIV6. Peer Research	

Please tell us about your experience of assessing workshop/training participants (again, year(s), duration(s). Please also tell us if you have any experience of peer reviewing abstracts/documents etc, if any. *(This section is for the facilitators who will be assessing participants throughout or for part of the training)*

Please tell us about what other areas of expertise you have, not mentioned above, that you might like to add. (This is because we may call upon you in the future to facilitate other workshops with/for women living with HIV).

Demographics – please help us with your information for our donor records. All information submitted will be anonymised.

<p>Age:</p> <p>a) under 20</p> <p>b) 20-24</p> <p>c) 25-49</p> <p>d) 50+</p>	<p>Nationality:</p>
<p>How do you like to describe your ethnicity?</p>	
<p>Employment Status (please tick):</p> <p>Employed Full-Time: _____</p> <p>Employed Part-Time: _____</p> <p>Self-employed: _____</p> <p>Unemployed: _____</p>	<p>Education level attained (please tick):</p> <p>Masters: _____</p> <p>College: _____</p> <p>Secondary School: _____</p> <p>Primary School: _____</p>

Thank you for completing this form.

For more information about your organisation's projects, please contact:
[your Staff names and contact details](#)

3 Application Form to be a participant on the Training of Trainers Workshop

SAMPLE Application Form to be a participant on the Training of Trainers Workshop

Aims of the training:

To create a sustainable network of women living with HIV in this region who, on successful completion, are recognised as qualified trainers.

Training dates: Add days, dates and times here

Venue: Add location here

NB we expect all those attending the training to be there for the full time – please confirm that you can do this by ticking here _____

Or please let us know when you CAN attend _____

Priority will be given to those who can attend for the full training time.

Name:	Email:
Date of diagnosis:	Mobile:
Area where you live (E.g. Leeds, London, Luton):	
Please tell us about your experience of supporting pregnant or other women living with HIV:	
Please tell us why you interested in attending the training:	
Please tell us how you will use skills gained from the training:	

Your logo here

Your organisation name here

Demographics – please help us with this information for our donor records. All information submitted to them will be anonymised.

Additional information:

Age: a) under 20 b) 20-24 c) 25-49 d) 50+	Nationality:
How do you like to describe your ethnicity?	
How many children have you had: a) before diagnosis: b) since diagnosis:	
Employment Status (please tick): Employed Full-Time: _____ Employed Part-Time: _____ Self-employed: _____ Unemployed: _____	Education level attained (please tick): Masters: _____ College: _____ Secondary School: _____ Primary School: _____

Thank you for completing this form.
When completed, please send it to XXXXXX

For more information about your organisation's projects, please contact:
your Staff names and contact details

4 Participant Assessment Form

Mentor Mothers Training of Trainers Training SAMPLE Participant Assessment Form

Each session, run by two trainee facilitators, should be assessed by two assessors. One assessor fills in one copy of this form for one trainee, the other fills in a copy for the other trainee. Each trainee should be assessed ideally by both / all assessors over the course of the whole workshop.

Indicators for trainers / assessors on:

Facilitation Skills.

Name of Trainer/Assessor:

Name of Trainee Facilitator:

Session name and no.

Indicators for observing Facilitation Skills	Indicators for observing Participant Responses	Scores: 1 = Needs Improvement 2 = Moderate 3 = Good
<p>Use of Session Guide Follows and Gives directions from the Session Guide clearly and makes sure that participants understand</p> <p>Adapts and uses the active learning methods described in the Group Facilitation Session to suit group</p> <p>Contributes accurate information from the HIV & Pregnancy Guide/BHIVA/WHO guidelines in their own words as and when appropriate</p>	<p>Participants work smoothly, with focus and remain on the right track</p> <p>Participants engage correctly with interest and enjoyment in the methods from the Session Guide</p> <p>Participants listen with interest and understanding to the information from the facilitator</p>	
<p>Facilitation Skills Works well with partner with equal sharing of roles, respect and mutual support (Mutual agreement so no contradictions during presentation, mutual sharing of tasks so no overlap of activities and mutual respect to ensure good role-modelling of team work so no dominating behaviour over the other)</p> <p>Listens actively and responds appropriately</p> <p>Encourages reflection and new perspectives using helpful questions, e.g. open, probing and circular</p> <p>Supports participants to arrive at learning points and conclusions linked to exercise objectives</p>	<p>Participants show that they feel comfortable with both facilitators and their interaction. Participants interact with both facilitators equally</p> <p>Participants show satisfaction with appreciative words and discuss controversial issues with new perspectives</p> <p>Participants respond with well thought out contributions to helpful questions</p> <p>Participants share what they have learned and agree on conclusions linked to exercise objectives</p>	

<p>Adaptation and Innovation</p> <p>Adapts learning activities (e.g. stories) to suit group whilst remaining faithful to message and objectives</p> <p>Adapts language to suit group and gives additional support to some if necessary</p> <p>Uses level of literacy, including no literacy, that is comfortable for the group and encourages members to support each other</p> <p>Facilitator introduces and talks about sensitive topics in a way that enables participants to engage with them</p>	<p>Participants engage in learning activities with enjoyment and understanding</p> <p>Participants demonstrate ability to communicate comfortably in the training language</p> <p>Participants able to manage reading and writing required, or without reading and writing</p> <p>Participants engage in discussion about sensitive topics and accept feelings that may arise such as embarrassment</p>	
<p>Time</p> <p>Keeps to times indicated, but remains mindful of participant concentration and concludes topics smoothly before moving onto next</p> <p>Is confident and starts exercises immediately with prepared materials</p> <p>Keeps focus and keeps things moving</p> <p>Asks participants to volunteer as timekeepers</p>	<p>Participants remain confident of the flow of activities</p> <p>Participants remain happy with management of time</p> <p>Participants remain focused and on track</p> <p>Timekeepers take role seriously</p>	
<p>Group Dynamics</p> <p>Encourages everyone to participate actively</p> <p>Shows empathy for feelings and then soothes participant when needed</p> <p>Helps participants to become co-leaders in the group</p> <p>Understands and manages confidentiality</p> <p>Reminds participants of ground rules, virtues¹ and equality</p> <p>Appreciates the strengths of all participants and gives constructive feedback</p>	<p>All participants from all social groups, including those with disabilities, actively engage in exercises</p> <p>Participants who show strong feelings such as sadness or anger are supported and taken care of</p> <p>Participants actively engage in exercises and take responsibility for their success</p> <p>Participants act in a way that protects their own confidentiality and that of others and demonstrate confidence that confidential issues will be kept as such</p> <p>Participants keep to ground rules and practice virtues¹ and equality</p> <p>Participants appreciate their own and others' strengths and show enthusiasm and energy</p>	

Comments: _____

¹ Virtues are timeless and irrespective of context or culture. They include assets such as honesty, kindness, determination, patience, friendliness, generosity, appreciation, cooperation and courage.

6 The Programme in Detail

The Programme in Detail, with suggested timings for a four-day workshop

Note about equipment: please see Page 51 of Volume 1 for equipment you need to have on hand throughout the sessions. Below we just list session-specific resources.

Colour code: Sessions shaded in this colour are led by a pair of trainee facilitators. In these sessions, each trainee facilitator needs to be assessed by one of a pair of assessors.

No	Session name	Led by*	Session-specific resources needed (please see the resources section for more details)	Time Needed (based on 14 trainees) and suggested timings
Stage A: welcome to the workshop				
Day One				
1	Welcome and Introductions	2 LTs	Pre-prepared flipchart of workshop aims (see introduction for wording) An example of an ice-breaker	15 mins 1700-1715
2	Housekeeping and Logistics	3rd LT	A pre-prepared list of all the info you need to provide participants	10 mins 1715-1725
3	Training Process and Consent	3 LTs	Consent forms Pre-training survey forms One copy each of this manual for all TFs List of who is running which session(s) for all TFs Handouts	25 mins 1725-1750
4	Pair Allocation and Guardian Angel Exercise	LTs	Pre-prepared list of pair allocations Bonding exercise	10 mins 1750-1800
Dinner				60 mins 1800-1900
5	Linking Peer Mentoring to the (UK) National Standards of Peer Support	LT or GS	Slide presentation on peer support	20 mins 1900-1920

6	Homework	LT		5 mins 1920-1925
7	Closing Circle for end of Day 1	LT		10 mins 1925-1935
Lead trainers meet to review opening session and check for any adjustments needed				<60 mins 1945-2045
Trainees meet in allocated pairs to prepare for sessions they are due to facilitate on Day Two				<60 mins 1945-2045
Day Two				
8	Warm up Exercise / Energiser	2 TFs	Pre-prepared energiser	10 mins 0845-0855
9	Agreeing Group Working Agreements / Ground Rules	2 TFs	Pre-prepared flipchart with some general rules	10 mins 0855-0905
10	Gives/Gets/Ghastlies	LTs	Pre-prepared flipchart	10 mins 0905-0915
Stage B: developing our skills				
11	Group Facilitation skills	LT or GS	Slide presentation on group facilitation skills	120 mins 0915-1115
Tea break				30 mins 1115-1145
12	Ice Breaker 1: Creating a 'carpark'	2 TFs		10 mins 1145-1155
Stage C: understanding the pregnancy journey				
13	Ice Breaker 2: Quiz	2 TFs	Pre-prepared short quiz and your answers Snacks	20 mins 1155-1215
14	Preconception Planning: What do you need to consider when planning a pregnancy?	2 TFs	Latest info about ARTs, conception and pregnancy Planning for pregnancy handout for you	15 mins 1215-1230
15	Information Session: Defining different methods of conception	LT	Syringe (without the needle) Small pot Non-spermicide lubricated condoms (male and female) i-base HIV and pregnancy and treatment booklets NAM info sheet on how to do DIY pregnancy	15 mins 1230-1245

Lunch				75 mins 1245-1400
16	Information Session: How can HIV be passed on to a baby?	LT	i-base mini guides	30 mins 1400-1430
17	What happens during pregnancy, and after the baby is born?	2 TFs	Pre-prepared pregnancy timeline Small A4 versions of this timeline with answers for the facilitators Pre-prepared pregnancy guideline milestone cards	30 mins 1430-1500
18	Delivery: The benefits and disadvantages of different delivery methods	2 TFs	Pre-prepared flipchart	10 mins 1500-1510
19	Aftercare baby timeline	2 TFs	Pre-prepared baby timeline Small A4 versions of this with answers for the facilitators Pre-prepared baby milestone cards	15 mins 1510-1525
20	Aftercare: What else do you need to consider after the baby is born?	2 TFs		15 mins 1525-1540
21	Revisiting the carpark	LTs	Carpark flipchart from earlier session	15 mins 1540-1555
22	Closing Circle for end of Day 2	LT		10 mins 1555-1605
Tea break				
Lead trainers meet to review today's sessions and check for any adjustments needed				<60 mins 1615-1715
2 Trainees: preparation for tomorrow's session				
All trainees: Optional early evening films				
Stage D: exploring our own experiences				
Day Three				
23	Warm-up Exercise	LT	A potato	10 mins 0900-0910
24	Introduction to Creative Writing	LT		10 mins 0910-0920
25	Writing Exercise: Writing about the senses	LT	Small pieces of paper List of words to go on them	30 mins 0920-0950

26	Creative Writing: Post Card Exercise	LT	Postcards of people Two examples of these	15 mins 0950-1005
27	Main Writing Exercise and Feedback	LT	Creative Writing handout	60 mins 1005-1105
Tea break				30 mins 1105-1135
Stage E: exploring others' experiences				
28	Differences between Peer Support and Peer Mentoring (Recap)	2 TFs	Pre-prepared flipchart	15 mins 1135-1150
29	House on Fire Exercise	LT	Pre-prepared flipchart	15 mins 1150-1205
30	Issues that could come up during a peer mentoring session and how these can be dealt with	LT	Pre-prepared flipchart	25 mins 1205-1230
31	Problem-Solving and Action Planning	LT	Pre-prepared flipcharts Forms for handouts	30 mins 1230-1300
Lunch				75 mins 1300-1415
Stage F: realising our rights				
32	An Introduction to Sexual and Reproductive Health and Rights	LT	Pre-prepared flipchart Presentation on Sexual and Reproductive Health and Rights (SRHR) 'Safe house' outline on photocopied sheets	120 mins 1415-1615
Tea break				30 mins 1615-1645
33	Revisiting the carpark	LT	Carpark flipchart from earlier sessions	15 mins 1645-1700
34	Homework – preparation for Planning Next Steps session tomorrow	LT	2-sided handout	10 mins 1700-1710
35	Closing Circle for end of Day 3	LT		15 mins 1710-1725
Lead trainers meet to review today's sessions and check for any adjustments needed				<60 mins 1725-1825

2 Trainees: preparation for tomorrow's session
 All trainees to read through tomorrow's sessions

All trainees and trainers: Evening get-together in eg local restaurant

Stage G: monitoring, evaluation and planning ahead
 Nb if you have more time before participants have to leave, you can add an extra 30 mins each to sessions 37 and 39 and go on to mid-afternoon.

Day Four

36	Warm-up Exercise	2 TFs		10 mins 0900-0910
37	An Introduction to Monitoring and Evaluation	M&E trainer	Monitoring and Evaluation handout SMART and SPICED information with ALIV[H]E Change Matrix Post-training evaluation form	60 mins 0910-1010
38	Process Evaluation	M&E trainer		20 mins 1010-1030
Tea break				30 mins 1030-1100
39	Planning Next Steps	LTs	Pre-prepared flipchart of tree, (drawn by 3 participants) Post-it® stickers from participants' homework from Day 3 evening SMART and SPICED information	60 mins 1100-1200
40	Hand Exercise	LT	Example of hand drawing – but do all draw your own	25 mins 1200-1225
41	Post-Training Evaluation	M&E trainer	Post-training evaluation form	15 mins 1225-1240
42	Closing Circle for end of Day 4	LT	Attendance certificates for all participants	20 mins 1240-1300
Lunch and trainees' departures or optional extra workshop hour after lunch				1300 onwards

Before Assessors Depart

Follow-up meeting for Co-trainers / Assessors before you leave the venue

7 Evaluation Consent form

SAMPLE Evaluation Form

Title of project: **YOUR programme name**

Your research project title

Researcher: **Your organisation name**

Please initial all boxes

I confirm that someone has explained the above project to me and that I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.

I agree that information I have provided from my completed evaluation forms can be used for the purposes of evaluating this project.

I agree that YOUR ORG staff/assigned volunteer can contact me to discuss taking part in future projects that relate to the YOUR PROJECT NAME. I will be under no obligation to take part.

If I participate in a future interview about the project, I understand that the interview will be sound recorded and my name and other personal details will be removed. I agree to this in principle now and understand that my agreement will be confirmed at the beginning of the interview.

I agree to the use of direct quotations (from questionnaires or interviews) in publications, provided that my name and all other personal details are removed.

I agree to the use of direct quotations and written work (from creative writing) in publications, provided that my name and all other personal details are removed.

8 Immediate Pre-training Survey

Your organisation's name here:

Mentor Mothers Training of Trainers Training SAMPLE Immediate Pre-training Survey

As part of the evaluation of the Training the Trainers programme we would like to know more about your experiences and opinions on the topic. This will help us to improve training for future participants. Please answer the following questions. They shouldn't take more than 10 minutes. This is not an exam; all information obtained will be anonymised and used exclusively for research purposes. Personal details are requested only for comparison purposes over time and will be kept strictly confidential. Participation in the evaluation process is mandatory for all Mentor Mother participants, however you do not have to answer all the questions. If you are happy to, please give us any reason(s) why you prefer not to answer.

Name: Date:

1. Previous Experience:

Have you attended a course or training or teaching course on HIV & Pregnancy before this one?
(If more than 1, mention the last one)

No (Go to Question 2)

<input type="checkbox"/> Yes →	1.1.	Where did you receive it?
	1.2.	How long ago did you receive it? (In years)
		Any other comments:

Confidence around facilitating workshops for women living with HIV

2. Confidence around facilitating workshops for women living with HIV

What do you think are the main challenges around facilitating workshops for women living with HIV?
Please list below

a.
b.
c.

3. Knowledge about HIV and Pregnancy: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge around HIV and pregnancy?

1. Very Good 2. Good 3. Satisfactory 4. Poor

4. Confidence about facilitating workshops on HIV and Pregnancy: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your confidence in facilitating a workshop around HIV and pregnancy?

1. Very Good 2. Good 3. Satisfactory 4. Poor

Creative Writing

5. Knowledge around Creative Writing: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge around Creative Writing?

1. Very Good 2. Good 3. Satisfactory 4. Poor

6. Confidence about facilitating a session on Creative Writing with women living with HIV:
Please tick

On a scale of 1 to 4 (where 1 is high and 4 is low), how confident are you around facilitating a session on Creative Writing with women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

7. Knowledge about Monitoring and Evaluation: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge of monitoring and evaluating workshops?

1. Very Good 2. Good 3. Satisfactory 4. Poor

8. Confidence around explaining monitoring and evaluation of workshops to women living with HIV:
Please tick

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your confidence around explaining the importance of monitoring and evaluating of workshops, to women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

9. Confidence around planning, organising and facilitating workshops. *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how confident are you around planning, organising and facilitating/running a workshop for women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

10. Is there anything else you would like to add at all? Please use the space below.

General Information

1. Ethnicity:

White British <input type="checkbox"/>	White Irish <input type="checkbox"/>	White Other (specify) <input type="checkbox"/>
Black British <input type="checkbox"/>	Black Caribbean <input type="checkbox"/>	Black African <input type="checkbox"/>
Black Other <input type="checkbox"/>	Chinese <input type="checkbox"/>	Indian <input type="checkbox"/>
Bangladeshi <input type="checkbox"/>	Pakistani <input type="checkbox"/>	Asian Other (specify) <input type="checkbox"/>
Latin American <input type="checkbox"/>	Mixed background (specify) <input type="checkbox"/>	Prefer not to answer (please say why if you are happy to) <input type="checkbox"/>

2. Do you practise any religion?	<input type="checkbox"/> No (GO TO QUESTION 3)
	<input type="checkbox"/> Yes 
	23. What religion?
	Prefer not to answer (please say why if you are happy to)

3. Age:	<input type="checkbox"/> Prefer not to answer (please say why if you are happy to)

4. Employment status:	<input type="checkbox"/> Employed	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Part-time
	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Prefer not to answer (please say why if you are happy to)	

5. How many children do you look after?
Your children (no)
Other children (no)
<input type="checkbox"/> Prefer not to answer (please say why if you are happy to)

6. Educational qualification: (Please tick one ie. highest level attained).	
<input type="checkbox"/> Primary	<input type="checkbox"/> Secondary
<input type="checkbox"/> College	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Prefer not to answer (please say why if you are happy to)	

Thank you very much for completing this form.

9 Sample Quiz – Questions only

Your organisation's name here:

Mentor Mothers Training of Trainers Training SAMPLE Quiz - Questions only

NB please delete this whole box when giving it to participants to fill in. Lead Trainers: Please adapt this Quiz and your answers to suit the country/setting where the workshop is being delivered. Please also update all the information in it.

No	Question	Answer
1.	What is the number of people living with HIV in the UK?	
2.	How many of them are women?	
3.	How many men?	
4.	How many women living with HIV in the UK give birth each year?	
5.	How many of these women already know their HIV status?	
6.	How many of them are already on treatment?	

7.	How is HIV passed on from one person to the other?	
8.	What steps/interventions are taken/recommended to prevent transmission to the unborn/born baby	
9.	Can women living with HIV in the UK breastfeed their babies?	
10.	How can sero-different (where one is HIV positive and the other is not) couples conceive?	

10 What to consider when planning a pregnancy

What to consider when planning a pregnancy

Some of the things that women living with HIV need to consider when planning a pregnancy.

- Your general health and whether you need to start taking folic acid, iron, vitamin C, vitamin D, calcium...
- Whether or not you have started taking your HIV medication (ARVs-Anti Retrovirals)
- Whether you are thinking about your alcohol intake and smoking and nutritional issues related to the best health for yourself and your baby
- Whether you have a partner and what their HIV status is
- 'U=U' means you cannot pass HIV to your sexual partner or unborn child or baby, if you have an undetectable viral load. However, for your own peace of mind especially during pregnancy, it is advisable to tell your partner about your status, if you feel safe to do so.
- Support needs around your HIV. Are you in touch with other women/mothers living with HIV
- Clinical needs – it is important to be and stay engaged with your clinic/healthcare providers.
- Practical things like finances, housing, support with child care etc.
- What else?

Then during the session itself, the participants place these 'pregnancy guideline milestone' cards on the chart where they think they fit.

Table code: Green = 1st Trimester; Pink = 2nd Trimester; Yellow = 3rd Trimester.

Pregnancy timeline			
All 9 months: avoid smoking, drinking, drugs to minimise possible birth defects. Do ask for help to stop if you want - smoking is often the hardest.			
You		Baby stages	Healthcare for you, the Mother
Hormonal changes = morning sickness Fatigue Headaches	Month 1	Baby is ¼ of an inch = the size of a grain of rice	You start / continue ARVs (varies)
Breasts become tender	Month 2	<ul style="list-style-type: none"> • Facial features continue to develop: ears, fingers, eyes start to form. • Baby = foetus = 2.54cm = 2g • 1/3rd of baby is the head! 	<ul style="list-style-type: none"> • Antenatal checks • Dating Scans • Etc.
You may be offered a first scan to confirm the pregnancy and number of babies, and a first check of the baby.	Month 3	<ul style="list-style-type: none"> • Baby's organs developing (12 – 16 weeks) • Baby has arms, hands, fingers, toes, can open and close mouth • Teeth begin to form • Respiratory organs develop • Urinary, circulatory system working • Difficult to tell sex • Baby = 6cm = 9-14g • Chance of miscarriage falls 	Other tests
<ul style="list-style-type: none"> • Increased energy levels • Leg cramps, backaches, nasal congestion possible • Accelerated weight gain 	Month 4		
	Month 5	<ul style="list-style-type: none"> • Baby moves (varies) • Baby can hear and recognise your voice 	<ul style="list-style-type: none"> • Anatomy/ ultrasound scan (11-22) • Baby's part measured: heart, lungs, kidney, brain • Could find out sex of baby

Travel restrictions: Cruise 28 (no); air (HC permission)	Month 6		
	Month 7		<ul style="list-style-type: none"> • Tests for gestational diabetes – to test how your body reacts to sugar during pregnancy. (Nb this can be done earlier in the pregnancy if there is a history of type 2 diabetes in your family and/or if you show other risk factors of developing gestational diabetes) • Regular HC visits • Tests if access to HC • Urine for protein; foetal heart rate (listen); measure fundal height; check hands and feet for swelling; check baby's position; check cervix to see how body's preparing for childbirth.
	Month 8		<p>Group B streptococcus check (GBS). GB = serious threat to newborns. Treatment = antibiotics to stop baby from getting it.</p>
<p>After baby is born</p> <ul style="list-style-type: none"> • Lochia discharge – bloody-like period, can last up-to 6 weeks; varying - uterine cramps (uterus shrinking to pre-pregnancy size); <p>Sex: Recommendation to wait 6 weeks for Vaginal Birth and 8 for C-Section.</p> <ul style="list-style-type: none"> • Contraception! • Most women make a full discovery although others experience complications and less common symptoms eg Post-Natal Depression 	Month 9		<p>Week 36 Viral load should be undetectable.</p> <p>Week 39 Planned C-Section – nb NOT now recommended as routine by WHO – see 2017 Guideline</p> <p>Week 40</p> <ul style="list-style-type: none"> • Vaginal birth or • Emergency C-Section if needed

12 Baby Timeline

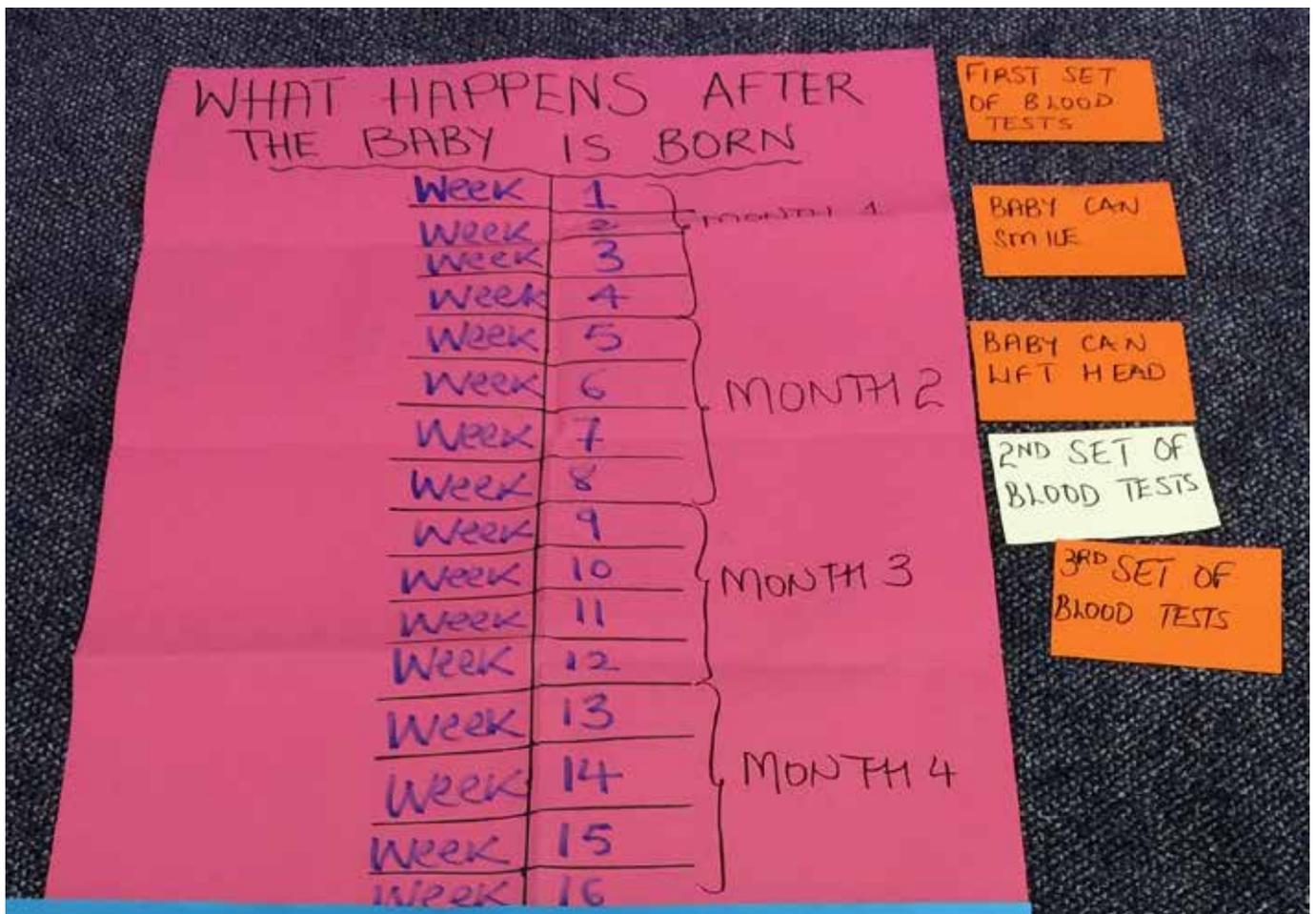
Here is a photo of how you can draw out the table below on flipchart paper.

In this photo above, the different 'baby milestone' card colours were just used by different participants.

The table below provides you with the information you need for this exercise.

Please prepare the flipcharts as shown in the photo below, before the session, with just the weeks marked. The information about the Baby and its healthcare should be written on the 'baby milestone' cards, also before the session.

Then during the session itself, the participants place these 'baby milestone' cards on the chart where they think they fit.



Baby timeline (After the baby is born)		
First medical test – APGAR 5-10 min after birth although 1 min possible! A - Appearance P- Pulse G- Grimace A - Activity R - Respiration Score of 7-10 good Other tests: hearing, eyesight, blood type – whilst in hospital	Month 1	Day 1 First set of blood tests and baby starts treatment Week 4 <ul style="list-style-type: none"> • Baby lifts head • Baby smiles Jaundice: 60% of newborns can get jaundice!!! Treatment: Incubator/formula first few weeks Baby weight – one week after
	Month 2	Second set of blood tests
Baby gurgles	Month 3	Third set of blood tests
	Month 4	
	Month 5	
Cessation of Breastfeeding	Month 6 (please amend to suit country guidelines as these may differ, particularly where longer duration of breastfeeding is advised.)	If breastfeeding Regular monitoring including monthly blood tests for baby and mother
	Month 18	Last HIV test

NB it is also really important to include vaccinations in this list above. You can check out the latest advice about which vaccines to have when here: <https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule>

13 List of Words for the Writing the Senses Exercise

List of words (feelings) for use with the Writing the Senses Exercise. These should be written out on small pieces of paper.

Words printed on small pieces of folded paper (one word for each participant):

Love

Anger

Joy

Peace

Pride

Fear

14 Examples of 2 postcard images for the Creative Writing Exercise



Sava Sekulic
Untitled, 1983



Do Ho Suh
Spectators, 2014

15 Creative Writing Handout

Creative Writing Handout

What is it?

Creative writing is writing that deals with our personal thoughts and feelings. In creative writing we have total control over what we say and how we say it. In this way it's totally different to the kind of writing we do in our daily routine such as filling in forms.

Why is it important?

- It keeps records of significant experiences
- It allows us to share experience with an interested group
- It fulfils our need for free individual expression, which contributes to mental and physical health.

Research has shown that regularly writing about our emotions can make us happier, healthier and reduce our levels of stress and anxiety. Writing about difficult experiences in our lives can help us to reflect and explore those events in a safe environment.

HIV and Creative Writing

HIV can limit what we feel we can say, even to our friends and family. Women living with HIV are often experts at *not-saying*, especially if they do not know others in a similar position. By writing about living with HIV we can share our personal experiences with others. We can also write openly about living with HIV, even when we can't talk openly about it (you don't have to show what you write to anyone!)

Tips for Creative Writing

- Don't worry about spelling, grammar, or punctuation – it's more important that you write quickly, about whatever comes into your head.
- Keep a diary and try to write in it a little bit as often as possible. This can be daily, weekly or monthly, depending on what works for you. Note down how you are feeling including any worries you have.
- Be honest about your emotions when writing. You don't have to share, or even keep, your writing if you don't want to.
- If you feel that writing about any topic will be harmful to you, or will cause you a lot of stress, then don't write about it.
- Think of one good thing you feel grateful for each time, no matter how small, and try to finish your writing time by adding a note about that too.

Some simple Creative Writing Exercises

- Start a paragraph with, "I remember..." and let your memories dictate what you write.
- Write a letter to a person who is no longer in your life (either through death, moving, or simply losing touch) while telling a story of an experience that has helped you develop into the person you are today.
- If you could write a letter to your younger self, what advice would you want to give yourself?

16 Action Planning Tool

Action Planning Handout

Simple Action Planning Tool

Goal: (What are you planning to do/achieve)

Eg I am planning to get fit and lose weight & create some 'me' time by going running regularly. (You can specify how much weight you plan to lose)

Start Date: *Monday*

End Date: *Never*

What are you planning to do:

Go running

What resources you will need:

*Eg: **Free:** Place to run (a nearby park or a gym subscription thro' GP); 'Parkrun' group near me (<https://www.parkrun.org.uk/>); 'Couch to 5k' NHS app; a friend; **Paid:** running shoes; supportive undergarments (eg bra, especially after childbirth, when breasts will have grown).*

How much are you going to do:

Build up from scratch by using the NHS app above?

When are you going to do it:

In the morning? When works best for you?

How often are you going to do it:

3 times a week?

What / who will motivate you to keep going:

Do it with a friend? Local Parkrun group? Getting into that dress! Good role-model for children?

Goal: (What are you planning to do/achieve)

Start Date:

End Date:

What are you planning to do:

What resources you will need:

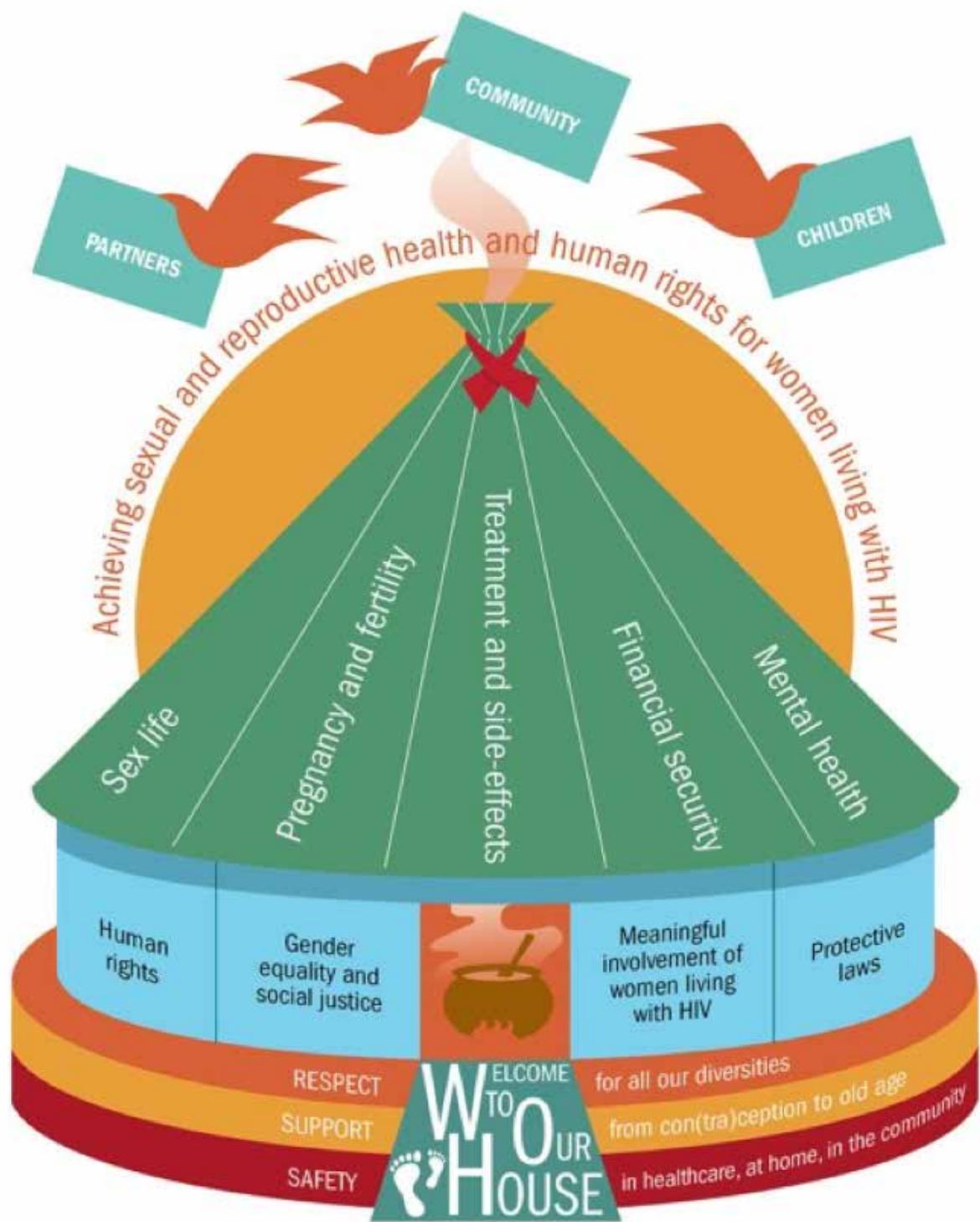
How much are you going to do:

When are you going to do it:

How many often are you going to do it:

What / who will motivate you to keep going:

17 House image – Building a Safe House on Firm Ground



'Building a Safe House on Firm Ground'
© Salamander Trust 2015

18 Preparing for Day 4 – Homework for ‘Planning Next Steps’

Preparing for Day 4: homework for ‘Planning next steps’

- a) **3 volunteers:** please would three of you volunteer to draw a tree together. This should be made up of 3 flip charts stuck together at their short ends to form a trunk, with four more then stuck together and added on to form the branches, with leaves, flowers and fruit. Don't take too long over drawing it together but we will all use this tree together for our 'planning next steps' exercise (see more below).
- b) **All of you:** In the final stage of this workshop, we will have a 'planning next steps' session. We would like you to think ahead to imagine what you would like to see happen with this work over the coming weeks, months and years and how you want to be involved in the process.

We will do a short exercise together, to think about NOW, SOON and LATER.

We do not have much time to do this in this workshop but would like you to spend 30 minutes or so this evening, either alone or with 2-3 others, to brainstorm a bit about what you would like to happen/change. What can you do as an individual /group with your current skills, knowledge and networks?

Tomorrow we will take some flipcharts and use your ideas to describe together a beautiful tree with leaves, flowers and fruit. Imagine that the trunk of the tree has grown strong and tall.

Think first of the *lower* third of the trunk. **What changes** (actions such as: funding, training, service provision, policies, self-confidence building, collaborations, etc.) do you feel should happen NOW (in the next few days and weeks) to help to start this tree to grow? And **who** do you think needs to be involved in making them happen?

Note down 4-6 ideas clearly, one idea per note, in a short sentence per note, on **RED/PINK** post-it notes. Here is an example for you of a pink post-it note:

Think next of the *middle* third of the trunk. **What changes** do you feel should happen SOON (in the next 3-6 months) to help this tree to grow taller and stronger? And **who** do you think needs to be involved in making them happen?

Note down 4-6 ideas clearly, one idea per note, in 3-5 words per note, on **YELLOW/ORANGE** post-it notes. Use the same 'WHAT / WHO' format as the pink example above for each idea.

<i>What</i>	<i>Who</i>
<i>Meet with my support org, to tell them about what I've learned here and want to do next</i>	<ul style="list-style-type: none">• <i>Me</i>• <i>A lead trainer</i>• <i>Vol. coordinator from support org....</i>

Then think of the *upper* third of the trunk. **What changes** do you feel should happen LATER (in the next 7-12 months) to really make this tree grow firm and strong? And **who** do you think needs to be involved in making them happen?

Note down 4-6 ideas clearly, one idea per note, in 3-5 words per note on **GREEN** post-it notes. Again, use the same 'WHAT / WHO' format as the pink example above for each idea.

Please be ready to bring these post-its with you tomorrow, to share with everyone. You can also look overpage, for some more thoughts, before you start.

NB please remember, there is no such thing as a silly idea! This is a 'brainstorming' activity for everyone to share their ideas about how we can all take this work forward together.

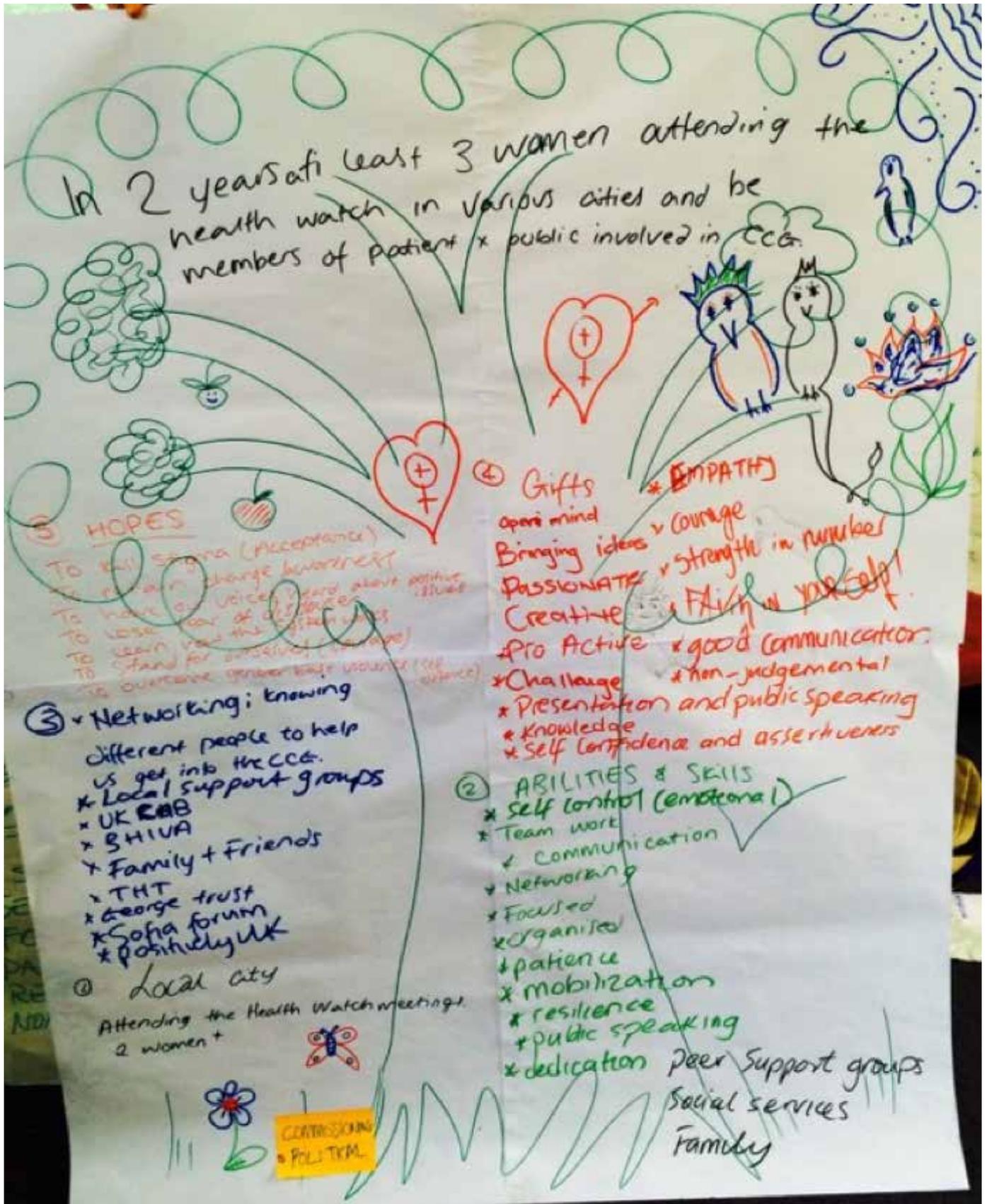
Over the page is an example of a vision tree from Sophia Forum 'Wise Up' workshop, June 2014 (see www.sophiaforum.org).

We don't have time to do this exercise below in this workshop, but we are sharing it with you as an example of a more detailed planning exercise.

If you have enjoyed this workshop and would like to continue to be involved in the work in your area, maybe you would like to take part in a separate planning day, in a few weeks' time, which could go into more detail, as this tree below has done?

We can discuss this possibility together tomorrow. Perhaps it could be one of the ideas you include in your lists above? If so, when would you like it to happen?

19 Tree image from Sophia Forum



20 M&E Handout

4M Monitoring and Evaluation: Information Sheet

Monitoring and evaluation - often just called M&E - is how we ensure our projects are working according to our plans (monitoring) and having the impacts that we planned them to have (evaluation). It involves thinking about the types of changes that we hope to have in the lives of women living with HIV and the best ways to document these changes. At a very basic level this includes carefully recording how many people attend each training. At a more complex level it tries to understand what impact the training has on the lives of participants and others. **Every project or initiative should have a monitoring and evaluation (M&E) plan.**

Understanding key M&E terms

Monitoring involves the collection of data to measure our progress towards achieving our stated program objectives. Monitoring is an ongoing process. For example, it might happen during each workshop as feedback is collected from participants on the Flipchart.

An **Evaluation** measures how well the programme activities met its expected outcomes. It considers the total impact of a project. Evaluations require data collection at the start of any project (to provide baseline data) and again at the end.

Baseline data

Baseline data are information that is collected at the beginning of a study or before the programme has occurred.

Indicators

If you want to track changes resulting from your projects you will need to identify indicators. These are specific and concrete pieces of information that you choose in advance to enable you to track the changes. For example, if you are training women to act as peer mentors, an indicator might be how many women they have mentored.

Why do M&E?

It sounds obvious but it's worth thinking about *why* we do monitoring and evaluation, in order to prepare for the challenges we could face along the way.

- To learn how change happens, what works and what doesn't work to improve programmes in the future.
- To give everybody a voice.
- To be accountable. This is very important for **funders**, in order to show that the project deserves funding and provides good value for money.
- To advance our advocacy for social justice. M&E can show why and how the work we do is important. It provides us with a way to create statistics about our work.

One of the key intended outcomes of the 4M training project is an enhanced knowledge of HIV and treatment used in the context of pregnancy. We therefore designed a series of multiple choice questions to test knowledge levels (**indicators**). Participants completed these forms immediately before the training began (our **baseline data**) and again at the end.

By comparing how many answers participants answered correctly before with those answered correctly afterwards, we were able to use the results to demonstrate that 4M training really does achieve its stated outcome.

Who is responsible for M&E?

Whilst your organisation will most likely lead on M&E planning, as a trainer you will be involved in explaining why and how you will document and collect information for M&E from workshop participants. It is important that they understand how their data will be used (and how it won't be used), as well as allowing participants opportunities for project feedback (monitoring).

M&E planning checklist

The following is a useful checklist of things you should consider and discuss among your peers. The answers to these questions will support you in thinking about M&E.

What are you trying to achieve?	<input type="checkbox"/>
What are the goals that you need to meet for the programme to be successful?	<input type="checkbox"/>
How will you know that you have achieved those goals?	<input type="checkbox"/>
What are the indicators that you will use to measure success?	<input type="checkbox"/>
What elements will support positive change in this environment (for example, the structured support of a health service) - and which external elements might be a barrier to change (for example, bus money or long travel for participants)?	<input type="checkbox"/>
Over what period of time will you track the progress of the success indicators?	<input type="checkbox"/>
What is the most appropriate tool you could use to gather data to measure success? (attendance numbers, women supported by participants, survey questionnaires or participant interviews)	<input type="checkbox"/>
How will the data be presented/communicated and for what purpose? (Ideally, all the data collected should be communicated to all programme staff, funders, learners and the community at large.)	<input type="checkbox"/>

To learn more about what we have done with M&E data from the 4M workshops, see here <http://tinyurl.com/4MExecSumm>

We will also learn more about M&E together during webinars over the coming months.

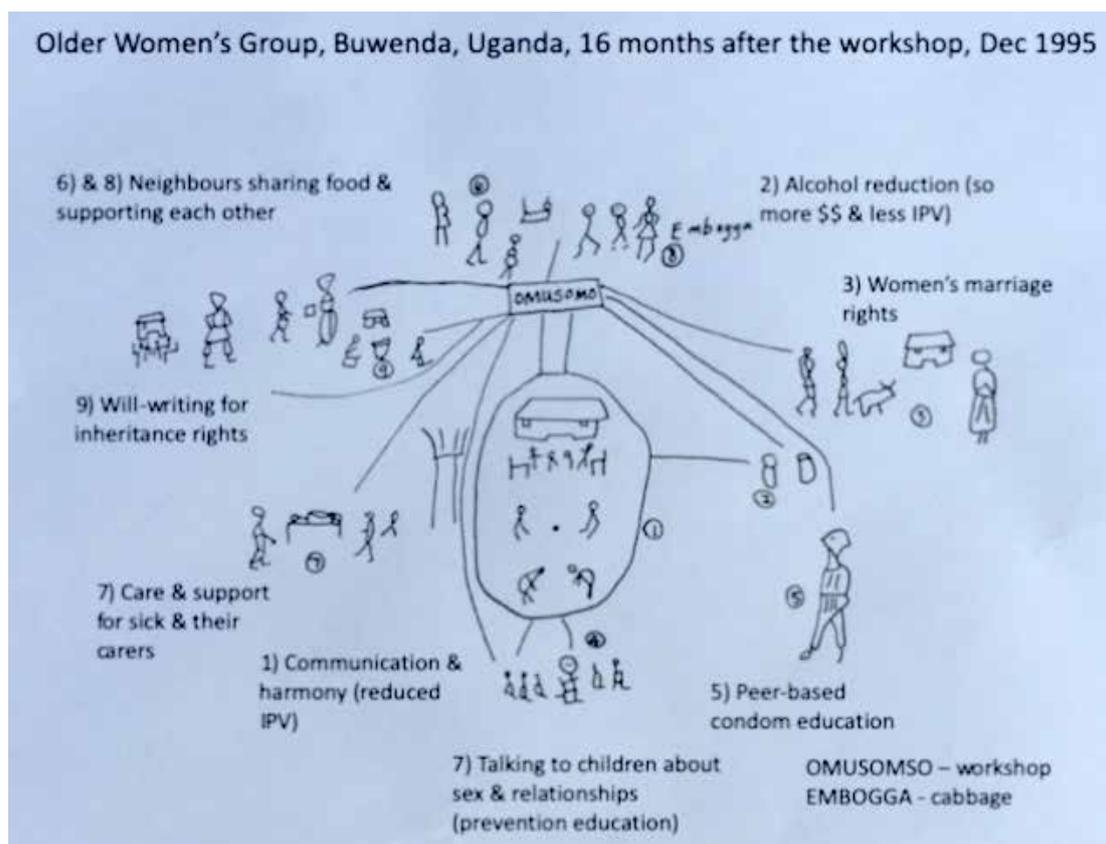
21 SMART & SPICED and ALIV[H]E change matrix handout

Extracts from: *Action Linking Initiatives on Violence Against Women and HIV Everywhere, ALIV(H)E framework: Salamander Trust, Athena, UNAIDS, AIDS Legal Network, Project Empower, HEARD, University of KwaZulu-Natal. 2017.*

http://salamandertrust.net/wp-content/uploads/2017/11/ALIVHE_FrameworkFINALNov2017.pdf

A: SMART and SPICED indicators

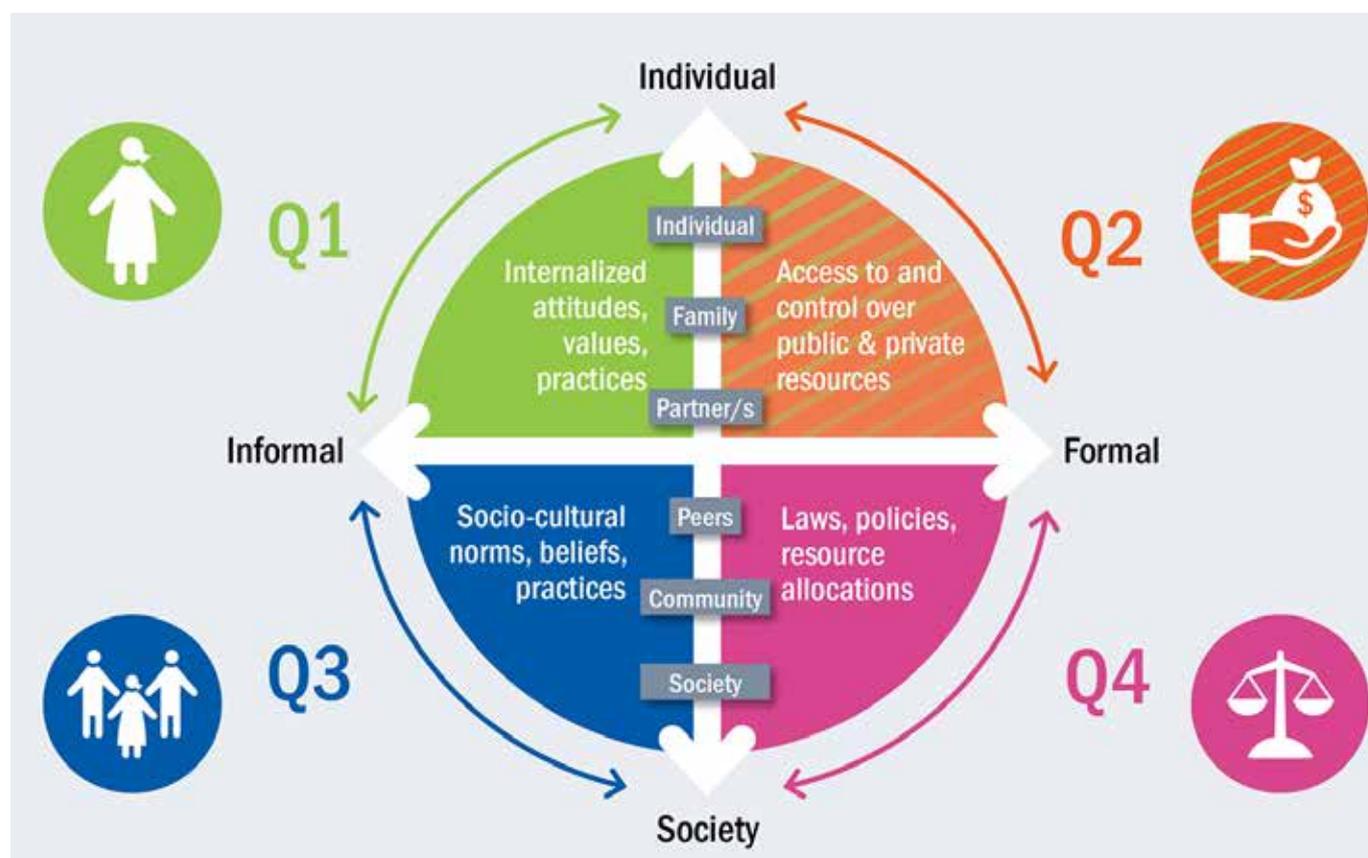
We are often asked by donors to provide SMART (Specific, Measurable, Attainable, Realistic and Time-bound) indicators. But, are these enough to develop relevant and effective programmes? Indicators created by community members, through participatory processes, can often enrich our understanding of the priorities of women facing violence, compared with what outsiders might think their priorities are, or should be. For example, outsiders might want to include within the project timeframe, priority indicators that emphasise a woman's 'disclosure' of her HIV status to her partner and her adherence to medication. These could be measured through SMART indicators. However, 'disclosing' her HIV status to her partner and having her medication discovered may make her vulnerable to IPV and potentially lose her children. Her top priority might be staying safe so that she can keep her children safe and, therefore, avoiding 'disclosure' and taking medication. Indicators derived from her perspective could be identified as SPICED (Subjective, Participatory, Interpreted, Cross-checked, Empowering, Diverse and Disaggregated) indicators. These SPICED indicators are closer to the priorities and desires of the woman than the SMART indicators, which, despite the researchers' good intent, have a limited understanding of any potential violence. Developing SPICED indicators through participatory qualitative M&E processes can help us to develop programmes that would first address the violence itself, together with those whose lives we seek to support. Such programmes are likely to need more time to implement, but are ultimately likely to be safer, more sustainable and more effective in the long-term.



The diagram above was drawn by a group of older women in Buwenda, Uganda in 1995 (before ART was available), 16 months after a Stepping Stones workshop. It shows the positive changes in the women's lives since the workshop. The annotated notes were added later to summarise what the women had depicted in the drawings and in their local language. The NGO staff were struck by the rich diversity of issues identified by the women, covering a wider range than they anticipated. This diagram could be used to construct a set of SPICED indicators for work with other communities on VAW and HIV. However, SMART and SPICED characteristics are not mutually exclusive and can complement each other. Ideally, we would move towards a process where all indicators have both SMART and SPICED characteristics: whereby they have been developed in a participatory way through the process described here, to reflect and account for local priorities and desires. For example, the SPICED indicator 'neighbours sharing food and supporting each other' could then be defined in a SMART way as 'the extent to which individuals have felt comfortable sharing their food and supporting each other over the past year' with a score of 0–10.

B: ALIV[H]E Change Matrix

The diagram below is taken from the ALIV[H]E Framework also. It is a useful tool to help us think through where change needs to take place to address the challenges we can face as women living with HIV.



You can read more about this here: https://salamandertrust.net/wp-content/uploads/2017/11/ALIVHE_in_Action_FINAL_Salamander_et_al_March2019.pdf

22 Using our Six Friends to Plan Ahead

Mentor Mothers Training of Trainers Training Using our six friends to plan ahead

Prepare a flipchart that looks like this, with enough space in each box for a rectangular post-it

The pink post-it in the first column is an example of one of the post-its from the NOW part of the tree (on the lower trunk).

IDEA for ACTION	WHEN	WHAT	WHO	WHY	WHERE	HOW
	Now					
	Soon					
	Later					

Add in more rows if needed for Now, Soon and/or Later. But remember to keep enough time to make some of these ideas SMART also.

23 Turning our SPICED Ideas into SMART Ideas

Mentor Mother Training of Trainers Turning our SPICED ideas into SMART ideas.

Prepare a flipchart that looks like this, with enough space in each box for a rectangular post-it

The pink post-it in the first column is an example of one of the post-its from the NOW part of the tree (on the lower trunk), which you have now copied from the SIX FRIENDS table.

IDEA for ACTION	Specific	Measurable	Attainable	Realistic (or Relevant)	Timebound
<div style="border: 1px solid black; background-color: #fce4ec; padding: 5px; display: inline-block;"> <i>What Who</i> </div>	Eg Start phone calls to a mentee	6 people making phone calls to 1 mentee each	Each MM calls x2 a week for 10-15 mins max	Yes	Check in with supervisor: after 1st call; after 4th call; after 12th call if going well – more often if not. For 3 months initially?

Add in more rows if needed. But it is fine if you just use 2-3 examples from the NOW / SOON / LATER table above, so participants understand what is being done.

24 Hand exercise

HAND EXERCISE:

Remember that each of you should all draw around your own hand to begin with. Then you pass the drawings round the circle. So this is how it might look like in a group of 15 women when it comes back to Anita (there are 14 comments on it – one from each woman, except Anita). Remember that you lead trainers need to include yourselves in this exercise!



25 Post-Training Evaluation Form

Mentor Mothers Training of Trainers Training SAMPLE Immediate Post - training Evaluation Form

As part of the evaluation of the Training the Trainers programme we would like to know more about your experiences and opinions on the topic. This will help us to improve training for future participants. Please, answer the following questions. They shouldn't take more than 10 minutes. This is not an exam; all information obtained will be anonymised and used exclusively for research purposes. Personal details are requested only for comparison purposes over time and will be kept strictly confidential. Participation in the evaluation process is mandatory for all Mentor Mother participants however, you do not have to answer all the questions. If you are happy to, please give any reason(s) why you prefer not to answer.

Name: Date:

1. How would you rate the training content? Please tick

Excellent Good Satisfactory Poor

2. How would you rate the training facilitation?

Excellent Good Satisfactory Poor

3. Consider the following list of methods used in the training. How useful were they in increasing your knowledge and understanding of Group Facilitation/Facilitating Groups?

	Very useful	Fairly useful	A little useful	Not useful
Information sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork/ Small group discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Large group discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitating sessions in pairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feedback from Trainers on the sessions you facilitated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Confidence around facilitating workshops for women living with HIV: What do you think are the main challenges around facilitating workshops for women living with HIV? Please list below

a.
b.
c.

5. Knowledge about HIV and Pregnancy: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge around HIV and pregnancy?

1. Very Good 2. Good 3. Satisfactory 4. Poor

6. Confidence about facilitating workshops on HIV and Pregnancy: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your confidence in facilitating a workshop around HIV and pregnancy?

1. Very Good 2. Good 3. Satisfactory 4. Poor

7. Knowledge around/about/of? Creative Writing: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge around Creative Writing?

1. Very Good 2. Good 3. Satisfactory 4. Poor

8. Confidence about facilitating a session on Creative Writing with women living with HIV: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how confident are you around facilitating a session on Creative Writing with women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

9. Knowledge about Monitoring and Evaluation: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your knowledge of Monitoring and evaluating workshops?

1. Very Good 2. Good 3. Satisfactory 4. Poor

10. Confidence around explaining Monitoring and Evaluation of workshops to women living with HIV: *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how would you rate your confidence around explaining the importance of Monitoring and Evaluating workshops, to women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

11. Confidence around planning, organising and facilitating workshops. *Please tick*

On a scale of 1 to 4 (where 1 is high and 4 is low), how confident are you around planning, organising and facilitating/running a workshop for women living with HIV?

1. Very Good 2. Good 3. Satisfactory 4. Poor

26 Participation Certificate

PERINATAL PEER MENTORING
PROJECT
MENTOR MOTHER TRAINING OF
TRAINERS WORKSHOP

THIS CERTIFICATE OF ATTENDANCE

IS AWARDED TO

Participant's Name

DATE HERE

TRAINER ONE
ORGANISATION NAME

TRAINER TWO
ORGANISATION NAME

YOUR ORGANISATION'S LOGO HERE

F Useful References

Please note this reading list is not exhaustive. Nor can it be fully up to date. We offer it here as a starting point or to complement your own reading. It includes both UK-specific and international material.

Some Essential Reading

The following are essential references that we strongly recommend you read before you start your own Mentor Mother training programme.

- 4M: Peri-natal Peer Mentoring Programme by, with and for women living with HIV* Salamander Trust. 2018. (This is about our UK work with 4Mnet) <https://issuu.com/salamandertrust.net/docs/salamandertrust4madvocacybrieffinal>
- 4M+: Peri-natal Peer Mentoring Programme for women living with HIV. Advocacy Brief about the 4M+ Programme.* Salamander Trust. 2018. (This is about our work with partners in Kenya and Uganda) https://issuu.com/salamandertrust.net/docs/20180308_4m_advocacybrieflowresfina
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Useful Wider Reading

The following are other materials that we have found relevant and/or useful

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OTHER USEFUL WEBSITES in alphabetical order

- Avert <https://www.avert.org/>
- British HIV Association <https://www.bhiva.org/>
- i-Base <http://i-base.info/>
- National AIDS Trust <https://www.nat.org.uk/>
- Positively UK <http://positivelyuk.org/>
- Sophia Forum <http://sophiaforum.net/>
- SWIFT <http://www.swift-women.co.uk>
- UNAIDS <http://www.unaids.org/>
- WHO <https://www.who.int/>

On the Salamander Trust website, there are also many other pages of interest and relevance to women living with HIV. These include discussions about Dolutegravir during pregnancy, HPV and Cervical Cancer, the WHO 2017 Guideline on the SRHR of women living with HIV, the importance of positive affirmative language when describing people living with HIV and the issues we face; and many other topics. www.salamandertrust.net

Your Notes

Your Notes

Your Notes

Salamander Trust is a deliberately small organisation, registered as a charity and with Companies House in the UK. It aims to protect, promote and enhance the health and rights of people marginalised as a result of their gender, HIV status or sexual & reproductive health. Its logo reflects what it seeks to do: 'On the RIGHT(s) Track - **T**rainning, **R**esearch & **A**dvocacy informed by **C**ommunity **K**nowledge

The 4M Network has as its logo 'My Health, My Choice, My Child, My Life'. It started in 2016 when, supported by the Salamander Trust, it trained 46 women as Mentor Mothers across the UK. In 2017 it conducted a national training of trainers workshop, which trained 14 women as Mentor Mother Trainers.

The 4M work is aimed at developing and delivering training workshops for women living with HIV training and skilling them up to become 'Mentor Mothers' to support other women living with HIV.

4M Network was developed and is led by women living with HIV; and is guided by a steering group, which includes women living with HIV, healthcare clinicians, academics & researchers.

The 4M training programme has also been conducted with partners in Uganda and in Kenya.

The 4MNetwork in 2019 is working in the UK with MAC funding to expand the network and with MIND to promote perinatal mental health awareness in HIV.

In 2019 the 4MNetwork also celebrated the next stage of its development by becoming an independently registered Community Interest Company.



Salamander Trust
ON THE RIGHT(S) TRACK