

# Mothers and Babies Course Instructor's Manual Activities Module

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## ACTIVITIES MODULE

### Class #1: Introduction to the Mothers and Babies Course

#### CLASS OUTLINE

- I. Welcome & Purpose of the Course (20 min)
- II. Introductions (15 min)
- III. Class Guidelines (5 min)
- IV. New Material
  - a) The mother-baby relationship (5 min)
  - b) Stressors that affect the mother-baby relationship (5 minutes)
  - c) How the course can help you (5 min)
  - d) The 12 classes (5 min)
  - e) Video and reactions to video (35 min)
  - f) What kind of mother I want to be (10 min)
- V. Personal Project (10 min)
- VI. Feedback and Preview (5 min)

#### Goals for instructors:

- Establish rapport and motivate participants to come to the course.
- Present rationale and purpose of the course.
- Administer the CES-D (optional)
- Introduce the idea that we can improve our physical and emotional health by shaping our behaviors, thoughts, and social relationships.
- Go over class guidelines, including confidentiality.
- Discuss the mother-baby relationship (i.e., attachment and bonding).
- Give an overview of the 12 classes of the course.
- Teach participants to monitor their mood using the Quick Mood Scale.

Note: The New Materials Section contains several activities. Instructors may not be able to cover all of these activities in one session. Instructors are encouraged to decide a priori which activities are most relevant to their participant population and present those in each session.

#### Materials needed:

1. Participant manuals; instructors will create and include 2 calendars describing the days and times of the MB course)
2. Nametags
3. Pens, Dry erase board, or chalkboard to present material to class
4. Video: "My Parents, My Teachers" and brochures (see <http://www.elvalor.org/programs/mispadres.html>)
5. Copies of CES-D or other mood questionnaires (optional)
6. Evaluation/feedback forms (optional)

## I.A. WELCOME TO THE CLASS (10 MINUTES)—Session 1 of Each Module



### Overview

Begin by introducing yourself to the participants as they arrive and give each participant a nametag and a manual. When you are ready, welcome group members and provide a brief orientation to the class.



### Key Points

- ❑ Welcome participants to the class
- ❑ Reinforce their coming to the group
- ❑ Give a brief introduction of the course instructors and additional staff (e.g., camera person if the class is being filmed)
- ❑ Emphasize the reciprocal nature of the group; meaning, we learn from them, they learn from us
- ❑ Emphasize that they will be the experts of their own pregnancy and of their children, and we will contribute our professional knowledge. This may be especially important if none of the leaders have been parents.
- ❑ Provide very general rationale for course: to focus on the baby's arrival and how we can raise physically and emotionally healthy children.
- ❑ Be attentive to the participants' needs and remind them that they can excuse themselves at any time to use the restroom or if they are experiencing normal pregnancy symptoms (i.e., nausea).



### Information

From the beginning, group leaders should keep track of time, especially because participants will notice and follow leaders' expectations regarding keeping to the allotted time.

Open Group Option. At times new group members may be rotating into the class. When there is a class composed of "veteran" members and new group members, encourage the "veteran" members to share the purpose of the group with the new members and to talk about what they have learned thus far from the group. You will also want to let new members know that this is a rotating group and that there are "veteran" members.

To create a warm, welcoming atmosphere leaders may choose to provide small snacks (e.g., tea and cookies) at this and other meetings.

If the class is being taped, be prepared to discuss role of videotaping because some group members may feel uncomfortable being videotaped at first.



### Step by Step

**Step 1:** Introduce yourself to group members when they arrive. Give each group member a nametag and a manual.

**Step 2:** When enough group members have arrived, begin by giving a general overview to the course.

#### Suggested Wording

*We would like to welcome you to the Mothers and Babies Course. Today we will talk about the purpose of the course, introduce ourselves, and then begin to talk about how this course can help you. First, thank you for coming. We realize that you had to give up many things and change your schedules to come. The fact that you are here shows that you are*

*committed to becoming the best mother you can be for your baby. The manuals that we have given you are for you to keep. That way, you will be able to review things later when you most need to remember them. They contain handouts for each class.*

*In the front, you will find two copies of a calendar. One copy is for you to keep at home. The other one is for your manual, so we can mark down important group activities each week.*

Refer to the calendar.

*As you can see, we will meet once a week for the next 12 weeks. If there are days when you cannot make these meetings, either because you have another appointment or are sick, please let us know as soon as you can. In other groups that we have led, we have found that group members worry about each other when they're not there.*

**Step 3:** Put phone numbers on the board where each of the group leaders can be reached (or have them prewritten in their manuals). Also, if you have them, hand out business cards.

**Step 4:** Elicit and answer questions.

Suggested Wording

*Are there any questions about this or anything else we've talked about so far?*

**STEP 5: (OPTIONAL)** Introduce and administer the CES-D to group members

Suggested Wording

*Before we begin, we would like to have you fill out a brief questionnaire about how you have been feeling during the past week.*

Answer any questions and collect and score questionnaires at the end.

## I.B. PURPOSE OF THE COURSE (10 MINUTES)—Session 1 of Each Module



### Overview

Begin a discussion about the class content and connect it to the participants' desires and goals.



### Key Points

Discuss how the course will focus on the following topics:

- Relevant information about pregnancy and infant/child development
- Ways to manage life stress, improve mood, and avoid mood problems
- Healthy interactions help create a healthy reality for the mother and her baby
- Healthy, positive ways that we can think about babies and interact with them
- The group as support



### Participant Manual

p. 1.2



### Rationale

The modal (most common) number of therapy sessions that people attend is one. It is key in the first session to motivate people to want to attend by helping them to see how this class will be useful and fun for them.



### Information

We underscore how the class will be useful by repeating the goal of the course: To teach mothers-to-be how mood works, so they can teach their own children. But you can't teach what you don't know well. So, the mothers need to learn how their own mood works and how to learn to increase positive moods and decrease negative moods. Doing this will also help them enjoy becoming a mother and being the kind of mother they want to be.

It is important to emphasize that the women in the course will learn healthy positive ways to think about and interact with their babies so that they can help their babies develop in an emotionally and physically healthy manner. Women may be entering the course not to help themselves but to be good mothers for their children and help them develop normally. This is the "hook" for many group members.

One of the course goals is to prevent serious depression. However, never feeling down or depressed is not a realistic goal. It is as normal to have a sad reaction to negative events as it is to feel pain when we hit our hand on something. The goal of the course is to reduce 1) the frequency, 2) the duration, and 3) the intensity of depressed moods, that is "How often we get depressed," "How long our depressed moods last," and "How deeply our depressed mood hurts us."

Women enrolled in the course may also be participating in prenatal classes. Emphasize that even though the *Mothers and Babies Course* is not intended to replace a prenatal class, the class may be a place where they can share ideas and suggestions on how to make their pregnancy enjoyable and help each other prepare for the birth.

It is important to emphasize that the materials for this course were developed by researchers with expertise in the areas of attachment and mood management as this legitimizes the materials.



### Step by Step

Step 1: Go over the purpose of the course.

#### Suggested Wording

*I'd like to begin talking about the purpose of the course. As the name of the course suggests, all of you who are here are about to become mothers. During your pregnancy, you attend prenatal care visits to take care of your physical health and your babies' physical health. This is wonderful!*

*We also believe that it is important to take care of your emotional health, during and after pregnancy because this will affect both you and your baby. We know that parents are the most important people in babies' lives. You are their first teachers. You teach your children not only how to walk, talk, and eat, but also how to be healthy emotionally and how to relate to other people. This class was developed to support you as you become a mother and to share ways that we can be emotionally healthy and that we can pass on these skills to our children.*

*We will be looking not only at how we can help babies but how we can help ourselves. Mothers are the foundation of the family, and the foundation needs to be strong so it can support the family. If the foundation crumbles, the family, in a way, also crumbles. During the class we will talk about ways to build a strong foundation and we will provide support around doing so.*

*During the class we will talk about becoming a mother, how you can be the kind of mother you want to be, and how you can raise healthy babies. The class will focus on you, your baby, and on your relationship. We will all share what we know about raising babies to be physically and emotionally healthy, and we hope that we will all learn from each other. The course contains materials that are based on research and years of working with mothers and babies. Other women have found it to be helpful, and we hope you will too.*

Step 2: Elicit participants' reactions to the purpose.

#### Suggested Wording

*Before continuing, I want to check and see what you think about this. Is this the type of course that you think might be helpful to you?*

*Support and listen to participants as they talk. Reinforce comments regarding the utility of the class. Be responsive and sensitive to doubts participants may have regarding the utility of the class.*



### Alternative Exercise

Ask the mothers (first time or again) what they would like to learn that they think would help them and their babies, including what they might learn that might help them raise emotionally healthy babies. After you have written down their answers, discuss how the Mothers and Babies Course will address these needs.

#### Suggested Wording

*As you all become mothers, what kinds of things do you think you would like to learn? In*

*other words, babies don't come with manuals, but if they did, what would you hope the manual would teach you?*

Elicit participants' responses. If they don't give responses that match with the course content, you may choose to ask the following question:

*Do you think maybe it would be useful if the manual included some things about how to help babies be emotionally healthy? If so, what do you think it might include on this topic?*

At the end, discuss how the course will address these topics.

## II. GROUP INTRODUCTIONS (15 MINUTES)—Session 1 of Each Module



### Overview

Help everyone begin to get to know each other and feel comfortable talking in the group and gather relevant information about the participants' backgrounds.



### Key Points

- ❑ Instructors should introduce themselves first (having instructors go first provides a model for the group introductions).
- ❑ If group leaders are not pregnant, they may instead share their interest and previous experience working with pregnant women and children or relevant and appropriate personal information.
- ❑ Each group member should introduce herself (refer participants to page #3 of their manuals).
- ❑ Conclude this section by emphasizing common characteristics among participants (e.g., how many of them are first time mothers)



### Participant Manual

p. 1.3



### Rationale

If group members feel heard or are able to establish a connection with other group members and/or the group leaders, they are more likely to return next week.



### Information

Leaders should look for opportunities to increase rapport. This is everyone's first chance to speak in the class and their experience (e.g., how you and the rest of the group responds) may set the stage for future participation. Rogerian interviewing techniques are most useful for this purpose, including:

- paraphrasing (repeating what the participant said in your own words, to ensure you understood what she meant)
- reflection of feelings (saying what you think the participant felt during the situation she described, to ensure you understood what she felt)
- summarizing (saying in a nutshell the main point of a participant's contribution, to ensure that you and the group get the point she wanted to make).

These techniques should be done in the context of empathy, genuineness, and unconditional positive regard, as Carl Rogers intended.

Group cohesion can also be increased via comments that highlight areas of commonality between the participants and the instructors and among the participants.

Some people may have difficulty speaking. You can handle this by acknowledging that it is often hard to talk in a group of people you don't know and by giving them permission to not talk if they don't want to. Let them know that we generally find it easier for people to talk as they get to know each other better and that we respect individual differences with regard to their desire to self disclose.

Group leaders who do not have children may want to highlight their experience with

children, both professionally (through research and clinical work) and personally (having contact with children of family or friends). Doing so may help build rapport with group members and may make the information they provide seem more valid.

Some participants may have trauma histories and may be unable to contain their affect when invited to speak. When a group member begins to talk about her trauma history, it is important to be sensitive to her feelings and to the feelings of other group members. The individual speaking needs to feel heard and supported emotionally; however, other group members may be overwhelmed by her story. After letting her speak briefly, you may choose to do some of the following things:

- Empathize with how hard the experience has been.
- Focus on how wonderful it is that she is coming to the group, and how you hope that this group helps her to have a better understanding of how to manage her life in a healthier way.
- Let her know that as we get to know each other better there will be more time to share these things.
- Acknowledge that other group members may have also experienced difficult events.
- Suggest that you may set up a separate meeting to talk with them more about what they are bringing up and then, perhaps, in that meeting determine if individual therapy is warranted.
- Remind the group member that she is safe in this environment.



### Step by Step

**Step 1: Let the participants know that we would like to begin to get to know each other better.** It is often good for a group leader to introduce him/herself first, using the outline provided in the participant manual so that the group leader serves as a model.

#### Suggested Wording

*We would like to begin to get to know each other. Please turn to page 3 in your books. There are a few questions for you to answer that will help all of us get to know each other better. We will all have to remember to try to keep our comments brief so that everyone will get some time to share. I will go first.*  
Introduce yourself.

**Step 2: After the group leader has introduced him/herself, go around and ask other members to introduce themselves.** Let them know how much time each person has (which will depend on the size of the group).

**Step 3: After all the introductions are done, group leaders should make some summary comments regarding similarities and differences among people (e.g., cultural background, hobbies, importance of family, first time pregnancy).**



### Alternative Exercises

Depending on the characteristics of the group (i.e., size, how comfortable the women are speaking), you may choose to have the women break up into pairs, introduce themselves, and then introduce their partners to the group.

#### Suggested Wording

*In a little while, we will begin talking more about the class and what you will be learning but first let's get into pairs and introduce ourselves to our partners. If you turn to page 3 in your books, we have written down some of the things you might tell your partner when you introduce yourself. Later, you will each introduce your partner to the group.*

Make sure to monitor the time to ensure that both people have a chance to speak. After they have introduced themselves to each other, have them return to the group and introduce their partner to the group. After everyone has introduced their partner, a few remarks about the similarities among the participants, as well as the variety of backgrounds might be indicated.

### III. CLASS GUIDELINES (5 MINUTES)—Session 1 of Each Module



#### Overview

Go over the class guidelines and discuss confidentiality in order to create an environment where everyone feels safe and comfortable talking.



#### Key Points

- Give participants your phone numbers or the clinic number, so they can call if they cannot make it.
- Let participants know that leaders also need to respect the group rules.
- Make sure you go over confidentiality discussing that as group leaders you are not able to maintain confidentiality if you hear about any of the following:
  - Child abuse
  - Elder abuse (abuse or neglect of a dependant adult older than 65 yrs. of age)
  - Abuse of disabled person
  - If a participant is going to hurt themselves or anyone else in the future
  - Stress that the rationale for this rule is to maintain safety.
- Let group members come up with their own rules if they wish.



#### Participant Manual

p. 1.4



#### Rationale

The guidelines set the stage for the class. They help create a safe, consistent environment that will maximize people's ability to benefit from the course.

Having participants actively create guidelines gives them ownership of the class and may increase their motivation to participate.



#### Information

Class guidelines are the rules of the class. Some women may react negatively when the word "rules" is used, especially those who did not have positive experiences while going to school. This is one of the reasons "class rules" are presented as "class guidelines."

It is important to convey that these guidelines are intended to make the course more useful for everyone. For example, coming on time helps everyone make use of the full two-hour period, so the group doesn't have to rush through the material, and so they have more time to talk, ask questions, and give each other advice. Confidentiality and respecting each other's point of view is intended to make the course an island of safety and support during the week, a place where they know they will not be attacked or criticized, and where everyone is on their side.

It is important to communicate to class participants that we welcome them to share these materials with their spouses, family members, and friends if they wish. However, the content of what we discuss in the course remains in the room to protect the confidentiality of each class participant and to make everyone feel safe in sharing their experiences.

It is a good idea to distribute your business cards to the class members as a way to facilitate communication between participants and instructors.

Some participants, particularly those who are recent undocumented U.S. immigrants, may worry where the information they share in group goes, particularly if the sessions are being video or audiotaped. You can reduce these fears by addressing these issues when you talk about confidentiality.



### Step by Step

**Step 1: Orient group members to the task and begin discussing the group rules**

#### Suggested Wording

*We want this class to be a place where you feel safe and comfortable talking. To do this, we have often found that it is useful to have some group guidelines. If you turn to page 4 in your books, there are some guidelines that group members have found useful in the past. Let's go over them.*

If you choose, you can have group members read the guidelines.

**Step 2: Highlight key aspects or provide the rationale for the guidelines.** We have provided the key aspects for some of the guidelines below. You may choose not to cover all of them.

#### Suggested Wording

*Try to come to every class - In each class, we will talk about a new topic related to improving mood and being a mother. We hope that each week you will learn something new that will be helpful to you and to your baby. I know that each week, I will learn something new by being with you.*

*Come on time - We understand that it is often hard to get to class because of transportation problems or other things, but we only have a certain amount of time together, and we really want to get the most out of it. Starting on time with everyone here will help us do that.*

Confidentiality - see Step 3

*Complete your personal project for the week - Each week we will be asking you to do a personal project. Hopefully it will be something you want to do to see if what you learn in class can help you create positive changes in your lives. When you complete the project, you will be able to tell the group how it went and get useful feedback.*

*Tell us if you are unhappy with the classes - We really want this to be a good and helpful experience for everyone. Let us know how we can help you. We would be very sad if you left because of a problem, and we didn't have a chance to try to make it better for you.*

*You don't have to do anything you don't want to do - In class, we will be asking you to participate in exercises. If anything makes you feel uncomfortable or if you simply don't want to do something, that is your right.*

*Share only what you wish to share and remember that you have the right to keep some things private - As we talk in class, we may all find that there are some things that we are happy talking about and other things we would prefer to keep to ourselves or talk about only with people we are very close to.*

**Step 3: Cover confidentiality in full detail.** This confidentiality guideline must be covered.  
Suggested Wording

*Respect confidentiality - In order for people to feel safe talking in the group, it is important that we all agree that what is said in the group stays in the group. This means that when people talk about themselves in the group, we do not share what they have said with others. You can, of course, talk to other people about what you are learning or what you have said in the group.*

Pause and verify that all group members agree to this guideline.

*I also want to let you know that there are some situations when group leaders cannot maintain confidentiality. The first is if we hear that a child has been hurt by an adult in any way that was not an accident, that a child has been abused or neglected. The second is if we hear that someone is in imminent danger of hurting themselves or someone else. The third is if we hear that someone older than 65 or someone who is disabled or dependent is being abused, not taken care of, or taken advantage of financially.*

*In each of these situations, class leaders would need to break confidentiality in order to protect safety.*

You can let them know that in general, your policy would be to discuss your concerns with them and involve them in the reporting process if you determined a report were necessary and they were willing to participate in making the report. In other words, you won't be doing things behind their backs and once they leave class, they don't have to worry that you will be breaking their confidence.

*I also want to let you know that group leaders may be consulting with other members of the Mothers and Babies team about the class and ways that we can help each of you. However, all the Mothers and Babies team members will also maintain confidentiality.*

Pause and elicit any questions about this guideline.

**Step 4: Answer any questions from participants.**

**Step 5: Ask participants class members if they have any guidelines they would like to add to the list.** If so, go over them and add them.



#### Alternative Exercises

Depending on the characteristics of the group (e.g., how talkative they are) you may choose to have the group come up with guidelines on their own before covering the guidelines in the manual. Make sure that confidentiality is included and that you have covered all the key points regarding times when you would need to break confidentiality.

#### Suggested Wording

*We want this class to be a place where you feel safe and comfortable talking. To do this, we have often found that it is useful to have some guidelines. What are some guidelines that would make you feel comfortable talking in class?*

Write their guidelines on the board and discuss each one. At the end, you can have group members write down their guidelines or you can indicate that the majority of these guidelines are covered on page 4 in their books.

## IV.A. New Material: THE MOTHER-BABY RELATIONSHIP (5 MINUTES)



### Overview

Begin a group discussion about the mother-baby relationship, focusing on what each partner brings to and needs from the relationship. Discuss the importance of the mother-baby bond (the attachment relationship).



### Key Points

- ❑ Mothers are responsible for most of their babies needs (food, clothing, love, stimulation).
- ❑ Mothers teach children about the world: how to behave, how to think, how to read, how to relate to others, how to overcome life's obstacles etc.
- ❑ Mothers also have their own needs (sleep, spend time with other adults, have time to relax, adjust to having given birth and becoming a mother).
- ❑ The key is to find a balance between the mother's and the baby's needs.
- ❑ Babies also give back to their mothers by providing them with love and the chance to have a very special relationship.
- ❑ Focus on the importance of the attachment relationship for both parent and child. (This relationship sets the stage for a lifetime of interactions with each other and with others).
- ❑ Encourage participants to begin thinking about the type of relationship they would like to have with their baby (Note: They need not discuss it in detail now as this is covered in depth in section titled "What kind of mother do I want to be.").



### Participant Manual

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### Rationale

Emphasizing the bi-directional nature of the mother-baby relationship helps the women think about how both participants in this relationship are individuals with their own needs. Recognizing the importance of the mother-baby relationship may increase the women's desire to attend the course, so they can learn new ways to strengthen the relationship.



### Information

It may be helpful to ask mothers who already have a child to share their experience because they may be able to offer a more realistic view of the mother-newborn relationship. This also promotes peer participation rather than the standard instructor-class format and may provide a more meaningful experience for the women.

It may be helpful to emphasize that the relationship that a mother has with her child is a very unique and special bond that only the two of them will experience together throughout the child's development. This class will help the women form ideas and practice ways they would like to mold their relationship with their child once s/he is born. The best time to do this is during pregnancy.



## Step by Step

**Step 1: Elicit participants' thoughts about the mother-baby relationship.**

### Suggested Wording

*Let's take a look at the picture on page 5 in your book. On this page, we see a mother holding her baby. The mother and baby share a very special relationship. What are your thoughts about this relationship?*

Other questions to elicit discussion include:

- *What are all the things the mother does for the baby?*
- *How does what the baby do affect the mother?*
- *How does what the mother do affect the baby?*
- *Why is the mother-baby relationship so important?*

Use active listening skills to summarize what participants say and help them feel heard. You may choose to write down some key elements of what participants say on the board.

**Step 2: Highlight the importance of the mother-baby relationship.**

### Suggested Wording

*The mother-baby relationship is unique. The relationship a child develops with his or her mother and the feelings that mothers have toward their children are one of the strongest bonds between human beings. This course is intended to help mothers-to-be to develop strong and healthy bonds with their new babies. Later today we will spend time talking about how you want the bond with your baby to develop.*

**Step 3: Highlight the importance of the mother's emotional health.**

### Suggested Wording

*We can see from this picture that the mother needs to be strong, both physically and emotionally. Physically we can see that she carries the child, but she also carries the child emotionally, which means that her emotional health is just as important as her physical health. During this course we will talk about ways to improve our emotional health.*

## IV.B. STRESSORS THAT CAN AFFECT THE MOTHER-BABY RELATIONSHIP (5 MINUTES)



### Overview

Discuss how life stressors affect us and can affect the mother-baby relationship. Highlight that identifying the stressors and understanding how they affect women and the mother-baby relationship is the first step in developing a plan to manage stress and avoid problems.



### Key Points

- Highlight that life stressors affect how we feel emotionally and physically
- Discuss how specific stressors (e.g., those shown on page #6) might affect:
  - the mother's emotional health and physical well-being
  - the mother-baby relationship
  - the baby
- Identify common life stressors following birth
- *Identify stressors in their lives?*



### Participant Manual

p. 1.6



### Rationale

This program was written to help people cope with real life problems. The heart of the course is a healthy management of reality approach. To build a healthy reality for ourselves and our children, we first have to face reality. This is why we need to learn to recognize the stressors that affect us.

This activity also allows group leaders to assess the types of stressors that individual group members are facing. Group leaders may want to take notes on the types of stressors each participant endorses. This will help leaders develop ecologically valid interventions that help participants manage their reality.



### Information

Prior to talking about how stress can impact the mother-baby relationship, we recommend discussing the impact of stress on our bodies, behaviors, and mood.

Women may get overwhelmed discussing every example on page #6. Pick one stressor that can potentially affect the women and ask for their physical and emotional reactions. There is not enough time to cover all the stressors.

If the women are unable to come up with reactions, give an example that most of the women can relate to, such as what happens when one watches a scary movie. It is helpful to write the women's reactions on the board so you can refer back to them when discussing this section.

When group members include immigrant women, leaders should be aware that immigrant status creates another level of stress (i.e., language problems, social support issues such as lack of extended families, and environmental stressors such as neighborhood violence).

Also make note of the women that endorse domestic violence or substance use in the home

or community setting as stressful, as managing these life issues will be part of shaping their reality. You may want to have a list of possible referrals to share with them.

The father of the baby or a family member may serve as a source of stress. It is important to make note of this. This area will be heavily focused upon in the People's Module (last 4 sessions).



### Step by Step

**Step 1: Begin a discussion about how stress affects our physical and emotional health.**

#### Suggested Wording

We've been talking about the mother-baby relationship, but sometimes things in our lives make it difficult to focus on that relationship. Let's look at page 6 in our books and think about how these different stressors might affect how we feel.

Select one stressor and talk as a group about how it would affect the mother, physically and emotionally.

**Step 2: Discuss how the stressor would affect the mother-baby relationship and the baby.**

#### Suggested Wording

*How do you think feeling (tired, angry, sad, in pain) would affect the mother-baby relationship and the baby?*

**Step 3: Help the women identify stressors in their lives.**

As a group, think about all the different stressors the women are experiencing as they become new mothers. Write them down on the board. Women can also identify stressors unique to their lives. They can choose to share them or they can write them in their books in the blank boxes.

#### Suggested Wording

- *What stressors are in your life?*
- *Are there other stressors that might affect the mother-baby relationship that aren't on page 6?*



### Alternative Exercises

#### Interactive Role Play

**Step 1: Select one group member to play the role of the mother.** Alternately, you can have all the members of the group do this exercise.

**Step 2: Give the participant something to carry that represents the baby** (e.g., a doll, a heavy book).

**Step 3: Ask her to interact with the "baby."** Ask her how she feels about and thinks about the baby. Ask her what kinds of things she thinks she might like to do with the baby.

**Step 4: Introduce various stressors.** You can have group members identify the stressors they would like to "carry". You can either have her imagine that she is experiencing the stressor or you can give her heavy items (like books or more cumbersome irregularly shaped items) that would represent the stressors.

**Step 5: As you add on the stressors, ask her how she feels, physically and emotionally.** Ask her how she thinks and feels about her "baby." Ask her about the types of things she would like to do with her "baby." Talk as a group about how the stressors are affecting the mother, the mother-baby relationship, and the baby.

### Facilitating the Link Between Stress and Health

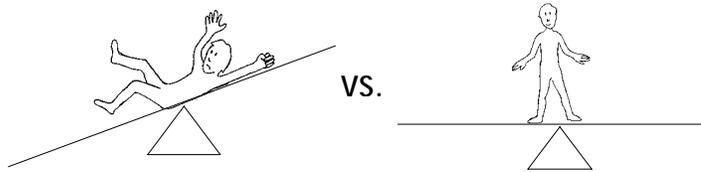
**Step 1:** Ask the women in the group about what they first notice when they are stressed. As they respond, write their responses on the board. Responses will typically fall into 3 areas: behavioral reactions (e.g., become socially isolated), physiological reactions (e.g., headaches), and emotional reactions (e.g., anger).

**Step 2:** As you write their responses, under these 3 categories, you may begin asking the women how these are related to one's emotional and physical health.

**Step 3:** Finally, begin asking the women how babies communicate that they are stressed from a very early age (e.g., crying if hungry or needs his/her diaper changed) to early childhood (e.g., acting out).

Highlight how important it is that they be able to recognize how stress affects them and learn how to manage it because their children are likely to experience stress and will look to them for guidance. The only way to teach someone, such as a child, ways to manage stress is for the teacher, in this case the mother, to learn them and try them out herself. The best time to do this is during pregnancy.

#### IV.C. HOW THE MOTHERS AND BABIES COURSE CAN HELP YOU (5 min)—Session 1 of Each Module



##### Overview

Introduce a cognitive behavioral model and explain to participants that by making changes in their thoughts, behaviors, and contacts with others, they can manage life stress and improve their mood.



##### Key Points

- Instill hope that there are good ways to manage stress and that by attending the Mothers and Babies Course, they will learn helpful ways to manage stress.
- Emphasize that mood is connected to our ability to reach goals, our self-esteem, the types of relationships we form, and ultimately to the quality of our lives.
- Discuss how by making changes in the way we behave, think and the support we receive from others we can manage stress and feel better
- Help participants understand that once they learn these skills and recognize the skills they have already developed, they can pass them on to their children.



##### Participant Manual

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##### Rationale

This section can help participants understand that stress can produce imbalance in our lives, especially if we don't have the necessary tools (covered in the Mothers and Babies Course) to deal with it. We hope to help participants see that there are aspects of their reality that they can manage and that by doing so, they will feel better in spite of stressors by creating options and alternatives of how to manage them.



##### Information

All life involves some stress. Being a mother of a young child is a particularly stressful stage of life, although it can also be a particularly happy and fulfilling part of life. The Mothers and Babies Course is intended to help mothers experience less stress and as much happiness and fulfillment as is possible given their circumstances. A basic assumption of the course is that even if their circumstances are difficult (indeed, especially if their circumstances are difficult), shaping their personal reality is essential to gain a sense of self-efficacy and to prevent developing the helplessness and hopelessness of depression.



##### Step by Step

**Step 1: Instill hope by emphasizing that it is possible to manage stress.**

##### Suggested Wording

*During the exercise that we just did, we saw how stressors can affect your emotional and physical health, your relationship with your baby, and ultimately your baby's emotional and physical well being, but we can learn to manage these stressors and minimize the effect they have on us and on our families. This is one of the primary reasons for this class. Over the years, mental health providers have learned a lot about helping people to manage their moods, and they have developed a number of skills called mood regulation*

*skills. During this class we will be teaching you these skills and helping you to use them in your daily lives. We will also be talking about how you can pass on these skills to your children.*

**Step 2: Present a metaphor or visual picture to help people understand that it is possible to balance stress with other factors.**

Suggested Wording

*If you look at page 7 in your books, you will see how stress can affect us. What do you think about this picture?*

Elicit participants' reactions.

*Now what do you think about the picture on the bottom of the page?*

Elicit participants' reactions.

**Step 3: Highlight the idea that when we have stress it is even more important to think of ways to balance that stress, and that during this course we will talk about ways to balance stress.**



Alternative Exercises

We have found the use of metaphors very helpful when presenting ideas. You might draw a scale on the board or bring an actual scale to class where one side represents stress and the opposite side represents ways to counterbalance stress. Have participants discuss ways to tip the balance.

#### IV.D. THE 12 CLASSES OF THE MOTHERS AND BABIES COURSE (5 MINUTES)—Session 1 of Each Module



##### Overview

Provide an overview of the Mothers and Babies Course and its three parts (modules).



##### Key Points

- The course is composed of 12 classes.
- The course is divided into three parts/modules: activities, thoughts and contacts with others, each of which can help us shape our mood.
- Four classes will be devoted to each module.
- Because activities, thoughts and contacts with others are interrelated, we will discuss all of them during the course, but we will focus on one for each module.
- Relevant information about pregnancy, motherhood and infant/child development are incorporated throughout the course.



##### Participant Manual

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##### Information

To make this section relatively brief, we recommend you focus on the three parts of the course (activities, thoughts and people) rather than each class.



##### Step by Step

**Step 1: Go over the basic structure of the class.**

##### Suggested Wording

*As we mentioned before, the Course has 12 classes. These classes are broken down into three parts. At the beginning of each part, new members may join the group. In each part, we talk about managing stress by making changes in a different area.*

*The first area is our activities, or what we do. We will be talking about how doing pleasant activities gives us the emotional strength to deal with stressful life events. What you do shapes your lives and will shape your babies' lives. We will talk about what we can do to reduce life stress, how to continue our lives and reach our goals in spite of stressors, and how to engage babies in activities that will help them develop. We will begin focusing on this area in the next session.*

*The next area is our thoughts. We will be looking at how our reactions, or the way we think, affect us. We will talk about ways of thinking that are flexible, balanced, and healthy. Thinking in this way will help us feel better and reach our goals. We will also talk about how you can help your children think in ways that will help them get ahead in life.*

*Finally, we will be looking at our relationships with others. We will talk about the importance of social support to handle stress, ways to increase our social support, and ways to decrease conflict with others. We will also talk about ways to build a good healthy relationship with your children and about the types of support you may want*

*around becoming a mother.*

*During the classes, we will be asking you how your pregnancy is going, and we will talk about managing mood and stressful life events during pregnancy. We will also be giving you information about child development, and we will talk about ways you can help your baby be healthy, both physically and emotionally.*

**Step 2: Elicit participants' reactions to the class outline and answer any questions they may have.**

#### IV.E. VIDEO: "My Parents, My Teachers" AND DISCUSSION OF VIDEO (Video length approximately 20 minutes: 35 minutes total)



##### Overview

Present the idea that parents are the first teachers of their children, highlight the importance of the first 3 years of life, and provide concrete examples of how children learn and how parents can become actively involved in their learning process. It is important to keep track of time when you reach this section. You want to have at least 15 to 20 minutes, after watching the video, for discussion.



##### Key Points

- The first three years are critical to a child's development as they affect future learning.
- Babies learn through play, communication, reading, and music.
- Sometimes these simple activities seem basic, but they are the foundation for healthy development.
- The best way to help children learn is to make it fun.
- Parents are not only teaching their baby skills for school but skills for life, such as:
  - how to behave in relationships
  - how to regulate their own emotions
  - how they view themselves (i.e., as loved, confident, competent)
- Teaching a baby something new makes their neurons grow and make connections.
- Point out the "Start now" brochures and let participants know that the brochure has a chart that describes different things that you can do with your baby as your baby grows up. Suggest that participants read through the chart as an optional personal project.



##### Participant Manual

p. 1.9



##### Rationale

Emphasizing the importance of the first 3 years of life in terms of cognitive, social, emotional, and biological development helps mothers recognize how important they are to their child's development and may motivate them to make positive changes in their and their babies' lives.



##### Information

Participants who have older children may be hearing for the first time about the importance of the first three years of a child's life. They may express feelings of guilt or disappointment in themselves about not raising their children in an ideal manner, especially if they feel they were not able to provide an environment that fostered early learning. You can handle this by letting them know that even when situations are less than ideal, children continue to develop and learn from new experiences and interactions in their lives. So it is never too late. Most of us were raised in less than ideal circumstances, and we were not damaged by this. However, now that there is more scientific knowledge about how human beings develop, it makes sense to use that knowledge to benefit children from now on.

Participants may ask about how other people in the home may play a role in the child's development (e.g., father of baby, grandmother, child's sibling). You can help them think about how and to what extent they would like others to be involved in teaching the baby. For example, one class member spoke of practicing the relaxation exercises with her 7-year

old because that way they would both learn how to soothe the baby.

Obtaining the video: The video was developed by El Valor, an early childhood public awareness campaign created for Latino parents with infants and toddlers. The videotape has Spanish and English versions of the same material, with the same actors. The actors are all Latino. The Spanish version is the first version on the tape. New copies of the video can be requested by writing: El Valor, 1850 West 21<sup>st</sup> Street, Chicago, IL 60608 or calling (312) 666-4511, or see: <http://www.elvalor.org/programs/mispadres.html>



### Step by Step

#### **Step 1: Show the video: "Mis Padres Mis Maestros."**

##### Suggested Wording

We'd like to show you a video called "Parents as First Teachers" that talks about the changes children make in the first three years of life and emphasizes how important you are as your children's first teachers.

#### **Step 2: Elicit participants' reactions to the video.**

##### Suggested Wording

- *What did you hear that was new to you?*
- *What did you already know?*
- *What did you like the most?*
- *What do you remember the most?*
- *What do you think about the idea that the human brain develops most during the first three years of life? What does this mean to you?*

Highlight the following points. These points are tied to the notes about the video that are on page 9 of the participant manual.

- The first 3 years are among the most important because this is when children learn to walk, to talk, to think, to love you, and to feel good about themselves.
- Learning all of this means their brain is developing connections at an amazing rate. We think learning takes place when the connections between neurons become strong.
- Children learn at different speeds and may need different environments to help them maximize their learning ability. For example, some children may learn better by doing (running around and seeing the world) whereas other children may learn by quietly sitting and watching.
- Children's work is to play. They just need the space and encouragement. And they really need to learn that playing and having fun is a good thing. When you play a lot with them, they will see you as someone who is fun. They will not feel they need to hide from you to have fun. And when you have to discipline them, it will be easier for them to accept discipline because they won't see you as someone who just wants them to stop having fun. They will know you like to have fun, too.
- When we say every mother is capable of giving what her child needs, we mean that every mother can give her child love, attention, and encouragement.

**Step 3: Point out the "Empieza ya" or "Start Now" brochures and encourage the participants to take one home to read.** Let the participants know the brochure has a chart that describes different things that you can do with your baby as your baby grows up.



### Alternative Exercises

If you do not have the “Mis Padres Mis Maestros” videotape, we recommend using another videotape that covers similar material. Alternately, you can do the following activity with the group.

**Step 1: Brainstorm as a group all the things babies learn in the first 3 years of life and write participants answers on the board.**

Sample answers are listed below:

- Walk
- Talk
- Soothe themselves (regulate emotions, how to calm down when they’re upset)
- About relationships (by using their relationship with their parents as a model)
- Eat by themselves
- Figure out how things work (by putting them in their mouths, using them)

**Step 2: Highlight that babies are learning how to think, to move, and to relate to others and that while they are doing this, their brains are actually growing and strengthening and building important connections.** For example, the first time the baby is held by his/her mother, he/she will learn what the mother’s embrace feels like.

**Step 3: Have parents discuss how babies learn all these things and highlight the importance of parents as teachers and role models.**

#### IV.F. Activity: WHAT KIND OF MOTHER DO I WANT TO BE? (10 min)



##### Overview

Begin a discussion about the type of mother the participants would like to be for this child and for their other children, if participants have other children. (You can restate some of the things that group members said during the group introductions.)



##### Key Points

- Encourage participants to talk about the type of mother they would like to be.
- Discuss the helpful things their parents, family members or other parents did that they may want to repeat with their own children and the things they would like to avoid doing.
- Summarize what group members have talked about.
- Highlight the following:
  - There is no one perfect way to be.
  - We will not always be able to do what we think is right.
- Emphasize that during the class we will talk about healthy, positive ways that we can think about and interact with babies.



##### Participant Manual

p. 1.10



##### Rationale

To help participants begin to think about how they would like to shape their relationship with their child and to remind them that we are all learning all the time, and that we can choose what we learn and what we teach our children.



##### Information

Some women may have experienced difficulties in their childhoods (e.g., victims of child abuse, neglect, abandonment, etc.). You can also use this exercise to empower the women by making them realize that in spite of their childhoods they do have some control of how their children will be treated and cared for. Sometimes, having had difficult experiences make us even more determined to make sure that our children do not have the same experience. This is certainly preferable to assuming that our children's lives will have to be hard because ours were.

If a woman does not feel that she has a good idea of the way to be a good mother, you can acknowledge that life has been very difficult for her and state that you see that she is looking for support and for knowledge by coming to the course and that is one of the ways that she is helping her baby.

There may be single mothers in the group. Acknowledge that playing the role of both parents can be difficult but can and is being done by many women. Reassure the women that there are resources available (e.g., parenting groups, friends, relatives, church) to help them in their role as a mother. Remind them, too, that having a husband or partner is no guarantee that the child will be well treated.



## Step by Step

Step 1: Engage participants in a discussion about the type of mother they would like to be.

### Suggested Wording

*One of the primary goals of this class is to help you to become the kind of mother you want to be. Many people say that that they really want to be a “good mother.” Let’s look at what this might mean for you. What is a “good mother”?*

Use the following questions as needed.

### Suggested Wording

- *What does a good mother do?*
- *How does she interact with her child?*
- *How does she think about her child?*
- *What would she not do?*

Step 2: Listen actively and responsively to what participants say to make sure they feel that they are heard. One way of demonstrating this is by writing the women’s responses to each question on the board.

Step 3: Talk about how people, in general, learned to be a mother.

Step 4: Summarize what people said. You can also include information participants shared earlier in the group.

### Suggested Wording

*From talking together, it seems that we all learned most of what we know from our parents or other key people in our lives. Not only did we learn about being a parent from them, but we also learned the language we use every day, to eat most of the things we eat right now, and the way we usually interact with others.*

Step 5: Emphasize our ability to shape the way we are with our children, and highlight that even though we will never be “perfect,” we can make positive changes that will really help our children and our relationship with our children.

### Suggested Wording

*As we grow older, we see that there are other ways to talk, eat, and treat others, and we can choose to change the way we do these things. This course is intended to help you really think about and decide how you want to raise your baby and what you want to teach your baby.*

*As you become a mother, you can look back and pick and choose those things that you most want to pass on to your child from your parents and your culture(s) , and what you want to avoid passing on or even protect your baby from.*



## Alternative Exercises

### Imagery Exercise

Help people imagine the type of mother they would like to be by using the following exercise. Then help them talk about where they think these ideas came from and how they have the ability to shape this vision of themselves and make what they want come true.

### Suggested Wording

*I’d like you to take a moment and think about the kind of mother you would like to be. Really imagine what you would be like if you could be what you consider to be a “good mother.” If you like, you can close your eyes. . . .Imagine the kind of things you might do.*

*. . . How would things be with your baby? . . . . .How would you think about your baby?  
. . . . What kinds of things would you not do?*

## V. PERSONAL PROJECT (10 min)



### Overview

Show participants how to track their mood using the Quick Mood Scale and highlight the importance of the personal project.



### Key Points

- Explain the Quick Mood Scale and have participants rate their mood for today.
- Do a practice week on the board so people get a chance to see how it works. You can ask for a volunteer or make up a mood scale.
- Emphasize the following information
  - People should use the whole range, not just 1, 5, or 9.
  - They should do it each day and not all at once at the end of the week. We often find that it is easiest to keep it by your bed in order to remind you to complete the record before going to bed.
  - It will feel more natural as they practice it. (There will be days when it will be hard to decide on an average for their mood. They should do the best they can.)
  - There is no right answer. Only they can determine how they have felt each day.
  - Each person is different.
- Let participants know that you will be asking them to track their mood using the Quick Mood Scale over the next week and that in future classes you will be looking at how making changes in what they do, how they think, and their contacts with others affects their mood.
- Discuss the importance of the personal project and go over the project for this week. (Quick mood scale and discussing what they learned in class today with a friend or family member).



### Participant Manual

p. 1.11



### Rationale

To learn to manage their mood, participants need to learn to recognize their moods. They need to learn that their mood fluctuates from moment to moment, hour to hour, and day to day. The Quick Mood Scale can give them a glimpse of this. Once the fact that mood fluctuates is clear, the next important concept to learn is which factors influence this fluctuation. The course focuses on 3 very important factors:

- 1) What we think (thoughts, or "cognitions")
- 2) What we do (activities, or "behaviors"), and
- 3) With whom we spend time (people, or "interpersonal interactions").

As the course proceeds, the Quick Mood Scale will include space to monitor each of these factors so participants can see the relationship between these factors and their mood. Therefore, it is important that they do the personal project.



### Information

The way group leaders speak about the personal project during this first session will influence whether participants complete the project for the duration of the course. Therefore, it is important that group members and leaders take the personal project seriously and believe in its importance.

We recommend you do an example on the board with the participants. Sometimes participants use extreme numbers to rate their moods. You can handle this by saying that 9s and 1s are very rare throughout our lives. Therefore, their mood will most likely fluctuate between 2 and 8. It can be helpful to ask for examples of 1s and 9s to help them differentiate between “worst mood” and “best mood.” Good examples of 9’s include: the birth of the baby, winning the lottery, and your wedding day. Although it is important to remember that for some participants some of these events may be negative. 1’s might include the death of a loved one and being told you or a loved one has a terminal illness.



## Step by Step

**Step 1: Provide the rationale for monitoring mood.**

### Suggested Wording

*One of the first steps in managing our mood is to begin to really notice our mood and understand what affects it. When we know what makes us feel better or worse, we can make changes to improve our mood. For example, we can do more of what makes us feel better. Even though some things that affect our mood may be out of our control, other things can be changed, and, we may find, that even small changes really help our mood.*

**Step 2: Explain the Quick Mood Scale.**

It can be helpful to draw the scale on the board.

### Suggested Wording

*If you turn to page 11 in your books, there is a copy of the Quick Mood Scale. We can use this scale to track our mood for a week.*

*The scale goes from a 1 to a 9, with a 1 being the worst you might feel, a 5 being average, and a 9 being the best you might feel. When we rate our mood, it’s important to try to use the whole scale. For example, if I were feeling bad, but I knew that it wasn’t the worst mood I’d ever had, I would figure out how bad I was feeling, and I would pick maybe a two or a three. There are no right or wrong answers. It’s just how I think I’m feeling.*

Pause and ask group members to rate their current mood. Use active listening skills to show you understand what they’re saying and how they’re feeling.

*By using the scale, I can track my mood for a week and see how it changes.*

Demonstrate using the board or holding a book.

*I put the dates of the week here and then each day I rate my mood. At first, it might feel strange to track your mood, but after a while it becomes natural, kind of a daily self check, so I can say to myself, “overall, how was today for me?”*

*It’s important to do it every day and not at the end of the week because sometimes we remember things differently than they really happened. We recommend putting the scale by the bed and then fill it in every night before going to bed.*

If there are veteran members in the group, you may choose to have them share their experience of using the scale. They can also graph their mood for the week on the board.

**Step 4: Elicit group member reactions to tracking their mood.** Empathize with both positive and negative reactions.

### Suggested Wording

*What do you think about the idea of measuring and keeping track of your mood?  
How could tracking our mood help us?*

**Step 5: Explain the rationale for the Personal Project.**

Suggested Wording

*The Quick Mood Scale is one part of a Personal Project that we'd like you to do each week. When we meet together we'll learn lots of new things, including ways to help us improve our mood and help our children. We'll be talking about these things in the class, but it is very important that you try some of them at home, so you can tell us whether or not they were helpful. We only meet for 2 hours every week, if we want to make lasting changes, we need to start making them when we're not here.*

*In order to help us try things we learned in class, each week we'll be doing a personal project. The project will include tracking our mood and then doing something related to what we learned in class. We also have a list of optional projects that you can pick from. We believe that the more you do the optional projects, the more you will learn from this class.*

**Step 6: Obtain participants' reactions to the idea of doing personal projects.**

**Step 7: Highlight that for next week, you would like them to practice using the mood scale. The optional project is to talk to a friend or family member about what they learned in today's class.**



Alternative Exercises

If there are veteran members, you may choose to have them explain the Quick Mood Scale and talk about how it has been helpful to them.

## VI. FEEDBACK AND PREVIEW (5 MINUTES)



### Overview

Give participants an opportunity to provide feedback about today's class, and give them a brief overview of next week's class.



### Key Points

- Provide participants with an opportunity to comment on today's class.
- Be supportive and responsive to their comments.
- Make a plan to make changes based on feedback, if appropriate.
- Provide an overview of next week's class.



### Rationale

To understand what class members think and feel about the class so that you can be responsive and provide them with the best experience possible. Also, to create a safe, responsive environment that fosters communication and learning and to show participants that we value their opinions.



### Information

If participants bring up a problem about the class, you may choose to do some of the following:

- Respond empathetically to their comments.
- Use active listening skills to ensure that you understand what they are saying.
- Develop a plan to make changes.
- Ask other group members to share their opinion.
- Model good problem solving skills.
- Meet individually with the group member to further discuss the problem.



### Step by Step

**Step 1: Elicit participants' reactions to the class.**

#### Suggested Wording

*We are almost done for today, but before we end, I want to thank you for attending the class and find out how the class went for you. Your opinion is very important to us as we want this to be a place where you can learn useful things and where you feel comfortable talking.*

#### Suggested Wording

- *What do you think about the Mothers and Babies course so far?*
- *What was helpful about today's session?*
- *Were there things that were not helpful, and if so, what were they?*
- *Are there things that you wished we had talked about today that we did not talk about?*

**Step 2: Respond to participants' comments.**

Respond empathetically and responsively, showing you understand their point of view. If the comments are negative, try not to become defensive but instead to take a problem solving stance so that you can make things better in the future.

**Step 3: Provide an overview of next week's class.**

### Suggested Wording

*We look forward to seeing you next week. Next week we will begin talking about how what we do affects our emotional health and how we can help our babies do activities that will help them develop to be healthy, emotionally and physically.*



### Alternate Exercise: Feedback Forms

Handout feedback forms and ask participants to complete them. This enables instructors to receive more formal, potentially anonymous feedback regarding the class.

## Class #2: Activities and My Mood

### CLASS OUTLINE

- I. Announcements and Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New Material (60-75 min)
  - a. Your Mood and Your Personal Reality (20 min)
  - b. Violet and Mary's Days (15 min)
  - c. What Do You Like to Do? (15 min)
  - d. Mood Problems After Birth (15 min)
- VI. Personal Project (5 min)
- VII. Feedback and Preview (5 min)

#### Goals for instructors:

- Review main concepts from last class
- Continue to build rapport
- Explain the concepts of internal and external reality
- Ensure that participants understand the connection between pleasant activities and mood (more pleasant activities → more positive mood; fewer pleasant activities → more depressed mood)
- Help participants identify activities that they find pleasant
- Discuss mood changes that occur during and after pregnancy

#### Materials needed:

1. Nametags (optional)
2. Participant manuals
3. Pens, Dry erase board, or chalkboard to present material to class
4. Ramos, Diaz, Muñoz, & Urizar (2007). *The MB Course: Relaxation Methods for Managing Stress* (optional)
5. An enlarged reality management chart (similar to p. 3) (optional)
6. Pleasant Activity cards, 1 set for every 2 people (optional)
7. Copies of CES-D or other mood questionnaires (optional)
8. Evaluation/feedback forms (optional)

## I. GENDA & ANNOUNCEMENTS (10 MINUTES)

Cover Class Material

Personalize Class  
(Participants share personal information)



### Overview

Go over the agenda for today's class and elicit agenda items from class members. Make announcements and invite class members to share announcements they have.



### Key Points

- ❑ Briefly review the agenda for the course (shown on the first page of this session).
- ❑ Ask participants if they have additional agenda items.
- ❑ Make announcements.
- ❑ Ask participants if they have announcements they'd like to share.



### Rationale

By setting an agenda, you help structure the session and let class members know what to expect, and you provide class members with an opportunity to actively participate in the class by contributing to the agenda.

It is important to encourage participants to share important events from their weeks. By doing so: 1) you get a glimpse of their state of mind, which may make their reactions (or lack thereof) more understandable during the class, and 2) you obtain stories from their lives that you can use to illustrate and personalize course material.



### Information

Setting the agenda sets the tone for future sessions. You want to set a balance between providing the structure necessary to cover all the class material and giving participants an opportunity to bring up topics that are important to them. Often participants will share information regarding their pregnancy, such as the gender of their child, what they learned at their last doctor's appointment, pictures of their baby or of other children.



### Step by Step

**Step 1: Review today's agenda.**

#### Suggested wording

*Now I'd like to review today's agenda (point to the board). As you can see we have a lot to cover. We'll begin by sharing announcements, and then we will talk about the importance of thoughts and how they influence our mood. Does anyone have something they would like to add to the agenda?*

If participants contribute suggestions, write them on the board, and schedule time for them.

**Step 2: Announcements.**

Make announcements and ask participants if there is anything they would like to share with the group.

**Step 3: Brief Pregnancy Check-in.**

Ask participants to briefly mention how they are feeling and how their pregnancy is going.

## II. REVIEW (10 MINUTES)



### Overview

Briefly review the material covered in the previous class.



### Key Points

- ❑ The purpose of the course is to learn ways to manage stress and improve mood and to talk about how you can pass these skills on to your children.
- ❑ We want the group to be a place where you feel safe talking, sharing, and learning.
- ❑ We hope to provide you with information that helps you and your children be physically and emotionally healthy.
- ❑ The mother-baby relationship is central to helping children develop.
- ❑ We can learn ways to make our relationships with our children be as healthy and happy as possible.



### Participant Manual

p. 2.2



### Rationale

Reviewing what was covered during the last class will help you determine what participants remember from last session, reinforce key points, and share information with group members who were absent last session.



### Information

It is important to reinforce class members' participation and validate their point of view. In essence there are no wrong answers. Participants are sharing what they remember from last week.



### Step by Step

**Step 1:** Ask participants to share what they remember most from the last class.

#### Suggested Wording

*Last week we met for the first time. We introduced ourselves and talked about the purpose of the course.*

- *What are some of the things that you remember most from the last class?*
- *Do you have any questions about what we talked about during the last class?*

Elicit responses from participants and answer any questions they may have.

**Step 2:** Reinforce participants' responses.

You can do this by writing down their words, highlighting what they have said, and/or praising their responses.

**Step 3:** If it seems appropriate, highlight key points that participants did not cover.

#### Suggested Wording

*So basically, we learned that life stress affects us and the people around us, like our babies. We talked about how we can manage stress by looking at what we do and how we think, and by having good support from others.*

*When we watched the video we saw how important parents are to their children. They are their baby's first teachers. We teach them by talking with them, reading, singing or playing music, and playing with them. We are also their role models. They follow us and for that reason, when we learn to manage our moods, they also learn how to do this. This is important because we want our children to be emotionally and physically healthy.*

Highlight key points that the women made during the last class (including examples that are relevant to the module and details regarding their families and children. Instructors can also review the relevant/selected activities from class 1, as applicable.

*Today, we will be talking about how our mood is affected by what we do, but first let's go over the personal project.*

### III. PERSONAL PROJECT REVIEW (10 MINUTES)



#### Overview

Review the personal project and optional projects from the previous class.



#### Key Points

- ❑ Review participants' Quick Mood Scales.
- ❑ Discuss how participants felt about completing the Quick Mood Scale.
- ❑ Discuss what participants learned from tracking their mood (or tracking their activities, thoughts, and interactions with others in future classes).
- ❑ Optional Project: Discuss whether participants shared what they learned in the first class with others and how they felt about doing so.



#### Participant Manual

p. 2.2



#### Rationale

Participants are more likely to benefit from the course if they complete the personal project. They are more likely to complete the project if they know leaders will be devoting class time to reviewing the project. Reviewing the personal project also provides the class with an opportunity to see how what they do outside the class affects them. Those who did not complete the project can benefit from and be motivated by those who did complete it.



#### Information

Participants are more likely to complete the project if leaders take the projects seriously and set a routine expectation that personal projects will be done and reviewed at the beginning of each class. Those who complete the personal project should be reinforced with attention. They can volunteer to go up to the board, draw their mood graph, and engage in an analysis of the things that affected their mood positively or negatively. Reinforcing completion of the project increases the likelihood that participants will complete the project in the future.

If participants did not complete the project, leaders can bring them gently into the discussion by asking them about specific events and their reactions to them. If they are willing, they can complete the project verbally. It is important that you help them see how completing the project is important. For example, by tracking your mood each day, you can begin to understand how what happened during the day affected your mood. The instructor can also lead the class in a discussion of ways to increase the chances that participants will do their projects. The leader may help participants identify obstacles to completing the personal project and develop a plan for overcoming these obstacles.

Participants may need emotional support as they talk about days when their mood was low. It is important to empathize with their feelings and normalize their reactions to difficult situations. We want to highlight that we cannot always be happy. Certain things will make us feel sad or angry and that is normal, but we don't want to be sad or angry all the time. When life is difficult, it is especially important to learn ways to manage our moods.

As you review participants' mood scales, be aware that pregnancy related symptoms are likely to influence how they are feeling. Help participants empathize with and support each other as they are all undergoing a similar experience. Listen for possible thoughts or behaviors that may be helpful or harmful given what the women are undergoing, acknowledge and empathize with difficult realities, and help participants arrive at a balanced view of their situation (e.g., my baby kicks me, and it's hard to sleep. It's also exciting to know I have a baby). Help them see that they can hold two opposing, equally valid positions in their mind.

When a participant has a particularly difficult personal reality (e.g., significant trauma history, single mother with no social support network), it may be important, and at times necessary, to stay at the feeling level and empathize with the situation and the accompanying feelings of sadness, anger, fear etc. When appropriate, you can highlight how wonderful it is that she is attending the group as this affords her one way to change her personal reality.



### Step by Step

**Step 1: Review participants' Quick Mood Scales.** We typically write the Quick Mood Scale on the board. We then ask for volunteers to share their mood scale. Participants either go to the board to graph their mood, or they call out numbers for each day and a group leader graphs them. At the end, we discuss what they have learned from the mood scales.

#### Suggested Wording

*Last week, we asked you to track your mood by using the Quick Mood Scale. [Refer to board]: We would like to go over your Quick Mood Scales. Who would like to share their Quick Mood Scale?*

Help the volunteer graph her mood scale on the board. Then elicit the participant's and the class' reactions. Possible questions to elicit discussion include:

- *How was it for you to complete the Quick Mood Scale?*
- *What did you learn by tracking your mood?*
- *What happened on the days when you had a really low mood?*
- *What happened on the days when you had a really good mood?*

Depending on what module you are covering, highlight the area of focus for the module. For example, in the activities module, highlight how what participants did affected their mood. Similarly, highlight how the participant's thoughts (thoughts module) and interactions with others (people module) affected their mood.

Facilitate other participants' sharing of their mood scale.

**Step 2: If applicable, help participants identify obstacles to completing the personal project.**

#### Suggested Wording

*If you did not have a chance to complete your personal project, were there any obstacles (anything that got in the way) of you not finishing the personal project?*

**Step 3: Review the Optional Project.**

Ask participants whether they talked to other people about the class and inquire about that experience.

#### Suggested Wording

*The optional project for last week was to talk to someone about the Mothers and Babies Course. Did anyone do this?*

Discuss who they talked to and how it felt for them to share what they have learned so far.  
Reinforce their completing the optional project.

## IV. RELAXATION EXERCISE (15 MINUTES)



### Overview

Conduct a relaxation exercise (imagery/visualization) with participants.



### Key Points

- ❑ Provide a brief rationale for doing relaxation exercises.
- ❑ Have each participant rate their current mood.
- ❑ Help each participant identify an activity they think would be pleasant and relaxing.
- ❑ Lead participants in a relaxation exercise where they imagine doing the activity.
- ❑ Ask participants to rate their mood at the end of the exercise.
- ❑ Discuss how imagining doing an activity affected their mood.
- ❑ Discuss the possible benefits of actually doing the activity.



### Rationale

This imagery/visualization exercise provides participants with an in-vivo experience to help them see how what they do affects their mood. Participants will be able to see that it is possible to take a break from their problems, and that doing so can help their state of mind, their physical well-being, and their baby.

Relaxation is a useful tool that will help the women manage stress during pregnancy and delivery and after the baby is born.



### Information

We include a relaxation exercise each class to teach participants several ways to relax. We move gradually from formal relaxation instructions to brief self-induced relaxation that they can build into their daily routines (refer to accompanying Relaxation Manual for exercises; Ramos et al., 2007).

Relaxation skills appear to be useful and important for women taking the Mothers and Babies course. The women in our first groups often remarked about how helpful it was to learn relaxation exercises. They particularly liked the relaxation audiocassettes instructors prepared for them. Many of the women reported using them several months after the class ended

Some participants may have difficulty selecting an activity that would be relaxing and pleasant. You can have the group help generate activities that might be relaxing/pleasant, you can help participants select an item from the Pleasant Activities Schedule (page 10 of participant manual), or you can work with participants to figure out what they used to like to do in the past that they can still do.

After completing the relaxation exercise, it is important to allow time to talk about participants' reactions to the exercise. Participants may report mixed reactions, including feeling worse following the relaxation activity. For this reason, we have included an inoculation technique, which helps prepare participants for the possibility and utility of negative reactions (refer to Step-by-Step section below).

Some women may report that their baby begins to kick more during the exercise. If this

happens, it will be important to discuss how the women understand this (e.g., this baby never lets me relax, she is healthy and is perhaps showing how much she enjoys the exercise).

Some instructors may report feeling uncomfortable or "hokey" conducting the exercise. They may worry that their voice is not relaxing, or they feel uncomfortable relaxing. We encourage instructors to practice the exercise by audiotaping themselves and then practice relaxing by listening to the audiotapes. Instructors can try the exercise with others and see how they respond to help them gain information about the benefits and potential pitfalls. Relaxation is an important skill, but not all exercises will help all individuals. The goal of this section of each class is to give participants an opportunity to learn several relaxation strategies and discover which ones are effective in managing their stress.



### Step by Step: Imagery Exercise

#### **Step 1: Introduce the exercise and provide the rationale.**

##### Suggested Wording:

*Relaxation is a key tool in managing stress. When we relax, we are doing something pleasant. Relaxation also helps our physical health and gives us a break from our thoughts. This is one way that we can shift our internal reality.*

Time permitting, refer participants to the drawing in class 1, page 7 of their participant manual. Briefly talk about how relaxation is one tool that will help them balance stress.

*Today we are focusing on how what we do affects how we feel. Let's begin by doing a relaxation exercise where we imagine doing something pleasant.*

**Step 2: Help participants each select a pleasant activity.** Ask participants to select an activity they could do alone that would be pleasant and relaxing. It does not have to be a big activity and should be something the participant could actually do while she is pregnant.

#### **Step 3: Inoculate participants against possible negative reactions.**

##### Suggested Wording:

*In a moment, I am going to ask you to imagine doing the activity you have chosen. As you imagine doing the activity, pay attention to how you are feeling. You may experience positive or negative feelings. Either type of feeling is fine. Your feelings may give us a clue about what you think about doing something relaxing. It will be important for both you and us to understand your reactions.*

#### **Step 4: Lead an imagery exercise where participants imagine doing the pleasant activity.**

##### Suggested Wording:

*I want you to try to imagine that you are about to do the activity you have chosen. This is something that you really enjoy doing. Close your eyes and imagine that you are planning to go and do this pleasant activity. Focus on how you might be feeling. . . . and now, try and imagine that you are actually in the middle of doing the activity. Imagine what it is like for you. This is an activity that you really enjoy. . . .*

[optional deepening techniques: imagery/visualization combined with deep breathing]  
*Let's take a few deep breaths. . . in. . . . out. . . . in. . . out. . . . Let your mind really focus on the activity you are doing. Imagine where you are. What do your surroundings look like? How are you feeling? Hot or cold, excited, sad, happy, peaceful? Are you*

*touching anything? Do you smell anything? Are you hearing any sounds? Continue breathing slowly and allow yourself to continue doing this activity that you like so much.*

[Wrapping up the imagery]

*Ok now, I'd like you to finish doing the activity and then at your own speed, open your eyes and return to the group.*

**Step 5: Process with participants what it was like to do the relaxation exercise.**

Suggested Wording:

*Did your mood change? What aspects of the exercise may have contributed to your mood changing if it did? Imagine really doing the activity, do you think that could have an even greater effect on your mood?*

If someone had a negative reaction to doing the activity, explore the thoughts she had during the exercise. Talk about how our thoughts can affect how we behave and how we feel.

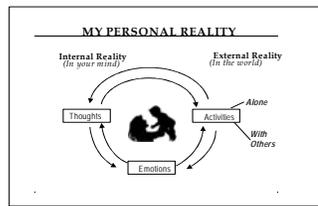


### **Alternative Exercises**

We have included a relaxation exercise; however, you may use any relaxation exercise or technique that you wish. For this module, we recommend that you select an exercise that focuses on doing something or thinking about what you do as a way to relax. A number of optional relaxation exercises are listed in the English version of the Relaxation Manual (Ramos et al., 2007).

You may also choose to have class members actually do something pleasant and relaxing, such as have a cup of tea or play a game and then discuss how this was.

## V.A. New Material: YOUR MOOD AND YOUR PERSONAL REALITY (20 MINUTES)— Session 1 of Each Module



### Overview

Help participants understand the difference between their external and internal reality. Help participants understand the connection between thoughts, behaviors, contacts with others, and emotions and begin to see that it's possible to make changes in these areas.



### Key Points

- Explain the concepts of internal and external reality.
- Help participants understand the connection between thoughts, behaviors, contacts with others, and emotions.



### Participant Manual

p. 2.3



### Rationale

To help participants understand a theoretical model for managing their mood.



### Information

This is the basis of the rest of the course. It is important that participants understand the concepts and see them as relevant to their lives. As you discuss these concepts, try to integrate information that participants have shared with the class and provide examples that are relevant to their lives.

We use a Healthy Management of Reality framework as a way to discuss how individuals can manage their mood. In essence, this is a simplified explanation of the cognitive-behavioral approach to mood management. We explain that people live in two worlds: 1) the world of their mind (their "Internal Reality") and the physical world (their "External Reality"). What happens in their mind and what happens in the outside world affect their mood. Their mood or emotions straddle both worlds. Their face and body are affected by and express how they feel, but there are parts of their mood and emotion that only they will know.

The circle graphic on Page 3 in Class #2 shows arrows going in both directions, from emotions to thoughts and activities, and between thoughts and activities. It is important to point out that, though emotions (how we feel) can affect the thoughts we have and the activities we do, thoughts and activities can also affect our emotions as well as each other. (This is the concept that Albert Bandura refers to as "reciprocal determinism," and which allows us to learn to manage our mood by changing our thoughts and actions.)

The idea of "shaping our reality" must be presented here and repeated throughout the course. It is the key concept of the course. Changing our mood by changing how we think is an important skill to have, but it is likely to have a relatively short-term effect by itself.

It is also necessary to acknowledge that our external reality has an important impact on our mood, and that, therefore, we need to shape it as well. Shaping our external reality involves considering where our activities place us in terms of space and time: Where does the participant spend each hour of her day, with whom, doing what? Where will her baby spend each hour of his or her day, with whom, doing what? Are there places, people, and activities that will create a healthier environment to grow and develop, and to have a more positive image of oneself and one's life? Can the participants begin to think about and actually implement changes in their lives that will increase healthy internal and external environments for them now, so that, by the time their babies are born, they will have these skills well learned?

Part of our "External Reality" (or our physical reality) is our body. It is important to emphasize that the condition of our bodies: how much we sleep, what we eat, and our level of exercise, also has an impact on our mood and our health. Teaching this to our babies early on will have a long-lasting effect on their lives. Learning and practicing this ourselves will give us an area of our lives which is more under our control than most other areas.

Bottom line: What we do each day shapes our lives. By actively choosing what we do, we can create a healthier reality for ourselves and our babies.



### Step by Step

**Step 1: Introduce the idea that people's moods change.**

Suggested Wording:

*When we reviewed your Quick Mood Scales today, we learned that our moods can change a lot. One day we may feel really happy and another day we might feel sad or angry. We might also feel tired and upset in the morning and full of energy and joyful in the afternoon.*

If appropriate, use examples from the participants' Quick Mood Scales.

**Step 2: Introduce the concepts of internal and external reality.**

Suggested Wording:

*We believe that it is important to understand that our moods do not change by themselves. There are many things that affect the way we feel. Some of these things are part of our external reality and some of these things are part of our internal reality.*

Diagram these concepts on the board.

*Our external reality includes all the things that happen to us, our physical health, all the things we do, and the way we relate to others. It includes observable facts. For example, if you have an argument with your partner, that would be part of your external reality. If you are nauseous because of your pregnancy, that is part of your external reality. If your baby wakes up in the middle of the night that is part of your external reality, and if you decide to take a walk to the park that is part of your external reality.*

Check to ensure that participants understand the concept of external reality. It may be helpful to use tangible objects in the room that everyone can agree on to further explain this concept. For example, you might say that it is part of all of your external reality, that you are all sitting in a room (describe the room) and that you are sitting on chairs (you might describe how comfortable or uncomfortable they are).

*Our internal reality is made up of our thoughts. Our thoughts are not observable. Others do not know what we are thinking, and sometimes we even need to stop and figure out what we are thinking. Our thoughts influence our vision of the world and of ourselves just as much as what we actually do and what happens to us.*

Again, make sure that participants understand the concept of internal reality. You can further explain the concept by saying that while we all share the same external reality, of being in the same room and sitting on the same chairs, you may have a different internal reality. Get participants to share their thoughts or reactions to the room or to sitting. Show how people's internal realities differ and discuss how this might affect mood.

Another example that often works is to have participants imagine that they are all eating a particular food, like chocolate or spinach. Their external reality is the same. However, they may each have a different internal reality because they may each have different thoughts about what they are doing. For example, one might think that this is really wonderful, another might worry about whether it will make her fat, another might think about how much she really does not like the food, and another might focus on how it will affect her baby.

*Together, our external and internal realities affect how we feel and create our personal reality.*

*We think these concepts are important because when we want to make changes in our mood, we can think about whether we want to make changes in our external reality, our internal reality, or both.*

### **Step 3: Show how internal and external reality affect mood.**

#### Suggested Wording

*If you turn to page 3 of this session in your books, you will see a diagram of how our internal and external reality can affect our mood. From the diagram, you can see that our thoughts, activities, and emotions are interrelated, meaning, how we feel affects the way we think and what we do.*

If possible, use examples the participants have shared earlier.

*We all have examples from our lives of this. For example, we just did a relaxation exercise. How did this exercise help mold your internal reality and your external reality? When we feel down, we are more likely to think negative, pessimistic thoughts, and we are less likely to do things that are healthy. However, as you can see, the way we think and what we do also affects how we feel. This means that if we can figure out a way to change the way we think or the things we do, we also change our mood. Changing what we do also affects how we think and vice versa.*

Make sure participants understand the diagram. If necessary, provide additional examples to personalize the connections.

### **Step 4: Review the concept of mood management.**

#### Suggested Wording

*Last week we talked about how stress can affect us. Do you remember the balance beam picture? Stress is part of our external reality. It brings us down. You can refer participants to the picture of the balance beam in their books or you can draw a picture of the beam on the board.*

*Although some things that happen to us are out of our control, there are also parts of our reality that are under our control. We can manage our external reality by choosing what we do. We can also manage our internal reality by making changes in the way we think. Sometimes it seems like we can't change the way we think, but we have found that we can make small changes that can be very helpful. You have all changed your reality by coming to the class and choosing to learn ways to help yourselves and your babies.*

*As we continue with the class, we will be talking a lot about how we can make changes in our internal and external reality that will help us and our children.*

*As mothers you will be able to pass on what you learn to your children and you will be able to show them how they can shape their reality. For example, you will be able to help them have healthy thoughts about themselves, how to engage in activities that help grow their minds and their bodies, and how to have good relationships with other people.*

**Step 5: Make sure that participants understand the concepts. Do this step only if it seems necessary.**

**Suggested Wording**

*Let's see if we can take some examples from your lives and figure out whether they are part of your external or internal reality.*

Have participants volunteer to share things in their lives (for example, they are all pregnant) and determine whether it is part of their internal or external reality. Then have them discuss the how this part of their life is related to their thoughts, emotions, and activities.

## V.B. VIOLET AND MARY'S DAYS (15 Minutes)



### Overview

Conduct an interactive activity that highlights the connection between what we do and how we feel.



### Key Points

- Engage the group in an active discussion about Violet and Mary's Days and highlight the following points:
  - What you do affects how you think and feel about yourself, others, and the world.
  - You can choose to do things that make you feel better.
  - Doing pleasant activities can actually create energy.
  - Doing pleasant activities helps make our lives more balanced; we realize there is more in our lives than just problems and things we have to do.



### Rationale

To help participants understand the link between what they do and their mood and to motivate them to engage in more pleasant activities.



### Participant Manual

p. 2.4



### Information

Each module will have a cartoon about Violet and Mary as a way to serve as models for how individuals can make changes in their mood. This exercise has been very well received by participants, and some participants talk about how this is one of the exercises that they remember most.

When you present the vignettes, allow time for group members to discuss these characters, to make them real as this will increase the likelihood that group members will keep them in their minds and will learn from their experiences. However, it is important not to "vilify" Violet because inevitably some of the women may have days similar to Violet's. Hopefully, if they can learn to empathize with and help Violet, they will be able to do the same for themselves.

If you conduct the exercise as a role play, some of the women may prefer not to play the role of Violet because of her outcome. Group leaders can discuss the group's reaction to Violet and talk about how the primary difference between the 2 women is that Mary engaged in pleasant activities.



### Step by Step

**Step 1: Introduce the vignettes.**

#### Suggested Wording:

*Let's look at the cartoons on page 4 in your books to see another example of how what we do can affect how we feel. Violet and Mary are both 5 months pregnant. Lately, they've both been feeling down. When their stories start, both would rate their mood as a 4.*

*Let's see how what they do affects how they feel.*

**Step 2: Elicit participants' reactions to the cartoons and help them flesh out the characters.** Questions to stimulate discussion are listed below:

- *Who are Violet and Mary?*
- *Why do we think they are feeling down? (What is their external reality?)*
- *What are they thinking? (What is their internal reality?)*
- *What does each character do? (How do they change their external reality and their internal reality?)*
- *How does what they do affect their mood?*

To make the exercise more interactive, you may choose to have one woman act as Violet and another woman act as Mary. As the women act out their roles, other group members can participate by indicating where each woman is on the mood scale as they go from scene to scene.

**Step 3: Graph the characters' mood scales on the board.** Have participants determine how Violet's mood changed with each picture. Then do the same for Mary.

**Step 4: Facilitate a discussion about how what we do affects how we feel.** Help participants discuss how this example is relevant to their lives.

You may choose to highlight the following points:

Pleasant activities help to balance our lives (balance beam), especially when they are stressful.

Pleasant activities tend to chain, meaning when you do one activity you often start a chain so that you are more likely to do more activities. For example, if you go out for a walk, you may bump in to someone and then you may decide to do something with them. Then, that night you may have pleasant thoughts about what you did together. And, in the future, you are more likely to go out for a walk again.

Even when life is stressful, we can choose to do pleasant activities. By doing so, we change our mood and at least a small part of our lives.

**Step 5: Connect this exercise to the explanation of mood and your personal reality.**

Highlight that Mary made choices and did activities that changed her external reality and affected both her thoughts and her mood. Refer to the diagram and explain that during this module we will be focusing on activities. We will be looking at activities we can do alone and those we can do with others that will make us feel better.

## V.C. WHAT DO YOU LIKE TO DO? (15 Minutes)



### Overview

Help participants identify activities they would enjoy doing now and after their babies are born.



### Key Points

- Help each participant identify a minimum of three activities she would like to do now and three she might like to do after the baby is born.
- Highlight the following points (which are also summarized on p. 7 in participant manual):
  - We don't all like the same things
  - We don't need to do tons of pleasant activities to feel good
  - Some pleasant activities are brief and just take a second
  - There are times when we enjoy doing a particular activity and other times when we don't. It's important to figure out under what conditions an activity is likely to be enjoyable
  - When you know what you like to do, it makes it easier to do it.



### Participant Manual

p. 2.5



### Rationale

Identifying pleasant activities makes it easier to do them. We want to help the women identify two types of activities that affect their mood: activities they can do on their own, and activities they can do with others. Both are important in shaping their External Reality.



### Information

Some women may feel that becoming a mother involves giving up many things that they used to do. This is true, and it is important to validate these feelings. Motherhood is an important transition that involves change. It is especially important to listen to and empathize with women with unwanted pregnancies. They may feel ambivalent about their babies and may need to have a chance to express their feelings and feel heard and supported. These feelings may also change as they continue throughout pregnancy.

You can also help the women reach a balanced view of the transition. Although they may be giving up some aspects of their lives, they will also discover new aspects they may have never expected. Without denying their perspective, help women who feel ambivalently about having a baby -- to explore what some of the positive aspects of motherhood might be.

During the exercise, some women may indicate that they can no longer do things they used to enjoy doing because they have less energy, no resources (e.g., money or transportation), or because they are not in their home country (e.g., language barrier, not with friends and family). The point of this exercise is to engage group member's creativity in generating alternative activities when obstacles arise. This is an important problem solving skill.

It is important to remind group members that pleasant activities can be thought of as “meaningful” activities (e.g., talking to a loved one, enjoying a meal) but do not have to be “special activities” (going to Disney Land). We cannot always do a “special” activity, but we can do “meaningful” activities.



### Step by Step

Depending on the amount of time you have, you may choose to do an alternate activity. The one we have listed below takes the least time but is the least interactive.

#### **Step 1: Introduce the activity.**

##### Suggested Wording:

*In this module, we are focusing on how the things you do can affect your mood. Activities you can do on your own give you the freedom to choose how you will spend your day without having to rely on others. Activities you do with others help create and maintain what psychologists call “a social support network,” that is, a web of people who can help you deal with the demands of life and bring healthy interactions into your life. Now we’d like to do an exercise so that each of you can decide which activities are pleasant for you. If you turn to page 5 in your books, there is space for you to write down activities you would like to do right now and activities you would like to do after you have your baby. Let’s take a few moments to fill out this page.*

Give participants time to complete the page.

#### **Step 2: Help participants share what they wrote.**

##### Suggested Wording:

*So let’s see what you would like to do now and things you would like to do when your babies are born.*

Have participants volunteer to share their responses and write them down on the board. As you write the responses, highlight the following points:

- The difference between activities you do by yourself and activities you do with others and the importance of having both types of activities on your list.
- How doing the activities affects how the participants feel and how it changes their reality.
- Mothers can also do different activities with their babies that may also affect the babies’ mood.
- Both mothers and babies can learn that certain activities are fun and promote a healthy mood.

**Step 3: Summarize and make comments regarding the activities that are listed on the board.** Key points to cover are listed below, and are also summarized on p. 7 of the participant manual.

- Not everyone likes to do the same thing.
- There are lots of things to do that are free and easy.
- It’s good to have activities we can do by ourselves and activities we can do with other people.
- When you have a baby, you have to give up things you like to do, but you also get to do a lot of things you couldn’t do before.
- Knowing what you like to do gives you a roadmap and can help generate ideas to improve your mood when you are feeling stuck.
- There are different conditions that may make an activity more or less pleasant. For

example, depending on how much energy you have, you might choose to do a big or a small activity. It's important to think about this because if you pick an activity that is too big, given your level of energy, it can end up not being pleasant anymore.



### Alternative Exercise: Pleasant Activities Card

**Step 1: Make the Pleasant Activities Cards (To be done prior to the session).**

Instructors can create a set of Pleasant Activities Cards. Each card has a picture of a pleasant activity along with a written description of the activity. There are also some blank cards so that people can add activities that are not on the list. Cards can be organized by color. For example, yellow cards show activities that people can do alone (yellow=yourself). Purple cards show activities that people can do with other people (purple=people). Blue cards show activities that are specifically related to the baby. White cards are blank cards where people can write down their own ideas of pleasant activities.

#### ACTIVITY CARDS:

Yellow = yourself

Purple = people

Blue = baby

White=wild (blank cards)

**Step 2: Introduce the activity.** Ask the participants to get together in groups of 2-3 people. Give each person a stack of Pleasant Activities Cards. Ask participants to work together in their small groups and sort through the cards. They can sort the cards into two or three piles: 1) things I like to do; 2) things I sometimes like to do; 3) things I don't like to do.

Ask them to talk to one another about the activities they each find pleasant. As they identify the activities they like, they can write them down in their books. Remind them that they will not all like the same activities, but it may be interesting to see that different people have different preferences.

**Step 3: Circulate among the small groups.**

**Step 4: Wrap up the activity.** Ask group members to share what they learned by doing the activity. You may also choose to comment on the process. Usually, participants' moods improve during this activity and it can be useful to talk about how just thinking about doing something fun is good for our mood.

#### Alternate Activity: Discussing What You Like to Do in Small Groups.

Even if you do not use the cards, it can be helpful to break participants up into small groups so they can talk about what they like to do. By doing so, members are able to talk more and to form relationships with one another. Afterwards, rejoin the group to summarize what they learned.

## V.D. MOOD PROBLEMS AFTER BIRTH (15 MINUTES)—Session 1 of Each Module



### Overview

Discuss the different mood problems that women may experience during pregnancy and after birth and identify the different symptoms associated with each mood problem.



### Key Points

- Assess what participants already know about postpartum depression, baby blues, and depression.
- Provide clear definitions of each.
- Ensure that participants understand the difference between the different types of mood problems and can recognize them.



### Participant Manual

p. 2.6



### Rationale

One of the goals of the course is to prevent clinical depression. It is important, therefore, that participants be able to recognize the characteristics of common types of depression that are prevalent during pregnancy, postpartum, and beyond and understand the differences among these types.



### Information

This exercise can generate multiple reactions from the women. It may help the women feel less alone to understand that others have symptoms similar to those they have experienced in the past or are currently experiencing. Other women may worry about the future and the possibility of developing a significant mood disorder. Others may have a history of major depression or postpartum depression and may worry about how you and other group members will react if they share this information.

The idea here is not to scare the women but to educate them. As you cover each disorder, it is important to highlight that there are things you can do to try to prevent a mood disorder, and if you discover you have one, there are things you can do to treat it. They are decreasing the likelihood that they will have a mood disorder by learning the skills taught in the course. They are also learning to identify mood disorders, which will help them get treatment as soon as possible should they develop a mood disorder.

Instructors should also be aware that there is a fourth type of mood problem, postpartum psychosis, which is not listed in the participant manuals. This disorder is described below. A participant with a previous history and/or current symptoms of postpartum psychosis should be referred to a psychiatrist for treatment.

### POSTPARTUM PSYCHOSIS

#### Description:

- very severe mood disorder (more severe than postpartum blues or postpartum depression)
- usually occurs within 6 weeks after delivery
- often needs to be treated by hospitalization

### Symptoms:

May have similar symptoms as depression but may also have the following symptoms:

- restlessness
- rapid speech
- overly excited
- disorientation
- visual hallucinations (see things when they aren't there)
- auditory hallucinations (hear things when there are no sounds)
- thoughts about hurting yourself
- thoughts about hurting others

### How Common is it?

- Very rare - 1 out of 500-1,000 people

### What to Do

- See a doctor or psychiatrist immediately
- Consider taking medications if this is what your doctor or psychiatrist recommends
- May require hospitalization until more serious symptoms are treated
- Get help and support from family members and friends



### Step by Step

#### **Step 1: Introduce the Activity.**

##### Suggested Wording:

*Now we want to give you some information about some mood problems that sometimes happen after giving birth, so that if they happen to you, you will be able to recognize them and know how to handle them.*

#### **Step 2: Assess the women's current knowledge about different mood problems.**

##### Suggested Wording:

Many women say that they experience mood changes during and after pregnancy. Has this happened to any of you either recently or before when you were pregnant with your other children? Or have any of you heard other pregnant women or new mothers talking about mood changes?

Elicit answers from the participants about what they have either experienced or heard. If no one has heard of anything like this, you may want to ask specifically whether they have heard of postpartum blues, postpartum depression, or depression.

Questions to stimulate discussion are listed below:

- *Have you heard about \_\_\_\_\_ before? (how or from where)*
- *Do you know any one who has had \_\_\_\_\_?*
- *Have you ever experienced \_\_\_\_\_?*
- *What are your thoughts about \_\_\_\_\_?*

#### **Step 3: Go over the mood problems shown on page 6 in the participant's manual.**

##### Suggested Wording:

*Let's go over the different types of mood problems that sometimes happen around pregnancy or soon after giving birth. If you turn to page 6 in your books, we have a description of different types of mood changes that many women experience during and*

*after pregnancy.*

Go over the different categories of mood disorders (description, symptoms, how common, what you can do).

**Step 4: Elicit participant reactions after each category of mood disorders is presented.**

Highlight the following points:

- The skills they are learning in the course will help reduce the likelihood that they will develop one of these disorders.
- It is key to know how to recognize these disorders because then you can get treatment as soon as possible.
- There are things you can do should you develop one of these disorders, including getting treatment and using the skills you learned during the course.

## VI. PERSONAL PROJECT (5 MINUTES)



### Overview

Assign this class's personal project



### Key Points

- Assign the Quick Mood Scale and explain if necessary
- Ask participant to do one pleasant activity over the next week
- Assign the Optional Project: Talk to someone who is the mother of a baby and find out two things that babies like to do.



### Participant Manual

p. 2.8



### Rationale

We want participants to begin consciously doing pleasant activities, so they can see how doing them affects their mood.

We would like them to talk to someone who is the mother of a new baby, to help participants develop a support network and to generate activities to do in the future with their own babies.



### Step by Step

**Step 1:** Assign the Quick Mood Scale. If necessary, see pages 28-30 of Class #1.

**Step 2:** Assign the Optional Project.

#### Suggested Wording:

*As you know, each week we also ask you to do an optional project. This week, we would like you to do one new pleasant activity. We will talk next week about how doing the activity made you feel.*

*If possible, we would also like you to talk to someone who is the mother of a baby and find out two things that babies like to do. Hopefully, we will each learn something that we will be able to share with other group members.*

## VII. FEEDBACK AND PREVIEW (5 MINUTES)



### Overview

Give participants an opportunity to provide feedback about today's class, and give them a brief overview of next week's class.



### Key Points

- Provide participants with an opportunity to comment on today's class.
- Be supportive and responsive to their comments.
- Make a plan to make changes based on feedback, if appropriate.
- Provide an overview of next week's class.



### Step by Step

**Step 1: Elicit participants' reactions to the class.**

#### Suggested Wording:

*We are almost done for today, but before we end, I want to thank you for attending the class and find out how the class went for you. Your opinion is very important to us as we want this to be a place where you can learn useful things and where you feel comfortable talking.*

#### Suggested Wording

- *What do you think about the Mother's and Babies course so far?*
- *What was helpful about today's session?*
- *Were there things that were not helpful, and if so, what were they?*
- *Are there things that you wished we had talked about today that we did not talk about?*

**Step 2: Respond to participants' comments.**

Respond empathetically and responsively, showing you understand their point of view. If the comments are negative, try not to become defensive but instead take a problem-solving stance so that you can make things better in the future.

**Step 3: Provide an overview of next week's class.**

#### Suggested Wording:

*We look forward to seeing you next week. Next week, we will talk more about how babies learn and we will talk about different activities they like to do and how doing these activities helps them develop.*



### Alternate Exercise: Feedback Forms

Handout feedback forms and ask participants to complete them. This enables you to receive more formal, potentially anonymous feedback regarding the class.

### Class #3: Activities and My Baby's Mood

#### CLASS OUTLINE

- I. Announcements and Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New Material (60-75 min)
  - a. What do Babies Like to Do? (20 min)
  - b. What is My Baby Doing Now? (20 min)
  - c. How Does Doing Pleasant Activities Help My Baby? (20 min)
- V. Personal Project (5 min)
- VI. Feedback and Preview (5 min)

#### Goals for instructors:

- Review main concepts from last class
- Continue to build rapport and encourage group process
- Provide important developmental information about how babies learn and how activities foster development.
- Help participants begin to think about activities their babies will enjoy.

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2007). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

Note: In Classes 3-8, detailed descriptions (e.g., overview, step by step instructions) will be provided for the New Material section only.

For additional information on sections that are common to all sections, refer to: 1) the *Introduction to Instructor's Manual* (pp. xxxi-xxxv), and/or 2) Class #2:

- I. Announcements and Agenda (pp. 2-3, in class 2)
- II. General Review (pp. 4-5, in class 2)
- III. Personal Project Review (pp. 6-8, in class 2)
- IV. Personal Project (p. 26 in class 2)
- V. Feedback and Preview (p. 27 in class 2)

#### Section IV. Relaxation Exercise

In Classes 3-8, we suggest a relaxation exercise to use that corresponds to the module (e.g., thoughts and mood, pleasant activities and mood). Specific instructions for each exercise can be found in the Relaxation Manual (Ramos et al., 2007). Participants are also given a copy of the Relaxation Manual, which may increase the likelihood of their using these exercises outside of class. Alternatively, instructors can choose other exercises that participants choose/prefer.

#### **IV. RELAXATION EXERCISE**

**Recommended exercise: "Using Muscle Tension to Learn to Relax" (Ramos et al., 2007, p. 9).**

V.A. New Material:  
ACTIVITIES AND MY BABY'S MOOD (20 MINUTES)



**Overview**

Provide participants with developmental information to help them understand how babies learn and how they as mothers can help their babies learn. Highlight that a key way that babies learn is by doing.



**Key Points**

- Babies and young children learn by playing.
- Doing pleasant activities helps babies' physical and emotional health.
- Doing pleasant activities with our babies help strengthen mothers' relationship with them, which is important now and in the future.



**Participant Manual**

p. 3.3



**Rationale**

The intent of this section is to teach that, just as activities affect our mood, they affect the baby's mood. They also affect babies' overall development. Pleasant activities are crucial because they help babies' brains develop. Babies learn by playing. By having appropriate stimulation, which happens when babies engage in pleasant activities, their brains form important connections.



**Information**

Babies learn by watching and interacting with important people around them. If we want them to learn to do pleasant activities, we need to do them ourselves so that we provide them with a good model to follow.

Doing pleasant activities helps strengthen the mother-child relationship in the following ways:

- 1) The pleasure involved in doing these things becomes associated with the mother. The child then enjoys the mother's company more. (The mother becomes a stimulus associated with enjoyment.)
- 2) The child learns that his/her mother does fun things with him/her and is not just a disciplinarian, someone who stops him/her from doing fun stuff. This becomes especially important when the mother has to set limits (e.g., getting the child to go to bed, do chores). If the child knows the mother knows how to play and enjoys doing so, s/he will be less likely to resent her and think of her as only a spoilsport.
- 3) Doing pleasant activities together starts a positive cycle - doing pleasant activities improves the relationship and makes it more likely that mother and child will have more pleasant interactions and will want to spend more time together doing pleasant activities.

During this exercise, you can remind group members that their babies are going to smell, taste, and hear things for the first time. This will be an amazing process. Help the women see that they will be able to share these experiences with their babies. The first three years of life are an especially exciting time when everything is new and each new

experience helps babies learn and grow. You can bring up examples of how they will be affected by things we take for granted (e.g., developmental milestones), like the first time they listen to music or taste a banana. It's fascinating what they will be learning. Help group members become aware of the important role they will play in their child's development. They are their children's first teachers, and they can teach their children that learning can be fun. It may be helpful to refer to the video seen during the 1<sup>st</sup> week of the course "My parents, my teachers."



## Step by Step

### **Step 1: Discuss the importance of emotional intelligence.**

#### Suggested Wording:

*We have been talking about how babies develop. When we think of development, we usually think about their physical development, meaning how fast they will grow, when they will crawl and walk, and we think about their intellectual development, when they will talk, learn to read, be able to use a computer. Lately, people have become more interested in children's emotional intelligence. What does this term mean to you?*

Elicit responses and write them on the board.

Some things to highlight include:

- Children's ability to form positive relationships with others
- Frustration tolerance (crying to get their needs met)
- Affect regulation, or how they calm down when they get upset

### **Step 2: Discuss how children learn, focusing specifically on how they would learn the skills participants identified when they talked about emotional intelligence.**

#### Suggested Wording:

*Last week when we watched the video, we saw that our children learn from us. Let's spend a couple of minutes now and talk about how it is that our children learn. How do they know what to do or what not to do? How do they learn to soothe themselves when they are upset? How do they develop a picture of themselves, meaning who they are in the world?*

Begin a discussion about how babies learn.

Key points (p. 3, participant manual):

Babies learn by:

- by watching us and copying us
- by interacting with us (by the way we treat them)
- by doing what we teach them
- by being supported when they try new things
- by being reinforced by us. For example, seeing us smile or laugh happily when they do something. Even giving them our attention is reinforcing!

Highlight that babies learn from us. This means that if we want to teach them something, we need to know it first.

Also, remind participants to be aware that their children are learning from us even when we are not aware we are teaching them. It is important to avoid teaching them stuff we don't want them to learn. For example, if we yell at or hit them when we are frustrated, they will learn to yell or hit when they are frustrated.

## V.B. WHAT DO BABIES LIKE TO DO? (20 MINUTES)



### Overview

Engage participants in a discussion about the different activities that babies like to do. Emphasize how developmental and temperamental factors affect whether a baby will enjoy doing an activity.



### Key Points

- Help participants identify activities that babies enjoy doing (alone, with mom and/or dad, and with other people/babies)
- Highlight the following:
  - From birth there are things babies enjoy doing, so it is never too early to begin planning and doing pleasant activities with your baby
  - Doing activities with your baby will help your baby develop and will strengthen your relationship with your baby.
  - Your baby's developmental level will affect whether s/he enjoys a given activity. As babies develop, different activities become pleasant.
  - Your baby's temperament will affect whether s/he enjoys a given activity.
  - All babies are different. We need to learn to read their signals to determine which activities are pleasant for each baby. We also need to learn how each baby learns best.



### Participant Manual

p. 3.4



### Rationale

The goal is to help the women identify healthy, developmentally appropriate pleasant activities that their babies may enjoy. This is important because if the mother has age-appropriate activities in mind before the baby is born, it will be easier for her to provide the kinds of opportunities that the baby can benefit from as the baby grows. If the baby finds a world that is full of interesting, exciting, and pleasant experiences, his or her impression of the world will be much more positive than if he or she finds a world that is boring, unpleasant, or even scary. The impression of the world the baby is creating in his or her mind will have an influence for the rest of his or her life. This is why creating a healthy reality for the baby is so important.



### Information

It may be helpful to have participants first think about what their baby will like to do by him or herself (e.g., playing), with his/her mother (e.g., being held), and with others caregivers and family members (e.g., baby's father, grandparents, siblings). The handout on page 4 provides space for group members to write down their ideas. When you go over what they have written, assess for the following:

- Attitudes about babies
- Thoughts about babies and how they interact with others
- Knowledge of child development

You will want to listen for strengths and also possible ways of thinking that may be risk factors for postpartum depression or for problems in the mother-baby relationship (e.g., unrealistic expectations regarding child development, lack of a support system, feelings of being overwhelmed). If you find unhelpful thoughts or attributions, you will be able to

slowly work with these throughout the remainder of the class. For example, you may be able to discuss them further during the Thoughts section.

You may want to highlight when in the child's development the child will enjoy the activities they listed. For example, a baby might find certain toys or activities overstimulating at one month but may really enjoy them at 3 months. You can go over the handout on page 5 for a general listing of activities babies like to do at different ages.

Participants sometimes are surprised to see that there are activities babies like to do shortly after childbirth (see p. 5 in participant manual). You can help them understand that from birth (and even before that), babies are ready to learn and to interact with others. It is important to acknowledge differences in activities preference as they are related to differences in developmental ages.

Research has shown that babies prefer figures that are faces, which suggests that they are born wanting to make connections to others. Babies also recognize their mother's voice and smell.

When you talk about monitoring the number of pleasant activities you do, it is very important to explain that pleasant activities are not just special activities. If participants only count things like going to the movies, seeing a one-hour television program, or going out to a restaurant, they will limit themselves to two or three of these a day because it is impossible to have time (or money) for more. However, if instructors point out that a pleasant activity can be really brief; they will see that they can engage in pleasant activities throughout their day.

Pleasant activities might include:

- Looking out their window at home, work or as they are riding the bus and noting that the weather is nice, that there are nice parks or stores along the way, or that most people they see have enough to eat and a place to live
- looking at a photo album and remembering memories
- generating pleasant memories in one's mind
- humming a favorite song
- relaxing while waiting in line or at a stop sign
- taking the scenic route rather than the quickest route.

Pleasant activities can involve becoming conscious of things one does routinely and mindfully appreciating and enjoying them. Realizing how nice it is to be able to brush one's teeth, take a shower, use a clean bathroom with hot and cold running water, turn on a light by just touching a switch, open the refrigerator and taking out fresh food. (Imagine not being able to do any of these things). Learning how to be aware of pleasant activities and engaging in them will increase the chances the women will model this for their babies. Point out how much happier their babies' lives will be if they learn to do this from the time they are small.

Once the baby comes, they will be able to be mindful of pleasant activities that involve the baby, such as bathing the baby, feeding it, changing its clothes, feeling the baby's warmth as s/he falls sleep on her shoulder, enjoying the total trust the baby will have of his/her mother, seeing the baby learn something as simple as grasping something with his/her fingers, or finding something with his/her eyes. These can all be pleasant activities, but only if the participant is cued to consider them as such. This is the time to begin the process, and this needs can be reinforced throughout the course.

For cultural and health reasons many women will be unwilling to take their babies out of the home in the beginning or even for the first few months. We want to respect these decisions and talk about looking for places to take their babies when their babies are older. For example in Latino cultures, families observe "La Cuarentena," which is a period of 40 days when new mothers don't leave the house and practice traditional self-care activities.



### Step by Step

**Step 1: Help participants identify what they think babies like to do.** For mothers who have other children, ask them what their children liked to do as babies.

#### Suggested Wording

*What do you think babies like to do? For those of you who are mothers, can you remember what your child liked to do as a baby? [Elicit discussion.]*

*Have you ever noticed that babies are fascinated with faces? They like to reach out their hands and touch things. Babies are exposed to things for the very first time. They are learning new things every minute. We've talked earlier about how you can be your baby's teacher, and mold his/her internal reality. You can also mold your baby's external reality? How?*

#### Key points to highlight

- Babies learn by watching, so mothers can always have something available to stimulate babies' interest
- Attend to babies' needs (feed baby when crying)
- Give babies toys or objects that help them learn that they can make something happen. For example, a toy that lights up or makes noise they touch it or move it, such as a rattle.

**Step 2: Elicit discussion of what babies like to do in the presence of others.**

#### Suggested Wording

*What do you think that babies like to do with other people? Does she/he do things differently with her/his father, or grandparent/sibling...?*

**Step 3: Recognize that developmental and age differences in activities that babies engage in.**

#### Suggested Wording

*In the first year of your baby's life, there are many changes that your baby will make, including physical, cognitive, and social changes. Because your baby is changing so rapidly, the things that he/she does or likes to do will also change. As you can see on p. 5, there is a list of some of the activities that babies like to do at different ages. When she is young, she cannot move much but enjoys imitating and listening to your voice. Notice that she is older, she has more motor ability, can move around, crawl, and maybe even learn to stand up. So she'll be so much more active and more interested in the things around her. As your baby grows, it is important to recognize that the activities she likes will also change.*

## Class #4: Pleasant Activities Help Construct a Healthy Reality for Me and My Baby

### CLASS OUTLINE

- I. Announcements and Agenda (10 min)
- II. General Review (10 min)
- I. Personal Project Review (10 min)
- II. Relaxation Exercise (15 min)
- V. New Material (60-75 min)
  - a. Pleasant Activities Help to Construct a Healthy Reality for Me and My Baby? (15 min)
  - b. Pleasant Activities Can Help Make the Mother-Baby Relationship Stronger and Healthier? (15 min)
  - c. Balancing Stress and Fun? (10 min)
  - d. Overcoming Obstacles? (20 min)
- III. Personal Project (5 min)
- IV. Feedback and Preview (5 min)

#### Goals for instructors:

- Review main concepts from last class.
- Continue to build rapport and encourage group process.
- Help participants understand how doing pleasant activities can help them create a healthy reality for themselves and for their babies.
- Help participants identify potential roadblocks to doing pleasant activities.
- Help participants think about different ways to overcome roadblocks.

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2007). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

**Recommended exercise:** "A Country Day" (Ramos et al., 2007, p. 11). Alternatively, Instructors can ask participants to choose an exercise from the manual.

## V.A. New Material: PLEASANT ACTIVITIES HELP TO CONSTRUCT A HEALTHY REALITY FOR ME AND MY BABY (15 MINUTES)



### Overview

Conduct an exercise or provide a metaphor that helps group members see that they have choices, and that even seemingly small choices in what they do can have a significant impact on their mood.



### Key Points

- Your personal reality is shaped from moment to moment.
- We can choose what we will do and how we will think.
- Even seemingly unimportant choices affect mood directly and indirectly by making it more likely that another event or thought will occur.
- Conduct an exercise to help participants visually or metaphorically understand these concepts (to provide them with an “a ha” experience).



### Participant Manual

p. 4.3



### Rationale

This section reinforces the message that one’s actions and thoughts continually shape one’s reality. The intent of this exercise is to illustrate that at each moment we have choices regarding how we will react to the current situation. We can go up or down. We choose:

- What we think
- What we do
- How we interact with others.

These choices can have a positive or a negative impact on how we feel and what will happen next. The graphic on pages 3-4 is intended to illustrate this process.



### Information

Because concepts in this section may be hard to grasp, it may help to use Violet and Mary’s stories to illustrate how the decisions they made from moment to moment affected their mood. Drawing the paths of these decisions over time on a blackboard or eraser board may help participants visually realize that by choosing what we do, we all have some control over our mood. We shape our personal reality each day with each choice we make.

Note that this is not a “positive thinking” course in which we assume everything is great and everything is going to turn out fine. Our message is that no matter from where one starts, it is possible to gradually shape one’s life on a moment-to-moment basis so that the next moment can be slightly better than the last. And, if life deals us some bad experiences, we can make choices to try to surmount these experiences rather than letting our reactions sink us even further.



### Step by Step

**Step 1: Introduce the exercise.**

Suggested Wording

*In the last class, we began talking about your mood and your personal reality. Today, we will talk about how each of us can shape our personal reality. Let's talk about what we mean by shaping our personal reality. Have you heard the saying "Rome was not built in a day?" What does this saying mean to you when you think about building your personal reality?*

Elicit participants' responses. Highlight key points participants make regarding shaping their reality. They may talk about how when you build a building or a city, you do it brick by brick. Our mood is also constructed brick by brick, but the "bricks" are thoughts and activities. Each thought and each activity builds our mood and can lead us either up or down.

## **Step 2: Discuss the diagram shown on pages 3 and 4.**

### Suggested Wording

*Let's look at a diagram that shows us how we shape our mood through a series of seemingly small choices. Please turn to page 3 in your books. On this page we have a series of dots. Each dot represents a single moment in time. Let's say that we start at the first circle on the left. Each thought or action we have from that point onwards can move us up, down, or sideways. Going up would mean that it improves our mood, sideways would mean it has little or no effect on our mood, and down would mean it has a negative effect on our mood. At first the moves we make will not take us far away from where we began, but imagine where we could be 10 moves later.*

## **Step 3: Talk about how the choices Violet and Mary made affected their mood.**

### Suggested Wording

*Let's look at a specific example. Do you remember Violet and Mary from the second class?*

If participants do not remember them, you can either have them flip back to page 4 of class 2 and take a look, or you can remind them of the stories.

*Let's draw how each choice they made affected their mood.*

Group leaders can either complete the diagram, or they can have a group member lead the group and discuss how each step Violet and Mary made affected their mood. We recommend beginning with Violet and showing how each choice she made caused her to feel a tiny bit worse. Then discuss how the small choices Mary made led her to engage in more activities and to gradually feel much better. This is a good example of how activities chain, so that one pleasant activity is more likely to lead to another pleasant activity.

## **Step 4: Process what group members think about shaping their reality.**

Possible questions to stimulate discussion are listed below:

- *What does this diagram mean to you?*
- *Does this diagram help you to think about how you might shape your reality?*
- *What might you do to shape your own reality?*
- *What choices did you make recently that affected your mood? (If they are willing, they can diagram these choices on the board.)*



### Alternative Exercises

1. Instructors can use any illustration or metaphor that shows that people can make choices that affect how they feel. For example, an image of a stairway with people going up or down steps, represents a thought or action that participants engage in.
2. Instructors can draw a diagram or have a group member diagram how the activities she did over the past week, which she may have discussed during the personal project review, affected her mood.

## V.B. PLEASANT ACTIVITIES CAN HELP MAKE THE MOTHER-BABY RELATIONSHIP STRONGER AND HEALTHIER (15 MINUTES)



### Overview

Discuss how engaging in pleasant activities affects the mother-baby relationship. Highlight the importance of this relationship.



### Key Points

Engaging in pleasant activities helps the mother-baby relationship by:

- ❑ Helping mothers have a better mood and be more emotionally strong.
- ❑ Improving the baby's mood.
- ❑ Strengthening the mother-baby relationship through shared positive activities.



### Participant Manual

p. 4.5



### Rationale

This is an opportunity to review the material from Class 3, page 6 and again, talk about the importance of the mother-baby attachment relationship.



### Information

The main message is that engaging in pleasant activities not only improves the mother's mood but strengthens the mother-baby relationship. Relationships develop over time and through shared experiences. Babies learn about the type of relationship they will have with their parents based on the type of experiences they share. If a baby has enjoyable moments with his/her mother, s/he will have positive associations, emotions, and ideas about her and about their relationship. By beginning to do pleasant activities together when the baby is young, the mother and baby are developing an interaction pattern for the future. They are more likely to continue to do pleasant activities together as the baby grows, and they are more likely to have a positive view of each other and of their relationship.

Again, when we talk about pleasant activities, it is important to remember that pleasant activities do not have to be special or time consuming. Even routine tasks, such as changing a diaper, feeding, or bathing can be enjoyable for both mother and baby. The mother can help set the tone for these interactions. The instructors can refer to examples from the video, "My Parents, My teachers" to emphasize this point. For example, they can bring up the scene when the mother is smiling and laughing with her baby while she is changing the baby's diaper.



### Step by Step

**Step 1:** Talk about the picture of mother and baby and the importance of their relationship (p. 5 participant manual).

#### Suggested Wording

*During the first session, we looked at this picture and talked about the importance of the*

*mother-baby bond. What are some of the things you remember about this relationship?*

Elicit responses and, if necessary, highlight the following points:

- Mothers are responsible for most of their babies' needs.
- Mothers teach children about the world.
- Mothers have their own needs, and need to take care of themselves because they take care of others. They carry children both physically and emotionally.
- The mother-baby relationship is often the first relationship babies have. It sets the stage for other relationships. Babies who have warm, trusting relationships with their mothers will learn to develop similar relationships with others.
- As babies grow, they learn by exploring from a safe base. Their mothers are their base. Babies leave their mother's side, check out new things in their environment and then return to the safety of their mothers when they are finished exploring or when they are tired or scared. When the mother-baby bond is strong, the baby has a secure base from which to explore, s/he will be able to explore the world with less anxiety, and s/he will learn more.

**Step 2: Discuss how doing pleasant activities affects the mother**

Suggested Wording

*Now let's think about how doing pleasant activities affects the mother-baby relationship. First, why would it be good for the mother to do pleasant activities?*

Elicit responses. Make sure participants discuss how doing pleasant activities keeps the mother emotionally healthy, which better enables her to take care of her child. You have to take care of yourself before you care for others. Doing pleasant activities is one way that we care for ourselves. Sometimes it is important for mothers to do pleasant activities without their babies. Even "good mothers" need breaks where they can recharge.

**Step 3: Discuss how doing pleasant activities affects the baby.**

Suggested Wording

*Why would it be good for the mother to provide her baby with pleasant activities, such as looking at mobiles or interacting with other babies?*

Elicit responses. Highlight how babies learn by playing. Also, pleasant activities improve the baby's mood. The mother-baby relationship is bi-directional, meaning the baby also affects the mother. When the baby's mood is good, s/he is more likely to interact with his/her mother in a positive way, which will lead to a more positive interaction for both.

**Step 4: Discuss how doing joint pleasant activities affect the mother and baby.**

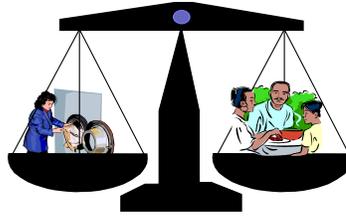
Suggested Wording

*Why would it be good for the mother and baby to do pleasant activities together?*

Elicit responses. If necessary, emphasize the importance of joint pleasant activities.

*When the mother and baby do pleasurable activities together, they build a positive relationship. We can think about the diagram with the dots. Each activity they do makes their relationship stronger. The baby learns that his/her mother is a warm and fun person, a partner who shows him/her an interesting side of the world.*

## V.C. BALANCING STRESS AND FUN (10 MINUTES)



### Overview

Help participants identify things they have to do and things they would like to do both now and once their babies are born. Discuss the importance of obtaining a balance between these two types of activities.



### Key Points

- Help group members identify things they have to do, both now and after the babies are born, and talk about how doing these things or thinking about them makes them feel.
- Talk about the importance of balancing what members have to do with what they want to do as a way to manage mood.



### Participant Manual

p. 4.6



### Rationale

The purpose of this exercise is to acknowledge the realities of daily life and the multiple stressors the women may face. This exercise can be particularly important for women experiencing multiple stressors and/or having little social support. This exercise is also meant to highlight the importance of having a balance between those things we like to do and those we have to do and increase group members' motivation to develop such a balance.



### Information

This exercise is particularly helpful for participants who talk about being too busy or stressed about their situations to engage in pleasant activities. It may become apparent that items listed as "things I have to do" may be obstacles for "things I want to do." This leads nicely to the next exercise where we discuss how to make "things I want to do" a priority so that there is a balance between these two categories. If our lives are filled only with things we have to do, our mood may suffer to the point where we eventually no longer have the energy to do those things.

There are many things that we have to do each day in order to survive, such as earn money, prepare food, clean up after ourselves, etc. Sometimes, these things may seem overwhelming, and we may feel that we simply do not have time to engage in pleasant activities. In this section, we highlight the importance of doing pleasant activities (activities you want to do) as a way to balance the stress that can be caused by activities we have to do.

Maintaining a balance between activities we have to do and those we want to do will be particularly important once the baby is born because there will be many more "have to do" activities (feeding the baby several times during the day and night, changing diapers, bathing, waking up in the middle of the night if/when the baby cries, and so on). Unless one also builds in "want to do" activities, the risk of becoming very unbalanced is very real. And, once this happens, one's mood and one's ability to enjoy one's baby become

compromised.

“Want to do” activities with the baby can include watching her learn, hugging her and feeling her warmth, looking into her eyes, singing to her, even watching her sleep. As the baby grows, the repertoire of pleasant activities continues to grow, especially if one is mindful of this potential. It may also be important for the women to consider how they may build in time to care for themselves. Small activities, such as taking a shower, getting their nails done, or going for a walk by themselves, can help replenish their mood so that they can return and care for their babies.

Participants may have become very good at identifying brief activities that they would enjoy. Instructors can reinforce their ability to do this and talk about how this is an important skill, one which perhaps was strengthened by coming to the group and doing the exercises. If a participant has difficulty identifying pleasant activities, instructors can refer to previous exercises she did and to activities she identified during these exercises. It is also important to attempt to determine what in the moment is preventing her from figuring out what she would like to do.

During this exercise, instructors may discover that a participant is overwhelmed by all the things she has to do. In some cases, it may be helpful to help her think about ways she could cut back or find help. Another woman may spend a lot of time worrying about doing something but not actually doing anything. If this is the case, instructors may want to try to identify those thoughts that are affecting her or talk about goal setting if the woman might benefit from a structured way to accomplish tasks. Instructors may also find it helpful to take notes regarding participants’ thoughts and social support networks that will be addressed in future classes.



### Step by Step

#### **Step 1: Introduce the exercise.**

##### Suggested Wording:

*We have been talking a lot about how pleasant activities help us to shape our reality and our relationships with important people in our lives, like our babies. But pleasant activities are not the only activities in our lives. We also have many things that we have to do. Sometimes doing the things we have to do can make us feel better because they give us a sense of accomplishment and competency and because when they are done, they are no longer hanging over our heads. But if all we are doing are things we have to do, how do we feel?*

Elicit responses from participants.

*How do you think this might affect our relationships with our babies and other family members?*

Elicit responses from participants.

#### **Step 2: Identify the things we have to do.**

Group instructors can facilitate this discussion by drawing two columns on the board, with one being “Things I have to do” and the other “Things I would like to do.”

- Ask participants to identify things they have to do. Write them down on the board.
- Then ask participants to identify things they will have to do once the babies are born. Write those down on the board.
- For mothers with other children, ask them to identify the changes and things they will

- need to do once the new baby is born. Write those down on the board.
- Ask participants to talk about how doing these things or worrying about doing them makes them feel.
- Acknowledge the burden participants may be under.

**Step 3: Identify the things we would like to do.**

- Ask participants to identify things they would like to do now. Write them down on the board.
- Then ask participants to identify things they would like to do once the babies are born. Write these down on the board. Remember to emphasize that we should not only think about doing special things, which are important, but also every day things that might be pleasant. Some things we have to do are also things we enjoy doing and can be written on both sides of the chart.

**Step 4: Discuss the importance of balancing between things we have to do and things we would like to do.** Engage participants in a discussion regarding why it might be important for them to balance things they have to do with things they would like to do, both now and after their babies are born.

You may ask them to look at the picture on the top of page 6 and think about what it is like if the scale is tipped too far in any direction. You can also refer them to page 7 of Class 1 for another graphic representation of the importance of balance.

Questions to stimulate discussion are listed below:

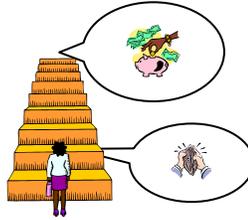
- *How do you feel if all you are doing are things you have to do?*
- *Is it possible or even beneficial to only do things you want to do?*
- *How do you think having a balance of these activities might affect your mood?*
- *By setting up a balance in our lives, what are we teaching our children? How might this help them?*



**Alternative Exercises**

It may be helpful to introduce Patterson's concept of the family bank. Use the following analogy: When we have a relationship with someone, it's like having a bank account. Positive shared experiences build up the account and strengthen the relationship. Inevitably, however, life makes withdrawals. For example, as a parent, when you ask your child to take out the trash, you are making a withdrawal. It is very hard to make withdrawals when there is nothing in the bank. Our relationships can only survive on credit for so long. This is why it is important to also do things we want to do with people who are important to us.

## V.D. OVERCOMING OBSTACLES (15 MINUTES)



### Overview

Help participants identify different ways to overcome obstacles to doing pleasant activities. In particular, discuss problem solving as one way to overcome a problem.



### Key Points

- Help participants identify obstacles to doing pleasant activities.
- As a group, discuss ways they might overcome these obstacles.
- Discuss problem solving as one way to overcome a roadblock or problem.



### Participant Manual

p. 4.7



### Rationale

Balancing “have to’s” and “want to’s” is often difficult. This page involves an alternative exercise for generating solutions to common obstacles when we try to engage in pleasant activities. It also includes a simple 4-step method to overcome obstacles that can be used repeatedly until a solution is found. By going through these four steps, participants will see that they have the skill and creativity to solve the obstacles they encounter.



### Information

It can be useful to go over reported obstacles that participants may have brought up while discussing the personal project.



### Step by Step

**Step 1: Identify obstacles to doing pleasant activities.**

#### Suggested Wording

*We just finished talking about the importance of balancing what we have to do with what we want to do. While we know that it's important to do pleasant activities, sometimes things just seem to get in the way of doing them. For example, the things we have to do can keep us from doing the things we want to do. What are other things that get in the way of doing pleasant activities?*

Elicit responses and write them on the board.

**Step 2: Brainstorm possible solutions to these obstacles.**

#### Suggested Wording

*Now let's all work together to think of all the possible ways we might overcome each obstacle. At this point, we want to come up with all possible solutions without evaluating them. We're all different, so we may each prefer a different solution.*

Go through each obstacle and have group members call out ways to overcome it. Write their answers on the board. Highlight how much they already know about overcoming

obstacles.

**Step 3: Discuss problem solving as a formal technique for overcoming obstacles.**

Suggested Wording

*You all know a lot of ways to overcome obstacles. Now I'd like to talk about one other way. It's a formal technique called problem solving. Counselors often teach couples or parents and children this technique so that they can resolve conflicts, but we can also use it to help us figure out solutions to difficult problems. We've outlined the steps to take on the bottom of page 7. You already use many aspects of problem solving. For example, the first step is to identify the problem or obstacle. We've already spent time doing this together.*

*The second step is to think about all the possible solutions. Another word for this is brainstorming. We just did this as a group when we came up with all the possible solutions to the obstacles. As we saw, it can be useful to ask others for their input because as the saying goes, "two heads are better than one." The important part of this step is to write down all solutions without thinking about whether it is a good choice. We will evaluate the solutions later.*

*The next step is to choose the best solution or combination of solutions. This means you pick the one that is best for you. Remember we are all different, so different solutions may work better for each of us.*

*The final step is to see how well the solution works for you. We try it out and then we see how well it worked. If it doesn't work, it's time to try something else out.*

**Step 4: Use problem solving to tackle an obstacle a participant is facing.**

**Step 5: Elicit participants' reactions to this problem solving technique.**



# Mothers and Babies Course Instructor's Manual Thoughts Module

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# THOUGHTS MODULE

## Class #5: Thoughts and My Mood

### CLASS OUTLINE

- I. Announcements & Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New Material (60-75 min):
  - a. What are thoughts? (10 min)
  - b. Helpful thoughts and harmful thoughts (20 min)
  - c. Do different thoughts affect our mood? (15 min)
  - d. Types of harmful thought patterns (20 min)
- VI. Personal Project (5 min)
- VII. Feedback and Preview (5 min)

#### Goals for instructors:

- Define thoughts & Discuss the importance of thoughts
- Ensure participants understand the connection between thoughts and mood
- Identify helpful and harmful thoughts
- Identify different categories of harmful thoughts
- Help participants see that we can, and often do, change the way we think
- Help participants understand how our external reality (e.g., activities) and internal reality (e.g., thoughts) both contribute to our personal reality
- Motivate participants to want to learn how to manage their thoughts (internal reality) so that they can improve the quality of their lives and their babies' lives

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress* (optional)
4. An enlarged reality management chart (similar to p. 3) (optional)
5. Pleasant Activity cards, 1 set for every 2 people (optional)
6. Copies of CES-D or other mood questionnaires (optional)
7. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

Recommended exercise: "Relaxing with Distraction" (Ramos et al., 2002, p. 11). Alternatively, Instructors can ask participants to choose an exercise from the manual.

## V.A. New Material: WHAT ARE THOUGHTS? (10 Minutes)



### Overview

Identify thoughts and discuss how thoughts are related to mood.



### Key Points

- ❑ Discuss the reciprocal relationship between thoughts and mood
- ❑ Thoughts = self talk, as if we were having a conversation in our mind
- ❑ Our thoughts can affect the way we feel
- ❑ Thoughts can affect our bodies (e.g., negative thoughts can cause tension)
- ❑ Thoughts can affect what we do
- ❑ It is possible to change the way we think. In many ways it is like learning a new language, a new way of talking! The first thing we need to do is be able to identify (hear) our own thoughts.



### Participant Manual

p. 5.3



### Rationale

Increase participants' understanding of what thoughts are and how they affect their mood.



### Information

For additional reading about thoughts, see Chapters 9, 10, and 11 in *Control Your Depression*, by Peter M. Lewinsohn, Ricardo F. Muñoz, Mary Ann Youngren, and Antonette Zeiss (1986). New York: Simon & Schuster. You can also review this book: Burns, DB (1980). *Feeling Good: The new mood therapy*. New York: Avon Publishing.



### Step by Step

**Step 1: Define thoughts.**

#### Suggested Wording

*What are thoughts?*

Elicit response from participants and make sure that it is clear that thoughts are things we tell ourselves. If participants share thoughts they are having, you can write them on the board.

**Step 2: Help identify thoughts related to their pregnancies**

#### Suggested Wording

*Please turn to page 3 in your books. Here is a woman who is pregnant, just like you, and she has a lot of thoughts about being pregnant. What kinds of things do you think she is telling herself?*

Elicit responses from the participants. Make sure to allow space for women to talk about both positive and negative thoughts. Highlight the idea that we can have many thoughts at the same moment and that we pay more attention to some thoughts than to others.

*How do you think these thoughts affect her mood?*

Highlight the connection the participants see between thoughts and mood.

*If we pay attention to burdensome thoughts our mood tends to get worse. If we pay attention to the positive aspects of our lives, our mood tends to improve.*

## V.B. HELPFUL, HARMFUL, AND BURDENSOME THOUGHTS (20 min)



### Overview

Talk about the difference between helpful, harmful, and burdensome thoughts and how they affect mood.



### Key Points

- Helpful thoughts help improve mood
- Harmful thoughts worsen mood
- Both helpful and harmful thoughts affect us emotionally and physically
- It is important to understand how the different thoughts we have can affect our mood



### Participant Manual

p. 5.4



### Rationale

To help participants begin to categorize thoughts as helpful, harmful, or burdensome.



### Information

It may be helpful to ask participants to give examples of thoughts they are currently having, as a segway to talking about "Helpful vs. Harmful/Burdensome Thoughts." During pregnancy, it is common for women to have a variety of thoughts. We cannot assume that they all view this as a joyous event. Pregnancy and childbirth can be very stressful, and we need to create a safe environment where women can bring up concerns they have regarding pregnancy, childbirth, and being a mother.

Here are some of the thoughts women have shared with us:

- *"I'm getting fat and ugly."*
- *"I just found out I'm going to have a boy. I'm not sure if I want a boy."*
- *"The world is so unsafe, how can I bring up a child in this world."*
- *"I don't enjoy sex, but my partner keeps pressuring me."*
- *"I'm afraid I'm going to hurt the baby if we have sex."*
- *"It's so amazing to have a baby who is half me and half my partner."*
- *"How can I be a good mother when I had such a bad childhood?"*
- *"The baby keeps me from sleeping."*
- *"I'm afraid to give birth, but I worry that if use the drugs I will be a bad mother."*
- *"Will my body ever be the same?"*
- *"Who is going to take care of my other child when I give birth?"*

Typically we talk helpful and harmful thoughts. There are also thoughts that are factual, such as "I don't have a lot of money," "it hurts when my baby kicks me," or "I'm bloated". These thoughts can be categorized as burdensome because they are true and difficult to change. But, if we only focus on this aspect of our lives, our mood will get worse.

Women and Trauma. When you ask participants to share their thoughts, some of them may begin talking at length about negative life experiences. For participants with significant trauma histories, it may be important to gently summarize what they are saying. You can do

this by saying something like “let me see if I understand, one of thoughts you are having is \_\_\_\_\_” or “it seems like it was very difficult for you when you were younger, and it leads you to believe \_\_\_\_\_.” Let’s see if we can help with that thought.” You can then write the thought on the board and then talk generally with the whole group about how earlier experiences affect our lives and the way we think about ourselves, other people, and the world and how important it is to understand the way they affected us so that now we can make changes in our lives and in our children’s lives.

In some cases, you may suggest to a participant that it seems very important that she speak more about her experience and that perhaps you can meet with her after class to figure out how to best help her. Later you will decide whether you can provide support through a brief meeting or whether a referral is more appropriate.



## Step by Step

**Step 1: Help participants begin to think about different thoughts.** Because this exercise may lead participants to talk at length about difficult experiences they are having, group leaders may want to provide structure to prevent flooding (individuals becoming emotionally aroused and sharing in length and in a disorganized way prior traumatic experiences—see “Information” section should this occur).

### Suggested Wording

*Now that we have talked about what thoughts are, let’s begin to categorize some of the thoughts you may be having. Before we start, we want to share some of the thoughts other participants have had. For example:*

- *“My body hurts, pregnancy sucks.”*
- *“I can’t believe there’s a life inside me.”*
- *“I don’t know if we can afford another child.”*
- *“I’m not sure if we’re ready to become parents.”*

*So as you can see, it’s normal and natural to have different types of thoughts during pregnancy. It is a time that can be both joyful and very stressful because of the changes you are experiencing both physically and emotionally.*

**Step 2: Introduce the activity.**

### Suggested Wording

*On page 4, you see the picture of the same woman. This time we would like you to imagine that you are that woman, and think about some of the thoughts you are having related to being pregnant and becoming a mom. Below are two columns. One column is labeled “helpful thoughts.” Under that column, write down thoughts you are having that make you feel good, happy, or hopeful. The other column is labeled “burdensome or harmful.” Write down thoughts in this column that make you feel stressed, drained, worried, sad, scared, or angry. Do you have any questions?*

Answer any questions. Give the participants approximately 5 minutes to write down 2-3 thoughts under each category. We recommend that instructors walk around the room to see how the participants are doing and to answer any questions.

**Step 3: Process the activity.**

Ask participant to share the thoughts they wrote down and the reason(s) they categorized them as a helpful vs. harmful thought. Remind participants to share only those thoughts that they feel comfortable sharing. You can write those thoughts on the board. Talk about what makes the thoughts helpful, harmful, or burdensome. The key here is just to focus on how the participants identified and categorized thoughts. Later we will talk about how those thoughts affect mood.

## V.C. HOW THOUGHTS AFFECT OUR MOOD? (15 min)



### Overview

Conduct an interactive activity that highlights the connection between what we think and how we feel.



### Key Points

- Engage the group in an active discussion about Violet and Mary's days and highlight the following points:
  - There are many different types of thoughts that one can have in any given situation.
  - These different thoughts can affect how we feel, either by bringing our mood up, down, or leaving it the same.
  - We have some control over what we think.



### Participant Manual

p. 5.5



### Rationale

To help participants understand how their thoughts about a particular situation can affect their mood.



### Information

This is the second story about Violet and Mary. See class 2 for a description of the first story and things to consider before doing the exercise.



### Step by Step

**Step 1: Introduce the vignettes.**

#### Suggested Wording

*Let's look at the cartoons on page 5 in your books to see an example of how thoughts can affect our mood. Violet and Mary have both recently gave birth, but now that their babies are born they are not sleeping very well. Both babies have colic, and they cry for almost two hours before they go to sleep at night. Their babies' colic is a real problem. It is part of their external reality. In the beginning their mood is at a 3 because they are tired. But Violet and Mary have different reactions to the problem.*

**Step 2: Discuss story.**

#### Suggested Wording

*Let's begin with Violet. Violet feels very bad that her baby has colic. When her baby cries she feels that she is being punished. She thinks it is very unfair that her baby is difficult. She wonders if the baby is doing it on purpose. She begins to think about her baby in a negative way. She sometimes thinks her baby is spoiled, difficult or fussy. She also worries because she thinks she should be able to get her baby to stop crying. She begins to think of herself as a "bad mother." She begins to feel angry with herself and with her baby, and because she is in a bad mood, she stops going out with her friends. She begins to find it*

*hard to be affectionate with her baby the rest of the day because she still feels resentful about last night.*

*Now let's look at Mary. Mary is also upset that she has a colicky baby, but she wonders how she can help her baby. She tries to figure out what is wrong and how she can help. Although her baby keeps crying, she believes that at least by holding her baby, she is showing the baby how much she cares and that must help a little.*

### **Step 3: Process story.**

Here are some questions to stimulate discussion:

- *At each step of the story, why do Violet and Mary's mood change?*
- *How would you rate Violet and Mary's mood at each step in the story (participants can circle a mood rating on their pictures)*
- *How do you think their thoughts affected their mood?*
- *How do you think their thoughts affect their relationship with their babies?*

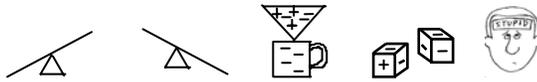
### **Step 4: Connect the stories to the participants' lives.**

#### Suggested Wording

*As many of you already know, all babies cry. Babies cry because it is the way they talk. Sometimes we are able to figure out what they need, and we can help them. Sometimes, we cannot figure it out or what they need and that can be frustrating. When babies have colic, like in the stories, nothing really helps them, and this is very difficult. It would be normal to think like Violet did that there is something wrong with the baby or with her, but the truth is that both Violet and her baby are just in a difficult situation. You may find yourselves in difficult situations too and at these times it will be important not to take it personally. Just because a baby cries does not mean that you're a bad mother or that you have a bad baby. The way we think about the baby crying will affect our mood and how we interact with our babies.*

*It is also important for us to remember that the babies will grow up. They will learn words to tell us what they need, and we will teach them ways to deal with difficult feelings. It will get easier. We can also make it easier by getting help from other people. We will talk more about this in the next session.*

## V.D. TYPES OF HARMFUL THOUGHT PATTERNS (20 min)



### Overview

For participants to become aware of their harmful thought patterns, those that affect their mood states.



### Key Points

- Different types of harmful thought patterns exist.
- These harmful thought patterns affect our mood in a negative way.
- It's important to recognize these harmful thoughts and be aware of how they affect us.
- By learning what types of thoughts we have, we can better understand how to modify them in a helpful way.



### Participant Manual

pp. 5.6-7



### Rationale

To learn to recognize harmful thought patterns.



### Information

If there is not enough time, group leaders can decide to do this activity during the next session because the next session has less material to cover.

It may be useful for group leaders to use props when reviewing the different types of harmful thought patterns. For example, a coffee mug and filter can be brought in to illustrate the concept of a negative filter, dice can be used to illustrate pessimism and a sticker label can be used to illustrate labeling. Leaders can point to a picture in the room and explain how some people make only focus on the imperfections (negative filtering) instead of seeing the entire picture. This is similar to being in any situation and focusing only on the negative aspects of the situation and therefore blind to the positive aspects that exist.



### Step by Step

**Step 1: Review the harmful thought patterns.**

#### Suggested Wording

*We've been talking about how thoughts affect mood. Next week, we will talk about how we can change the way we think to improve our mood, but before we do that, it may be helpful for us to learn more about different types of harmful thoughts. Harmful thoughts fall into different categories.*

*If you look on pages 6 and 7 of your books, we have listed some of the common categories. Let's go over a few of them.*

Pick the categories that you think are most pertinent for group members and review these categories.

**Step 2: Have group members identify which category their thoughts fall into.** If you have written group members' thoughts on the board, pick a few and then ask people which category the thought falls into. Otherwise, you can have group members share thoughts

from page 4 in their books and figure out which categories it falls into. Sometimes, a given thought will fall into more than one category.



### Alternative Exercise

Play a game, have participants form two teams and then play a game like family feud. One of the group leaders can play the game show host. This leader reads one of the phrases below and then participants try and decide which category of harmful thoughts it fits under. The first participant to guess the correct category gets a point for her team. If neither participant gets it, it goes to the next person on their team.

#### Thought:

#### Category of harmful thinking:

- |   |   |
|---|---|
| 1. I have to be the best mom in the world.                                | - All or nothing thinking<br>+ Should     |
| 2. The party is going to be really boring so why bother going.            | - Negative fortune telling                |
| 3. My partner seems very upset today, maybe I did something wrong.        | - Mind reading                            |
| 4. My baby is crying. I am a bad mom.                                     | - Negative filter (ignoring the positive) |
| 5. My child doesn't help me. He/She is lazy.                              | - Labeling                                |
| 6. Yes, I came to group today, but it's no big deal.                      | - Not giving oneself credit               |
| 7. I'm sure I will have a bad delivery.                                   | - Pessimism, negative fortune telling     |
| 8. I did not get the answer first. My team members will think I'm stupid. | - Mind reading                            |
| 9. If we lose, it will be all my fault.                                   | - Blaming oneself                         |
| 10. I yelled at my child. I've ruined her forever.                        | - Exaggerating                            |

## Class #6: How to Give Myself Good Advice

### CLASS OUTLINE

- I. Announcements & Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New material (60-75 min)
  - a. How to give myself good advice (30 min)
  - b. Harmful thought patterns and their antidotes (30 min)
- VI. Personal Project (5 min)
- VII. Feedback and Preview (5 min)

#### Goals for instructors:

1. Help participants see that they can make changes to their thoughts
2. Review harmful thought patterns
3. Help participants use antidotes to challenge harmful/burdensome thoughts

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

Recommended exercise: "Using mental images to relax" (Ramos et al., 2002, p. 10). Alternatively, Instructors can ask participants to choose an exercise from the manual.

## V.A. New Material: HOW TO GIVE MYSELF GOOD ADVICE (30 min)



### Overview

To help participants increase positive self talk.



### Key Points

- We can learn ways to talk back to harmful thoughts to improve one's mood.
- We give good advice to others; we can also give good advice to ourselves.



### Participant Manual

p. 6.3



### Purpose

Learn ways to talk back to harmful/burdensome thoughts.



### Step by Step

**Step 1: Reinforce participants' ability to identify their thoughts.**

#### Suggested Wording

*Over the past week, you have all begun to really focus on what it is you are telling yourselves. This is the first step in learning how to change the way we think.*

Give specific examples of thoughts participants have identified in the last class or during the homework assignment.

**Step 2: Introduce the "Giving Advice" Metaphor.**

#### Suggested Wording:

*Look at page 3 in your books. Imagine the woman in this picture is your friend, and imagine she tells you "I'm not going to be a good mother. I won't be able to take good care of my baby." What do you think you would say to her?*

Facilitate a group discussion about all the things the group may say to her. Make sure to ask how they think her thoughts would affect her mood.

When they are done ask them this question:

*Now imagine that you are this woman, and you had this thought. What do you think you would tell yourself?*

Begin a group discussion about how even though we know how to help others it is sometimes difficult for us to help ourselves. We often know the right things to say, but don't say them to ourselves. Talk about why this might be.

Some key issues to discuss:

- Women are socialized to be caretakers, helpers, to listen to others.
- We learn these skills from a young age. However, we are not taught to apply these skills to ourselves. Part of this may be cultural.
- Another part may be in the way we were raised. Many women are raised to pay

attention to how others are doing at the expense of how they are doing. We need to realize that we need to also care for ourselves. Mothers are the trees of the family. If the tree is not cared for, it will not bare good fruit.

**Step 3: Have women practice giving advice to themselves.**

Ask participants to pair off. If they did the optional project of writing harmful/burdensome thoughts on the index cards, they can use those cards now. Otherwise, take a couple of minutes and have participants write one burdensome/harmful thought on a card. Let them know they will be sharing this thought with their partner.

Once the cards are ready, have the participants swap cards, so now they have their partner's card, and their partner has their card. They will now take turns reading the cards (which are really their partner's cards), but they will pretend that it is their card. The person who does not read the card, will give advice on how to handle the thought (this means that each participant will really be giving herself advice).

As this exercise is occurring, circulate among the group, clarify the exercise, and help participants who may be stuck to really focus on helping "their friend."

**Step 4: Process the exercise.**

Have participants talk about what it was like to "give themselves advice." Did they have the answers when they felt the problem was not theirs? If they did not have answers, you can highlight the importance of getting support from a friend when you feel "stuck." Sometimes the best advice we can give ourselves is to get help.

## V.B. HARMFUL THOUGHT PATTERNS AND THEIR ANTIDOTES (30 min)



### Overview

To teach participants how to challenge harmful/burdensome thoughts using their antidotes.



### Key Points

- Go over the list of harmful thought patterns and their antidotes.
- Review the ones that are most applicable to participants.



### Participant Manual

pp. 6.4-6



### Information

Patterns and their antidotes are provided on pp. 4-6. Instructors may not have time to review all of them and should choose the ones most relevant to the participants.

In some cases when participants strongly adhere to a negative thought, it may be important to dig a little deeper and determine where they think that thought came from, such as from their childhood. You may need to highlight the connection between early childhood experiences and beliefs about themselves, other people, and the world. Participants need to become conscious of this connection and recognize that things are different now from how they were when they were children.



### Step by Step

**Step 1: Introduce the concept of antidotes to harmful thought patterns.**

#### Suggested Wording

*We have been talking about how to give ourselves good advice when we have thoughts that stress us out or cause us to feel sad, scared, or angry. But sometimes this can be hard to do. It can help us if we have specific strategies or ways that we can challenge specific types of thoughts. We call these strategies antidotes. If you have an infection, you can use an antibiotic to stop the infection from spreading. When we have harmful thoughts, we can use an "antidote" to help them from spreading and ruining our mood.*

*Let's go through some of the antidotes to our thoughts.*

**Step 2: Define and identify the antidotes to the harmful thoughts.**

#### Suggested Wording

*First, does anyone have a harmful thought they would like to share?*

Have participants either share thoughts from their cards or other thoughts they had while doing the optional project. If you were circulating around the room and noted that people were stuck on a specific thought, you might ask them to share the thought with the group, so that everyone can think about the possible antidotes to that thought.

Once a participant has shared a thought, go through the following steps:

- 1) Identify which harmful thought pattern the thought falls into. Thoughts may fall into more than one category.
- 2) Have participants talk about how the thought falls into that category.
- 3) Have another participant read the antidote to the thought pattern.

- 4) Have an open ended discussion where participants give advice based on what the antidote suggests.

Go through more thoughts and use more “antidotes.” Talk about how at first it can be difficult to use antidotes, but with practice it becomes easier. Highlight how they can practice this skill with their children and pass on the ability to challenge harmful/burdensome thoughts.

## Class #7: Fighting Harmful Thoughts that Affect My Baby

### CLASS OUTLINE

- I. Announcements & Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New material (60-75 min)
  - a. Passing on patterns of thinking (20 min)
  - b. Parenting: helpful and harmful/burdensome thoughts (20 min)
  - c. Coping with challenging situations with my baby (20 min)
- VI. Personal Project (5 min)
- VII. Feedback and Preview (5 min)

#### Goals for instructors:

- Help participants see the connection between themselves and their baby's thoughts and mood interaction Review harmful thought patterns
- Help participants identify how thoughts can shape their and their baby's internal reality
- Motivate participants to want to learn how to manage their thoughts (internal reality) so that they can improve the quality of their life and their baby's life

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

Recommended exercise: "Using breath to relax" (Ramos et al., 2002, p. 8). Alternatively, Instructors can ask participants to choose an exercise from the manual.

## V.A. New Material: PASSING ON PATTERNS OF THINKING (20 min)



### Overview

Help participants understand how the way they think will affect how their children think.



### Key Points

- Children learn patterns of thinking from their parents.
- The way you think about your children and yourself affects how you are with them, and this in turn affects the way your children think about themselves, you, and your relationship.



### Participant Manual

p. 7.3



### Information

In the first year of life, young children form important attachments to primary caregivers, and they begin to learn to regulate emotions. These are two of the primary tasks of early childhood. By regulate emotions, we mean that children learn how to deal with difficult feelings like hunger, anger, and fear. They learn to do these things through their interactions with their primary caregivers. The answers to the following questions are so important to their development: Will you take care of me? Will you hold me when I am uncomfortable or upset? Will you come when I cry? Will you come back when you leave? Through positive interactions with caregivers, children form secure relationships and learn ways to deal with difficult feelings. These interactions also form the basis for the way children begin to think about themselves, their relationships, and the world. If someone comes for me, then I am important, worthy. The world is not a scary place. I can turn to my mom, and she will protect me. If I am hungry, someone will give me food.

Most mothers want to be there to help their children. However, sometimes their experiences or thoughts can interfere with the way they are with their children. The goal of this session is to talk both about the helpful and harmful thoughts that may interfere with the mothers' ability to serve as safe attachment, consistent attachment figures.

Young children are very attuned to their parents' emotions. They interpret their world by the emotions attached to the words that are spoken around them. If their mothers are depressed or are experiencing a lot of harmful thoughts about being a mother or about their child, children will be exposed to a lot of negative emotions, which will affect the way they begin to think about themselves. As children develop language, they will also internalize the words that their mothers say. They will hear what their mothers say about themselves and what their mothers say about them and over time the mother's words may become the children's words and the children's internal reality. This is the intergenerational transmission of harmful thinking that we are seeking to prevent.



### Step by Step

Step 1: Discuss the intergenerational transmission of thought patterns.

#### Suggested Wording:

*During the past two classes, we talked a lot about the types of thought patterns we have,*

*and how different types of thoughts can affect our mood. But we have not yet talked about how we learned to think these ways.*

*How do you think we learned to think the way we do? For example, if I say "I'm stupid," which is an example of labeling, how did I learn this?*

Begin a discussion of how we learned to think the way we think. Key points to highlight include:

- *We learned by experiencing how others, like our parents or siblings, treated us.*
- *We learned by taking in the words that other people have said to us.*
- *Early experiences often shape the way we think about ourselves, others, and the world.*

**Step 2: Talk about breaking the transmission of harmful thought patterns.**

Suggested Wording:

*As mothers, we have the opportunity to teach our children different ways to think than we were taught. What would you like your children to learn to think about themselves, your relationship, and the world?*

You can write three columns on the board: 1) beliefs about themselves, 2) beliefs about their relationship with you, and 3) beliefs about the world and then elicit participant responses.

**Step 3: Talk about how they will teach their children to think in helpful ways.**

Begin a discussion about how they will teach their children the things they want them to learn. Highlight how they will serve as role models for their children in a similar way that their parents served as role models for them. So, if they want to make changes in their children's lives and thought patterns, they may need to make changes in their own way of thinking first.

## V.B. PARENTING: HELPFUL AND HARMFUL THOUGHTS (20 min)



### Overview

Help mothers identify helpful and harmful thoughts they may have related to being a parent.



### Key Points

- Identify helpful and harmful thoughts related to being a parent.
- Talk about how these thoughts are related to our childhood experiences.
- Talk about how we might challenge harmful thoughts, so we can provide our children with a positive experience.



### Participant Manual

p. 7.4



### Information

It is important during this exercise to acknowledge and normalize any fears or anxiety participants may share about becoming a mother.

As participants talk about how they want to parent their children, they begin talking about discipline strategies. Views of discipline for different cultures should be taken into account. One useful way of discussing discipline is by talking both about what they want their children to learn and how the discipline strategy will affect their relationship with their children. In addition, you can highlight that if the child has a positive and loving view of their relationship with his/her mother, physical discipline is less likely to be necessary. If participants bring up using corporal punishment, it may be important to talk about the guidelines of what is considered acceptable discipline in the U.S. versus child abuse.



### Step by Step

**Step 1: Identify harmful and helpful thoughts related to being a mother.**

#### Suggested Wording

*As you think about becoming a mother, a variety of thoughts may go through your head. In the previous exercise, we talked about how the way we think gets passed on to our children. We want to pass on some of the thoughts we have but not others. So, it is important that we be aware of our thoughts, so we can make changes and teach our children healthy ways of thinking.*

*Let's take some time and write down some of the thoughts we have related to being a mother.*

Write two columns on the board, one titled "healthy thoughts" and the other titled "harmful thoughts." Then ask participants to think of some of the thoughts that they may have related to being a mother, and write them down. If they need an example, you can share that a harmful thought might be "my children won't listen to me and won't respect me" while a helpful thought might be "I can't wait to teach them how to cook."

**Step 2: Talk about how these thoughts may affect their children.** Elicit and open discussion about how these thoughts (helpful and harmful) may affect the way they interact with their children and the way their children learn to think about themselves, their relationship with their mothers, and the world.

**Step 3: Talk about how we can challenge the harmful thoughts.**  
Have participants use the antidotes to challenge some of the specific harmful thoughts they have related to becoming a mother.

Note: At the same time that you help the women challenge harmful thoughts, you need to acknowledge that becoming a mother involves many changes not all of which are positive. You give up many things (including sleep); you just hope that you get many things in return.

## V.C. COPING WITH CHALLENGING SITUATIONS WITH MY BABY (20 min)



### Overview

Help participants identify times when they may be more likely to have negative thoughts about their children and develop a strategy for dealing with these situations.



### Key Points

- ❑ Young children cannot easily express what they need.
- ❑ It can be exhausting to be the parent of a young child.
- ❑ We can learn specific strategies for coping with times when we feel frustrated and angry with our children.



### Participant Manual

p. 7.6



### Step by Step

**Step 1: Discuss potentially stressful situations participants may face with their babies.**

#### Suggested Wording:

*On page 6 in your books, we have listed four situations that mothers often find stressful. Go over the list of stressful situations.*

- *Baby is crying and you don't know what to do*
- *Baby won't sleep at night*
- *Baby doesn't want you to leave the house*
- *Baby has a temper tantrum when you say no.*

**Step 2: Talk about participants' reactions to these situations.** Have group members pick a situation to discuss. Ask them to imagine being in that situation. You may choose to have them close their eyes while you describe a situation in greater detail. For example, you might say "*imagine that it's 3 o'clock in the morning, and your baby wakes up and starts crying.*"

Ask them what their immediate thoughts and reactions are. If participants have difficulty sharing their thoughts or reactions, you can ask them how they think Violet or Mary would react in this situation.

Make sure to highlight that negative reactions are normal. No one likes to hear a baby cry or be faced with a temper tantrum.

**Step 3: Talk about how they might cope with this situation.**

#### Suggested Wording

*On page 6 of your manuals, we have listed steps that may help you deal with difficult situations. Let's go over the steps and see what you think.*

*# 1: The first step is to try to figure out what your child is trying to say through her*

*behavior. This sometimes means putting our own reaction on hold while we try to focus on what is going on with our babies and answer the question “what do you need.” (For example, when we are so frustrated that we feel like yelling or crying, we sometimes need to take a deep breathe and say, ok let me see what you need, so I can help you, you’re not just doing this to annoy me.) Babies do not cry to be annoying or because they are spoiled. They cry when they need something, when they are tired, needing attention, hungry, wet, in pain, or worried. To help our babies we need to figure out what they need.*

Pause and elicit participants’ reactions to this step.

Instructors can also refer back to the colicky baby example from Violet & Mary’s Days in Class 5.

*# 2: The second step is to label the problem and the feeling the baby might be having. While we may not always be able to guess what is wrong, many times we know what our babies need. By giving words to the problem you help teach your babies language that they can use in the future. We also help to calm ourselves down. For example, when we say “oh baby you’re tired.” We’re telling ourselves my baby is tired and needs sleep that is why she is crying. Having this thought is very different from thinking that I have a baby who will never stop crying.*

*# 3: Next you will determine what to do based on what the problem is. So if you think your baby is hungry, you will give her food. If you think your baby wants attention you will give her attention. Sometimes you will not be able to give your baby what she wants. At these times, you may be able to help your baby by putting this in to words. For example, if your baby wants your coffee and tantrums to get it you might say “oh baby you really want mama’s coffee. But coffee is for big people not little people. I’m sorry but mama can’t give you coffee.” While this may not immediately stop the tantrum, it will teach your baby important lessons about life, including that mama understands what she wants but cannot give her everything.*

*# 4: Things don’t always work perfectly. Sometimes we guess wrong about what is wrong. Sometimes we have to try again. When this doesn’t work, it is important to go to step 5 and get help and support.*

**Step 4: Practice using the steps.**

*Have the group choose a difficult situation and practice using the steps to think about how they might cope with this situation. Talk about how using this process helps them to change the way they are thinking and their possible interactions with their babies.*

## Class #8: Thoughts I Want to Teach My Baby

- I. Announcements & Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (5 min)
- IV. Relaxation Exercise (10 min)
- V. New material (60-75 min)
  - a. What kind of thoughts I want to learn to teach my baby (20 min)
  - b. Thinking about your future (20 min)
  - c. Thinking about your baby's future (20 min)
- VI. Personal Project (5 min)
- VII. Feedback and Preview (5 min)

### Goals for instructors:

- Review thoughts module
- Help participants think about the types of thoughts they want to teach their babies
- Help participants begin thinking about their and their babies' futures

### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

## IV. RELAXATION EXERCISE

**Recommended exercise:** "Teaching your child to relax with you" (Ramos et al., 2002, p. 15). Alternatively, Instructors can ask participants to choose an exercise from the manual.

## V.A. New Material: WHAT KIND OF THOUGHTS I WANT TO LEARN TO TEACH MY BABY (20 min)



### Overview

Focus on thoughts the mothers want to teach their babies.



### Key Points

- Review the key points of the thoughts module.
- Mothers play an important role in helping shape their babies' thoughts and internal reality, which can have an impact on the mother's and baby's mood.



### Participant Manual

p. 8.3



### Information

This handout may be difficult for participants to understand at first, so it may be helpful to briefly review the healthy management of reality model.

Instructors may want to use the illustration on this handout to convey the main point of this exercise, which is what you say and how you talk to your child influences her/his perception of themselves and their mother.



### Step by Step

**Step 1: Review the basic concepts of the thoughts module.**

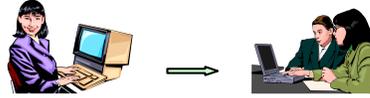
#### Suggested Wording

*This is the last class of the thoughts module. We have been talking about the kinds of thoughts we have, and we found out that some thoughts are healthy and more positive for our mood, and some thoughts are more harmful for our mood. We've also talked about some of the ways to try to get rid of these harmful thoughts, by using some antidotes and thinking about what kind of life we want to have for ourselves as mothers and for our babies. Is there anything else that you remember from this module?*

Elicit discussion

**Step 2: Review key concepts covered on the handout.** Have participants take turns reading the main points. Have them discuss what each of the bullet points means to them. Highlight what participants have said during previous classes.

## VI.B. THINKING ABOUT YOUR FUTURE (20 min)



### Overview

Help participants understand that they can actively shape their future by shaping their internal and external reality.



### Key Points

- When we identify what we want in the future, we can think in ways that help us achieve our goals.
- When we identify what we want in the future, we can plan to do things that will help us achieve our goals.



### Participant Manual

p. 8.4



### Information/Alternative Exercise

It is important to realize that some women may be more limited in the goals they set because of social, economic, or cultural factors. It is helpful in these instances to give examples of women who faced similar challenges and were successful in their goals.



### Step by Step

**Step 1:** Help mothers identify their ability to shape their own future, set goals.

#### Suggested Wording:

*We've been talking a lot in the past 4 weeks about how thoughts can be harmful or helpful to your mood at any given moment. Do you think that the thoughts that you have can also affect your future? How?*

Elicit discussion.

**Step 2:** Engage in an exercise to think about the "future past."

#### Suggested Wording

*We want you to be able to think and plan for your future. Let's do an exercise that helps us do this. First, close your eyes, get in a comfortable position and take a few deep breaths. [Do this for a couple of minutes until participants are relaxed and focused]. Now, I want you to look into the future. Today is \_\_\_\_\_ [date & year]. I'd like for you to fast forward your life to 5 years from now, the year of \_\_\_\_\_. [Ask each question & provide about a minute for participants to visualize their answers.]*

- *What do you see yourself doing 5 years from now?*
- *What kind of life do you want to have for you?*
- *What do you NOT want for yourself?*

After asking the questions, have participants come out of the relaxation activity and either 1) write down their goals (wants and don't wants) on p. 4, and/or 2) verbally discuss this activity.

**Step 3:** Recognize that mothers can set their goals and shape their lives by changing/molding/managing their internal and external reality.

#### Suggested Wording

*From this activity, it's clear that we all know that we have a particular life in mind for us. You know what you want out of life and what you do not want out of life. So the question becomes how can you make this happen?*

Elicit discussion

**Step 4: Recognize that one can be active in managing one's reality.**

Suggested Wording

*By taking this class, you've been learning that you can shape your life by figuring out, for example, that doing pleasant activities can help make you and your baby feel better. In the same way, to have the life that you want, you can also start by doing the things to make that future happen. You have 5 years to make this happen. What are some of the things you need to do now? What are some of the things that you need to avoid?*

Elicit discussion, and write on board relevant points.

*What do you need to start doing right now to reach your desired goal? If you don't change directions, you'll wind up where you're headed.*

*The main thing to know is that if you feel good about yourself and your life, then probably, your baby as she grows up, will be good too, and more secure in her life. Do you think that's true? [Briefly discuss this.]*

**Step 5: Identify obstacles to being active in one's life.**

Suggested Wording

*There are things you think and things you do that make it more or less likely that you will act to achieve your goals. What are they?*

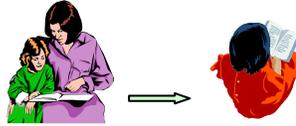
**Step 6: Identify obstacles to being active in one's life.**

Suggested Wording

*Is there anything that would prevent you from having the life that you imagined? What are some of the roadblocks? [Answers: time, money, lack of energy, lack of partner - write these on board and problem solve with participants; this would also be a good time to review the thoughts and mood module, e.g., harmful thought patterns & antidotes].*

*Can anyone think of a way to get overcome some of these roadblocks? [Help group to problem solve.]*

## V.C. THINKING ABOUT YOUR BABY'S FUTURE (20 min)



### Overview

This activity is similar to Activity V.B. (above) but focused on how mothers play an active role in shaping their baby's future.



### Key Points

- Thoughts can help the mother to shape her baby/child's life in ways that are healthier for both mother and baby/child.
- Identify different life goals, and ways to shape their baby's future (e.g., do's and don't do's).



### Participant Manual

p. 8.5



### Step by Step

**Step 1: Help mothers identify their ability to shape not only their own future but also their baby/child's future.**

#### Suggested Wording

*We just talked about the different ways that you can shape your future, by doing some of the things that need to be done now and avoiding things that may not be very helpful.*

*Review some specific examples in previous discussion.*

*Because you have this important person coming into your life, you also have a role to play as a mother, and can not only shape your own reality but also help your child to shape hers/his.*

**Step 2: Engage in relaxation exercise to think about the "future past."**

#### Suggested Wording

*Let's go through the relaxation exercise again, and this time, you're going to focus on your baby's future. First, close your eyes, get in a comfortable position and take a few deep breaths. [Do for a few minutes until participants are relaxed and focused]. Now, I want you to look into the future. Today is \_\_\_\_\_ [date & year]. I'd like for you to fast forward your life to 5 years from now, the year of \_\_\_\_\_. [Ask each question & provide about a minute for participants to visualize their answers].*

- *How old will your child be?*
- *What do you see her to do 5 years from now?*
- *Is she in school? Is she able to read, write?*
- *Does she enjoy school?*
- *What kind of life do you want to have for her to have?*
- *Who are the people in her life?*
- *What role does each of these people play in her life?*
- *What are some of the things that you want for your baby?*
- *What are some of the things that you do NOT want for your baby?*

After asking the questions, have participants come out of the relaxation activity and 1) write down their goals (wants and don't wants) on p. 5, and/or 2) verbally discuss this activity.

**Step 3: Recognize that mothers can help shape their baby's lives by helping her manage her internal and external reality.**

Suggested Wording

*From this activity, it's clear that as mothers, you want the best for your child. [Cite examples from discussion]. How can you help assure or increase the likelihood for this life will happen for your baby?*

Elicit discussion.

**Step 4: Recognize that mothers can be active in managing their baby's reality.**

Suggested Wording

*In the previous activity, we talked about the things that you could do to help realize your ideal future. Now, can you think of ways that you can help to make your baby's future happen? Remember, you have 5 years to make this happen. What kinds of things do you want to teach your baby? To make this happen, what are some of the things you need to do now? What are some of the things that you need to avoid?*

Elicit discussion, and write on board relevant points.

**Step 5: Identify obstacles to being active in one's life.**

Suggested Wording

*Is there anything that would prevent you from having the life that you imagined for your baby? What are some of the roadblocks?*

Elicit answers: time, money, lack of energy, lack of partner. Write these on board and problem solve with participants.

*Can anyone think of a way to get overcome some of these roadblocks?*

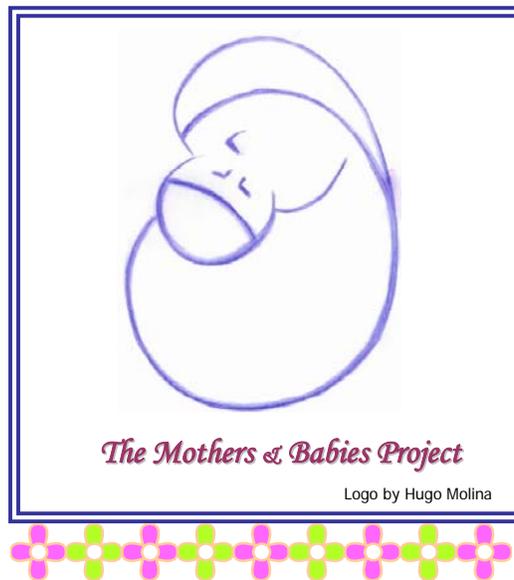
Help group to problem solve. If support is an issue, instructors can also provide a preview of the next section, on the connection between people and mood relationships.



**Alternative Exercise**

An alternative to doing Activity V.B. and V.C. separately is to do both activities together. This would help to clarify that the mother and baby's lives will be intertwined (during pregnancy and postpartum). There are ways to mold both mothers' and children's realities separately. Instructors can follow one of the exercises above and add "you and your baby" instead of just "you" or "your baby."

Another way to do the exercise is to have the participants stand up side by side and begin to think about the kind of life they want for their baby and the things they can begin doing now to ensure that their baby has a promising future. Tell the participants, "We are now going to take one step at a time, with each step representing one year of your baby's life. We want you to think about what things you want to do during each year to ensure your baby meets her/his goal that you have for her/him. Before beginning, imagine that you have your baby in your arms and think about what she or he looks like." Then have participants take the first step, in which their baby just completed her/his first year of life. Begin to describe all the physical and emotional changes that participants can expect their baby to have. During the next step, remind the participants that their child is now walking and holding their hand. Repeat this procedure for each of the next 3 steps until the "child" reaches 5 years of age.



# Mothers and Babies Course Instructor's Manual People Module

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## PEOPLE MODULE

### Class #9: Contacts with Others and My Mood

#### CLASS OUTLINE

- I. Announcement and Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New material (60-75 min)
  - a. Relationship between people contacts and mood (30 min)
  - b. Violet and Mary (15 min)
  - c. Identifying your social support system (15 min)
  - d. People in my life & the ways they support me (15 min)
- VI. Personal Project (5 min)
- VII. Preview & Feedback (5 min)

#### Goals for instructors:

- Review main concepts from last class and module (thoughts & mood)
- Introduce main concepts from new module on contacts with others and mood.
- Provide psychoeducation regarding the reciprocal nature of contacts with others and mood
- Identify participants' current support system.
- Begin to discuss graduation from course, begin termination process.

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
4. Copies of CES-D or other mood questionnaires (optional)
5. Evaluation/feedback forms (optional)

#### IV. RELAXATION EXERCISE

Recommended exercise: "My secret paradise" (Ramos et al., 2002, p. 8). Alternatively, Instructors can ask participants to choose an exercise from the manual.

V.A. New Material:  
RELATIONSHIP BETWEEN PEOPLE CONTACTS AND YOUR MOOD (30 min)



### Overview

To introduce the module on relationship between mood and contacts with others (interpersonal relationships).



### Key Points

- ❑ Provide psychoeducation regarding the reciprocal nature of interpersonal problems and depression.
- ❑ Identify participants' current support system.
- ❑ People contacts are part of one's external reality.
- ❑ Begin to discuss graduation from course, begin termination process.



### Participant Manual

pp. 9.3-4



### Information

In this section we describe the interaction between how we feel and how we act with other people. The interaction goes both ways: How we feel affects how we act with others *and* how we act with others affects how we feel.



### Step by Step

**Step 1: Introduce the relationship between people contacts and mood and provide overview of the next four weeks.**

#### Suggested Wording

*This is the last section of our new materials. We have 4 more weeks with each other. Over the next 4 weeks, we will be talking about how our relationships with others affect our mood, and how relationships with others might also affect your baby's mood. How we interact with others is part of our external reality. We will also have a chance to talk about what you've learned in this course, and also have a time to celebrate at the end of the four weeks. We will have a graduation party for all of you, as you prepare for the birth of your baby. Let's begin by talking about the connection between mood and contacts with others.*

**Step 2: Begin a group discussion regarding how depression affects contacts.**

Write the words "mood" and "contacts with others" on the board (similar to chart on p. 3). Write their answers on the board (see example below).

#### Suggested Wording

*What kind of people contacts do you have when you are feeling down?  
How does your feeling down affect your contacts with people?*

Key points to address include that when people are feeling down they often:

- Have less contact with others, avoid others
- Have lower tolerance, feel more irritable
- Feel more uncomfortable around people

- Act quieter and be less talkative
- Are more sensitive to being ignored, criticized or rejected
- Trust others less

**Step 3: Discuss how a lack of contacts or negative contacts can affect mood.**

Suggested Wording:

*When you isolate yourself from others, how does that affect your mood?*

*How does having more conflict or tension with others affect your mood?*

Key points to address include that when people have fewer positive contacts or more negative contacts they may:

- Feel alone
- Feel sad
- Feel angry
- Feel like no one cares
- Be more depressed

**Step 4: Summarize relationship.**

Suggested Wording

*So we can see that the relationship between depression and contacts with others is reciprocal, that is, it goes both ways. When we are feeling down or depressed, we often have fewer or more negative contacts because we don't feel like being around others, we may be more sensitive to others' comments, or we may be more irritable. When we have fewer positive contacts and/or more negative contacts with others, this also adds to our depression. So when we are feeling down or depressed, we can be caught in a vicious circle. We will be talking about how we can break this pattern, and better manage our external reality.*

**Step 5: Have participants identify what comes first: depression or lack of people contacts.**

Suggested Wording

*A lot of people wonder whether feeling down/depression cause people to be less sociable or being less sociable cause feeling down/depression? What do you think?*

Through group discussion elicit the following point:

*The answer is probably both. When we feel down, we are less likely to socialize. But not having contact with people can take away from us a good source of support, and we become more depressed. When we feel more depressed, we do even fewer things with people. This cycle continues until we are so depressed that we spend much of our time feeling alone.*

**Step 6: Have participants identify how to break the cycle between negative mood and fewer positive contacts (or more negative contacts) with others (refer to p. 4 of the participant's manual).**

Suggested Wording

*Now that we know about the cycle between negative mood and lack of positive people contacts, how can we break the cycle?*

Elicit group discussion.

*Now I'd like for you to look at p. 4 of your manual. As you can see here, we can see that to improve our mood, we can increase our pleasant activities, change the way that we think (our internal reality), and also by either reducing negative or harmful contacts with people*

*or increasing positive or helpful contacts with others. Can anyone give an example of using any of these strategies to improve your mood?*

## V.B. Violet and Mary's Days (15 min)



### Overview

Use this exercise to reiterate the relationship between mood and contacts with others.



### Key Points

- Note importance of the reciprocal nature of interpersonal problems and depression.
- Violet and Mary have different ways of managing their external reality, which can affect their mood.



### Participant Manual

p. 9.5



### Step by Step

#### Step 1: Reintroduce Violet and Mary.

##### Suggested Wording

*On page 5, you can see that Violet and Mary are now 8 months pregnant. This morning, Violet and Mary get a phone call from a friend asking them to go shopping. Violet does not answer the phone. She doesn't feel like getting out of bed and stays home. Mary decides to go out with her friend, and they spend the afternoon together shopping, looking at baby clothes, and talking about the upcoming baby.*

#### Step 2: Elicit Group Discussion regarding Violet and Mary.

##### Suggested Wording

*Notice that Violet and Mary both start out at a level "4" in terms of their mood.*

- 1) *How would you rate Violet's mood at the end of the story? (Circle number)*
- 2) *How do you think what she (Mary) did affected how she felt?*
- 3) *How would you rate Mary's mood at the end of the story? (Circle number)*
- 4) *How do you think what she (Mary) did affected how she felt?*

*Answers: Violet will have a lower mood rating than Mary. Why? Due to the relationship between mood and fewer positive contacts (isolation). Next, ask participants to help Violet break this cycle between depression and less/negative contacts with others.*

#### Step 3: Brainstorm possible ways to break the cycle. As they identify different ways, write them on the board.

##### Suggested Wording

- *How can we break the cycle?*
- *What did you learn in other modules that you could use to improve your mood?*
- *How does having a good talk or a good time with someone help your mood?*
- *Will improving your mood help your baby's mood?*

## V.C. IDENTIFYING YOUR CURRENT SOCIAL SUPPORT SYSTEM (15 min)



### Overview

Participants are asked to identify and evaluate their current social support system, and the relationship between social support and mood.



### Key Points

- ❑ Recognize the importance of social support and its relationship to mood.
- ❑ Humans by nature are social beings.
- ❑ Participants can identify and evaluate their own social support system.
- ❑ There are different kinds of support.
- ❑ We can make choices as to whom we spend time with.
- ❑ The class and community can act as a source of support.



### Participant Manual

pp. 9.6



### Rationale

Social support is a component of interpersonal relationships, which can help decrease depressed mood.



### Information

Women without partners. Some women in the group may not have partners. In this case, group leaders should acknowledge that it may be more difficult (but NOT impossible) than women w/ partners to obtain support/help. Different ways of seeking help might be important to note, and that this type of communication (communicating one's needs, getting help) will be covered in the later sessions (3 & 4) of the People module.



### Step by Step

Step 1: Introduce the concept of social support.

#### Suggested Wording:

*We've talked a lot about the importance of contacts with others in managing mood problems. Now let's talk about the people who are in your social support system.*

*By social support system, we mean the people who are close to you and with whom you share moments of your life, both positive, negative. This includes your family, friends, neighbors, co-workers, health care providers. In general, the stronger your support system, the better you will be able to face tough situations. Also, the stronger your support system, the better your health and your baby's health will be.*

Step 2: Have participants' identify their own social support system.

#### Suggested Wording:

*In general, who makes up your social support system? Who are the people that you go to for help?*

Elicit general group discussion. The exercise on p. 7 (see Step 5) will formalize this process.

**Step 3:** Begin a discussion regarding how the group and the community can act as a source of support.

Suggested Wording

*We have been talking about different people in our lives who provide us with support. Did you notice that by coming here and talking today we have increased your social support? People have provided others with advice and emotional support. Coming to the group is one good way to begin getting more social support.*

*How has it been helpful to be in the group and interact with others today? What kind of emotional feelings have you experienced being in the company of the other members of the group? Have you experienced positive feelings? If so, which kinds of feelings? Of course, it is also possible to experience negative feelings when you are with people. What fears or concerns do you have about the group? Part of what we want to discuss during these four sessions is how to reduce negative feelings and increase positive feelings when you are with others.*

*Also, the community that you live in can be a source of support. How? Are there resources in your community that can provide you with the help that you need?*

Elicit group discussion.

## V.D. ACTIVITY: PEOPLE IN MY LIFE AND THE WAYS THEY SUPPORT ME (15 min)



### Overview

Assess participants' current support networks.



### Key Points

- Participants can identify and evaluate their own social support system.
- There are different kinds of support.
- We can make choices as to whom we spend time with.



### Participant Manual

p. 9.7



### Rationale

Identifying one's social support system can help to determine if there are specific types or areas of support that one needs strengthening in order to improve mood.



### Information

Quantity vs. quality of social support. Group leaders should assess, for each participant, whether it is an issue of not having any support network at all (quantity) vs. not getting together with existing support network for particular reasons (i.e., quality, this person is not available because he/she does not live in the same country due to migration).

- If it is the quantity issue, it will be important to evaluate ways to find other pregnant women and other people in general to increase the support system.
- If it is a quality issue, it will be important to assess whether participants need to change the existing support system (e.g., by increasing contacts with supportive people or decreasing support with draining or hurtful people). It is important to acknowledge differences in individual support systems, and thus normalize this fact.



### Step by Step

**Step 1: Introduce the exercise including the purpose and ways to complete the exercise.**

#### Suggested Wording

*Please turn to p. 7. The activity is called the people in my life and the ways they support me. The purpose of this exercise is to figure out whom your social support system consists of. This page is divided into 4 squares. Each square represents a certain kind of support that a person might give you. As we go through them, think of the people in your life who might provide these different types of support. If you can't think of anyone who helps you in this way, put down a question mark. This exercise will help us understand where we have support and where we maybe need more support. As you do this exercise, it is important to note that there might not be people or names that you'll write down for each of these types of support, or that some people provide only one type of support, whereas others provide others types of support. For example, some are great at giving emotional support but won't help with chores. Therefore, not all people are good at all types of support.*

Go through the squares on page 7 in participants' manual. Help the participants fill them out. The same person can be in more than one square.

## Step 2: Have participants evaluate the adequacy of their social support system.

After completing the sheet, ask participants to look at their sheets.

Identify areas that members feel are fine and areas they would like to change and develop. Mention that you will be talking about how to make changes in their support network. Begin a discussion about their sheets. You can use the following questions.

### Suggested Wording

1. *What do you notice?*
2. *How many people did you think of for each type of support?*
3. *Were they mainly friends/family/professionals?*
4. *Where is there plenty of support?*
5. *Where are the gaps? In which areas?*
6. *Who gets a lot of mentions? (Identify risks of relying too much on one person).*
7. *Who do they want to be part of their life as a mother?*



### Alternative Exercises

#### 1) Picture presentation of social support network.

Another exercise used to identify one's social support system is to draw the participant in the center of the board with a circle around the person's name. Then ask the participant the names of the people in their lives who provide them with support (generically speaking) and whether they are close to them or not. For example, Jane is the participant, and Jane identifies that her mother, brother, and husband are supportive people in her life. The instructor would write the mother's name or relationship, brother's name or relationship, and husband's name or relationship on the board, with a circle around each name. Next, ask Jane how close she feels to each of them. For those that she identifies as close, draw a solid line attaching their circle to Jane's circle. For those that are identified as not close or conflictual, draw a dashed line from their circle to Jane's circle. In this way, the participant can identify and evaluate whether she needs to enlarge her social support network, and/or she feels that the network is adequate.

#### 2) Meeting People And Making Your Support System Larger and Stronger.

Purpose: To discuss ways that people can make their social support system stronger.

### Suggestion Wording

*Depression has been associated with low social support. Therefore, encouraging the formation of new relationships and increasing social contacts is essential to reducing participant's negative mood/depression.*

*One way to make your social support network stronger is to meet new people but doing this is not always easily, especially when you're feeling down, or when you are pregnant and may be uncomfortable going out.*

*Let's talk some good ways to meet new people:*

- *The easiest way to meet people is to do something that you like doing and doing it in the company of other people!*
- *Even if you don't find anyone in particular whom you would like to get to know better, you will still have been doing something pleasant and you will be less likely to feel that you wasted your time.*
- *Since the main focus is the activity you are doing, and not just meeting others, there will be less pressure on you than in a setting where the whole purpose is to meet people.*

### ACTIVITY

As a group brainstorm to identify activities and places where you can meet people. Identify places that are in the area and activities that are free such as:

- 1) Church, temple, synagogue, place of worship
- 2) Prenatal clinics
- 3) Childcare places
- 4) Parks where other mothers/children might frequent
- 5) Volunteer activities
- 6) Cultural/ethnic events

*What activity could you do this week with another person that might be helpful, supportive, pleasurable, relaxing or enjoyable?*

Example:

*Activity → Attend group (or Call a friend)*

*Mood → Less depressed*

*Your example:*

Activity: \_\_\_\_\_

Mood: \_\_\_\_\_

## Class #10: How to Get Support for Me and My Baby

### CLASS OUTLINE

- I. Announcement and Agenda (10 min)
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New material (60-75 min)
  - a. Getting support for you & your baby (10 min)
  - b. The Hierarchy of needs (15 min)
  - c. The attachment relationship (15 min)
  - d. Baby's physical and emotional needs (15 min)
  - e. Babies' needs change as they grow (10 min)
  - f. Baby's temperament (15 min)
- VI. Personal Project (5 min)
- VII. Feedback & Preview (5 min)

#### Goals for instructors:

- Review the reciprocal nature between mood and interpersonal relationships.
- Identify ways to increase support for one's baby
- Identify participants' Hierarchy of Needs
- Discuss the attachment relationship, and ways to meet the baby's needs, & temperament.
- Discuss and identify baby's needs

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. TV & VCR
4. Video on Temperament
5. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
6. Copies of CES-D or other mood questionnaires (optional)
7. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

At this time, participants have been exposed to various exercises and may have preferences. Instructors can ask for suggestions from the participants regarding which relaxation to do in class. This will increase the chances participants will use these exercises outside of class.

## V.A. New Material: GETTING SUPPORT FOR ME AND MY BABY (10 min)



### Overview

To continue discussing the relationship between mood and contacts with others, getting support for the baby, and understanding babies' needs and temperament.



### Key Points

- ❑ Provide psychoeducation regarding the reciprocal nature of interpersonal problems and depression.
- ❑ Identify participants' current support system and how this system can provide support for their babies.



### Participant Manual

p. 10.3



### Information

Quantity vs. quality of social support. Group leaders should assess, for each participant, whether it is an issue of not having any support network at all (quantity) vs. not getting together with existing support network for particular reasons (i.e., quality, this person is not available because he/she does not live in the same country due to migration).

- If it is the quantity issue, it will be important to evaluate ways to find other pregnant women and other people in general to increase the support system.
- If it is a quality issue, it will be important to assess whether participants need to change the existing support system (e.g., by increasing contacts with supportive people or decreasing support with draining or hurtful people). It is important to acknowledge differences in individual support systems, and thus normalize this fact.



### Step by Step

**Step 1: Discuss the relationship between social support and mood, and identify the baby's social support system.**

#### Suggested Wording

*As we mentioned last week, we are going to spend the next three weeks, including today talking about making changes in relationships, and changes in your support system in order to improve your mood. Today, we're going to do the same exercise and identify the people who will provide support for your baby. As you can see on p. 3, there are four types of support, and you can write down the names of the people who provide the different kinds of support.*

Have participants complete p. 3. Make sure participants understand the different types of support.

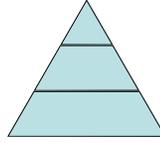
**Step 2: Discuss the baby's social support system, and have participant evaluate the adequacy of this system.** If the system is not adequate, have participants identify ways to increase the support.

Suggested Wording

*What do you notice about this exercise? Will your baby have people in his/her life that will provide support for him/her? Are there some types of support that your baby needs more of? How can the group help you to think about getting the different kinds of support and you and your baby will need?*

Brainstorm and write the possible solutions on the board.

## V.B. THE HIERARCHY OF NEEDS (15 min) The Relationship Between Mood, Health, and Needs



### Overview

Introduce the hierarchy of needs and have participants identify their own needs.



### Key Points

- ❑ We all have needs.
- ❑ Some needs take priority over others.
- ❑ Once you have a baby, his/her needs also have to be considered.
- ❑ Unmet needs may motivate our thoughts and behaviors.
- ❑ If our need for love or companionship is not satisfied, we may find ourselves thinking about looking for a relationship or staying in a harmful one.
- ❑ Fulfilling lower level needs, such as basic needs and safety needs, may make it easier to fulfill higher level needs.
- ❑ We often have times when we are working on several goals at different levels.
- ❑ Identify obstacles to getting one's needs met.
- ❑ Needs, mood, and health can all be related.



### Participant Manual

p. 10.4



### Rationale

Identifying needs can be helpful to understanding how one's met or unmet needs are related to mood and health.



### Information

The hierarchy of needs is based on the work of Abraham Maslow.

Cultural differences. Different cultural groups may place a greater emphasis on certain needs. It is critical that leaders assess the role culture plays in group members' conceptualizations of needs and resources and attempt to understand how the individual's view of their culture affects the way they perceive the relationship between access to resources, depression, and health.



### Step by Step

Step 1: Introduce the hierarchy of needs.

#### Suggested Wording:

*When you're thinking about becoming mothers, it is important to think about the different needs that you might have as you become a mother. We all have needs. As mothers, you are going to be responsible for trying to meet your baby's needs too. It is easier to be a good mother if you are feeling good. To feel good, it is important to meet your needs. It's probably easier to be a good mother if you are able to meet your own needs. By meeting your own needs, you will increase the likelihood that you will meet your baby's needs. This is why we are doing this exercise, to try to figure out where you are, and whether your needs are being met.*

Draw a triangle (Hierarchy of Needs) on the board or refer to p. 4.

*Let's begin by talking about the different types of needs that we have. We can think of needs as part of a hierarchy or a pyramid. It's easier to get to the top if we have met all the steps below. At the base of the pyramid are our basic needs (food, clothing, shelter, and health), next is our need for safety, then our need to belong and to be loved, then our need to meet responsibilities, either in our families or in our work. Finally, there is our need to be self actualized, meaning to feel like we have made personal achievements or contributed to a group or community in our own individual or special way.*

**Step 2: Ask participants to identify the levels that they are currently working on. Elicit their reactions to this way of viewing needs.**

Suggested Wording

*What do you think about the hierarchy of needs? What needs are currently being met in your life? What needs would you still like to fulfill? Sometimes, unmet needs may motivate our thoughts and behaviors. For example, when we are thirsty, all we may think about is obtaining something to drink. We can't think of anything else.*

**Step 3: Introduce the idea that there are different types of needs, which do not necessarily function on a hierarchy.**

Suggested Wording

*We often have times when we are working on several goals at different levels. Even when we do not have lower level needs met, we can achieve higher level needs, but it is often a struggle. For example, people who live in violent places where they feel unsafe are often able to create warm and loving relationships with others and contribute to the community. Do you know any people like this?*

**Step 4: Identify obstacles to not meeting one's needs.**

Suggested Wording

*What are some obstacles to you not being able to meet your needs?*

Some key points:

- negative mood
- health problems related to pregnancy or in general
- relationships (lack of positive, more negative, none)

**Step 5: Discuss how mood and health can affect participants' abilities to get their needs met. Refer to the diagram at the bottom of p. 4.**

Suggested Wording

*Needs can be important to understanding our mood and health. If our needs are not met, this can affect our health and mood, and our relationships with others. One of the purposes of this course is to learn how our mood works, how to protect our health and how to meet our needs, so we can teach these things to our babies. If they can learn this when they are growing up, we hope their lives will be better.*

Encourage participants to think about the role that feeling down/depressed and health problems play in obtaining resources at each level. Group leaders can write down the broad categories on the board and then inquire about the changes that group members have experienced at that level as a result of their depression or health problems.

Some key points:

- It is harder (although not impossible) to reach a goal on one level if you have not met the

goals on the levels below it

- Depression and health problems may affect your ability to meet goals you have set
- They may act as obstacles
- You may need to modify your goals.

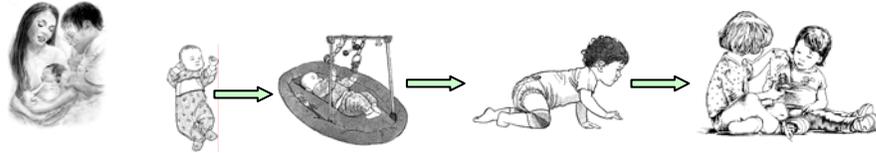
V.C. THE ATTACHMENT OR BONDING RELATIONSHIP BETWEEN PARENTS AND BABY (15 min)

V.D. BABY'S PHYSICAL AND EMOTIONAL NEEDS (15 min)

V.E. BABIES' NEEDS CHANGE AS THEY GROW (10 min)

V.F. Baby's temperament (15 min)

Note: The above 4 sections cover similar key points and are grouped together.



**Overview**

Introduce the relationship between mothers and babies (attachment, bonding), and how these are related to identifying babies' needs and temperament. Showing a video on temperament helps to tie all of these points together.



**Key Points**

- ❑ Bonding between mother and child occurs during pregnancy and when the baby is born.
- ❑ Bonding or attachment refers to the close emotional tie that develops between you and your baby.
- ❑ Bonding or attachment can help strengthen the parent-child relationship.
- ❑ Bonding or attachment in the early years lays the foundation for the parent-child relationship in later years.
- ❑ Identify ways to promote the parent-child relationship.
- ❑ Recognizing babies' different needs can help promote the parent-child relationship.
- ❑ Identify 3 main styles of temperament: a mother's relationship with her baby can be improved by understanding her child's temperament.



**Participant Manual**

pp. 10.5-10



**Step by Step**

Step 1: Define bonding and attachment.

Suggested Wording

*We've talked about your needs. Now we will talk more about your baby's needs. One of the most important relationships is the one that you will have with your baby, at birth and beyond. During pregnancy, you are already bonding with your baby. You know that your baby is growing inside of you -- when your baby is kicking, is restless, is sleeping. So really bonding continues from the relationship that you already have with your baby during pregnancy. When you give birth, this bond becomes more of a reality for you. Now you can see, feel, and talk to the little person whom you knew only by feeling, or from the movements and heartbeat that you heard during pregnancy.*

*Bonding refers to the close emotional tie that develops between you and your baby. Some people also call this attachment.*

Step 2: Elicit participants' understanding of attachment in their lives.

Suggested Wording

*How can you form an attachment with your baby? Are you doing this already? How?*

Step 3: Identify ways to promote bonding and attachment. One way is to recognize and

learn about baby's needs.

Suggested Wording:

*What can you do to promote the bonding experience with your baby? Just like you have needs, your baby will also have needs. On p. 6, you can see that your baby can have physical needs and emotional needs. Some parenting books talk about 3 goals that are important to be a helpful parent or mother: 1) know your child; 2) help your child feel right; 3) enjoy parenting.*

Write 3 goals on board.

*Remember, you are your child's first and favorite role model. You can send a positive message to her - that she is capable of doing many things. Start by being supportive. Take pleasure in your child's accomplishments and let her know it.*

Review the types of needs on p. 6.

*Part of attending to your baby is to recognize her needs. For example, if she is hungry, you want to feed her. When she is tired, put her to sleep. This will teach her that she can find love in the world.*

*Babies also have emotional needs. They want to know that they are loved. You can love your child and show your affection for her. Hug her, cuddle with her, read to her, talk to her throughout the day. This will teach her that she is important to you, and that therefore she can be important to others. Her internal reality will begin to form the idea that she is a valuable being. If she thinks of herself as valuable, she will be more likely to treat herself well, and expect that others treat her well, too.*

*You can establish daily routines so your child will feel secure within a schedule. Don't be afraid to alter the schedule occasionally for special activities. Predictability is good. But so is teaching your child to be flexible.*

*From the moment she is born, your child is developing a sense of self. She is working toward being attached to, but separate from, you. The first step in this development is learning to trust. When you meet your baby's physical and emotional needs, you are helping her trust herself and feel secure in the world.*

**Step 4: Identify 3 main styles of temperament: a mother's relationship with her baby can be improved by understanding her child's temperament.**

Suggested Wording

*An important part of learning to meet our own needs as mothers, and our babies' need is to recognize that not all babies are alike. In particular, babies have different ways of responding to the world - something that we call temperament.*

*We are all born with a genetic tendency toward a certain temperament or way of responding to the world. On p. 8, there are 9 ways that your baby can respond to the world that are part of what we mean by "temperament." There are three types of temperament: easy (flexible), slow to warm up (fearful) and difficult (feisty).*

Briefly go over the characteristics and show video on temperament. Elicit reactions to the video.

**Step 5: Ask participants to identify their own temperament. For multiparous mothers, have them identify also their child's temperament.**

Suggested Wording

*What is your way of responding to the world? For example, are you always moving or doing something, or you are more of a relaxed type?*

*For those of you who have children, what is your child's temperament?*

**Step 7: Elicit and answer questions.**

Suggested Wording

*Are there any questions about this or anything else we've talked about so far?*



Alternative Exercises

If there is time, instructors can also review p. 7, and/or mention that participants can read this at home. The goal of this exercise is to help participants recognize that babies' physical, emotional and social needs change as they grow older.

## Class #11: The Importance of Good Communication and Preparing for My Baby's Birth

### CLASS OUTLINE

- I. Announcement and Agenda (15 min)
  - a. Planning for graduation
- II. General Review (10 min)
- III. Personal Project Review (10 min)
- IV. Relaxation Exercise (15 min)
- V. New material (60-75 min)
  - a. Active listening (15 min)
  - b. Communication styles and mood (15 min)
  - c. Getting your needs met (15 min)
  - d. Obstacles to needs (15 min)
  - e. Preparing for my baby's birth (20 min)
- VI. Personal Project (5 min)
- VII. Feedback & Preview (5 min)

#### Goals for instructors:

- Introduce different communication styles
- Have participants identify their primary communication style, and how this may affect their mood and relationships.
- Help mothers prepare for their upcoming birth: Developing a birth plan

#### Materials needed:

1. Participant manuals
2. Pens, Dry erase board, or chalkboard to present material to class
3. TV & VCR
4. Video on Temperament
5. Box or basket for role play exercise ("What's in the box?")
6. Ramos et al. (2002). *The MB Course: Relaxation Methods for Managing Stress*.
7. Copies of CES-D or other mood questionnaires (optional)
8. Evaluation/feedback forms (optional)

### IV. RELAXATION EXERCISE

At this time, participants have been exposed to various exercises and may have preferences. Instructors can ask for suggestions from the participants regarding which relaxation to do in class.

V.A. New Material: ACTIVE LISTENING (15 min)  
(How to communicate with others to obtain support for you and your baby)



### Overview

Introduce communication skills as a way to obtain support for mothers and babies.



### Key Points

- Introduce communication skill of active listening.
- Recognizing one's communication style, and its relationship to mood.
- How to get one's needs met.
- Identify obstacles to getting needs met.



### Participant Manual

p. 11.3



### Rationale

Communication can improve interpersonal relationships, which in turn, can improve mood. Communication involves having others feel that they are being listened to and understood, and obtaining that feeling oneself.



### Information

There are cultural differences to the concept of communication styles. For some cultures, being assertive is perceived negatively. Therefore, it is important to assess the cultural context and the appropriateness of expressing oneself in a way that is consistent with one's cultural values and beliefs.



### Step by Step

**Step 1: Introduce communication and importance to obtaining support.**

#### Suggested Wording

*So far, we've talked about social support for you and your baby, how to identify and meet your needs and your baby's needs, and the important relationship between you and your baby.*

*We also talked about when we feel down or depressed, that we have a tendency to not interact with a lot of people, and this can include our babies. Babies, in turn, can sense our feeling depressed, and, if they feel rejected may give up trying to establish a bond with us. They may cry more. They may be difficult to console.*

*Now, we'd like to talk about how to be able to get the best support and help for you now (during your pregnancy), when you give birth, and as your baby becomes older. In order to get help, we have to learn how to communicate our needs to others. If we are able to communicate our needs, then there's more of a chance that we will be able to meet our own needs and our baby's needs.*

*Today, we will learn about different ways to be able to communicate our needs to others,*

*in order to get the help and support that we need.*

*If you turn to page 3 in your books, there's a cartoon at the top of the page. In the cartoon, one person is talking and the other person is listening. They are communicating with each other. Talking and listening can seem pretty basic to us, after all we've been doing this since we were little kids, but are they really easy to do?*

Elicit answers from the group. Discuss how misunderstandings, resulting from either people not speaking their mind or others hearing things differently, can cause interpersonal conflict.

**Step 2: Active listening exercise.** Have participants get together in pairs.

Suggested Wording

*Let's try an exercise to try out our listening ability. During the next five minutes one of you will speak and the other will listen. If you are the speaker, I would like you to tell your partner a little bit about the kinds of things that you would like to tell your baby about you as his/her mother and a little bit about the baby's father. This could be about anything about you or the baby's father—like what kinds of parents you would like to be, what are some qualities of the mother or father? As you talk, pay attention to your partner. Ask yourself, is my partner listening to me? How do I know my partner is listening to me? How do I feel after talking with my partner?*

*If you are the listener, I would like you to listen without adding anything new. In other words, for right now, don't talk about your own life, even if you have something in common with what your partner is saying. "Active listening" means that, from time to time, you repeat what your partner is saying in your own words to make sure that you have understood what they are saying. You may also mention the feelings you think your partner is experiencing. For example, "It sounds like that made you angry." This is intended to help your partner feel that you really understand what they are saying. (And, if you got it wrong, your partner has a chance to correct what you misunderstood.) Also notice how your partner talks to you, verbally and nonverbally.*

Depending on the group, you can choose to do this exercise without first talking about active listening skills or after introducing basic active listening concepts.

*What we are doing is one specific kind of listening: Active Listening, which means that you are listening to what the person is saying and repeating the important parts of what they said, without adding your own experience. You'll do this for 5 minutes, and then switch turns.*

After five minutes switch and have the speaker become the listener and vice versa.

**Step 3: Process the exercise.** At the end ask group members for their reactions. Possible questions to stimulate discussion are listed below.

Suggested Wording

*For talkers:*

- *How did you know your partner was listening to you? (verbal and non verbal cues.)*
- *How did it feel to be listened to? or not?*
- *What was good about what your partner did?*
- *What was not so helpful?*

*For listeners:*

- *What did you do to make your partner feel listened to?*
- *How well do you think you understood what your partner was saying? (content and at an emotional level)*

- *What was it like to really focus on listening and making the other person feel understood?*
- *How did you feel about listening to your partner?*
- *What was the key message that your partner was telling you?*

*For both:*

- *How did doing this exercise affect your relationship?*

Points to discuss:

- 1) Relationships can be affected by listening.
- 2) If one doesn't listen, they can misinterpret what the other person is saying.



### Alternative Exercises

The "Telephone" Game. Instructors can also ask group members whether they've ever played the game "telephone." You whisper something in one person's ear and then they go around the circle whispering it to the next person, and so on. At the end, the last person says the phrase. Often the phrase comes out very different at the end. This game is an example of how messages change as they get passed on to different people. Sometimes, we say things differently than they were said. Sometimes, we hear things differently. Once you have shown how much the original phrase changes, you can try it again, using active listening (in which each person repeats what she is being told to make sure she got it right) and show that the original phrase does not change as much.

## V.B. COMMUNICATION STYLES AND YOUR MOOD (15 min) (What's in the Box?)



### Overview

The relationship between communication styles, mood, and relationships with others.



### Key Points

- ❑ Identify participants' primary style of communication (passive, assertive, aggressive) in interpersonal situations.
- ❑ There are different communication styles that may work in different situations.
- ❑ Communication styles can affect mood
- ❑ Communication styles can affect relationships with others.



### Participant Manual

p. 11.4



### Rationale

Understanding communication styles can help improve mood and relationships with others. Some types of communication styles keep things bad or make things worse.



### Information

Materials: a box or basket in which there are three scenarios depicted on three separate papers, folded up in the box/basket (described below). Participants will pair up with one of the group leaders, pick out one of the papers, and enact the chosen situation in front of the class.

Individual and Cultural considerations. The point of this exercise is not to have participants *always* communicate in an assertive manner. Rather, it is to help participants feel comfortable enough doing so that they can choose how to communicate. There are individual and cultural differences in the value or importance of each of the three communication styles. There may be culturally relevant ways of expressing oneself in different situations. For example, being passive may be desired in certain situations, which may be related to culture. For some participants, including those in a relationship with domestic violence, being passive may be the best and safest way of relating to the perpetrator. In cases such as this, being passive can be viewed as respecting your own wishes and keeping yourself safe. In addition, particular cultures may value passive responses relative to assertive responses. Depending on group composition, it is important to acknowledge that there is no one "right" communication style. It depends on the particular situation.



## Step by Step:

Exercise: "What's in the box?"—Identifying your personal style of communication.

### **Step 1: Identify participants' primary communication style through role plays.**

#### Suggested Wording:

*In order to communicate our needs to others, we need to be able to talk about how we feel and what we need from others. We'd like to do a few role plays to figure out how you usually act or communicate in different situations. How do we actually talk in different social situations? Here, I have a basket that describes different everyday situations (like asking the grocery owner where a product is). \_\_\_\_\_ (instructor's name) and I will do one for you to see, and afterwards, you can think about what you would do in the same situation. Then we'll take turns acting out these situations.*

Instructors model the first one, by reading out loud the situation, and decide who will play which role. Typically, the participant should play the role ascribed to "what would you do in this situation?" The role plays should take a few minutes per situation. The options following each of the scenarios are intended for group leaders to elicit discussion following each of the role plays. Group leaders can ask participants what they would have done in that situation. It's also possible to have the same situation and another person (or group leader) model another style of communication.

Possible scenarios [these are written on separate papers ahead of time and put into the box; see end of this section for these items]:

Situation 1: *You went to a doctor and didn't understand what the doctor said. What do you do in this situation?*

2 roles: 1) doctor; 2) patient

[Possible options: would you: a) ask questions; b) just pretend to understand; c) not say anything.]

Situation 2: *You are in a clothing store and you cannot find the salesperson. Finally, after half an hour, you find the salesperson, but she does not want to help. What do you do in this situation?*

2 roles: 1) salesperson; 2) customer

[Possible options: would you: a) go to the manager; b) ask the salesperson to help; c) leave the store.]

Situation 3: *You were taking a class and the teacher said something you strongly disagreed with. What do you do in this situation?*

2 roles: 1) teacher; 2) student

[Possible options: would you: a) tell the teacher your opinion in a respectful manner; b) stay quiet; c) pretend to agree to please the teacher]

Situation 4: *You are angry at a very close friend about a comment that she made last week but have not said anything. She is coming over to your house today. What do you do in this situation?*

2 roles: 1) friend; 2) you.

[Possible options: would you: a) talk to friend about the situation; b) say nothing and

pretend that everything is fine; c) ignore friend/stop calling].

**Step 2: Introduce the concept of communication styles.**

Suggested Wording

*From this exercise, you can see that there are different ways of communicating our needs. In general, there are three main ways that we communicate what we want. We can do it in a passive way, an aggressive way, or an assertive way.*

Write the words on the board.

*What do these words mean to you? For example, who was passive in the role plays? Who do you think was aggressive or assertive in the role plays?*

**Step 3: Elicit a discussion regarding how they view these communication styles and how they think they might affect their mood and their interpersonal relationships.**

Suggested Wording

*How do you think that your communication style affects your mood?  
How does your communication style affect your relationships with others?*

**Step 4: Acknowledge cultural or individual differences. There is no one “right” way to communicate.**

Suggested Wording

*There is no right or wrong communication style. Sometimes, you may choose to act passively because that is what is expected of our families or our cultural upbringing. Sometimes, we change our best to fit whatever works best in a given situation. For example, an assertive person might choose to be passive because this is what is expected in this situation, or that is best for the situation. What is important is that you choose how you will act!*



**Alternative Exercises**

Instructors can introduce the three communication styles by going over putting the grid (communication styles and respecting wishes) on the board. Refer to p. 4 in participant manual.

At first, just put the bolded, underlined parts of the table on the board and ask group members to complete the rest.

Ask participants:

- *Which style do you tend to use?*
- *How do you think using that style affects your mood?*

Proceed to Steps 3-4 above.

Explaining Passive-aggressive Style:

Suggested Wording

*What does it mean to be passive-aggressive? As can be seen on p. 4, passive-aggressive can mean that you are not respecting your own wishes and not respecting others' wishes. In this way, you are not clearly communicating your needs to others.*

## V.C. GETTING YOUR NEEDS MET (15 min)



### Overview

Needs can be met by being assertive (making positive, clear, and direct requests).



### Key Points

- ❑ It's OK to ask for help.
- ❑ Asking for help in a positive, clear, and direct way can increase the chance that one's needs will be met (but not always).
- ❑ Being assertive can help increase the chance that one's needs will be met.
- ❑ One way to ask for help is to do it systematically (step by step approach).
- ❑ By being assertive and expressing what you want and how you feel in a respectful way, you can improve relationships with others.



### Participant Manual

p. 11.5



### Rationale

Getting one's needs met can improve relationships with others.



### Information

For suspected domestic violence cases: emphasize the fact that individuals have the right to feel safe! When relationships appear to be non-reciprocal, abusive or violent, the relationship may be headed toward dissolution or towards significant limits. The therapist can explore with the specific group participant how he or she evaluates the status of the relationship in dispute. (Instructors should have a list of referrals of agencies that support women who are victims of domestic violence that are particular to their geographical areas.) The therapist may also elicit input from the group regarding the stage of the relationship to provide additional feedback and/or support to the participant.



### Step by Step

**Step 1: Being assertive can help to get one's needs met.**

#### Suggested Wording:

*Part of being assertive is being able to make requests in a clear and positive way. When we do this, we are able to ask for what we want and need, others know how they can help us, and it increases the chance that we will get support. Of course, it does not guarantee that we will get what we want. The other person may agree to a different compromise, or they may simply refuse, but at least we'll know the answer. Why is it useful to make a request even when the answer might be no?*

Elicit answers from group members.

Points to emphasize are listed below:

- They might say yes.
- At least you know.
- You can move on and think about what else you can do.

**Step 2: Identify steps to being assertive.** Put the 5 steps on the board (p. 5).

Suggested Wording

*There are 5 steps that can help for us to become more assertive, to communicate in a way that might increase our chances of getting our needs met.*

- 1) Identify what you want.*
- 2) Pick who you should ask for help.*
- 3) Figure out a way to say it in a way that is clear and direct.*

Discuss the difference between indirect and direct requests. For example, "boy, the trash can is full" and "I wonder when you'll be taking out the trash" are both indirect requests. "Could you please take out the trash in the next half hour" is a direct, specific request. "I sure am worried about my sugar level" versus "Doctor can you check my sugar level."

- 4) Respect the other person's right to say no. (e.g. "I know you're really busy.") Talk about how this sets the stage for making a request.*
- 5) Be willing to compromise.*

Have each group member think of someone they would like to request something of this week (e.g., friend, family member, doctor). Help them to decide what they would like to request from this person and think about how they would like to make the request.

Have them practice making the request in group and then have group members give them feedback.

## V.C. WHAT KEEPS YOU FROM EXPRESSING YOUR NEEDS? (15 min)



### Overview

Identify obstacles to the ability to communicate one's needs and teach problem solving to overcome these obstacles.



### Key Points

- Identifying obstacles to being assertive or expressing one's needs can help to increase one's external reality.
- There are different ways to overcome these obstacles.



### Participant Manual

p. 11.6



### Step by Step

**Step 1: Explore with participants the roadblocks to being assertive.** As group leaders, you should also raise your hands if this applies to you.

#### Suggested Wording

*We all have times when we don't say what is on our minds. We often have a lot of excuses for not doing so. Sometimes the excuses are really good, and in some cases it might not be the right time to share our thoughts, feelings, or desires, but sometimes we fall into a non-speaking trap. Let's talk about some of the things that might prevent us from speaking our mind when it's a good idea for us to do so.*

Brainstorm with the group some of the things that might keep them from being assertive and speaking their mind. Some of the common obstacles are listed below. After you have brainstormed with the group. Discuss each obstacle, clearly defining what thought or thoughts are linked to the obstacle, obtaining opinions from different group members, and talking about how to overcome the obstacle.

Be respectful of cultural differences (e.g. age, gender, family positions, and structure) that may contribute to the inability to be assertive and/or to valuing other forms/styles of communication.

#### Common Obstacles:

- Fear
- Habit/routine - not used to doing it
- Low energy - too tired to do it
- Don't believe it would change things (why bother)
- Don't want to show disrespect to another person

Other questions to stimulate discussion are listed below.

- *Does assertiveness mean danger for you?*
- *E.g., "If I'm assertive, then, I'll be rejected."*
- *"If I speak up for myself then, I'll be humiliated or hit."*

- *Do you feel like your disagreement can be resolved?*
- *Is the relationship headed for dissolution?*
- *Do you have evidence that the relationship is not reciprocal, not mutually respectful and caring of each other's needs?*

## V.E. PREPARING FOR MY BABY'S BIRTH (20 min)



### Overview

Begin to identify ways that participants are preparing for their baby's birth.



### Key Points

- Identify items/tasks that participants have already done and/or still need to do, and the specific people who will help them with these tasks.
- There are different ways to prepare for the baby's birth.
- You can choose to have a birth plan that you feel prepared and comfortable with.



### Participant Manual

pp. 11.7-8



### Rationale

Advanced planning can help improve mood and psychological preparation for the baby's birth. Not knowing what might happen can increase stress and anxiety.



### Information

For large groups. You can divide this exercise into pairs.

Low SES women. Some participants from low SES may realize from this exercise that they cannot afford some/most items. It is important here to refer back to last week's discussion re: Needs hierarchy, and how some needs may not be met due to financial reasons. It is also important to reiterate the ideas of internal vs. external reality here, and how one can manage these differently.



### Step by Step

**Step 1: Preparation Plan**—Identify items/tasks that participants have already done and/or still need to do, and the specific people who will help them with these tasks.

Begin a group discussion regarding how they are preparing for their baby's birth. Here include information regarding the details of preparing for the birth, emphasizing the people in their lives who can help with this.

Refer to p. 7 in participant manual for the items/checklists to prepare for the baby.

#### Suggested Wording

*We have included two checklists in your manuals, on pages 7 and 8. These checklists should help you get organized as you prepare to welcome a new member into your family. On the first page are items that you can get before the birth, and the second page includes items that you can pack for the actual birth. Don't be overwhelmed by a long shopping list of "things" for the baby. These are only suggestions, and you may not need some of these items. Please be sure to follow the recommendations of your doctor or midwife. Remember that most of what your baby really needs you already have—warm hearts, lots of love, strong arms, and endless patience - and these don't cost any money.*

**Step 2: Preparing for birth is part of managing one's external reality.**

### Suggested Wording

*Remember how we've talked about the ideas of internal and external reality? This checklist is one way to manage your external reality, by taking control of our lives and planning for the future for you and your baby.*

*Let's go through these lists and see what items you already have, might need, or would still like to get. Let's go around the room and have each of you read out loud this list for the group. You can check off the things that you already have. Also, if there are things that you recommend, please let the whole group know, especially those who are already mothers can really help us out here.*



### Alternative Exercises

**BIRTH PLAN** (p. 9 participant manual). Purpose: to have participants identify their ideal birth plans.

#### Suggested Wording

*We've talked about what to prepare before birth, and this can be considered part of your birth plan. Now we'd like to talk a little bit about your actual birth plan. What is a birth plan?*

Elicit discussion and continue explaining birth plan.

*A birth plan is an ideal plan about how one's birth and delivery should be. This birth plan can be shared with your baby when she or she is older, so that your child will appreciate all the care and effort that you took to prepare for his/her arrival to your family.*

Ask the following questions:

- *What is your birth plan?*
- *Who will you call when you are ready to go to the hospital?*
- *Who will be present in the delivery?*
- *What do you want your delivery to be like?*
- *Who will be in the hospital with you?*
- *Who will take you home?*
- *Who will help you in the first few days after your birth?*

Points to discuss:

- A birth plan is an ideal plan about how one's birth and delivery should be. Having an "ideal" plan will make it more likely that things will go the way one wants them to go. But remember, that things may turn out different, and that does not necessarily mean things turned out badly.
- Identify the supportive people during this period
- Discuss what participants' providers (doctors, midwives) have told participants re: delivery plan, whether participants agree with this, etc...
- Obstacles to a successful birth plan
- Any questions that participants might have re: birth plan

## Class #12: Using the Course to Build a Healthy Life for Me and My Baby

### CLASS OUTLINE

- I. Announcement and Agenda (10 min)
- II. General Review (5 min)
- III. Personal Project Review (5 min)
- IV. Relaxation Exercise (10 min)
- V. New material
  - a. Role models for me and my baby (20 min)
- VI. Class review (30 min)
- VII. Final Activity (15 min)
- VIII. Graduation (25 min)

#### Goals for instructors:

- Review the reciprocal nature between mood and interpersonal relationships.
- To identify relationship rules and how they affect mood
- To review main concepts of class
- Saying goodbye & graduation

#### Materials needed:

1. Participant manuals
2. Pens
3. Dry erase board, chalkboard, or large sheets of paper to present material to group
4. Copies of CES-D or other mood questionnaires (optional)
5. Food & drinks for celebration
6. Video Camera, Camera for class photo (optional)
7. Relaxation tape for participants (optional)

### IV. RELAXATION EXERCISE

Suggest that participants choose a relaxation exercise from the Relaxation manual. If you are able to make a relaxation tape for participants as a parting gift, perhaps you could play it so they hear what it sounds like. This may make it more likely they will use it at home.

## V. New Material: ROLE MODELS FOR ME AND MY BABY (20 min)



### Overview

Introduce role models as a way of thinking about one's interpersonal relationships, and how role models can inspire people to behave in a healthier and happier way.



### Key Points

- ❑ Identify role models.
- ❑ Role models can be different people whom we admire.
- ❑ Parents are babies' first role model.
- ❑ By being role models, parents can help their babies and children behave in ways that make their lives healthier and happier.



### Participant Manual

p. 12.3



### Rationale

Role models can help to improve interpersonal relationships and mood.

We often pick up ways of doing things from other people. Some are good and some are not.



### Information

This discussion of role models may increase anxiety for some participants, especially those who felt that they did not have positive role models in their lives. In this case, instructors should point out that it's not too late to find role models for themselves and to start thinking about possible people to be role models for their babies.



### Step by Step

**Step 1: Introduce this week's material, linking it to material taught in previous sessions.** Instructors can elicit a general discussion and/or have participants complete four questions on p. 3 and then discuss their written answers.

#### Suggested Wording

*Last week, we talked about different communication styles, and how being passive, assertive, or aggressive can affect our mood. Today is our last day together, and we will spend some time reviewing what we've learned in the past 12 weeks, and saying goodbye to each other. Let's start by talking about role models. What are role models?*

Elicit participants' answers.

Points to cover:

- Role models can be people who have qualities that make a person look up to them (e.g., honesty, friendliness, genuineness).
- Role models can be real people or fictional.
- Role models can guide a person's behavior positively (i.e., behave in ways that help make their lives healthier and happier).

**Step 2: Elicit participants' role models.**

#### Suggested Question

*Who are your role models?*

**Step 3: Parents are their baby's first role model.**

Suggested Wording

*As parents, you are your baby's first teacher and your baby's first role models. As a role model, what qualities do you want your baby to know about you?*

*Your baby can also have other role models. Who would you like your baby to have as role models?*

**Step 4: Parents can help to protect babies from negative role models.**

Suggested Wording

*There are also role models that may have a negative influence. Some people look up to others who do not have positive qualities. For example, there is a lot of violence on TV. How do you protect yourself and your baby from these negative and unhelpful influences in your life? We learn the way we behave, the way we talk, and even the way we think from people who are around us. This happens whether we are conscious of it or not. Part of what we would like you to remember from the course is that you can consciously choose what you learn from other people and what you will teach your baby.*

*In terms of what you learn from other people, we suggest you focus on parents you know, see at the stores, park, or on the street.*

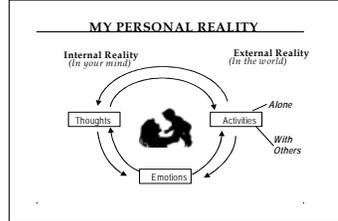
*Notice the things parents do which you would like to do with your own child. Notice also the things parents do which you want to avoid doing with your own child. If you see things, which are particularly important to do or not do, you may want to jot them down, so you will remember when your child is born, and as he or she grows up.*

*In terms of what you will teach your baby, remember that your baby is learning all the time, not just when you intend to teach him or her something. That means that if there are things you are used to doing that you would rather your child did not learn, now is the time to break the habit. If you keep on doing them once your child is born, he or she will see you doing it, and might learn to do it himself or herself. Similarly, if there are things you want to do more often, or want to begin doing so your child will learn it, then now is the time to start, so that it has become part of the things you do by the time your child is born.*

Points to discuss:

- Being aware of the negative influences.
- Help child to be aware that there are both positive and negative influences.
- Try to stay away from the negative influences e.g., select particular TV shows to watch or avoid.
- Increase social support in one's life.

**VI.A. Class Review:  
EXTERNAL AND INTERNAL PERSONAL REALITY  
CREATING A HEALTHY REALITY FOR ME AND MY BABY (30 min)**



### Overview

Review and reinforce main concepts from the 12 week class.



### Key Points

- ❑ Review the main concepts of internal and external reality.
- ❑ Review the main concepts of the class: Relationships between mood and pleasant activities, thoughts, and contacts with others.
- ❑ These relationships can affect one's internal and external reality.
- ❑ Thoughts affect our internal reality.
- ❑ The activities that we do, and the people that we have in our lives can affect our external reality.
- ❑ We can make choices to have a healthier reality (both internal and external).



### Participant Manual

pp. 12.4-5.



### Rationale

Review the main concepts of the class will help to prevent the likelihood of a major depressive episode in the future.



### Information

Because this is the last class, termination issues will be prominent. Instructors should address termination, in particular, what participants can do in the short term (e.g., next week during class time) and the long term to manage their reality. The goal of this review is also to discuss relapse prevention.



### Step by Step

Step 1: Review of most important concepts of class.

#### Suggested Wording

*Now we'd like to review all of that you've learned in the past 12 weeks. We've discussed different ways of managing one's reality. What do you remember the most about this? What is internal reality?*

*What is external reality? Let's look at p. 4 of your book and talk about these concepts.*

Points to discuss:

- Emphasize choices that participants can make over their internal and external reality.
- Internal and external reality may affect their mood.
- Mothers can help mold their babies' internal and external reality by using some of the tools in this class (go to point 2).

**Step 2: Review mood and thoughts, activities, and people contacts within the reality management approach.**

Suggested Wording

*We've also talked about how your mood is related to pleasant activities, thoughts, and people contacts. As you can see on p. 5, there are different ways that you can manage your internal and external reality by either having more helpful thinking, doing more pleasant activities, or spending time with people who are helpful influences in your lives. How can you create a healthy reality for you and your baby?*

*Creating a healthy reality means shaping your own and your baby's day to day life so that it is more satisfying, filled with more peaceful, happy, loving moments for both of you. Shaping your day includes both shaping what you actually do but also what you think.*

*Shaping what you do is what we mean by shaping external reality. This includes how you spend each hour of the day, where you spend it, with whom, and what kind of activities you build into your life.*

*Shaping what you think is what we mean by shaping your internal reality. This includes what goes on in your mind as you go through your day: are you mindful of the special moments as you and your baby develop your relationship? Are you mindful of what he or she is experiencing, so that you can have a positive influence on what he or she feels about you, about him- or herself, and about the world in general? The things your baby feels, sees, and hears, are shaping his image of what life is like. So you have a real chance to help shape that image. Will it be one of being special and cared for? Of being able to get what he or she wants? Or will it be one of being ignored and not being able to stop being frustrated? The things we have discussed these 12 sessions are all relevant to these issues.*

Points to discuss:

- The types of activities and people one interacts with can affect one's mood (here focus on external reality).
- The types of thoughts that one has can affect one's mood (here focus on internal reality).
- By changing one's own internal and external reality, mothers can help shape their children's internal and external reality.
- What types of activities do mothers want their babies to have?
- Who do mothers want to have in their babies' lives? (reiterate importance of social support)
- How can mothers and babies improve their bonding/attachment relationship?

**Step 3. Obtain participants' input about the Mothers and Babies course.**

Suggested Wording

- 1) *What were some of the things that you learned about this class?*
- 2) *What was helpful?*
- 1) *What was not helpful?*
- 2) *How have you learned to manage your internal reality?*
- 3) *How have you learned to manage your external reality?*
- 4) *If you face obstacles, how will you be able to overcome this?*
- 5) *Have you learned things that would be helpful for your baby?*
- 6) *Based on this class, what kinds of things (if any) would you teach your baby?*
- 7) *How have you made changes in what you do since beginning the group?*
- 8) *What did you learn about relationships that were most helpful, in terms of improving your mood?*
- 9) *What message will you take from this class?*

- 10) *Would other women benefit from this class? If yes, what specific aspects would you recommend to them?*
- 11) *What would be helpful for other pregnant women to know about this class if they were to take it?*

## VI.B. FINAL ACTIVITY: WHAT OTHERS LIKE ABOUT YOU (15 min)



## VII. GRADUATION AND CELEBRATION (25 min)



### Overview

Carry out a final exercise intended to provide positive feedback for participants from their peers. Celebrate end of class with a graduation ceremony.



### Key Points

- Participants have an opportunity to listen to others appreciate them.
- Celebrate end of course and graduation.



### Participant Manual

p. 12.6-7



### Information

Depending on the group composition, group members may want to plan their graduation party. For example, some members have brought food or drinks to share with the class. Also, an optional thing is to have certificates of graduation and take pictures of the class (per participant choice).



### Rationale

Provides an opportunity for each participant to recognize other participants, and to celebrate the completion of class.



### Step by Step

**Step 1: Positive reviews exercise: “What others like about you.”** This exercise provides an opportunity for each participant to recognize other participants. Each person will say something positive to another person until everyone has had a turn. Depending on class size, the number of comments may vary. If the class is small, everyone will get an opportunity to say something about another person. If the class size is larger, instructors can limit the number of comments per person.

We suggest one of the leaders start, and model giving a brief, i.e., one or two sentence description of something one of the participants **does** that the leader values. Then that participant picks one other member of the group and does the same, and so on until all are done.

### Suggested Wording

*Before we celebrate your graduation, we'd like to do one final exercise, called “What others like about you.” The purpose of this exercise is to give you an opportunity to recognize each other, and the strengths that you each have. You've had an opportunity to get to know each other in the past 12 weeks. Each person will have a turn to say something nice or positive about another person. All too often, we don't get recognized for what we*

*already do. So this is one way of allowing all of us to do this.*

Conduct the exercise as described above and then ask: *How was the exercise for you?*

Typically, the result of this exercise is that participants feel very good about themselves. Emphasize:

- You have choices about how you behave with others.
- You can change how you behave with others.
- This exercise was an example of one way to change one's internal and external reality. Have them notice how they felt at the beginning of the exercise, and how they feel at the end. What is it that people **did** that produced this difference, and what kinds of thoughts were triggered that made their mood better?

**Step 2: Graduation ceremony and graduation.** Typically, instructors have prepared a-priori certificates of completion of the Mothers and Babies Class for each participant. Instructors congratulate the participants and give participants a chance to say something about the class.

#### Suggested Wording

*Finally, it's graduation time! Congratulations! We want to congratulate all of you for coming to class, and hope that this was a worthwhile experience for you. We really enjoyed having you in class. Now, I'd like to call you up here for your certificate. If you would like to say some brief comments to your fellow students, this would be a good time.*

Optional things include the following:

- 1) Graduation photo
- 2) Graduation ceremony
- 3) Food and drinks
- 4) Videotape party as a way to replay during the postpartum months

If you have plans to keep in touch with participants after the birth, include time to schedule post-intervention interviews. Include a table/chart/separate handouts about expectations of babies during the first year postpartum.



#### Alternative Exercises

##### **INVITATION TO PARTICIPATE IN A FOCUS GROUP**

Purpose: In order to evaluate the impact of the group on the participants, we suggest that you invite participants to attend a focus group w/ non-group leaders to gain information regarding their views of the course (e.g., strengths, weaknesses).

Emphasize that this is voluntary, group leaders will not be present, and it will be videotaped. Focus group should ideally take place 1 week following 12<sup>th</sup> session. Have sign-up sheet or ask to get an idea of who will be present. The feedback obtained in the focus groups can be used to improve the way the course was implemented by identifying specific issues that were most important to the population you serve.