



Our Family Our Choice

Facilitator's
Discussion Guide



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Overview of Video

Our Family Our Choice is an educational video that follows two HIV+ Zambian couples as they seek to make informed choices about their fertility. It also introduces viewers to a third HIV+ Zambian couple that have already made their choice. Through their stories, the video shows the challenges and decision making process involved in each choice, while providing important information about family planning methods that can be safely used by people living with HIV/AIDS. The video emphasizes open communication and joint decision-making within couples – no matter what decisions they make about their fertility.



Paul and Miriam are HIV+ and already have two children who are HIV- because they enrolled in the Prevention of Mother to Child Transmission (PMTCT) programme and followed all the steps. Their families

want them to have more children but they have decided to stop. Together, they attend a positive living support group and visit a nurse counselor. They decide to use the Depo Provera injectable in addition to condoms for double protection and are considering switching to a permanent family planning method like vasectomy or female sterilization in the future.



Evans and Ruth were only married for one year when they learned they were both HIV+. Ruth became very sick and started taking antiretroviral (ARV) medicines. They have no children. Their families do not know their HIV status and

put a lot of pressure on them to have a child. Evans and Ruth also want a child, but worry about the burden on Ruth's health and the risk of infecting the child with HIV. They decide to wait until Ruth has been taking ARV medicines for at least six months and her body is strong enough to carry a pregnancy. Together, they attend a positive living support group and visit a nurse counselor. They decide to use the family planning pill in addition to condoms for double protection.



Patrick and Rita have been married for five years. They are both HIV+ and taking ARV medicines. They have no children and their families put a lot of pressure on them to have a child, but they have decided not to have one. They

are worried about the risk of infecting the child with HIV, the burden on Rita's health, as well as who would care for the child if they became very ill or died. They are at peace with their decision and spend a lot of time with other children in their family. They decide to go for a permanent family planning method and Patrick has a vasectomy.

Target Audience

The primary audience for *Our Family Our Choice* is HIV+ men and women of reproductive age (15-45 years old).

The secondary audience includes providers of HIV related and/or reproductive health services, as well as other community members.

How to use the Video and Discussion Guide

Adults learn and remember more when they have a chance to actively discuss what they see and hear. The *Our Family Our Choice* video and discussion guide are powerful tools that can be used by providers of HIV related and/or reproductive health services to stimulate thought and discussion about family planning options for people living with HIV/AIDS. While the educational value of the video is maximized when it is followed by discussion, if this is not possible, the video can also be shown alone. For example, clients can view the video in clinic waiting areas. The video and discussion guide can also be used to train providers of HIV related and/or reproductive health services, as well as educate the wider community about the family planning needs of people living with HIV.

In order for everyone to be able to participate, the ideal size of a discussion group is 4-5 couples or 8-10 service providers. If screening the video for a larger audience, consider dividing into smaller groups during the discussion. Just make sure there is at least one facilitator per group. Where possible, involving people living with HIV/AIDS as facilitators or co-facilitators is always recommended.

Role of the Facilitator

Some of the issues which may be raised during discussions about *Our Family Our Choice* are quite personal and sensitive. Each participant will bring their own experiences to the discussion and participants may have different opinions.

In this kind of situation, it is important for the facilitator to make sure participants respect each other's opinions and comments so that open and thoughtful discussions can take place. The facilitator must make sure that each participant feels comfortable to speak freely and that his or her comments are valued and appreciated.

Before Viewing the Video

- Read through the entire guide and watch the video yourself first.
- Make notes and become familiar with the health messages. This will help you explain the messages and answer questions.
- Assemble all your video equipment, including power cords and cables, and make sure they are running properly. If using a portable generator, have extra fuel to ensure the electricity will last.
- Test equipment and the power source. Does the video player turn on? Play? Rewind? Fast Forward? Stop?
- Play a short portion of the video and move around the viewing area. Is the screen easy to see? Can you hear the video everywhere?
- Before the audience arrives, re-set the video to the beginning.

Tips for a Successful Video Show and Discussion

- Facilitate in a language that the audience is comfortable with.
- Introduce the video before you play it. This will help viewers know what to look for as the drama unfolds.
- Show the entire video during one session. You can wait to have the discussion at the end of the video, or stop the video at various points for discussion, as suggested later in the guide.
- Ask the audience the questions suggested by the guide. You may need to re-phrase some questions for clarity. You may also find you need to probe further on certain things raised by the group.
- During the discussion, you can answer questions (making sure that the audience's questions are adequately answered without being rushed), explain medical facts, and focus viewers' attention on important information.
- Correct any misinformation on the part of the audience by gently giving the correct information. Avoid embarrassing a person who has answered wrongly.
- After viewing the video and having the discussion, help the audience summarize the key messages of the video. This will help them remember what they have just learned.
- In the end, thank the participants for coming and contributing to the discussion.

Possible Questions for Group Discussion

The *Our Family Our Choice* video is divided into three parts. The title of each part appears before it begins. You can either show the whole video before starting the discussion, or stop the video for discussion at the end of each part.

Part 1: Attending a Positive Living Support Group



- What do you think of the video so far?
 - Are the people and situations you have seen realistic? Why or why not?
 - Who needs to think about planning a family?
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- Where can people living with HIV/AIDS go to get information about family planning? Who can advise them?
 - What fertility choices do people living with HIV/AIDS have?
 - Why is family planning important, especially for people living with HIV/AIDS?
 - Why can it sometimes be difficult for people living with HIV/AIDS to make decisions about family planning? What special issues do they have to think about?
 - Do you have mixed feelings about whether or not to have a child? Why or why not?

- Why can it sometimes be difficult for partners to share their feelings about family planning with each other? How can they overcome this difficulty?
- How does your family influence your decisions about whether or when to have a child?

Part 2: Visiting a Health Care Provider



- Why is it important for couples to discuss and make decisions together about their fertility and which family planning method to use?
- Which family planning methods can people living with HIV/AIDS safely use – even if they are taking ARV medicines? Is there any family planning method that harms your health or stops ARV medicines from working properly?
- What is “double protection”? Why is it so important? What can you do for double protection?
- Which family planning methods permanently prevent pregnancy? How safe do you think these methods are?
- When an HIV+ woman and her partner decide to have a baby, what can they do to reduce the risk to the health of the mother and the child?

Part 3: Making Family Planning Decisions and Supporting Each Other



- What do you think of Paul and Mirriam's decision not to have any more children?
- What do you think of Ruth and Evans' decision to have a child after Ruth has been on ARV medicines for six months?
- What do you think of Patrick and Rita's decision not to have any children? How is their case different from Paul and Mirriam's? How difficult do you think it would be to decide not to have any children at all?
- What do you think of Patrick and Rita's decision to go for a permanent family planning method like vasectomy? Would you consider a vasectomy or female sterilization? Why or why not?
- Do you have any other questions or any other topics you would like to discuss?
- What did you think of the video overall? Did it help you in any way? If so, how? If not, why not?
- Do you plan to do anything after seeing this video? If so, what?

Key Messages

- Both partners should know their HIV and health status before getting pregnant in order to make an informed decision about whether to have a child now, have a child later, or avoid pregnancy altogether.
- If an HIV+ woman and her partner wish to have a child, they should talk to their health care provider about the best time to get pregnant to minimize risk to the health of the mother, and about PMTCT to minimize risk of infecting the child with HIV.
- Family planning and the use of contraceptives is important to:
 - Avoid unplanned pregnancy;
 - Space the length of time between pregnancies to keep the mother and child as healthy as possible;
 - Ensure that HIV+ women are healthy before becoming pregnant to minimize risk to the health of the mother and the child;
 - Help HIV+ women who are unwell, or have just started taking ARV medicines, avoid getting pregnant until they are back to health, and are used to taking their medicine every day – which is essential for the medicine to work.
- People living with HIV/AIDS can safely use many family planning methods to delay or avoid pregnancy altogether, even if they are taking ARV medicines. None of the recommended family planning methods harm their health or stop ARV medicines from working.

Reference Material

What is the first step in planning a family?

Both partners should know their HIV status by getting tested.

What are the fertility choices for couples in which one or both partners are HIV+?

The same as any other couple: whether to have a child now, have a child later, or avoid pregnancy altogether.

Who should be involved in planning a family?

It is important that a couple discuss their family planning options together. The couple should seek advice from healthcare providers and from people who have been through a similar experience, but in the end, only the couple can make the decision that is right for them.

What are the risks to the health of the mother and the child when an HIV+ woman and her partner have a baby?

- It is possible for a woman living with HIV to infect her baby with HIV during pregnancy, childbirth, or breastfeeding.
- When the mother is HIV+, there is a slightly increased chance of a stillbirth, premature birth, or the baby having a low birth weight.
- If the woman is not well at the time of becoming pregnant, a pregnancy can potentially increase her ill-health, but if she is well, there is no evidence to suggest that the pregnancy will have a negative impact on her health.

How can an HIV+ woman and her partner minimize the risk to the health of the mother and the child when they decide to have a baby?

- By asking a doctor whether her body is strong enough to carry a pregnancy.
- If the doctor recommends she take ARV medicines:
 - By making sure the doctor understands they wish to have a child in the future, as some ARV medicines are not recommended for pregnant women.
 - By using a family planning method to delay pregnancy for at least 6 months to allow the medicines to work and make her well again. The medicines will only work if she gets used to taking them every day.
- By enrolling her in a PMTCT programme and following all the steps.

Which family planning methods can people living with HIV/AIDS safely use to delay or avoid pregnancy altogether – even if they are taking ARV medicines?

People living with HIV can safely use many family planning methods to delay or avoid pregnancy altogether – even if they are taking ARV medicines. None of the recommended methods reduce the effectiveness of ARV medicines or put any additional burden on their bodies. Instead, they help HIV+ people live healthy lives in which they are in control of their own fertility.

Family Planning Methods:

Abstinence (Avoiding Sex Altogether)

- This is not something married couples often choose to do
- If you choose to avoid sex altogether, you must both agree to this and support each other to live with this choice
- Use a condom if you decide not to abstain and have sex even one time

Condoms

- Two kinds (do not use at the same time):
Male Condom: A rubber sheath that covers the erect penis
Female Condom: A loose plastic pouch that lines the vagina
- A new condom must be used correctly EVERY time you have sex

Injectable Depo Provera

- An injection given to a woman that prevents pregnancy for 3 months
- A new injection must be given EVERY 3 months
- If a couple wishes to have a baby, the woman can become pregnant around 7 months after receiving her last injection

Family Planning (Contraceptive) Pill

- A pill that must be taken by a woman EVERY day, or as directed by the instructions on the packet
- A missed pill must be taken as soon as possible
- If a couple wishes to have a baby, the woman can become pregnant as soon as she stops taking the pill

Jadelle

- 2 small, thin and flexible rods inserted into a woman's upper arm to prevent pregnancy for up to 5 years
- If a couple wishes to have a baby, the Jadelle rods can be removed ANY time, and the woman can become pregnant as soon as they are removed

Intrauterine Device (IUD)

- A small plastic and copper device inserted into a woman's womb to prevent pregnancy for up to 10 years
- If a couple wishes to have a baby, the IUD can be removed ANY time, and the woman can become pregnant as soon as it is removed
- NOT recommended for women at high risk of sexually transmitted infections

Vasectomy

- Simple and effective operation for men
- Safe for many men with HIV, but, like any operation, men who are HIV+ and not well or have developed AIDS need to get well again before they undergo a vasectomy

Female Sterilization (Tubal Ligation)

- Effective operation for women
- Safe for many women with HIV, but, like any operation, women who are HIV+ and not well or have developed AIDS need to get well again before they undergo sterilization

What is double protection?

Double protection means preventing pregnancy and protecting against sexually transmitted infections like HIV.

Which are the only family planning methods that can provide double protection when used alone?

Abstinence and condoms.

Which family planning methods prevent pregnancy only but can safely be used with condoms for double protection?

Depo Provera, Family Planning Pill, Jadelle, IUD, Vasectomy and Female Sterilization prevent pregnancy only. If a couple chooses one of these methods, they must also use condoms for double protection.

Which family planning methods are permanent?

Vasectomy and Female Sterilization.

Our Family Our Choice is an educational video that follows two HIV+ Zambian couples as they seek to make informed choices about their fertility. It also introduces viewers to a third HIV+ Zambian couple that have already made their choice. Through their stories, the video shows the challenges and decision making process involved in each choice, while providing important information about family planning methods that can be safely used by people living with HIV/AIDS. The video emphasizes open communication and joint decision-making within couples – no matter what decisions they make about their fertility.

This discussion guide is designed to help facilitators lead effective discussion groups on ***Our Family Our Choice*** in order to maximize the educational value of the video.

