# Mothers and Babies 1-on-1: Facilitator’s Guide

**September 2016**

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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Learning Objectives</th>
<th>Key Talking Points</th>
<th>Slide #</th>
<th>Teaching Methods</th>
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| 9:00 – 9:15| Welcome and Introductions                                     |                                                                                 | Facilitator/clinician introduction to home visiting program  
Provide overview of Mothers and Babies project in State of Florida |  | Group engagement        | Registration  
Agenda  
Training manuals:  
Home visitor guide and participant manual |                                    |
| 9:15 – 9:45| Conceptual Background of the MB Course                        | Participants will gain a basic understanding of the three theoretical foundations of the MB Course: Cognitive-Behavioral Therapy, Attachment Theory, and Psychoeducation. | Curriculum is based on principles of cognitive-behavioral therapy, which has three main components: a) encouraging pleasant activities, b) promoting healthy thought patterns, and c) promoting social support  
Attachment theory also central to curriculum—activities in Mothers and Babies focus on promoting interaction between mother and child  
Psychoeducation refers to helping clients understand how CBT concepts affect their mood | 2       | Presentation/lecture  | Training manuals                                           |                                    |
| 9:45 – 10:00| MB Course Structure and Logistics                             | Participants will understand the format of MB 1-on-1 Course sessions including: Delivering the key points of the session to the client through use of 1) the script provided in the manual to guide content delivery, 2) interactive learning activities they can conduct with the clients to help clients understand concepts, and 3) introducing personal projects for clients to practice between sessions in order to facilitate retention and individualization of the material. | There is a standardized format for each of the 12 sessions in the curriculum  
Each session is intended to last 15-20 minutes  
Sessions should (ideally) be conducted every week or every other week  
Sessions should ideally be conducted in person but phone is acceptable  
Each session has multiple topics and for each topic there is: a) key points, b) a script to guide presentation of material, c) an interactive learning activity, and d) a personal project to be conducted before the next MB session  
The script does not have to be read verbatim. It is intended to provide a “safety net” for those delivering the | 3-4     | Presentation/lecture  | Training manuals                                           |                                    |
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<tr>
<td>10:00 – 10:30</td>
<td>Introduction to MB (MB Sessions 1 – 2)</td>
<td>Participants will understand and be able to explain to their clients: 1) how everyone experiences stress, 2) there are ways to manage stress, 3) the importance of monitoring our mood. Session 1: - Identify common life stressors in participants’ lives, including those following birth of their child. - Discuss how specific stressors might affect the mother’s emotional health and physical well-being, the mother-baby relationship, and the baby. - Indicate there are skills to manage stress and that the Mothers and Babies Course will discuss helpful ways to manage stress, specifically via a) pleasant activities, b) modifying thoughts, and c) increasing positive social support. Session 2: - Explain the concepts of inner and outer reality and how both affect our mood. - Explain the Quick Mood Scale and the importance of monitoring our mood.</td>
<td>5 – 7 Presentation/lecture Training manuals</td>
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<td>10:30 – 10:45</td>
<td>Break</td>
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<td>10:45 – 11:15</td>
<td>Group activity/ Skills practice (Intro module)</td>
<td>Participants will understand and be able to explain to their clients how to use the Quick Mood Scale. Participants should break into groups of 2 or 3. Each participant should first complete their own Quick Mood Scale for the past week. Each participant should then play the role of home visitor and home visiting client. The home visitor should ask the client to report on his/her Quick Mood Scale. After completing the activity, have a large group discussion about the activity, being sure to emphasize the following points: 1) what did participant notice about his/her mood from completing the Quick Mood Scale, 2) what did the</td>
<td>8, 9 Activity: 2-3 person groups to practice Quick Mood Scale Group engagement: Large group discussion and reflection on Quick Mood Scale Training manuals Participant Manual: Worksheet 2.2 Field Guide: Session 2, Topic 2</td>
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Participants will understand and be able to explain to their clients: 1) how engaging in pleasant activities can have a positive effect on mood; 2) how engaging in pleasant activities with her baby can help make a healthy reality for mother and baby; and 3) problem-solving methods to overcome obstacles to engaging in pleasant activities

### Session 3
- Review the Quick Mood Scale and reinforce the purpose.
- Violet and Mary: “story” to help introduce the concept of pleasant activities
- When people do pleasant activities they often feel happier, are more likely to have positive thoughts about their lives, and are more likely to have positive contacts with other people.
- Pleasant activities tend to chain—doing one activity can start a chain so you are more likely to do other pleasant activities

### Session 4
- Help client identify activities she enjoys doing a) alone, b) with other people, and c) with her baby.
- Pleasant activities can be brief, low/no cost, and part of everyday routines.
- Mothers can do pleasant activities with their babies that can affect both their mood and their babies’ mood.
- Doing pleasant activities affects how you feel and it changes both your outer reality (what you are doing) and inner reality (how you feel).
- Help participants identify obstacles to doing pleasant activities and discuss ways they might overcome these obstacles.
- Discuss problem solving as one way to overcome a roadblock or problem.

### Session 5
- Discuss whether client completed the pleasant activity they scheduled.
  - Discuss ways they might overcome obstacles, if any existed.
  - Emphasize it is sometimes difficult to complete pleasant activities when they are scheduled, but it is important to not...
give up on scheduling and doing pleasant activities.
• Help participants identify activities that babies enjoy doing (alone, with mom and/or dad, and with other people/babies).
• Pleasant activities affect the mother-baby relationship by helping mothers have a better mood, improving the baby’s mood and strengthening the mother-baby relationship through shared positive activities.
• Discuss how babies learn by observing and imitating their parents and following what their parents teach them.

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<tr>
<td>11:45 – 12:30</td>
<td>Group activity/ Skills practice (Pleasant Activities Module)</td>
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<td>Participants should break into groups of 2 or 3</td>
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<td>Each participant should first complete Worksheet 3.2, which asks him/her to list pleasant activities that one can do alone or with others</td>
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<td>Each participant should then play the role of home visitor and home visiting client</td>
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<td>The home visitor should ask the client to report on his/her list of pleasant activities</td>
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<td>After completing the activity, have a large group discussion about the activity, being sure to emphasize the following points: 1) what did participant notice about his/her list of pleasant activities, 2) what did the home visitor notice about successes/challenges in getting the client to talk about his/her list of pleasant activities, and 3) what are anticipated challenges and opportunities to doing this activity with actual home visiting clients</td>
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<td>1:30 – 2:00</td>
<td>Thoughts Module (MB Sessions 6 – 8)</td>
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<td>Participants will understand and be able to explain to their clients: 1) how harmful thoughts can lower one’s mood and helpful thoughts can lift one’s mood; 2) how increasing helpful thoughts can affect both the mother’s and baby’s future; 3) how to identify helpful and harmful thoughts; and 4) techniques to reduce harmful thoughts and increase helpful thoughts</td>
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<td>14 – 17</td>
<td>Presentation/lecture</td>
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<td>Training manuals</td>
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• We have some control over thoughts, and can manage our inner reality.
• Thoughts are like self talk, like having a conversation with ourselves.
• Helpful thoughts help improve mood. Harmful thoughts worsen mood.
• Both helpful and harmful thoughts affect us emotionally and physically and affect our inner reality.
• Identifying harmful and helpful thoughts about your pregnancy and how they affect your mood is an important step toward improving your mood.

Session 7
• There are several harmful thought patterns that people have; four specific harmful thought patterns are: 1) all or nothing thinking, 2) overgeneralization, 3) blaming oneself, and 4) negative fortune telling.
• There are several strategies (or "antidotes") for changing harmful thoughts.
• Four specific strategies are presented; not everybody will find each of them equally useful, but they all can be effective in changing harmful thoughts.

Session 8
• Children learn patterns of thinking from their parents.
• Mothers play an important role in shaping their babies’ thoughts and inner reality, which can have an impact on both the mother’s and the baby’s mood.
• Shaping your future by doing things that will lead to achieving your goals will help shape your future and also help to shape your child’s future.
• It is important to also envision the type of future you’d like for your child so you can plan for your baby’s ideal future.

2:00 – 2:30 Group activity/ Skills practice (Thoughts Module)

Participants should break into groups of 2 or 3
Each participant should first complete Worksheet 6.4, which asks him/her to list helpful or harmful thoughts.
Each participant should then play the role of home visitor and home visiting client.

Activity: 2-3 person groups to practice activities/exercises
Group engagement: Large group discussion and
Training manuals
Participant Manual:
Worksheet 6.4
Field Guide:
Session 6, Topic 3
The home visitor should ask the client to report on his/her list of helpful/harmful thoughts.

After completing the activity, have a large group discussion about the activity, being sure to emphasize the following points: 1) what did participant notice about his/her list of helpful and harmful thoughts, 2) what did the home visitor notice about successes/challenges in getting the client to talk about his/her list of helpful and harmful thoughts, and 3) what are anticipated challenges and opportunities to doing this activity with actual home visiting client, when they are asked to talk about helpful and harmful thoughts related to their being a mother.

2:30 – 3:00 Contact with Others Module (Sessions 9 – 11)

Participants will understand and be able to explain to their clients: 1) how increasing the frequency of positive contacts with other people, and decreasing the frequency of negative contacts with others, can affect one’s mood positively or negatively, respectively; 2) how to get support for both mother and baby; 3) how interpersonal relationships can effect one’s mood; and 4) techniques for improving assertive communication skills in order to better facilitate getting one’s needs met.

Session 9
- Violet and Mary: “story” to help introduce the concept of contact with others
- Contact with others is part of our outer reality.
- There is a reciprocal relationship between contact with others and one’s mood.
- Emphasize that we can break the cycle between negative mood and fewer positive contacts by either reducing negative or harmful contacts with others or increasing positive or helpful contacts with others.

Session 10
- Identify participant’s current support system, while introducing four categories of supportive individuals: 1) people closest to me, 2) close friends, 3) friends, and 4) acquaintances
- Examine how the current support system provides support in four different ways: 1) practical support, 2) advice/information, 3) companionships, and 4) emotional support
- Emphasize that people can make choices about who they spend time with (i.e., positive contacts vs. negative contacts)
- Emphasize the importance of expanding one’s support network
- Discuss how doing pleasant activities is one way of expanding one’s support network.

Session 11

18 – 21 Presentation/lecture Training manuals
Communication style can affect mood as well as relationships with others. There are three main types of communication styles: aggressive, assertive, and passive; using an assertive style can increase the chance that one's needs will be met. There are obstacles to using an assertive communication style that may limit a client's willingness to use assertive communication. Role changes such as having a new baby affect relationships you have with other people, and often these changes can be stressful.

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<td>3:00 – 3:15</td>
<td>Break</td>
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<tr>
<td>3:15 – 3:45</td>
<td>Group activity/ Skills practice (Contact with Others Module)</td>
<td>Participants should break into groups of 2 or 3. Each participant should first complete Worksheets 10.1 and 10.2, which asks them/her to identify supportive individuals and what type(s) of support each individual provides. Each participant should then play the role of home visitor and home visiting client. The home visitor should ask the client to report on his/her support network and how those individuals provide support. After completing the activity, have a large group discussion about the activity, being sure to emphasize the following points: 1) what did participant notice about his/her support network, 2) what did the home visitor notice about successes/challenges in getting the client to talk about his/her support network, and 3) what are anticipated challenges and opportunities to doing this activity with actual home visiting client, when they are asked to talk about their support network.</td>
<td>Activity: 2-3 person groups to practice activities/exercises. Group engagement: Large group discussion and reflection on contact with others module. Training manuals: Participant Manual: Worksheet 10.1 and 10.2. Field Guide: Session 10, Topics 1 &amp; 2.</td>
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<td>3:45 – 4:00</td>
<td>Tips for Keeping Mothers and Babies Skills Active; Course Review; Graduation (MB Session 12)</td>
<td>Session 12: Review main concepts: pleasant activities, thoughts, and contacts with others all can affect one's mood.</td>
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• We can make choices to have a healthier reality (both inner and outer), which can lead to a healthier mood
• Encourage client to keep Mothers and Babies workbook for future reference.
• Encourage client to continue using strategies that have been helpful and try out some of the skills she hasn’t tried yet.
• Emphasize that the Mothers and Babies skills are useful even as one’s baby gets older

4:00 – 4:30  Implementation and Supervision Recommendations
While they will not immediately be experts in MB Course delivery, by engaging in supervision during the process of implementing the MB Course for the first time participants will be able to become proficient in delivering the curriculum as well as tailoring the course to specific client needs.

Discuss next steps with the Florida Mothers and Babies project, specifically:
1) Each home visitor that is trained will be asked to implement Mothers and Babies with about 4-5 clients
2) Home visitors will receive supervision/technical assistance from the clinician/trainer to help address any questions related to MB content and MB implementation

4:30 – 5:00  Q & A
Open for questions from group

23  Presentation/lecture

Group engagement