

Mission Motherhood® Messages on Extra Topics

In response to requests from groups working with the original MAMA messages, we have created extra messages on these topics:

- Fasting and pregnancy
- Fasting and breastfeeding
- Circumcision
- Pregnancy loss
- HIV/PMTCT

Please add these messages to your programme if there is a local need.

Message topic	SMS Message	Partner Notes	References
Ramadan: Warning signs in pregnancy	If fasting makes you feel weak and dizzy, talk to your religious advisor, and go to the clinic for medical advice.	<p>These warning signs have been identified as possibly having a negative effect on woman's health.</p> <p>Awareness of fetal movement is important. A decrease could indicate a problem.</p>	<p>Almond, D., & Mazumder, B. (2011). Health Capital and the Prenatal Environment: The Effect of Ramadan on Pregnancy. <i>American Economic Journal: Applied Economics</i>, 56–85.</p> <p>Gatrad, A. R. (1994). Attitudes and beliefs of Muslim mothers towards pregnancy and infancy. <i>Archives of Disease in Childhood</i>, 170-174.</p> <p>Moradi, M. (2011). The effect of Ramadan fasting on fetal growth and Doppler indices of pregnancy. <i>JRMS</i>, 165-169.</p> <p>Naderi, T., & Kamyabi, Z. (2004). Determination of fundal height increase in fasting and non-fasting pregnant women during Ramadan. <i>Saudi Med Journal</i>, 809-815.</p> <p>Robinson, T., & Raisler, J. (2005). "Each One Is A Doctor for Herself": Ramadan fasting among pregnant Muslim women in the United States. <i>Ethnicity and Disease</i>, 99-103.</p> <p>Ziaee, V., Kihanidoost, Z., Younesian, M., Akhavarad, M.-B., Bateni, F., Kazemianfar, Z., et al. (2010). The Effect of Ramadan Fasting on Outcome of Pregnancy. <i>Iran Journal Pediatrics</i>, 181-186.</p> <p>Azizi, Fereidoun. "Islamic Fasting and Health." <i>Annals of Nutrition and Metabolism</i> 56.4 (2010): 273-82.</p>
	If your baby moves less than usual while you are fasting, go to the clinic. They can check your baby is coping with your fast.	<p>"Apart from being an element indicating fetal life, fetal movements are associated with embryo-fetal health. A marked reduction or interruption of such movements should suggest health problems or even fetal death."</p> <p>CLAP/WR-PAHO/WHO 2011</p>	

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			<p>Van Ewijk, Reyn. "Long-term Health Effects on the next Generation of Ramadan Fasting during Pregnancy." <i>Journal of Health Economics</i> 30.6 (2011): 1246-260.</p> <p>Kavehmanesh, Zohreh, and Hassan Abolghasemi. "Maternal Ramadan Fasting and Neonatal Health." <i>Journal of Perinatology</i> 24.12 (2004): 748-50.</p> <p>Malhotra, Ashok, P. H. Scott, J. Scott, H. Gee, and B. A. Wharton. "Metabolic Changes in Asian Muslim Pregnant Mothers Observing the Ramadan Fast in Britain." <i>British Journal of Nutrition</i> 61.03 (1989): 663.</p>
Eating well while pregnant and fasting	<p>Eating plenty of lentils and beans at <i>Iftar</i> and <i>Suhur</i> will keep you feeling full as they are digested slowly.</p> <p>Fasting can make you dehydrated. Drink lots of clean water during the night. If your urine is dark and smelly go to the clinic for a check-up.</p> <p>Eating lots of fruits and vegetables at <i>Iftar</i> and <i>Suhur</i> will help you and your baby cope with the fasting time.</p>	<p>Please suggest food items that are easily available in your target area.</p> <p>Dehydration is identified as a potential problem and common symptom during fasting. (Cross-Sudworth, 2007)</p> <p>Fruits and vegetables slowly release energy and rehydrate the body. 'A Guide to Healthy Fasting'.</p> <p>Maternal and child under-nutrition is the single leading cause of health loss worldwide. (UNICEF, 2008; Blössner and de Onis, 2005.)</p> <p>Anaemia is the most common nutritional deficiency disorder in the world. 20% of maternal deaths are due to maternal iron-deficiency, anaemia and stunting in women. (The Lancet: Khan, 2006)</p> <p>Change these foods to other iron-rich foods that are easily available in your community.</p>	<p>Almond, D., & Mazumder, B. (2011). Health Capital and the Prenatal Environment: The Effect of Ramadan on Pregnancy. <i>American Economic Journal: Applied Economics</i>, 56–85.</p> <p>Gatrad, A. R. (1994). Attitudes and beliefs of Muslim mothers towards pregnancy and infancy. <i>Archives of Disease in Childhood</i>, 170-174.</p> <p>Moradi, M. (2011). The effect of Ramadan fasting on fetal growth and Doppler indices of pregnancy. <i>JRMS</i>, 165-169.</p> <p>Naderi, T., & Kamyabi, Z. (2004). Determination of fundal height increase in fasting and non-fasting pregnant women during Ramadan. <i>Saudi Med Journal</i>, 809-815.</p> <p>Robinson, T., & Raisler, J. (2005). "Each One Is A Doctor for Herself": Ramadan fasting among pregnant Muslim women in the United States. <i>Ethnicity and Disease</i>, 99-103.</p> <p>Ziaee, V., Kihanidoost, Z., Younesian, M., Akhavirad, M.-B., Bateni, F., Kazemianfar, Z., et al. (2010). The Effect of Ramadan Fasting on Outcome of Pregnancy. <i>Iran Journal Pediatrics</i>, 181-186.</p> <p>Azizi, Fereidoun. "Islamic Fasting and Health." <i>Annals of Nutrition and Metabolism</i> 56.4 (2010): 273-82.</p> <p>Van Ewijk, Reyn. "Long-term Health Effects on the next Generation of Ramadan Fasting during Pregnancy." <i>Journal of Health Economics</i> 30.6 (2011): 1246-260.</p> <p>Kavehmanesh, Zohreh, and Hassan Abolghasemi. "Maternal Ramadan Fasting and Neonatal Health." <i>Journal of Perinatology</i> 24.12 (2004): 748-50.</p>

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			<p>Malhotra, Ashok, P. H. Scott, J. Scott, H. Gee, and B. A. Wharton. "Metabolic Changes in Asian Muslim Pregnant Mothers Observing the Ramadan Fast in Britain." <i>British Journal of Nutrition</i> 61.03 (1989): 663.</p>
<p>Deciding whether to fast while breastfeeding</p>	<p>Worried that fasting may affect your milk? Talk to your religious advisor about delaying your fast or performing <i>Qadhar</i> or <i>Fidyah</i> instead.</p>	<p><i>Fidyah</i> is the practice of giving charitable donations, instead of fasting for Ramadan. <i>Qadhar</i> (or <i>qada</i>) is the practice of making up the missed days of the fast when the person is able to.</p>	<p>Almond, D., & Mazumder, B. (2011). Health Capital and the Prenatal Environment: The Effect of Ramadan on Pregnancy. <i>American Economic Journal: Applied Economics</i>, 56–85.</p> <p>Gatrad, A. R. (1994). Attitudes and beliefs of Muslim mothers towards pregnancy and infancy. <i>Archives of Disease in Childhood</i>, 170-174.</p> <p>Moradi, M. (2011). The effect of Ramadan fasting on fetal growth and Doppler indices of pregnancy. <i>JRMS</i>, 165-169.</p> <p>Naderi, T., & Kamyabi, Z. (2004). Determination of fundal height increase in fasting and non-fasting pregnant women during Ramadan. <i>Saudi Med Journal</i>, 809-815.</p> <p>Robinson, T., & Raisler, J. (2005). "Each One Is A Doctor for Herself": Ramadan fasting among pregnant Muslim women in the United States. <i>Ethnicity and Disease</i>, 99-103.</p> <p>Ziaee, V., Kihanidoost, Z., Younesian, M., Akhavarad, M.-B., Bateni, F., Kazemianfar, Z., et al. (2010). The Effect of Ramadan Fasting on Outcome of Pregnancy. <i>Iran Journal Pediatrics</i>, 181-186.</p> <p>Azizi, Fereidoun. "Islamic Fasting and Health." <i>Annals of Nutrition and Metabolism</i> 56.4 (2010): 273-82.</p> <p>Van Ewijk, Reyn. "Long-term Health Effects on the next Generation of Ramadan Fasting during Pregnancy." <i>Journal of Health Economics</i> 30.6 (2011): 1246-260.</p> <p>Kavehmanesh, Zohreh, and Hassan Abolghasemi. "Maternal Ramadan Fasting and Neonatal Health." <i>Journal of Perinatology</i> 24.12 (2004): 748-50.</p> <p>Malhotra, Ashok, P. H. Scott, J. Scott, H. Gee, and B. A. Wharton. "Metabolic Changes in Asian Muslim Pregnant Mothers Observing the Ramadan Fast in Britain." <i>British Journal of Nutrition</i> 61.03 (1989): 663.</p>
<p>Eating well while breastfeeding and fasting</p>	<p>Breastfeeding and fasting can make you very thirsty. Drink plenty of clean water during the</p>	<p>Please suggest food items that are easily available in your target area.</p>	<p>Almond, D., & Mazumder, B. (2011). Health Capital and the Prenatal Environment: The Effect of Ramadan on Pregnancy. <i>American Economic Journal: Applied Economics</i>, 56–85.</p>

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	<p>night and at <i>Suhur</i> to prevent dehydration.</p> <p>To give you lots of energy during the day, eat some snacks during the night. Meat, lentils, peas and beans will keep you feeling full.</p> <p>Fasting and breastfeeding? Get some rest during the day. Ask family to help you. This will keep you feeling strong.</p>	<p>Dehydration is identified as a potential problem and common symptom during fasting. (Cross-Sudworth 2007)</p> <p>Fruits and vegetables slowly release energy and rehydrate the body. 'A Guide to Healthy Fasting'.</p> <p>Maternal and child under-nutrition is the single leading cause of health loss worldwide. (UNICEF, 2008; Blössner and de Onis, 2005.)</p>	<p>Gatrad, A. R. (1994). Attitudes and beliefs of Muslim mothers towards pregnancy and infancy. <i>Archives of Disease in Childhood</i>, 170-174.</p> <p>Moradi, M. (2011). The effect of Ramadan fasting on fetal growth and Doppler indices of pregnancy. <i>JRMS</i>, 165-169.</p> <p>Naderi, T., & Kamyabi, Z. (2004). Determination of fundal height increase in fasting and non-fasting pregnant women during Ramadan. <i>Saudi Med Journal</i>, 809-815.</p> <p>Robinson, T., & Raisler, J. (2005). "Each One Is A Doctor for Herself": Ramadan fasting among pregnant Muslim women in the United States. <i>Ethnicity and Disease</i>, 99-103.</p> <p>Ziaee, V., Kihanidoost, Z., Younesian, M., Akhvirad, M.-B., Bateni, F., Kazemianfar, Z., et al. (2010). The Effect of Ramadan Fasting on Outcome of Pregnancy. <i>Iran Journal Pediatrics</i>, 181-186.</p> <p>Azizi, Fereidoun. "Islamic Fasting and Health." <i>Annals of Nutrition and Metabolism</i> 56.4 (2010): 273-82.</p> <p>Van Ewijk, Reyn. "Long-term Health Effects on the next Generation of Ramadan Fasting during Pregnancy." <i>Journal of Health Economics</i> 30.6 (2011): 1246-260.</p> <p>Kavehmanesh, Zohreh, and Hassan Abolghasemi. "Maternal Ramadan Fasting and Neonatal Health." <i>Journal of Perinatology</i> 24.12 (2004): 748-50.</p> <p>Malhotra, Ashok, P. H. Scott, J. Scott, H. Gee, and B. A. Wharton. "Metabolic Changes in Asian Muslim Pregnant Mothers Observing the Ramadan Fast in Britain." <i>British Journal of Nutrition</i> 61.03 (1989): 663.</p>
<p>Danger signs for mother and baby while breastfeeding and fasting</p>	<p>Breastfeeding and fasting? If you're dizzy, or your urine is dark and smelly, you may be dehydrated. Drink some water and get clinic help.</p> <p>Breastfeeding means you need to eat more. If you lose weight while fasting, get checked at the clinic. Staff will check you're healthy.</p> <p>If your baby is making 6-10 wet nappies a day during your fast, it</p>	<p>These warning signs have been identified as possibly having a negative effect on woman's health.</p> <p>Dehydration is identified as a potential problem and common symptom during fasting. (Cross-Sudworth 2007.)</p> <p>Appropriate home care and timely treatment of complications identified as a key strategy in tackling MDG 4.</p> <p>Source: WHO Factsheet.</p>	<p>Almond, D., & Mazumder, B. (2011). Health Capital and the Prenatal Environment: The Effect of Ramadan on Pregnancy. <i>American Economic Journal: Applied Economics</i>, 56–85.</p> <p>Gatrad, A. R. (1994). Attitudes and beliefs of Muslim mothers towards pregnancy and infancy. <i>Archives of Disease in Childhood</i>, 170-174.</p> <p>Moradi, M. (2011). The effect of Ramadan fasting on fetal growth and Doppler indices of pregnancy. <i>JRMS</i>, 165-169.</p> <p>Naderi, T., & Kamyabi, Z. (2004). Determination of fundal height increase in fasting and non-fasting pregnant women during Ramadan. <i>Saudi Med Journal</i>, 809-815.</p> <p>Robinson, T., & Raisler, J. (2005). "Each One Is A Doctor for Herself": Ramadan fasting among pregnant Muslim</p>

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	<p>is a good sign that he is getting plenty of milk!</p> <p>If your baby loses weight during your fast she may not be getting enough milk. Take her to the clinic, and talk to your religious advisor.</p> <p>You will still make milk during the day, so feed your baby as often as she wants. It will help your body make plenty of milk.</p>		<p>women in the United States. <i>Ethnicity and Disease</i>, 99-103.</p> <p>Ziaee, V., Kihanidoost, Z., Younesian, M., Akhvirad, M.-B., Bateni, F., Kazemianfar, Z., et al. (2010). The Effect of Ramadan Fasting on Outcome of Pregnancy. <i>Iran Journal Pediatrics</i>, 181-186.</p> <p>Azizi, Fereidoun. "Islamic Fasting and Health." <i>Annals of Nutrition and Metabolism</i> 56.4 (2010): 273-82.</p> <p>Van Ewijk, Reyn. "Long-term Health Effects on the next Generation of Ramadan Fasting during Pregnancy." <i>Journal of Health Economics</i> 30.6 (2011): 1246-260.</p> <p>Kavehmanesh, Zohreh, and Hassan Abolghasemi. "Maternal Ramadan Fasting and Neonatal Health." <i>Journal of Perinatology</i> 24.12 (2004): 748-50.</p> <p>Malhotra, Ashok, P. H. Scott, J. Scott, H. Gee, and B. A. Wharton. "Metabolic Changes in Asian Muslim Pregnant Mothers Observing the Ramadan Fast in Britain." <i>British Journal of Nutrition</i> 61.03 (1989): 663.</p>
<p>Post-miscarriage programme and recovery</p>	<p>Don't need these messages anymore? Have you had a miscarriage? We can send you messages to help. Text yes to xxxxx to get these messages.</p> <p>Losing a baby can be very hard. Talk to someone you trust and give yourself time to deal with your feelings. It takes time to move on.</p> <p>Early miscarriage is common and it does not happen because of anything you do, or don't do. You are not to blame.</p> <p>No one is to blame for a miscarriage. It usually happens because the baby was not growing</p>	<p>If there are counselling groups available in your area, give recipients contact details.</p> <p>Just as it took time to adjust to the idea of being pregnant, it may take time to adjust to the non-pregnant state. There is a tendency for people to feel that they must get on with life and not focus on sad events and feelings. But grieving is a process and healing is a process; with them, emotions ebb and flow.</p> <p>Resolve. Miscarriage: The Hidden Loss.</p>	<p>Wong et al. 2003. 'A qualitative investigation into women's experiences after a miscarriage: implications for the primary healthcare team', <i>British Journal of General Practice</i>, 2003, 53, 697-702.</p> <p>Natalène Séjourné, Stacey Callahan & Henri Chabrol (2010): 'Support following miscarriage: what women want', <i>Journal of Reproductive and Infant Psychology</i>, 28:4, 403-411.</p> <p>Li et al. 2002. ' Recurrent miscarriage: aetiology, management and Prognosis', <i>Human Reproduction Update</i>, 8(5): 463-481.</p> <p>Broen et al. 2004. ' Psychological Impact on Women of Miscarriage Versus Induced Abortion: A 2-Year Follow-up Study', <i>Psychosomatic Medicine</i>, 66:265–271.</p>

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	properly, not because of anything you ate or did.		
Post-miscarriage danger signs	Some bleeding after miscarriage is normal. If your bleeding gets heavier or you continue to bleed for more than 2 days, go to the clinic.	Complications of all types of abortion are a leading cause of morbidity for women in developing countries. Any bleeding in pregnancy, whatever the cause has the potential to cause serious complications. WHO, 1995. WHO (2015) guidelines on post abortion care.	Wong et al. 2003. 'A qualitative investigation into women's experiences after a miscarriage: implications for the primary healthcare team', <i>British Journal of General Practice</i> , 2003, 53, 697-702. Natalène Séjourné, Stacey Callahan & Henri Chabrol (2010): 'Support following miscarriage: what women want', <i>Journal of Reproductive and Infant Psychology</i> , 28:4, 403-411. Li et al. 2002. 'Recurrent miscarriage: aetiology, management and Prognosis', <i>Human Reproduction Update</i> , 8(5): 463-481. Broen et al. 2004. 'Psychological Impact on Women of Miscarriage Versus Induced Abortion: A 2-Year Follow-up Study', <i>Psychosomatic Medicine</i> , 66:265–271
	If you have a heavy, smelly discharge after a miscarriage, you may have an infection. Go to the clinic for the treatment you need.		
	Tell your family that after a miscarriage you must rest so your body can recover well. Try not to do any hard work until the bleeding stops.		
	If you have a fever, abdominal pain, or a smelly discharge, go to the clinic for the right medicines. You may have an infection.		
	If your period doesn't return within 6 weeks of miscarrying, go to the clinic for a checkup.		
Care after a miscarriage	After miscarriage, you will bleed like a heavy period, so be prepared. Don't insert anything into your vagina. Change pads every 4-6 hours.	Many women will not be ready to even think about the next pregnancy. But we felt it's important to include advice about birth spacing as they may not get any messages or advice elsewhere. Intervals of shorter than six months between abortion and subsequent pregnancy were associated with elevated	Wong et al. 2003. 'A qualitative investigation into women's experiences after a miscarriage: implications for the primary healthcare team', <i>British Journal of General Practice</i> , 2003, 53, 697-702. Natalène Séjourné, Stacey Callahan & Henri Chabrol (2010): 'Support following miscarriage: what women want', <i>Journal of Reproductive and Infant Psychology</i> , 28:4, 403-411.
	It's important to get some rest. You may bleed a little. Wash yourself very day. Try to avoid		

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	<p>having sex until you stop bleeding fully.</p>	<p>risks of premature rupturing of membranes, anaemia and bleeding, pre-term and very pre-term births, and low birth weight, compared with longer intervals. WHO, 2005.</p> <p>Poor diet may play a role in some miscarriages. For example, a diet that is low in trace elements such as iron and zinc, and low in important vitamins, can be associated with an increased rate of congenital abnormalities, leading in turn to an increased risk of miscarriage. Millet et al.</p> <p>WHO (2015) guidelines on post-abortion care.</p>	<p>Li et al. 2002. 'Recurrent miscarriage: aetiology, management and Prognosis', <i>Human Reproduction Update</i>, 8(5): 463-481.</p> <p>Broen et al. 2004. 'Psychological Impact on Women of Miscarriage Versus Induced Abortion: A 2-Year Follow-up Study', <i>Psychosomatic Medicine</i>, 66:265–271.</p>
<p>Give your body a rest before trying to get pregnant again. Waiting for at least six months will give your body time to get strong again.</p>			
<p>You can get pregnant again now but it's best to wait at least 6 months so your body can heal. Use a family planning method.</p>			
<p>When you get pregnant again, go to the clinic straight away for a check-up and to get iron and folic acid tablets to help your baby grow.</p>			
<p>Eating well will help your body and mind to recover from your loss. Try to eat plenty of fruit, vegetables, beans and lentils.</p>			
<p>A miscarriage may make you worry about future pregnancies. But most women go on to have a healthy baby. Don't give up hope yet.</p>			
<p>Clinic staff may not be able to say why you miscarried. This can be hurtful. Sadly, miscarriages often don't have a clear cause.</p>			
	<p>If you are worried, sad or anxious, talk to a health worker. She will be able to help you through this tough and emotional time.</p>		

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Miscarriage un-subscription message	Sadly, it is time for our journey with you to finish now. We wish you the best of luck for the future.	Many women will not be ready to even think about the next pregnancy. But we felt it's important to include advice about birth spacing as they may not get any messages or advice elsewhere.	
Safe circumcision	Circumcision can be unsafe if it isn't done in a clean way. Take your baby to the clinic or doctor for a safe, clean circumcision.	WHO is working with countries to provide technical guidance supporting the implementation of safe and effective male circumcision services.	<p>WHO.2006. 'Demand for male circumcision in a bid to prevent HIV'. Bulletin, vol. 84 (7)</p> <p>WHO. 2007. Male circumcision: Global trends and determinants of prevalence, safety and acceptability. WHO: GenevaWHO/UNAIDS..</p> <p>WHO. 2008. Male circumcision quality assurance: a guide to enhancing the safety and quality of services. WHO: Geneva</p> <p>WHO. 2010. Manual for early infant male circumcision under local anaesthesia. WHO: Geneva.</p> <p>H. A. Weiss et al. 2010. 'Complications of circumcision in male neonates, infants and children: a systematic review'. BMC Urology vol.10(2)</p> <p>K. Peltzer et al. 2010. 'Evaluation of a safer male circumcision training programme for Ndebele traditional surgeons and nurses in Gauteng, South Africa: Using direct observation of circumcision procedures'. African Journal of Traditional, Complementary and Alternative Medicines. Vol. 7(2) pp.153-159 - (not neonates but still interesting)</p> <p>N Macdonald. 2011. 'Male circumcision: Get the timing right.' CMAJ 183(7). DOI:10.1503/cmaj.101425.</p>
Circumcision after care	<p>Bandaging the penis after circumcision prevents too much bleeding and protects it from germs. You can get gauze from the clinic.</p> <p>Unsure how to bandage his penis? Fold gauze into long strip. Wrap round, crossing the ends. Wind</p>	<p>Please check if applying antiseptic is part of local guidelines.</p> <p>Bandage is required only for Gomco/Mogen methods of circumcision.</p> <p>To the untrained eye, a completely normal circumcision wound could look infected. It is normal for a circumcision wound to have a</p>	<p>WHO.2006. 'Demand for male circumcision in a bid to prevent HIV'. Bulletin, vol. 84 (7)</p> <p>WHO. 2007. Male circumcision: Global trends and determinants of prevalence, safety and acceptability. WHO: Geneva WHO/UNAIDS. 2007. Male Circumcision: Global Trends and Determinants of Prevalence, Safety and Acceptability.</p>

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	the rest and tape it. Don't cover the tip.	thin yellow film, which can easily be mistaken for pus.	WHO. 2008. Male circumcision quality assurance: a guide to enhancing the safety and quality of services. WHO: Geneva
	Is the bandage on his penis too tight? Squeeze it to check. The bandage and penis should give a little. If not, redo the dressing.	Apply petroleum jelly on the wounds to prevent rubbing against the nappy and help the healing process.	WHO. 2010. Manual for early infant male circumcision under local anaesthesia. WHO: Geneva. H. A. Weiss et al. 2010. 'Complications of circumcision in male neonates, infants and children: a systematic review'. BMC Urology vol.10(2)
	Before bandaging the penis, apply plenty of petroleum jelly to the gauze. It will help protect the wound.		K. Peltzer et al. 2010. 'Evaluation of a safer male circumcision training programme for Ndebele traditional surgeons and nurses in Gauteng, South Africa: Using direct observation of circumcision procedures'. African Journal of Traditional, Complementary and Alternative Medicines. Vol. 7(2) pp.153-159 - (not neonates but still interesting)
	Keep the penis bandaged for 2 days to protect it. If it falls off but isn't bleeding lots, leave it uncovered and apply petroleum jelly.		N Macdonald. 2011. 'Male circumcision: Get the timing right.' CMAJ 183(7). DOI:10.1503/cmaj.101425
	Your baby's bandage must come off after 2 days. If it doesn't on its own, soak it in warm water. This will make it easier to unwrap.		Morris et al. 2012. 'A snip in time: what is the best age to circumcise', BMC paediatrics, 12(20), doi:10.1186/1471-2431-12-20.
	After circumcision, a little blood on the bandage is OK. If the blood spot is bigger in size than your two thumbs, take him to the clinic.		
	Is your circumcised baby urinating less than normal? There may be a problem. Take him to the clinic for a check-up. Staff will help you.		
	After circumcision, a shiny yellowish crust forms on the wound, which cannot wipe off easily. If it does, take your baby to the clinic.		

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	<p>A white or yellow film over the penis is a sign of healing. If it smells or is swollen, take him to the clinic. It could be infected.</p> <p>A fever, fewer wet nappies and refusal to feed are all warning signs that your baby's penis may be infected. Take him to the clinic today.</p> <p>After circumcision, your baby's penis will be red and swollen. It will start to look better in 2 days. If not, take your baby to the clinic.</p> <p>To help your baby's penis to heal, give it a thin coating of petroleum jelly. This will help it to stay clean and reduce soreness.</p> <p>If a ring was used for your baby's circumcision, it must fall off within 8 days. If it doesn't, take your baby to the clinic.</p>		
<p>Social support message (pregnancy)</p>	<p>Having someone you trust with you in labour can give you extra support. Why not ask someone to be with you for when labour starts?</p> <p>When labour starts, a friend can help you cope. They can massage your back or fetch you a drink. Start thinking about who you want with you.</p>	<p>WHO lists social support during labour as being an essential intervention to improve the outcomes of birth for mothers and their infants.</p> <p>WHO, 2011.</p>	<p>WHO, PMNCH, Aga Khan University. 2011. 'Essential Interventions, Commodities and Guidelines for Reproductive, Maternal, Newborn and Child Health: A global review of the key interventions related to reproductive, maternal, newborn and child Health. WHO: Geneva.</p>

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	Having support during labour will keep you relaxed. This will make labour faster. Choose someone to be with you when labour starts.		

HIV/PMTCT

Topic	Suggested week/stage	SMS message	Partner notes	References
Empowerment	Early pregnancy	Pregnant with HIV? You are not alone. Lots of pregnant women have it. You can still have a healthy pregnancy and a healthy baby.		WHO (2015) Guidelines for conducting HIV surveillance among pregnant women attending antenatal clinics based on routine programme data WHO (2015) Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV. WHO (2013) Paediatric HIV surveillance among infants and children less than 18 years of age.
Empowerment/ PMTCT	Early pregnancy	Women living with HIV can have a healthy baby. Free medicine at the clinic will help prevent transmission of HIV and keep you healthy, too.		WHO (2010) PMTCT strategic vision 2010–2015 : preventing mother-to-child transmission of HIV to reach the UNGASS and Millennium Development Goals. WHO (2010) Antiretroviral drugs for treating pregnant women and preventing HIV infection in infants: recommendations for a public health approach. – 2010 version.
Empowerment	Throughout	You have control over your life: eat well, go to your check-ups and, if you have HIV, take ARVs. This will keep you happy and healthy.		Matilda Ngarina, Rebecca Popenoe et al. (2013) Reasons for poor adherence to antiretroviral therapy postnatally in HIV-1 infected women treated for their own health: experiences from the Mitra Plus study in Tanzania, BMC Public Health 13: 450. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3651864/
Empowerment/P MTCT	Throughout	HIV is like any other illness. With the right medicines, you can lead a long and healthy life.		Lesley Odendal (2013) 'Option B+' women are at increased risk of loss to follow-up after starting HIV treatment http://www.aidsmap.com/Option-B-women-are-at-increased-risk-of-loss-to-follow-up-after-starting-HIV-treatment/page/2699596/
Empowerment	Throughout	Know a mother who has HIV? Tell her that by accepting and managing HIV,		Tweyha H, Feldacker C, Estill J, Jahn A, Ng'ambi W, et al. (2013) Are They Really Lost? "True" Status and Reasons for Treatment Discontinuation among HIV Infected Patients on Antiretroviral Therapy Considered Lost to Follow Up in Urban Malawi. PLoS ONE 8(9): e75761.

		there is a future for her and her baby, just like everyone else.		doi:10.1371/journal.pone.0075761 http://www.plosone.org/article/fetchObject.action?uri=info%3A%2F10.1371%2Fjournal.pone.0075761&representation=PDF
HIV test	8-12 weeks	Your baby is now the size of a date. It's time for your 1st clinic check-up. Get an HIV test and a blood test. Go with a friend for support.		Nachega JB et al. (2012) Adherence to antiretroviral therapy during and after pregnancy in low-, middle- and high-income countries: a systematic review and meta-analysis. <i>Advance online edition AIDS</i> 26, doi: 10.1097/QAD.0b013e328359590f. http://www.ncbi.nlm.nih.gov/pubmed/22951634 Visser (2012). Women, HIV and Stigma. <i>Future Virology</i> 7 (6) http://www.medscape.com/viewarticle/766512_3
PMTCT/ARV	Early pregnancy	Look after your own health, so your baby grows well. Women with HIV need to take medicine (ARV) every day.		El Sadr et al. JAIDS 2010. Antiretroviral Treatment as an HIV Prevention Strategy: HPTN 065 (TLC-Plus) Study. http://www.hptn.org/web%20documents/HPTN065/TrgPrsntns12_2010/WEl-Sadr28_Oct_2010.pdf
HIV-drug interactions	Early pregnancy	Women with HIV must tell the health worker if they are on any medication.		Nyblade et al (2009). Combating HIV stigma in health care settings: what works? <i>Journal of the International AIDS society</i> http://archive.biomedcentral.com/1758-2652/content/12/1/15
Testing positive	Post HIV test	It can be scary to find out you have HIV. Give yourself time to get used to it. No one can see it and lots of pregnant women have it.		Valarie., A. et al. 2010. Methadone, Buprenorphine, and Street Drug Interactions with Antiretroviral Medications. [Online]. Available on: http://www.researchgate.net/publication/44658508_Methadone_buprenorphine_and_street_drug_interactions_with_antiretroviral_medications [Accessed on 5 March 2014]
Partner testing	Early pregnancy	You and your partner need an HIV test. Go to the clinic together for the test. You will get your results and plan your care together.		WHO., 2014. Adolescent pregnancy. [Online]. Available on: http://www.who.int/maternal_child_adolescent/topics/maternal/adolescent_pregnancy/en/ [Accessed on 5 March 2014]
Disclosure	Early-mid pregnancy/through out	It's important for a person with HIV to tell a friend or someone they trust. It will help her to stick to the treatment.		Horwood., C. et al. 2013. HIV-Infected Adolescent Mothers and Their Infants: Low Coverage of HIV Services and High Risk of HIV Transmission in KwaZulu-Natal, South Africa. [Online]. Available on: http://www.plosone.org/article/info%3A%2F10.1371%2Fjournal.pone.0074568 [Accessed on 5 March 2014]
				Newman., L et al. 2013. Global Estimates of Syphilis in Pregnancy and Associated Adverse Outcomes: Analysis of Multinational Antenatal Surveillance Data. [Online]. Available on: http://www.plosmedicine.org/article/info%3A%2F10.1371%2Fjournal.pmed.1001396 [Accessed on 5 march 2014]

HIV-TB coinfection	Throughout	If a family member has TB, get yourself tested too. Women living with HIV can get free pills at the clinic that protect them against TB.		<p>Strasser., S. et al. 2012. Introduction of Rapid Syphilis Testing Within Prevention of Mother-to-Child Transmission of HIV Programs in Uganda and Zambia: A Field Acceptability and Feasibility Study. [Online]. Available on: http://www.researchgate.net/publication/229436820_Introduction_of_Rapid_Syphilis_Testing_Within_Prevention_of_Mother-to-child_Transmission_of_HIV_Programs_in_Uganda_and_Zambia_A_Field_Acceptability_and_Feasibility_Study [Accessed on 5 March 2014]</p> <p>Bailey. R. C. et al., 2001. Male circumcision and HIV prevention: current knowledge and future research directions. [Online]. Available on: http://www.hawaii.edu/hivandaids/Male%20Circumcision%20and%20HIV%20Prevention%20%20%20Current%20Knowledge%20and%20Future%20Research%20Directions.pdf [Accessed 22 November 2013]</p> <p>WHO. 2007. Male Circumcision and HIV Prevention. [Online]. Available on: http://www.who.int/hiv/pub/toolkits/Male%20circumcision%20and%20HIV%20prevention.pdf [Accessed on 22 November 2013]</p> <p>Jewkes. R. K. et al. 2003., Gender inequalities, intimate partner violence and HIV preventive practices: findings of a South African cross-sectional study. <i>Social Science & Medicine</i>, 56, pp. 125-134.</p> <p>Antle., B. J. et al. 2001. Challenges of parenting for families living with HIV/AIDS. <i>Social work</i>, 46 (2), pp. 159 - 170.</p> <p>Clark and Hamplova. 2010. Single motherhood in Sub-Saharan Africa: A Life Course Perspective. http://www.indepth-network.org/email%20indepth%20leaders/Concept%20Note%20Single%20Motherhood.pdf [Accessed on 5 Aug 2014]</p> <p>Dorsey et al. (1999). Parenting Self-Efficacy of HIV-Infected Mothers: The Role of Social Support. <i>Journal of Marriage and Family</i>, Vol. 61, No. 2 (May, 1999), pp. 295-305</p> <p>Roman. 2011. Maternal parenting in single and two-parent families in South Africa from a child's perspective. http://repository.uwc.ac.za/xmlui/bitstream/handle/10566/995/RomanParentingChildSouthAfrica2011.pdf?sequence=1 [Accessed on 6 Aug 2014]</p> <p>AIDS info., 2013. Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents. [Online]. Available on:</p>
HIV-TB coinfection	Throughout	If a family member has TB, make sure they sleep in a separate room and get medicines which will cure it. This protects you and your baby.		
ART adherence	Pregnancy	Don't run out of your medicines. If you have HIV, make sure to get your ARVs, iron, folate and calcium from the clinic before you run out.		
ART adherence	Throughout	Continue taking your ARVs. Your baby's health still depends on yours. Make it part of your daily routine, such as taking pills after meals.		
HIV test-repeat	3 rd trimester	You will be offered an HIV test again. Take it, even if the last test was negative. Knowing now helps prevent HIV passing to your baby.		
Breastfeeding + ARV	3 rd trimester/ Neonatal period	Breastmilk protects your baby from many illnesses. A mother with HIV should feed breastmilk only and give her baby ARV syrup for 4-6 weeks.		

HIV testing for baby	6 weeks	At 6 weeks, your baby can be tested for HIV. Take your baby to the clinic. Staff will also check that you have recovered from the birth.		http://aidsinfo.nih.gov/contentfiles/lvguidelines/AdultandAdolescentGL.pdf [Accessed on 5 March 2014] Mills., E. et al. 2005. Impact of African herbal medicines on antiretroviral metabolism. [Online]. Available on: http://journals.lww.com/aidsonline/Abstract/2005/01030/Impact_of_African_herbal_medicines_on.13.aspx [Accessed on 5 March 2014] CDC., 2014. Syphilis - CDC Fact Sheet. [Online]. Available on: http://www.cdc.gov/std/syphilis/stdfact-syphilis.htm [Accessed on 5 march 2014] WHO. 2002. Prevention of mother-to child transmission of syphilis. http://www.who.int/reproductivehealth/publications/maternal_perinatal_health/prevention_mtct_syphilis.pdf [Accessed on 29 July 2014] Bond et al (2002). Stigma, HIV/AIDS and prevention of mother-to-child transmission in Zambia Evaluation and Program Planning 25 (4). http://www.sciencedirect.com/science/article/pii/S0149718902000460 Rankin et al. (2005). The Stigma of Being HIV Positive in Africa. PLoS Med 2(8) http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.0020247
Cotrimoxazole preventative therapy	4-6 weeks	If you have HIV, your baby needs an HIV test at 6 weeks and a medicine called cotrimoxazole (CTX) daily to fight against infection.		
Discontinuing breastfeeding	Before 12 months	If you have HIV, it may be time to stop breastfeeding. Talk to your health worker about how to gradually stop breastfeeding your baby.		
		Decided to feed your baby other types of milk? Find out from the health worker how to make sure the milk you feed your baby is safe.		