Appendix 2
Example of a workshop to explore issues around HIV/AIDS and young children

The following workshop outline and exercises may be helpful if you are planning to hold a workshop or are looking for ideas about methods to help health workers to think about HIV/AIDS and children.

Workshop outline

Day 1

SESSION 1
- **Introduction and welcome**
- **Workshop objectives**
- **Introductions, expectations and fears**

Exercise 1: Introductions, expectations and fears
To help participants get to know one another, give each person a large piece of coloured card or plain paper. Ask each person to draw his or her own face, then to write down three expectations or fears he or she has about the workshop. When these are finished, pin them on the wall and ask participants to guess whose face belonged to whom, and ask each participant to introduce himself or herself.

SESSION 2
- **Setting the scene: HIV/AIDS and young children – what are the issues?**

Exercise 2: Identifying issues of concern
Give each participant three blank cards (approximately 6x3 inches) and ask the participants to think about, and then write on the cards, what issues the words HIV/AIDS and young children raise for them. Collect the cards and ask the participants to cluster them into groups of similar or common issues. Display the cards on the wall, or lay them on the floor. Give each group of issues a title (for example, care and support issues, or counselling issues). Drawing out the issues and the process of grouping them can be a helpful way to start discussions and to plan how participants want to organise the workshop.

After grouping the cards, ask participants to indicate which area they are most interested in by making a pen mark on the relevant group.

SESSION 3
- **Mother-to-child transmission**

This session can be used to provide participants with some background information, for example by watching a video, or listening to an outside speaker. Specific issues can then be discussed in more depth.

- **Feedback and discussion**

Exercise 3: Mother-to-child transmission
Divide the participants into groups according to their main area of work; for example, home-based care workers, counsellors, clinicians. Each group could then discuss questions such as those listed below.

**Questions for home-based care workers**
Which women are more at risk of contracting HIV in pregnancy and why? In particular, what are the needs of HIV-positive women practising safer sex who want to conceive? How can vulnerable women who are pregnant be made aware of the need and be supported to practise safer sex? What potential community-based activities could be used to raise awareness of mother-to-child transmission?
Questions for counsellors
When is screening and testing of women for HIV/STDs during pregnancy appropriate? What are the advantages and disadvantages of testing? Identify and discuss any available guidelines for testing and counselling and their appropriateness.

Questions for clinicians
What are the key issues in providing good care for women during pregnancy and delivery in areas where HIV infection is common? In particular, what information and guidelines are currently available to health workers regarding care and management of pregnant women, good practice during delivery, care and management of newly delivered infants and mothers?

SESSION 4
- HIV/AIDS and breastfeeding

Use short problem-posing case studies to highlight situations health workers and families may be faced with and draw out possible solutions.
Day 2

SESSION 1
- Care and management of children with HIV infection and support to families

Again, participants can be divided into groups according to professional background or interest, to discuss issues and strategies related to, for example: clinical diagnosis, management and treatment, counselling, or care and support.

Exercise 4: Using role play to highlight problems
Groups of participants can use role play to present particularly difficult problems or scenarios to other participants. In the Zambia workshop, one group of participants presented a role play to illustrate the case of three young sisters aged under five whose parents had died and who were being abused by a male cousin. A relative took the girls to see a health worker, who treated them for STDs, then referred them to a counsellor. After an initial visit, the counsellor felt she could not continue until she had a discussion with the rest of the family. She was worried about sending the girls back to the home, even temporarily. The relative did not return. On enquiring, it became clear that the male cousin had been sent away and the girls sent to another village. The issue brought up was, how safe are the girls in their new home? What follow-up would they get, especially as they had been suffering from psychological as well as physical problems, and the elder child was very depressed?

Participants could be asked to discuss how they might deal with this situation.

SESSION 2
- Young children affected by or vulnerable to HIV/AIDS

Exercise 5: Communicating with the community
Participants are asked to develop role plays that can be used to start discussions in the community about children and HIV/AIDS, using a problem-posing approach. In the workshop in Zambia, a number of role plays were developed that prompted debate about child neglect and abuse, and the difficulties of families coping with HIV/AIDS.
Day 3

SESSION 1
- Young children and HIV/AIDS: raising awareness

This session is intended to focus on ways health workers can raise awareness of HIV and young children and related issues. This includes thinking about:

- target groups in the community
- materials and methods that are available and that might be appropriate for the target audience.

It also gives participants the opportunity to share their experiences of working with different community members on HIV/AIDS awareness, and to consider how existing resources can be used and adapted.

SESSION 2
- Ethical issues

Exercise 6: Exploring ethical issues
This practical exercise is intended to help participants explore some of the common ethical issues experienced by people caring for children with HIV and AIDS, and to help them to think about children’s rights.

Mark a line on the ground, and mark one end YES and the other end NO. In between represents a continuum. Ask the group a series of questions. For each question, participants are asked to think about their response and to stand somewhere on the line depending on their response. The facilitator then asks two or three participants to explain why they chose to stand in a particular place. This highlights differing viewpoints and encourages active debate of the issues.

The following are examples of questions that could be asked:

- If the mother of a young child dies from HIV/AIDS and the grandmother takes over care, does she have the right to know the HIV status of the child?
- A three-year-old child is admitted to hospital with severe anaemia and signs of heart failure. The HIV testing kits for blood are finished. Would you give a transfusion of untested blood?

SESSION 3
- Taking things forward

Participants can be asked to think about improvements in practical management and care and support of pregnant women and young children.

Exercise 7: Action at different levels
Ask participants to consider what actions are needed at different levels and to suggest one practical and realistic action that could be taken at national, district, community and family level. Their responses are written on different coloured cards or paper and displayed on the wall. The suggestions can be used as a basis for discussion or action planning.

SESSION 4
- Workshop evaluation

In addition to a short evaluation at the end of each day, it is useful to pull things together at the end through an evaluation of the overall workshop. This can be done by asking participants to:

- reflect on the main subjects and comment on what worked well, what the difficulties were, and how sessions could be improved in future
- respond to two questions – what has been the most useful aspect of the workshop for you personally – and – what are your suggestions for how it could have been improved
- rate whether or not the objectives and expectations (which can be displayed on a chart) have been met using a scoring system from 1 (not met) to 5 (fully met)