



# "SISTERS FOR LIFE" ©

***Gender and HIV Training Manual***  
For use with Small Enterprise Foundation  
(SEF) Centre Meetings



Produced by RADAR  
(Rural AIDS and Development Action Research Program)  
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South Africa

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# Session 1: Introductions: Who are We?

**Prayer**

**Pledge (Theme)**

**Prayer/Praise Song:** Led by Chairwoman  
Include reference to workshop topics and making change happen in our lives. Attendance follows prayer.

**Pledge:** Led by leader of a loan group  
Have a member explain how one aspect of the pledge is meaningful to her in regards to improving her life

## **Activity Sequence and time allocations (60 minutes)**

- 1) Introductions (20 minutes)**
- 2) Overall goals and Programme (10 minutes)**
- 3) Expectations and Concerns (10 minutes)**
- 4) Ground rules (10 minutes)**
- 5) Introduction to Co-Counseling (10 minutes)**

### **Activity 1: Introductions & Nametags (20 minutes)**

#### Goals

- Help participants to learn more about one another
- Help participants to feel comfortable and safe
- Help facilitators to learn more about participants

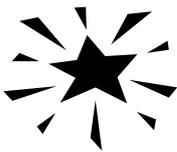
Materials: Nametags

#### Process:

1. Trainers welcome participants and introduce themselves-giving the meaning of their names. (Fill out nametags and hand them out.)
2. Break into loan groups-have each come forward and the leader explain the meaning of their group name.
3. Have other group members individually share the following:
  - Name
  - Meaning of their names
5. Facilitator reflects how her name shaped her.



- ◆ Introduction of Intervention:
- ◆ -Idea of two cycles
- ◆ -Our role as part of SEF
- ◆ -



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### **FACILITATOR'S NOTES:**

- **Session may take a long time if not managed.**
- **Gently remind everyone that there will be ample opportunity to talk during the course of the training.**
- **Ensure that all women have a chance to speak**
- **At this point if arrangement of chairs isn't working, change them before continuing**
- **Keep time in mind and have facilitation partner quietly remind active facilitator**

### **Activity 2: Overall Goals & Programme (10 minutes)**

#### Goals:

- Inform participants about workshop's goals and content
- Introduce concepts of homework, ground rules, ubuntu.

Materials: Goals and content written out legibly on newsprint

#### Process:

- 1) Facilitator reads out and explains goals and content on newsprint.
  - 2) Facilitator ensures that all participants understand the content by calling for questions and comments.
  - 3) Facilitator makes links between sessions.
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### **Activity 3: Expectations and Concerns (10 minutes)**

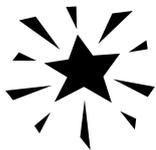
#### Goals

- Alleviate any concerns that the participants may be having.
- Agree on the expectations which the workshop can and cannot meet.

Materials : Small sheets of papers and pens

#### Process

- 1) Participants break into loan groups (form circles)
- 2) Participants discuss their expectations i.e. what they hope to learn and their concerns
- 3) The expectations and concerns are recorded on different sheets of paper and the leader of the group reports to the larger group.
- 4) The facilitator notes expectations and indicates which ones will be met and which ones, if any, will not be met by the workshop.
- 5) The facilitator notes the concerns and indicates ways in which the concerns will be addressed.
- 6) Have each group mention only expectations that are different from those mentioned of previous groups.



#### **FACILITATOR'S NOTES:**

- **Expectations and concerns must be visible during the course of training.**
- **To avoid a lengthy discussion, it is best for facilitators to simply respond to the expectations and concerns raised.**
- **If there's misunderstanding or disagreement, this must be opened for clarification and for purposes of reaching a consensus.**
- **Encourage participation by non-chairwomen and non-writers**



### **Activity 4: Ground rules (10 minutes)**

#### Goals

- To establish guidelines for how participants will interact during the course of the training
- To create a climate in which everyone feels that their opinion and input matters.
- To promote unity among participants

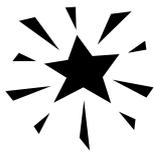
Materials: Newsprint and marker

#### Process

1. Facilitator asks group why we need rules to govern the trainings.
2. Facilitator lists ground rules as provided by the group on a newsprint.

### **Examples of Key Ground Rules:**

1. Go tla ra nako/Be on time– Rules & Fines of SEF apply
2. Go hlomphana/Have respect
3. Go theeletsage go rutwa/bolewa/ Listen to each other when speaking, No interrupting
4. O se tshabe ge o satsebe/ Everyone must participate-includes assigned homework and reportbacks
5. Confidentiality
6. Don't be afraid to ask questions
7. Cellphones off



### **FACILITATOR'S NOTES:**

- **Link ground rules with respect and African traditions (e.g. respecting each other-ubuntu)**
- **Make sure that the ground rules remain visible for everyone during the course of the entire training.**
- **Facilitator may need to keep referring to the ground rules whenever a need arises.**
- **As some participants may not be literate. Make sure that you read out everything that is written on the newsprint. ( stand to the side when writing)**
- **If there are suggestions for rules that seem inappropriate, ask the group to explain why it is a necessary rule.**



### **Activity 5: Introduction to Co-counseling (10 minutes)**

Goals:

- Develop listening skills
  - Relieve stress
  - Support fellow members of SEF
  - Practice confidentiality
  - Learn to speak out in safe space
- 1) Facilitator explains what co-counseling is and why it is relevant and useful to the training. ( Emphasis that they will listen only, not respond when person is talking.)
  - 2) Break into pairs (These will be pairs for all sessions)
  - 3) Tell the group to close their eyes think about how SEF has helped them with the loan, how it has changed their lives.
  - 4) Ask everyone to open their eyes, turn to the woman next to them and tell her how they are feeling right now. Spend 2 minutes each speaking.

### **Summary of Session 1**

#### **Key points**

- Introduction of participants by learning about how we got our names and how we relate to them.
- Introduction of workshops through the overall programme.
- Gauged groups expectations and feelings about the training and practiced working in loan groups.
- Set out clear ground rules for the rest of the training, came to an understanding of why we need ground rules.
- Practiced co-counseling and listening skills in pairs.

**Individual Summary**

**Closing Prayer**



# Session 2: Reflecting on Culture

Prayer	Pledge (Theme)	Co-Counseling	Summary: Session 1
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**Activity Sequence & Time allocation**  
1) Wedding songs & Women's Names (25 minutes)  
2) Girls Dos & Donts (30 minutes)  
3) Homework (5 minutes)

**Activity 1: Wedding Songs & Names (25 minutes)**

Goals:

1. To encourage women to think about some of the words that are used by the community to address women.
2. To get women to think about the kind of messages that are given to young women on their wedding day and the impact it has on them.
3. The role of the community and the influence of culture in our lives

Materials: Pen and paper

Process:

- 1) Ask the participants to divide into loan groups of five people.
- 2) Ask some groups to analyse wedding songs and others to analyse names given to men and women and report back on the messages in those songs and names both good and bad.
- 3) Bring everyone back to the larger group and have groups reportback, ask one group to sing a song.

**Wedding Songs    Dikosa tsa manyalo**

: Tolerance    Bogadi ba dula ka pelo  
: Daughter in law concentrate on your things  
: Makoti tlogela ditaba tsa batho  
: Sweep girl sweep Fiela ngwanyana  
: Now is your time Makoti ke dinaku  
: Mother in law leave the pots    Mmatswale tlogela dipotwana  
: Listen to their rules    O mamele molao  
: She is our mother take care of her    Ke mmarona



## Wedding Songs Discussion Notes:

"Wedding songs concentrate on how the bride should behave. Why aren't there songs for men?"

- Why do we sing these songs?
- What do we want to tell girls in the songs?
- How do the songs influence us?
- What messages are given to woman in relation to housework and care-taking of children

### **Key messages in songs:**

- Women should prepare for their roles as housekeepers
- Mother-in-laws should assume their roles of monitors of daughter-in-laws
- The wife must stay no matter how hard it gets (Domestic Violence)

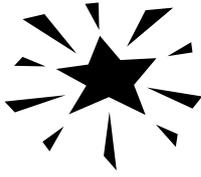
- 1) Ensure relevant songs are mentioned by prompting during group time.
- 2) Discuss the full meaning of the songs
- 3) Illustrate to the group how over one's lifetime listening and singing the songs is like conditioning yourself to believe the messages.

### Women's Names/Maina a basadi

Prostitute	Kobaobane
** Divorcee	Poabogadi
** Unmarried	Lefetwa
** Barren woman	Moopa
Ugly	Sekobo
** Witch	Moloi
** Dog/Bitch	Mpsa
Lazy woman	Sebodu

### Men's Names/Maina a banna

Unmarried man	Kgope
Widower	Mohlolo/Ngolobe
Unemployed man	Mahlalela
Lazy man	Majascaftin
Drunkard	Segatamoroko



## Names Facilitator's Notes:

- Step 1: Write list  
Step 2: Clarify meanings  
Step 3: Probe for additions/specifics ( similar for men)

Messages in Names:

-Separate laws

- ◆ Who uses these names, do men have the same names as women?
- ◆ Why is it that men do not have so many bad names as women have?
- ◆ Decide which items to focus on, don't analyse all mentioned.
- ◆ Does this mean that men do not need to be told how the community expect them to behave ?
- ◆ How are expectations for behavior different for men than women?
- ◆ Lobola question: discuss the exchange of symbolic gifts to bind 2 families.

### **Activity 2: Girls Dos & Don'ts (30 minutes)**

Goals:

- 1) To understand expectations & restrictions placed upon women during childhood
- 2) To explore the meanings behind the messages sent to women
- 3) To sensitize the group to the consequences of women not conforming.

Materials: Newsprint and pens for each group

Exercise:

- 1) Ask loan groups to think back to when they were small girls and the messages they received related to: write on newsprint
  - a) Things that girls are supposed to do (10 minutes)
  - b) Things that girls are not supposed to do (10 minutes)
- 2) Come back to larger group and go over the lists of Dos & Donts then as a large group brainstorm: What happens to girls who don't conform?
- 3) Bring up contradictions or confusing messages
- 4) Discuss the what messages are sent to men and how they affect women.



**Girls are supposed to do:**

- 1. \*\*Have sex after marriage (Be innocent in sex)
- 2. \*\*Have respect-listen to elders
- 3. Wake up early & sweep
- 4. Sit on the floor
- 5. Do household chores
- 6. To play only with girls
- 7. \*\*To look clean & beautiful
- 8. \*\*Wear dresses (long)
- 9. Cover head in church

**Girls who don't conform:**

- 1. Get pregnant
- 2. Get raped
- 3. Get kicked out of the house
- 4. Not given food
- 5. Not given education
- 6. Not given money
- 7. Isolated-Labelled/Insulted
- 8. Beaten
- 9. Rain on your wedding day
- 10. Fertile too soon

**Girls are not supposed to do:**

- 1. To look dirty & careless
- 2. \*\*Wear mini-skirts or trousers
- 3. To eat eggs, liver, sour milk or rich food
- 4. To go on to University
- 5. To play with boys
- 6. To stay out late at night
- 7. To eat while standing
- 8. To cook while menstruating
- 9. To have sex while menstruating
- 10. Healers cannot heal during menstruation
- 11. To go to church during period
- 12. To stand at the door
- 13. To sit on the rock
- 14. To eat inside the pot (It will be rainy & windy on wedding day)
- 15. To wash after sunset
- 16. To turn back in the middle of the road ( Partner's family might be coming on the road with Lobola)
- 17. To wash hair while menstruating.

**Dos & Donts Facilitator's**

**Notes:**

- Begin Discussion by Clarifying and adding additional
- \*\*Probe specific ones for messages and contradictions  
(If a woman isn't beautiful, she is called names, but if she is "too sexy," then she deserves to be raped.)
- Highlight how women oppress each other and themselves through use of these terms**
- Ask the group what kind of mothers-in-laws or sister-in-laws they are

or will be? Are they supportive of their female non-blood relatives?

-Discuss the influence the Bible or religion

**Important messages to probe:**

- Respectful-how does that influence a woman's ability to speak out?
- Innocent about sex- can't ask for sex, not supposed to know positions, what about condoms?
- Miniskirt-deserves rape? What about baby in nappy?



### **Summary of Session 2:**

- 1) Names & Wedding Songs:
  - a) They have messages used to control women's behavior
  - b) there are negative consequences for breaking rules: punishment, labels, rape, beaten
- 2) Three Key messages:
  - a) Women's role is to obey, serve, be submissive
  - b) Sex-responsible for rape/should be innocent/it's bad to too fertile/barren
  - c) There are separate laws for men-compare with apartheid. E.g. Women told not to sleep around, men told OK to sleep around.
- 3) Who came up with these messages?
  - a) Culture-who?
  - b) Bible/Religion?
  - c) It is both women & men who use these names & songs to oppress women and control women's sexuality.
- 4) Link to Session 3; we'll talk about who makes up culture? Is it healthy or natural and whether it can be changed.

### **Activity 3: Homework Instructions (5 minutes)**

Materials: None

Process:

- Think about the words that we use to call women who don't conform
- What are the consequences of calling someone those names
- Listen to the songs they sing in weddings and think why they sing them and what it is supposed to mean to the bride.

**Individual Summary**

**Closing Prayer**



# Session 3: Gender Roles

Prayer

Pledge  
(Theme)

Co-Counseling

Summary:  
Session 2

## Activity Sequence and Time Allocation

- 1) Homework Report Back (15 min)
- 2) 24 Hours Part 1 (40 min)
- 3) Homework instructions (5 min)

### Activity 1: Homework Report Back (15 min)

#### Goals:

- 1) To reflect on the messages about men and women from the last session (wedding songs, proverbs)
- 2) To link this to today's activity on gender roles and stereotypes

Materials: Flip charts from last session

#### Process:

- 1) Put flip charts on wall and remind women about last session's homework.

#### Key Questions/Prompts:

- 1) Did any women notice how messages we had explored were being used in "real life"?
- 2) Did anyone attend weddings or other events where songs or proverbs or names were used?
- 3) Who was using these messages? How did other people respond? How did they feel about these messages?



## **Activity 2: 24 Hours (Part 1) (40 min)**

### Goals:

- 1) To identify the tasks of men and women in society.
- 2) To create awareness of men and women's workloads.
- 3) To compare how much time men and women spend caring for themselves and for others. (further exploration of these issues to be continued in Session 4)

### Materials:

- A prepared flip chart of the activity partially completed (to use for giving instructions).
- Prepared flip charts with the 24 hours of the day listed already – one for each group to use. (Facilitator only writes times)
- Markers.

### Process:

- 1) Ask the women to break into their loan groups.
- 2) Explain that this activity is going to look at what men and women in their communities do on a typical day. Use the prepared flip chart as an example of how to complete their own flip charts.
- 3) They should each come up with a "typical" family, giving the husband and wife names, and decide how many children they have.
- 4) Starting with 12 am (midnight) and ending with 11 pm, should list what the husband and wife are each doing each hour:
- 5) Divide the groups so that half address Scenario 1 and half address Scenario 2:

**Scenario 1:** A family in the community with both the husband and wife working, the woman is a SEF client and as a result she is running a small business. They have children

**Scenario 2:** Same as above (wife is a SEF client, they have children) but here the husband is unemployed

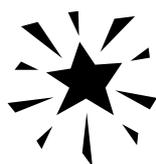
### **Process Part 2:**

- 1) After the women have worked on their flipcharts, ask a group that has finished to present.
- 2) Have a participant read off the activities on her chart, for each one ask the group which activities the wife is doing for herself, and which ones for others? (W= wena, B= bangwe)
- 3) Have participant mark these as W (in 1 colour) and W (in another colour) next to each activity. Do the wife first, then the husband.
- 4) Now add up the number of hours a woman spends on her self vs. others.
- 5) Ask the group if they think that it is fair, summarize the session.



<b>Wife (Thandi) (Sipho)</b>	<b>Husband</b>
12 am Sleeping	12 am sleeping
01 am Breastfeeding	01 am Sleeping
02 am Sleeping	02 am sleeping
03 am Sleeping	03 am sleeping
04 am Wake up prepare bath	04 am sleeping
05 am start breakfast for the family	05 am sleeping
06 am Wake up children & bath them	06 am sleeping
07 am Feed children & herself	07 am wakes up
08 am Dresses herself, leaves for town	08 am eats break-

fast



### **Facilitator's Notes:**

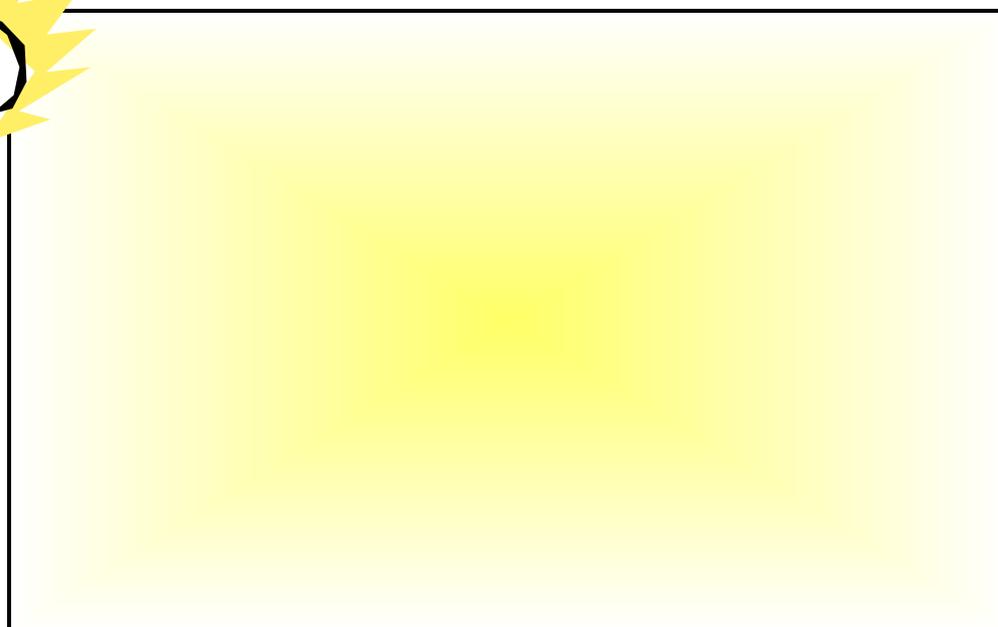
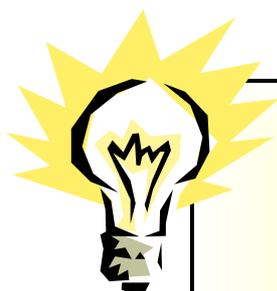
- Facilitator should walk around and help out groups.
- Remind them (if there is a baby) to include time for breast-feeding, changing the babies nappies, etc.
- Notice if they have not included "sex" as one of the activities, ask them (in a playful way) to include it.
- Ask the group: Is this 24 hours real? Does your day look anything like this? What do you notice about the man's day and the woman's day?
- Ask the group: Who get paid for the work that they do? Why is housework not considered "real" work? Is it because it is not valuable? Or because it is not valued?
  - Go back to the messages in the wedding songs, proverbs.
  - Are there any messages that re-inforce these different roles for men and women (eg. wedding songs: " The road will be hard but you must not complain...")
- Although it's possible to go further with this discussion, just try to raise these issues this time. We are laying the foundation for a deeper discussion of the issues in the next session.
- It is not necessary to write all activities in the example.
- Emphasize the women's workload compared with men's.



### **Activity 3: Homework (5 min)**

Process:

- 1) As you continue to go about your daily routine, take notice of how much of your time is spent on various activities, how much time do you spend on taking care of yourself?



### **Summary of Session 3:**

- 1) Participants discussed further the names and messages sent to us as women through songs, proverbs and in our daily lives.
- 2) Participants began to chart out women's activities in one day to explore how much work she is doing and how much time she has for herself.
- 3) In the next session, we will discuss what our hectic day means for our health and family.

**Individual Summary**

**Closing Prayer**



# Session 4: Women's Work

Prayer	Pledge (Theme)	Co-Counseling	Summary: Session 3
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## Activity Sequence and Time Allocation

- 1) Homework Report Back (15 min)
- 2) 24 Hours Part 2 (30 min)
- 3) Homework instructions (5 min)

### Activity 1: Homework Report Back (15 min)

#### Goals:

- 1) To get women to reflect on how the 24 hours exercise reflects the reality of their own lives

Materials: 24 Hours flipchart from Session 3 (not yet marked "self" vs. "others")

#### Process:

- 1) Bring a flipchart from last time
- 2) Ask one woman (X) from that group to come up with you.
- 3) Ask all the women to look at the flipchart and to reflect on a typical day during the time since we last met.
- 4) Work with group to mark S vs. O on it, allowing X to mark the paper. (W= wena & B= Bangwe)
- 5) Ask volunteer to count up the hours devoted to self for both the man and the woman.



### Facilitator's Notes:

- Understand the participants' thinking for "S" & "O" (W & B)
- If there's confusion, explain: "This is how I see it"
- Ask the group to compare the number of hours for self



## **Activity 2: 24 Hours - Part 2 (30 min)**

### Goals:

- 1) Explore the implications of women's heavy workload on their health and well-being
- 2) To challenge whether this is fair, healthy, or "natural"
- 3) Understand the difference between "sex" and "gender"
- 4) Unpack and challenge the idea of "culture"

### Materials:

Continue with the flipchart used above. Add other 24 hours flipcharts from Session 3

### Process:

- 1) Now ask the group:

- **Is this real?** (Does this reflect your daily life?)
- **Is this fair?**
- **Is it healthy?** Why not?

**Physically:** anemia, poor nutrition, high BP, heart attacks, strokes, arthritis, backaches, neck pain.

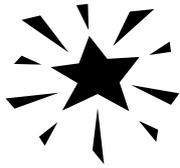
**Emotionally/Mentally:** Stress, depression, no personal time, short-tempered with children.

**For Children:** Mothers don't have time to play with them, they aren't as supervised/protected, need two parents. Are they just your children or are they his as well? If he helped make them, why can't he help raise them? If they say he's bewitched, who says it? (women oppressing women)

- **Is it "natural"? (What is nature?)**

- 2) **Sex vs. Gender:** Take an example (breastfeeding) and ask whether men can do this. (See next page)
- 3) **Where does this culture come from?** Who makes up culture? Can culture change?
- 4) Use apartheid example. Afrikaaners believed that God said whites were superior to blacks. Was that fair? Was it natural? Now, we have a black president, how is that possible if culture cannot change?

Ask how the activity would look if they were to compare 24 hours in the day of a **white farm owner** and a **black farm worker** (what time they wake up, what activities they do, how much time is for self vs. others). Ask the same questions.



## Discussion Notes:

### **Sex vs. Gender**

**Sex:** Differences in the body, private parts and biological processes, e.g. giving birth, breastfeeding, etc. (Male, female)

**Gender:** The experience of a male or female within society and influenced by culture. Identity as given by society of a woman or man.

**Gender Roles:** How society expects one to act based upon their gender. Assumed power relations and economic, cultural & social attributes.

Examples:

- Lower value of girl babies than boy babies
- Women's role in cooking, cleaning and raising children
- Men as protectors, providers, strong-not emotional
- Women as emotional, dependent and submissive

Questions:

- Why do people say a man is bewitched if he helps with cooking and cleaning.
- Can the white farm owner not do manual labour because of how his body is made? Or does this have more to do with "culture"?
- If the wife is working, does the husband usually help out with the cooking and cleaning?)

### **Why are Gender Roles Bad for us?**

- Women feel less respected and less valuable and have lower self-esteem
- Women are discouraged from certain goals and career paths, e.g. going to university, doctor, lawyer, professor, positions of authority over men.
- Women are made to feel useless without a man
- Inheritance and property laws exclude women from access to family resources
- Men feel pressure to "be strong," cannot show emotions or ask for support
- Men aren't allowed to spend time being fathers.

Why haven't Gender Roles Changed?

- They were built over a long time period– in the structure of the laws.
- They are benefiting men– they are afraid of sharing power with women (will they take revenge?) Ex. Apartheid
- Culture takes a long time to change

Questions:

- Why do people say an organization will fail if a woman is the director?
- What are examples of changes in women's roles over the years?



### Summary of Session 4

- The 24 hours reflects the reality of women's lives, not just in South Africa, but in most parts of the developing world
- where women carry the burden of looking after most household duties and caring for the family, the elderly and the sick.
- This situation is not fair, not healthy, and not "natural"
- Culture (gender) rather than sex (biology) accounts for most of this inequality
- Culture is not natural, but rather man-made, sometimes people use it to justify their actions & maintain their privilege
- Culture can change (analogy to apartheid, possible with women's rights) but change is not easy. (analogy to apartheid struggle)

### Activity 3: Homework (5 Minutes)

Process:

- 1) Ask women about when they first heard about sex & menstruation (Where babies come from?)
- 2) Ask the group to think about stories they heard when they were young about sex, menstruation and reproduction.



**Individual Summary**

**Closing Prayer**



# Sisters for Life

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## **RADAR & SEF Gender/HIV Workshops**

### **1 Introductions: Who are we?**

- 1) Introductions
- 2) Overall Programme
- 3) Ground rules
- 4) Expectations and concerns
- 5) Introduction to Co-Counseling

### **2 Reflecting on Culture**

- 1) Wedding songs, & Women's Names
- 2) Girls Dos & Donts

### **3 Gender Roles**

- 1) Report-back on Do's and Don'ts
- 2) 24 Hours (part 1)

### **4 Women's Work**

- 1) 24 hours cont.-Self vs. Others
- 2) Women's Workload Discussion (part 2)

### **5 Our bodies, Our selves**

- 1) Discussion on Womanhood
- 2) Body Mapping
- 2) Condom demonstration

### **6 Domestic violence**

- 1) DV Definition & Brainstorming
- 2) Role Play & discussion

### **7 Gender and HIV**

- 1) Basic HIV information
- 2) Women & HIV Information
- 3) Who is in Danger? Stories
- 4) Discussion on Social Factors
- 5) Homework: VCT

### **8 Knowledge is Power**

- 1) VCT Demonstration
- 2) Visualization Exercise
- 3) Homework: Obstacles to prevent HIV

### **9 Empowering change**

- 1) Report: Obstacles to talking about HIV
- 2) 2 Role plays: a) negotiating safer sex; b) talking to your child about sex.

### **10 Wrap up & Way Forward**

- 1) Report-back on homework: Involving Men & Youth
- 2) Review of Previous Sessions
- 3) Celebrate completion



# Session 5: Our Bodies, Ourselves

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Prayer

Pledge  
(Theme)

Co-Counseling

Summary:  
Session 4

## Activity Sequence & Time Allocation

- 1) Homework Reportback (5 minutes)
- 2) Discussion of Womanhood (10 minutes)
- 3) Body Mapping & Discussion (40 minutes)
- 4) Wrap-up /Homework (5 minutes)

### Activity 1: Homework Report Back (5 minutes)

Process:

- 1) Ask for volunteers to share stories of first understanding of sex and where babies come from.
- 2) Quickly get brief reports from 2-3 people. Including at what age, whom they heard it from and whether it was a positive or negative message. (Did it help you understand or made you more confused?)

### Activity 2: Open Discussion of Womanhood (10 minutes)

Goals:

- Open up discussion on our bodies
- Identify negative terms given to women's sexual parts and behavior
- Discuss where negative messages about women's bodies come from?

Materials: Flipchart, markers

Process:

- 1) Ask the group: What is a woman? What makes us women? How are we different from men?
- 2) Ask women to give different names that are given to women's body parts and behaviors related to sexuality. Include feelings (Record).
- 3) Once a list is up, talk about the messages those terms send to us about our selves and our bodies, what do they mean? Are the words negative or positive? Do we accept these terms for ourselves?
- 4) ) Include on the list: the sources of those names (who says them and who first told them to you-draw arrows from names to sources)



### **Activity 3: Body Mapping (40 minutes)**

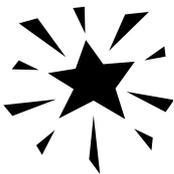
Goals:

- 1) To understand and normalize processes in womanhood
- 2) To explore language and feelings associated with our bodies
- 3) To share experiences with each other

Materials: Large construction paper, markers

Exercise:

- 1) Break into smaller groups of 5 and trace someone's form onto a large piece of paper.
- 2) Ask each group to describe/illustrate on the paper what happens to a woman's body during 1) Menstruation, and 2) Sexual intercourse.
- 3) Each group will have one process (it's okay if more than one group has the same topic)
- 4) Ask the group to draw the effects or write effects on the paper, including emotions with physical changes.



### **FACILITATOR NOTES:**

- Go around to each group and provide guidance through answering questions or giving prompts.
- Encourage women to explore emotional, physical and spiritual changes that are part of these processes
- Include a condom demonstration in discussion
- Keep track of time, allow 5-7 minutes for drawing, 10 minutes for writing out feelings, then come back to group, even if some aren't finished.
- ***Don't be concerned with the accuracy of women's knowledge of biological processes, the purpose is to share knowledge and how processes make us feel. (Don't Draw for them)***
- If not sure about a process, ask colleagues for guidance
- Be sure to have every group members' experience can be reflected on the paper.
- Be sure to have a drawn diagram of a vagina for explanation of menstruation.



### Discussion Notes:

- What are the links between myths about wet vaginas, size of vagina and dry sex with words used in activity 1.
- Explain effects of using drying agents
- Discuss issues of shame connected to menstrual blood.
- What are associations with women who are open about their need for sex? (Explore shame around women's sexuality.)
- How are these names connected with Gender Roles?
- Link with names, dos & donts, wedding songs & 24 hours (Self vs. Other)
- Bring in traditional/historical knowledge about processes
- Encourage discussion of personal experiences, build on the knowledge that women have already.

### Common Topics:

#### **Menstruation:**

- Thick blood
- Cramps
- Twice a month
- Sex during menstruation
- Shame- unclean
- Church during menstruation

### **Sexual Intercourse:**

- Large Vagina/Small Vagina-Myth of promiscuous women
- Large Penis/Small Penis
- Dry Sex-to make vagina small for male pleasure (HIV/AIDS)
- Who's responsible for satisfaction? Is it OK to want sex?
- Using Condoms, Does it hurt the man?
- Whose pleasure is more important?

### Summary of Session 5:

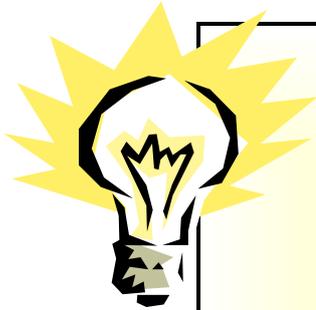
- 1) We receive negative messages about our bodies and about sex from an early age.
- 2) No matter what our shape or size we need to be proud of our bodies.
- 3) Menstruation and Sexual intercourse are both natural parts of life that we should not be ashamed of.
- 4) It is important for us to understand how our bodies work to keep healthy.
- 5) Drying agents and unprotected sex put us at risk of HIV-Link with Session 6.



### **Activity 4: Wrap-up & Homework (5 minutes)**

Process:

- 1) Give each woman a piece of paper and ask them to draw a picture of themselves.
- 2) Ask the women to indicate on the drawing the scars & wounds they have from violence both physical and emotional.

A large, empty rectangular box with a black border, intended for the women to draw themselves and indicate scars or wounds.

**Individual Summary**

**Closing Prayer**



# Session 6: Domestic Violence

Prayer	Pledge (Theme)	Co-Counseling	Summary: Session 5
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## Activity Sequence and Time Allocation

- 1) Homework Reportback (5 minutes)
- 2) Definition/ Brainstorming session in groups (25 minutes)
- 3) Roleplay & Discussion (25 minutes)
- 4) Homework Instruction (5 minutes)

### Activity 1: Homework Reportback (5 minutes):

#### **Process:**

- 1) Facilitator demonstrate their drawing first and discuss own experience utilizing their drawing.
- 2) Ask participants to share their drawings with the group highlighting the pain and violence they have experienced/witnessed.
- 3) Keep the presentations brief and select only 2-3 people to share.



#### **Introduction Notes:**

- These are stories of us, as women.
- Explain why we are not going straight to HIV, there are factors which make someone more vulnerable to HIV such as Domestic Violence.
- Domestic Violence is bad for women's health, it is big problem for women in South Africa.

## **Activity 2: Domestic Violence Definition & Brainstorm**

**(25 minutes)**

### **Goals:**

- 1) To show a variety of experiences which constitute domestic violence.
- 2) To identify ways in which women are not supportive of other women.
- 3) To notice how gender conditioning support domestic violence.
- 4) To understand that DV is wrong and women never deserve to be beaten.

**Materials:** Flip chart, pens

### **Process:**

- 1) Ask women to divide into pairs and reflect on the following:
  - All forms of violence that they experienced, witnessed or heard of which was subjected to **women**
  - Who were the offenders in instances described
  - Settings and objects or weapons used in occurrences(5-10 minutes in pairs, 10-15 minutes of reportback)
- 2) Ask everyone to come back to the larger group, have groups call out different acts of violence, write them on the flip chart.
- 3) Group the different behaviour/acts into forms of violence by placing P, S, E or T to indicate physical, sexual, emotional/verbal and threat of violence respectively.

### *Definition of Domestic Violence:*

*Any form of aggression/threat of between household members/intimate partners which occurs consistently/repeatedly.*

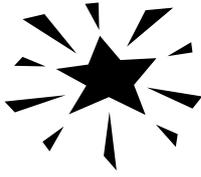
*Usually the aggression is used as a form of control to maintain power in a relationship*

*Physical: Beating, Sjambok, Clap, Kicking, Punching, Dragging, Pushing.*

*Emotional: Humiliation, verbal battering, Neglect*

*Sexual: Rape, Unwanted touching, forced to perform acts*

*Financial: Taking earnings, withholding money for necessities, giving money in exchange for sexual acts*



### **Facilitator's Notes:**

- Connect to Gender roles exercises in sessions 2&3
- Make examples used specific to Male-female relationships
- There may be a need for co-counseling after this session, mention to the group the need to feel supported and cry if necessary.
- It won't be possible to hear everyone's story so try to get diverse experiences and then move into the role play.

## **Activity 2: Role Play & Discussion** **(25 minutes)**

**Materials: Flipchart & paper**

### **Process:**

1) Lead facilitator & Co-facilitator do role play, emphasizing a negative response from the mother-in-law:

Your daughter-in-law appears with a bruised eye. When you ask her how it happened she tells you that she was beaten by your son. When you ask why, she tells you it is because she was complaining about his coming home late at night, and that she thinks he is having other girlfriends. How will you respond?

2) Ask the following key questions to the larger group:

- Why do we think this happens to women?
- Why did the mother-in-law respond in this way? Is there another way she could have responded?
- Why do women stay/go back to abusive relationships?
- Do abused women tell someone, if yes, whom? If not, why?
- What are people's experiences with mothers-in-laws? Daughter-in-laws? Are they supportive?
- What are the links between this scenario and Session 2 Wedding songs and gender roles.

3) Ask two participants to do the role play again emphasizing a supportive response from the mother-in-law.





### Facilitator's Notes:

- Take time to elicit responses to the role play
- The facilitator's role must encourage participants to acknowledge and name specific acts of abusive behaviour.
- Summarize the discussion by reinforcing different forms of violence
- Make the links with previous exercises on gender roles (wedding songs; girls do's and don'ts) and 24 hours.
- Make links to the next session on gender and HIV.
- Emphasize opportunities for women to support other women in the discussion.

#### Key Discussion Points:

Men's conditioning:

- Violence is OK
- Strength: power shown in violence
- Must have multiple partners

Women's conditioning:

- Violence isn't OK
- Strength: bear suffering without complaining
- Must be faithful

When society says it's OK to beat wife:

- 1) Infidelity/suspicion of: double standard
- 2) Refusal to have sex: Duty, Lobola-property
- 3) Talking back: breaking rules, Dos & Donts
- 4) Not taking care of house/ children: 24 hours workload

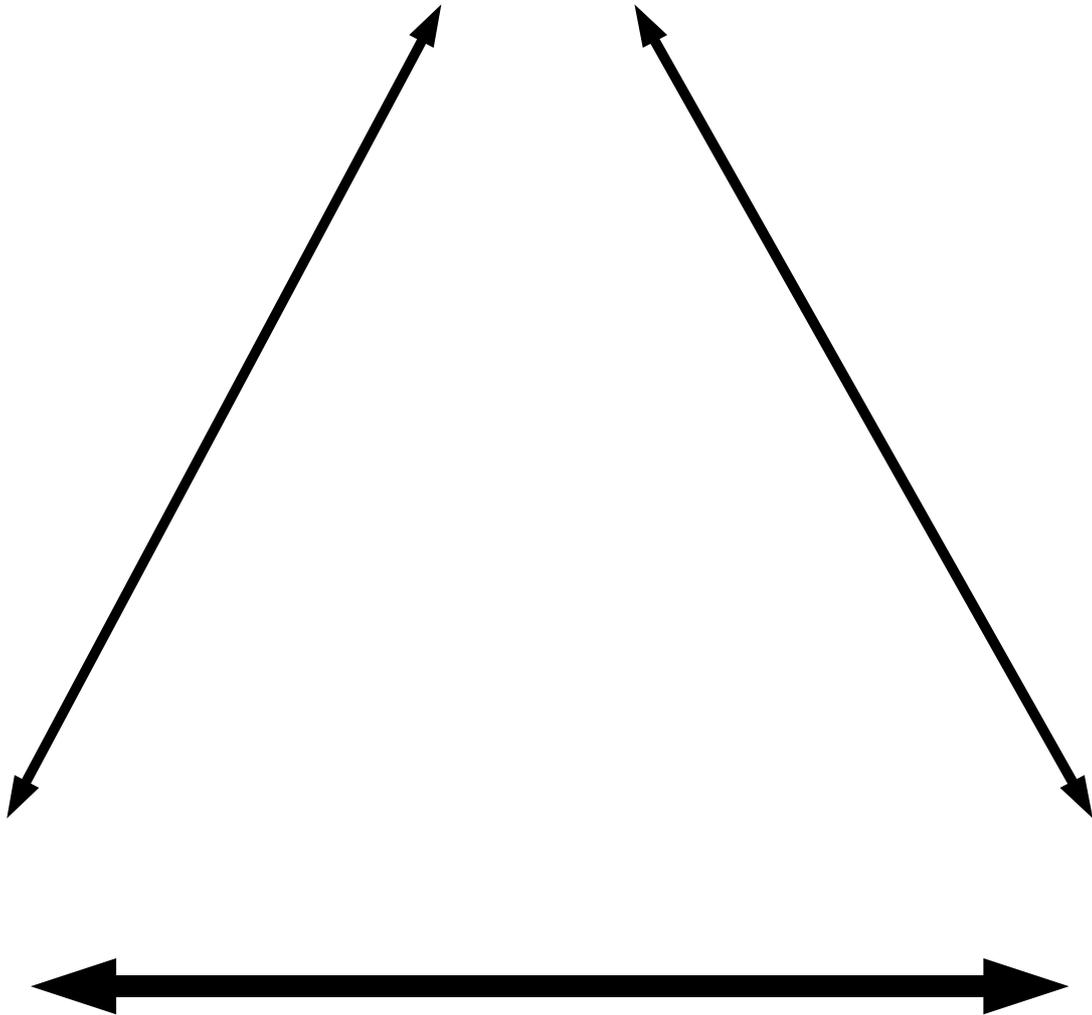
Message: **IT IS NEVER OK TO BEAT YOUR WIFE**

#### Key Probing Questions:

- 1) What are excuses given for beating your wife? Are women allowed to use same excuses? (Ex. Beat husband if suspicion of other partners) (Discuss the excuse of Alcohol or poverty)
- 2) What happens to men who abuse? How are they viewed by society?
- 3) Why do women stay in relationships with abusive men?
- 4) Is it OK to talk about abuse? Is it OK to report it to police/elders? Why not?
- 5) How does this violence predispose women to HIV/AIDS?



# Domestic Violence



## Activity 3: Homework (5 minutes)

Process:

- 1) Women are requested to think about how physical, sexual, emotional, psychological, economic and threats of violence can put women at risk of HIV.

**Individual Summary**

**Closing Prayer**



# Session 7: Gender and HIV

Prayer

Pledge  
(Theme)

Co-Counseling

Summary:  
Session 6

## **Activity Sequence and Time Allocation**

- 1) Homework Report Back (5 min)
- 2) Basic HIV information (15 min)
- 3) Women and HIV Information (15 min)
- 4) Who's in Danger Stories (10 min)
- 5) Homework Instructions (5 min)

### **Activity 1: Homework Reportback (5 minutes)**

Process:

- 1) Ask women to share their ideas as to how Domestic Violence affects us.
- 2) Ask 2-3 people to share and explain that this session will go into more depth about women's risk.

### **Activity 2: HIV Basic Information (15 min)**

Goals:

- 1) To find out what the women already know about HIV.
- 2) To make sure participants understand the basics of HIV transmission and prevention and to explore myths about HIV/AIDS

Materials: Prepared flipcharts

Process:

- 1) Facilitator reviews previous sessions to set the context for why we are talking about HIV today.
- 2) Ask an open-ended question to encourage participants talk about what they know about HIV – write these on the flip chart.
- 3) Include 3 main topics: Transmission (emphasis on sexual and mother to child), Prevention (A,B,Cs), and Myths
- 4) Discuss why abstinence, be faithful and condomize is difficult.
- 5) Include discussion of Surface area.



### **Activity 3: Women and HIV Information (15 min)**

#### Goals:

- 1) To highlight statistics, trends about HIV and women's vulnerability
- 2) To highlight that women's increased vulnerability to HIV is due to social factors more than biological ones.
- 3) Review some of the messages about gender roles and stereotypes from previous sessions (wedding songs/proverbs, 24 hours, triangles) and relate this to women's risk of HIV.

#### Materials:

- Previous flipcharts from Wedding songs/proverbs, and 24 hours, (sessions 2,3,4)
- Prepared flipchart with HIV statistics and biological/social factors

#### Process:

- 1) Facilitator uses flip charts and exercises to stimulate discussion (see Fig. 1,2,3)
- 2)

#### Fig. 1: Gender and HIV – Trends and Statistics (5 minutes)

- 20 years ago, men were at more risk, now women are in danger-specifically young women.
- UNAIDS estimates that in 2000, more than 12 million women worldwide had been infected with HIV since the start of the epidemic. Worldwide, the HIV risk for women is rising.

#### **Standing Exercise:**

*Ask 10 women to stand, then ask:*

#### ***Where do most of the women who are being infected live?***

- 9 out of 10 HIV-positive women live in a developing country (Ask one woman to sit, she represents rich countries)
  - 8 of 10 of all HIV infected women are African (Ask another woman to sit down, she represents Asia & Latin America.)
  - The remaining women standing represent African women infected with HIV.
-



Fig. 1: Trends & Statistics

Young women at highest risk?

- Recent data indicates that around half of all new HIV infections world-wide occur among people aged 15 to 24<sup>[21]</sup>. Why?
  - Girls start sex early because of pressure from society
  - Partners-Older men who have more partners (Taxi drivers, teachers, sugar daddies)
  - Men offer to pay school fees, cellphones, clothes in exchange for sex
  - They have less power in relationships to ask to use condoms
- (Ask women if they have teenage daughters?)

Which women are at risk?

- Although many people associate prostitutes with HIV, prostitutes are more successful with condoms than married women, thus more protected
- A study in Uganda shows that more than half of women with HIV were married and monogamous.

Fig. 2: Women at higher risk of HIV? Biological Factors

*Our bodies are more vulnerable to HIV than men's bodies. Why?*

- Rape, violence: tearing and bleeding during intercourse multiplies the risk of HIV infection
- "Dry sex": women use herbs or drying agents. This may also increase the risk of tearing and bleeding during intercourse.
- Untreated STDs: this can multiply the risk of HIV transmission by times ten. Most STD cases in women go unrecognised – unlike men, the sores or other signs are absent or hard to see, and they do not suspect they are at risk.

**Symptoms of STDs:**

Itching

Burning Urine

Discharge: change in color, smell, amount

Sores

Bad Smell

No symptoms



### **Activity 4: Who is in danger? Stories (10 minutes)**

#### Goals:

- 1) To stimulate discussion based upon examples and stories that the participants can easily relate to.
- 2) To move into a larger discussion of women's increased vulnerability to HIV based on social factors.

Materials: Flipcharts with three scenarios written out.

#### Process:

- 1) Tell the large group the three stories of women.
- 2) Ask them to explain to you who is in the most danger and why?
- 3) Move the discussion into the general social factors for HIV risk.

#### **Dimakatso, Age 16**

- In School
- Mother is not working
- Father went to Jo-burg, hasn't returned for long time.
- Has boyfriend, Vusi, Age 40, Taxi driver
- He is married, has many other partners and does not use condoms with any of them.
- Vusi buys her clothes, pays her school fees, and gives her food for her family.
- Vusi gives her free rides to school.
- She was also raped by her teacher last year.

#### **Sibongile, Age 35**

- Married, has 4 children
- Faithful to husband
- Husband, Mandla, Age 39, Truck Driver
- He has many partners
- He drinks very often
- He is abusive: accuses her of sleeping around, beats her, rapes her and sometimes doesn't give her money for food.

#### ■ Key Questions:

- 1) Do you know someone similar to these women?
  - 2) Who is the most in danger, why?
  - 3) What in relation to the factors discussed earlier put them at risk:
    - Poverty
    - Gender Roles
    - Domestic Violence/Sexual Violence
- (Identify these factors from the examples)

## **Social Factors for HIV Risk**

*For many women, it is the social and economic circumstances of their lives that place them at risk of HIV. Lacking economic resources of their own, and fearful of abandonment or violence from their male partners, they have little or no control over how and when they have sex. In this way, they are vulnerable to HIV infection.*

### **Poverty: How does poverty put women at risk?**

Why do poor countries have more HIV?

- Exchange sex for money (Women economically dependant on men)
- Lack of sex education
- No recreation facilities/activities for youth
- Migrant Labor/Multiple relationships
- Competing Needs: Daily Survival priority over long-term health

### **Gender:**

Why are women more vulnerable to HIV?

- Gender Roles: Submissive, tolerant, innocent about sex, don't talk about  
1) condoms, 2) other partners (Ex. Dos & Donts)
- Domestic Violence:

- a) If leaves, vulnerable because of poverty, faces labels, isolation, stigma
- b) If stays, No condoms, raped, can't ask about other partners

(Rape within marriage is against the law. In a Zimbabwe<sup>[30]</sup>, 1 of 4 women said they were forced to have sex when they did not want to. 2 out of 5 said that their partner told them that it was their duty to have sex with him. )

- Fewer Opportunities: Not supposed to work/go to university-lower self-esteem  
a) Only valuable if get married  
b) Economic Dependence on men

### **Sexual expectations: Why is it difficult to abstain?**

In a study of teenage mothers in Cape Town, 1 out of 3 reported that their first intercourse was "forced" and 1 out of 10 said they had been raped. They thought the consequences of refusing sex would be 3 out of 4 said they would be beaten, feared being laughed at and some felt they would lose their friends:

- Child sexual abuse:

Most victims of child sexual abuse are female, and most abusers are older males who are in a position of trust or authority over the child: parents, relatives, neighbors, teachers. The ways in which child sexual abuse can increase risk of HIV are:

- 1) At the time of abuse, a girl can be infected
- 2) Later in life, victims may do things which put them at risk. (E.g. early and multiple partners, unprotected sex, and the excessive use of alcohol and drugs.)

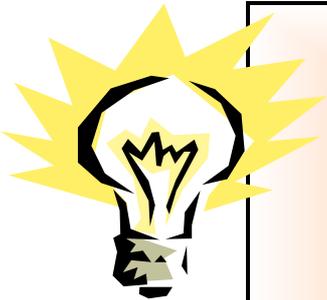
### Summary of Session 7:

- Modes of transmission, methods of prevention
- Women in Africa are the most at-risk for HIV in the world
- Young women are at high risk because of older partners
- Married women are at more risk than prostitutes if not using condoms
- Our bodies are more vulnerable to infection than men's. (Dry Sex,)
- STDs make us more vulnerable to HIV infection
- Social factors such as poverty and gender inequality are the greatest causes of HIV 's spread in our communities

### Activity 4: Homework (5 minutes)

Process:

- 1) Ask the groups if they know where to get VCT?
- 2) Ask the groups to list out what the pros & cons of testing are for themselves?



**Individual Summary**

**Closing Prayer**



# Session 8: Knowledge is Power

Prayer

Pledge  
(Theme)

Co-Counseling

Summary:  
Session 7

## Activity Sequence and Time Allocation

- 1) Homework Report Back (15 min)
- 2) VCT demo (15 min)
- 3) Visualization Exercise (35 min)
- 4) Homework instructions (5 min)

### Activity 1: Homework Report Back (15 min)

#### Goals:

- 1) To prepare women for thinking about VCT and their own personal risk of HIV

#### Materials:

- Chart with 2 questions written out in Sepedi
- Prepared chart with names of all clinics offering VCT in the area

#### Process:

- 1) Remind women of the 2 questions:
  - Do you know where you can get an HIV test in your community?
  - What are the pros and cons of getting tested?



### Facilitator's Notes:

- Ask Reporting group if they know where they can get and HIV test? Write responses on chart. (Ask other groups if they know other places. )
- End by reviewing prepared chart with list of all VCT clinics
- Ask Reporting group what are the Pros (good reasons) for getting tested? (then ask everyone to add)
- Ask RG what are the cons (fears, concerns)? (then ask everyone to complete)
- Put these charts on the wall without further discussion
- Discuss Informed Consent and what it means



## **Activity 2: VCT Demo (15 min)**

### Goals:

- 1) To understand what "VCT" is about.
- 2) To see what the rapid test looks like and how it works

### Materials:

- Old Rapid Tests (1 + and 1 – result per group).
- 1 Testing kit (lancet, etc).

Chart with enlarged picture of Rapid test (+ and -) drawn

### Process:

- 1) Begin by passing 2 tests (+/-) to each group. Write "VCT" in big letters on a chart. Explain what each letter stands for:
  - V = Voluntary - stress that testing is always voluntary. No one is ever forced to get tested.
  - C = Counseling – All nurses have been trained and certified to give pre and post test counseling. Results are strictly confidential (explain what this means)
  - T = Testing – tests are free and give results in only 15 minutes
- 2) Using big VCT Chart and lancet/testing fluid explain in simple terms how test works
  - Tests for antibody (something in the blood)
  - Only tells you whether + or – (not when you were infected or by whom)
  - 2 stripes means positive, 1 stripe means negative



### **Facilitator's Notes:**

- Address any questions briefly – Remember, we only have 15 minutes for this session.
- Make as participatory as possible, if some group members are familiar have them help demonstrate.
- Discuss pre-test counseling briefly
- Emphasize that it is: Fast, Accurate, Accesible, doesn't say when or from whom infected.



### **Activity 3: Visualization Exercise (25 min)**

#### Goals

- 1) To address pros/cons of VCT raised in homework report back
- 2) To realize at a very personal level that HIV is real, and that we are all at risk

#### Materials

- Pros/Cons chart completed during homework reportback

#### Process

- 1) Ask participants to get comfortable sitting, relax and take a deep breath. (Stretch if necessary) (Repeat deep breath X3, count with them.)
- 2) Tell participants to close their eyes.

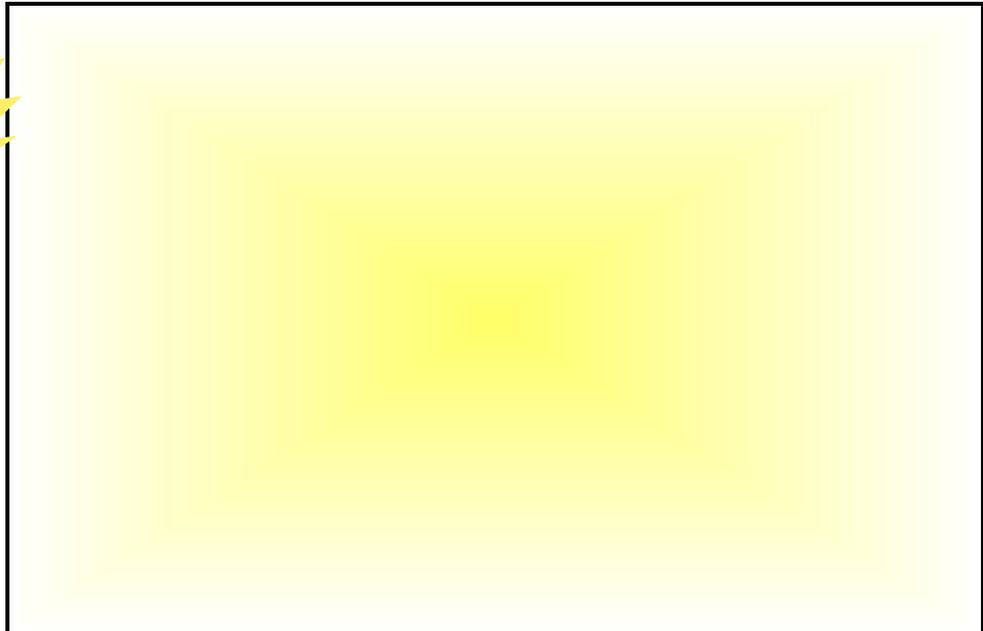
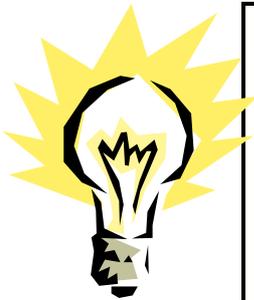
Imagine that you have just completed this workshop and you decide to go to the clinic to test. You have thought about it and concluded that it is best for you. When you enter the clinic there is a queue of people waiting to be seen. You ask one of the nurses where you can be tested for HIV. The nurse asks you to wait. You are nervously waiting outside of the consultation room for your turn. Finally, the nurse calls you in and she is smiling but you can tell she is very busy. You sit down and tell her that you're interested in an HIV test. She asks you why you think you might be at risk. You are asked to sign a consent form for the test and she explains the procedure. She then takes the test from the cabinet and asks for your hand. She pricks your finger with a small needle. You feel the pain of the prick and you see the blood coming out. The nurse collects the blood with a tube and places it on the test. You watch as your blood is absorbed into the test and the nurse is noting the result. She asks you to wait for 10 more minutes as she looks over the test. You can't move or think of anything but your blood on the test and the result. The nurse returns, sits down and asks if you are ready for your result. You feel confident that it will be negative so you say yes, you're ready. She turns to you and slowly says, "the results of your test are positive."

- 3) Ask participants to open their eyes. Ask them these questions:
  - a) How do you feel?
  - b) How would you want people to treat you?
  - c) Are you going to tell anyone?
  - d) How will your family/partner/friends/neighbors react?
  - e) How are you going to cope?
- 4) Explore feelings and if there is time, discuss what reaction would be to loved one testing positive.



### **Summary of Session 8:**

- Participants are aware of where they can be tested locally
- Participants have discussed the positive aspects of knowing status/testing.
- Participants are familiar with the test itself.
- Testing is: fast (15-20 minutes), confidential, accurate, free
- Through visualization, participants have considered consequences of their testing positive and what they would do.



### **Activity 4: Homework (5 min)**

- 1) Ask women to reflect on today, and to think about what they think is their biggest obstacle to preventing HIV infection.
- 2) Choose a group to report back for next time – write question on chart and give to one member for safekeeping
- 3) Encourage women to have a co-counseling session to talk about their feelings about their risk

**Individual Summary**

**Closing Prayer**



# Session 9: Empowering Change

Prayer	Pledge (Theme)	Co-Counseling	Summary: Session 8
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## Activity Sequence and Time Allocation

- 1) Homework Report Back (15 min)
- 2) 2 Role Plays and Discussion (40 min)
- 3) Homework instructions (5 min)

### Activity 1: Homework Report Back (15 min)

#### Goals:

- 1) To set the tone for today's role plays by reflecting on what are the real obstacles (and fears) to changing behaviour relating to sex, and talking about sex

Materials: Flip chart with the 2 homework questions from last time

#### Process:

- 1) Ask assigned groups to report back on the following questions and
- 2) Have groups write responses underneath:
  - a) What is the biggest obstacle to talking to your **children** about sex, and about HIV?
  - b) What is the biggest obstacle to talking to your **partner** about sex, and about HIV?



### Facilitator's Notes:

- **Probe** by asking: **why** is this such an obstacle? (explore feelings it raises – embarrassment, discomfort, etc)
- Ask how do you think the other person would respond eg) child – might laugh, or ignore your advice. Husband – might accuse of being unfaithful, might get angry
- **Link** to next activity by explaining that we are going to explore these issues further through dramas.
- Make a link with the dos & donts exercise
- Follow-up the role plays with the obstacles mentioned.

## **Activity 2: Role Plays** (40 min)

### Goals:

- 1) To explore why speaking to others about sex and HIV is difficult
- 2) Through role play, practice speaking to others about HIV and Condoms.
- 3) To share their lessons and approaches.

Materials: None

### Process:

Each role play should be brief (less than 5 min) followed by 5 min. of discussion. (10 min. per role play). This leaves 10 minutes at the end of all the role plays to summarize and link them up.

- 1) Demonstrate the role play with a co-facilitator, emphasizing a negative response.
- 2) Ask the group if they agreed with the approach used by the woman.
- 3) Ask volunteers to do the role play a second time emphasizing a more positive response.
- 4) End by summarizing and linking the 2 role plays.



## **Role Play 1: Negotiating safer sex with your partner**

(Actor 1 = SEF woman; Actor 2 = her husband)

*You are a SEF woman, who has just attended a workshop on HIV. Your husband has just returned from Johannesburg where he works. You suspect that he has other partners in Johannesburg. You want to tell him about the workshop, and to begin talking about using condoms.*

### Key Questions/Prompts: (For Discussion in group)

- What did you notice about the woman's approach? What did she do well? What could she have done better? (timing of the conversation, language, etc.)
- What are different options for women who know that their partner has other partners? (use condoms together, ask partner to use condoms with others, ask that he stop having other partners, leave the relationship...)
- Has anyone had any success trying to speak to a partner about HIV or condoms?



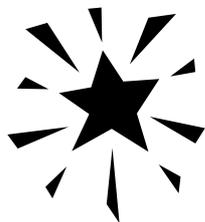
## **Role Play 2: Speaking to your son about HIV**

(Actor 1 = SEF woman; Actor 2 = her son who is 15 years old)

You are concerned about your 15 year old son, who you know is starting to get interested in girls. He often stays out late at night with his friends, and you are worried about his risk of HIV.

Key Questions/Prompts: (For Discussion in group)

- What were the obstacles of talking with a young man?
- How was it easy?
- How do youth tend to respond when an adult “tells them what to do”? Are there other ways to approach this, besides judging the youth’s behaviour?
- What are the pressures that young people face these days?
- Has anyone had any success in trying to speak to a young person about HIV? What did they do?



### **Facilitator’s Notes:**

- End this session by emphasizing lessons learned from the women themselves during the role plays.
- Go back to the homework report back (fears and obstacles to changing behaviour). What do they risk by changing? What do they risk by NOT changing? (HIV infection)
- Ask the actors to reinforce gender stereotypes-creating problems to discuss
- If the actors portray an easy-going husband or son, ask the group, “Is this what normally happens?”
- Focus the discussion on the behavior of the woman and not the male role, the emphasis is on the change that women can make.



### **Activity 3: Homework (15 min)**

Process:

- 1) Choose 1 group. Ask each woman in the group to try speaking to **one person** (a child, friend, partner) about HIV and to tell us how it goes next time.
- 2) Begin thinking about what they can do (as women, as mothers, as community members) to reduce vulnerability to HIV.



**Individual Summary**

**Closing Prayer**



# Session 10: Way Forward

Prayer

Pledge (Theme)

Co-Counselling

## Activity Sequence and Time Allocation

- 1) Homework (Groups and report back) (5 minutes)
- 2) Review of previous sessions (10 minutes)
- 3) What can we change? What can't we? (30 minutes)
- 4) Closing Ceremony & Candle Lighting (15 minutes)

### Activity 1: Homework Reportback (5 minutes)

**Goals:**

- 1) Identify ways of involving men and youth in HIV education.

**Materials:** Flipchart, paper and pens.

**Process:**

- 1) Have group report back on homework. Facilitator should probe and clarify the group's input and then ask for comments from the rest of the participants.

### Activity 2: Review of Previous Sessions (10 minutes)

**Materials:** Flipcharts from all previous sessions lined up on the wall.

**Goals:**

- 1) To review, link, and summarize what has been covered to date.
- 2) To allow women to comment, ask any remaining questions, and appreciate their progress.

**Process:**

- 1) Facilitator stands in front of each flipchart and recalls the main points which were covered in each session.
- 2) Facilitator also illustrates the *new skills* they have learned: communication, supporting each other, speaking in front of a group, co-counseling, problem solving, etc.
- 3) After reviewing all sessions, facilitator asks if there are any questions or comments about what we've covered.
- 4) Facilitator ends by congratulating women on how much they have contributed and learned.



### **Activity 3: What can we change? What can't we change?** **(30 minutes)**

#### **Goals:**

- 1) To reflect on **realistic** next steps based on what has been learned in the 10 sessions
- 2) To commit to personal change

#### **Materials: none**

#### **Process:**

- 1) Have participants sit in a large circle, facilitator writes key points on flip-chart and makes comments. There should be 2 columns: "can change" and "cannot change".
- 2) Introduce activity by saying we have learned that there are many things that put us at risk of HIV. Now we want to think about all the things we have learned in the 10 sessions, and what kinds of changes we can make in our lives.
- 3) Each woman is asked to reflect on one thing they think they can change one thing they think they cannot change.
- 4) Ask participants to make small, less-risky promises that can go toward the overall goal of protecting yourself from HIV. Maybe what someone can say is that they will just *ask* their partner to use a condom for the first time.
- 5) Ask participants to think about one thing that they would like to change but don't think they can.
- 6) End by acknowledging the reality of things they cannot change, but reminding them that change is step by step, and today they have taken an important first step by promising to themselves that they will change 1

#### **Facilitator's Notes:**

- Look at the obstacles on women's sense of self as well as collectively finding ways to address them.
- Make sure to have flipcharts numbered and in order for this session so that participants can see the flow of the sessions.
- Keep a broad focus, don't just focus on condoms
- Include topics from Session 2 (24 hours) about sharing the house work or raising children differently, or being a different kind of mother-in-law.



### **Facilitator Notes Continued:**

- Whatever they decide, ask them to think about it carefully – because when they say it to the group, it becomes a promise to themselves that they must really try.
- Emphasize to the women that we want to be honest and realistic – don't say "I'm going to use condoms everytime now" unless you really believe you are going to do this.
- Don't write everything down, don't record repeats.
- Probe, make sure the "can change" is real. Probe the "cannot change" and ask "why can't you change this?"

### **Activity 4: Closing Ceremony and Candle Lighting (15 minutes)**

#### Goals:

- 1) To inform them of what happens in the next cycle.
- 2) To celebrate what they can change
- 3) To thank them for participation

Materials: Candle and matches

#### Process:

- 1) Explain about the break between this cycle and the next, and how we will resume.
- 2) Arrange a time when we will meet away from the center meetings to talk about what they would like to see happen in the next cycle, and to give us honest feedback about the first cycle
- 3) Stand in circle with candle in center and choose 1 person (eg. chair-person) to light the candle
- 4) Summarize some of the things that they have said they can change, and reflect on these.
- 5) Celebrate that they have made a promise to themselves – no one will be monitoring what they do next except themselves, and no one needs to - because it is a solemn thing to make a promise to oneself.
- 6) Thank them for what they have also taught you in these weeks.

**Individual Summary**

**Closing Prayer/Song**