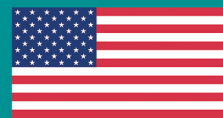
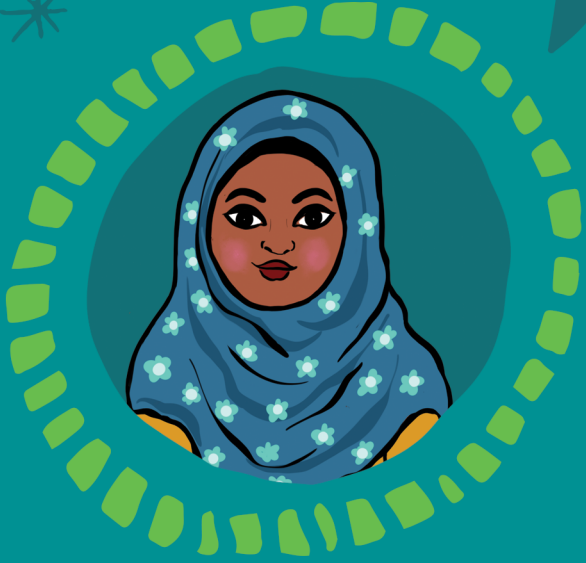


PART 3A

Girl Shine Early Marriage Curriculum for Caregivers

Girl Shine



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The Early Marriage Curriculum



Introduction to the Girl Shine Early Marriage Curriculum

The Early Marriage Curriculum’s main focus is on delaying marriage and responding to the needs of married girls. This curriculum also incorporates other forms of gender-based violence (GBV), but it goes much deeper into the subject of early marriage than the Girl Shine Life Skills Curriculum does.

In terms of **delaying marriage**, the content of the curriculum aims to: (1) unpack the drivers of early marriage; (2) raise awareness of the risks of early marriage; (3) support girls and caregivers to find alternatives to marriage; (4) support girls and caregivers to strengthen relationships with each other; and (5) build social support and solidarity amongst girls.

In terms of **responding to the needs of married girls**, the content of the curriculum aims to support young mothers, married, divorced, and widowed girls to understand and claim their rights. This is accomplished by (1) providing them with information about their bodies; (2) providing them with information on how to influence decisions; and (3) encouraging girls and caregivers to strengthen their relationships with each other and build social support and solidarity amongst girls.

A summary of each session and how to implement it is offered below, and each session’s materials—which can be found within the curriculum—will provide more detailed instructions on how to prepare in advance.

Scope & Sequence

Topic	Implementation Guidance
Pre-Session	<ul style="list-style-type: none">The pre-session assessment should be completed with participants, either before the sessions start or at the end of the first session. It must be completed before session two commences.
Session 1: Introduction to the Girl Shine Program	<ul style="list-style-type: none">This is an opportunity for caregivers to get to know each other and the facilitator, and for them to establish their group culture.This session also covers sex and gender so that caregivers enter into all future conversations with this foundation in mind; it is essential facilitators are prepared to deliver this content.
Session 2: Celebrating Our Family	<ul style="list-style-type: none">This session intends to strengthen the relationship between girls and their caregivers. For the female caregiver session, this includes the relationship with girls and their mothers-in-law.This session helps to establish a positive framing of how the caregivers will engage in this journey and why strengthening relationships can be beneficial to the entire family.
Session 3: My Experience as a Caregiver	<ul style="list-style-type: none">This session explores the roles that women and men often play in society.It may be challenging to implement; gender roles and expectations are deeply ingrained, and women and men may be resistant to ideas of changing these.
Session 4: Adolescent Girl Development	<ul style="list-style-type: none">This session will cover adolescent sexual and reproductive health.It is important that facilitators feel comfortable with the information included in the session and read the instructions ahead of time.In contexts where it is safe to mention, facilitators should talk about sexual orientation and gender identity to normalize these.

<p>Session 5: Supporting Adolescent Girls</p>	<ul style="list-style-type: none"> • This session includes separate content for caregivers of married and unmarried girls. For caregivers of unmarried girls, the session covers sexual and reproductive health (SRH) information and how caregivers can support girls when they begin menstruating. • The session encourages caregivers to create a supportive space for married girls to express any concerns or questions they have during marriage
<p>Session 6: The Family Environment</p>	<ul style="list-style-type: none"> • Caregivers will explore the idea of the family environment and the impact of the family environment on adolescent growth and development. The caregivers will unpack what healthy relationships and environment can look like and will learn communication styles that can help create a healthy environment.
<p>Session 7: Exploring Our Relationships with Adolescent Girls</p>	<ul style="list-style-type: none"> • Caregivers analyze the concept of the “emotional environment” and unpack communication styles in more depth. There are different scenarios for caregivers of married and unmarried girls throughout, so facilitators will use the scenario that best fits their group.
<p>Session 8: Power in the Home</p>	<p>Female Caregivers:</p> <ul style="list-style-type: none"> • This session will cover concepts of power with female caregivers and unpacks decision making both in terms of the power men have over women and the power women have over girls. <p>Male Caregivers:</p> <ul style="list-style-type: none"> • The male caregiver session also unpacks forms of power and explores the power men traditionally hold over women and girls. The session goes on to ask men to analyze the power dynamics within their own homes and how they can take steps to make a change in shifting or sharing power.
<p>Session 9: Parenting for Equality</p>	<ul style="list-style-type: none"> • This session explores how caregivers parent their children based on gender differences, and how girls and boys experience the family environment differently.
<p>Session 10: Marriage in Our Community</p>	<ul style="list-style-type: none"> • This session discusses marriage in the community’s context. • It’s really important that facilitators have a good understanding of the legal frameworks governing marriage in the country in which they are facilitating this session, as well as in the country from which refugees have fled. Legal frameworks can include formal/state law, religious law, customary/traditional law, or a combination of the above. • Facilitators should have a working understanding of the rights afforded to each person in the marriage, what kinds of acts and behaviors are considered against the law, and what to do if someone’s rights are violated in the context of the marriage. • Facilitators must read the session instructions in advance.
<p>Session 11: Violence Women and Girls Experience</p>	<p>Female Caregivers:</p> <ul style="list-style-type: none"> • In this session, caregivers will explain the types of violence women and girls face. The session will explore the link between GBV and power. • This session may be triggering for some women who have experienced violence, and the facilitator should be prepared with information on GBV case management services.
<p>Session 11: Safety and Violence</p>	<p>Male Caregivers:</p> <ul style="list-style-type: none"> • The session opens by mapping out all the risks to women, girls, men, and boys in the community. This gives men the opportunity to share any thoughts they have about issues facing men and boys, but the activity will also highlight how risks are much higher for women and girls. • After identifying the different forms of violence women and girls in particular face, the session then goes on to analyze why violence against women and girls happens

<p>Session 12: Supporting Girls Who Experience Violence</p>	<ul style="list-style-type: none"> • Now caregivers have had the opportunity to examine different types of violence and men in particular have explored the idea of violence as a choice, caregivers will explore this concept in relation to blame (and how girls are not to blame for the violence they experience).
<p>Session 13: Our Vision for the Family</p>	<ul style="list-style-type: none"> • Caregivers are encouraged to explore the barriers they may face when making changes both to the way they support their daughters and to the aspirations they hold for them, specifically related to marriage.
<p>Session 14: Change Begins with Us</p>	<ul style="list-style-type: none"> • The next three sessions help caregivers put the information and knowledge they have gained from the sessions and from each other into action. This session starts with a reflection exercise with a series of questions for caregivers. • It's important to keep note of sequencing for these remaining sessions, the girls' session should happen first, followed by female caregivers' and then male caregivers' so that girls' and women's inputs can be shared anonymously with the men's groups.
<p>Session 15: Supporting Girls in Our Community</p>	<ul style="list-style-type: none"> • For this session, it is important that facilitators give enough time to capture all of the views that girls expressed to caregivers and keep returning to the points girls raised to ensure that any decision making around actions reflects what girls have expressed to their caregivers.
<p>Session 16: Leading the Way to Change</p>	<ul style="list-style-type: none"> • This is the final session. Programs will need to decide if they are doing the graduation on the same day or separately and whether they will be doing the post assessment on the same day or separately. If the program does plan to do either of these things on the same day as graduation, the session will need to be extended. • Men and women may also want to come together for this last session; there are adaptations included, and it is important to identify a space where women feel comfortable. • It is recommended that the post assessment is done within the same week as the final session.

Facilitating Sensitive Topics for Female and Male Caregivers

Early marriage is a sensitive topic to discuss, in both communities where it is legal and communities where it is illegal. Challenging deeply-ingrained norms and practices could be perceived as interfering and may create distrust in the community. Rooted in patriarchy, control of adolescent girls' sexuality is a key driver of early marriage, making it an even more difficult topic to discuss. This is why trust-building is so important and why some of the most sensitive content in the curriculum comes later on.

Because early marriage is so widely accepted, it is likely that differences of opinion will come up, and there could be difficult situations or challenging comments that arise from discussions or outreach. As a team, it's important to be prepared for this; for example, the team can use the framing "delaying marriage" instead of "early marriage prevention" and ensure that it is accepted and understood in the community. It is also important to be clear and transparent on the program's position on early marriage, yet at the same time not to pass judgment on those who are already married or who marry during the program.

Girls are at the heart of what we do and should not be excluded under any circumstances; we should always be available to offer support. Drawing on international and national legal frameworks (if they exist) is a helpful advocacy and educational tool for raising awareness of early marriage being a violation of rights. When coming up against people who are resistant to information and concepts related to early marriage, facilitators can follow up with a few statements:

- *"I appreciate you sharing your opinion with us. Can you tell us why you feel this way? Please do also try to understand that not everyone will share the same opinion."*
- *"If you would like to discuss this more, I am happy to sit with you after the session/discussion/meeting to talk about it, or to introduce you to people who have more information they could provide."*

Facilitators should remember not to let any potentially harmful views and comments go unchallenged or explained within sessions. For example, some people may say that it is okay for girls to get married at a younger age than boys. Facilitators can respond in the following ways:

- *"Thank you for sharing your opinion. What do the rest of you think? Who here has a different opinion?" If another point of view is not offered, then facilitators should make sure to offer one. If possible, facilitators should draw on facts and evidence to make their case.¹*
- *Facilitators could say, "All of us want to ensure that the girls in our community are safe, happy, and healthy. We can do this by avoiding the harmful health consequences that come with early marriage."*
- *If early marriage is illegal, facilitators can say, "Does anyone know what the law says about the age of marriage?"*

The facilitation guidance included in the [Girl Shine Caregiver Curriculum \(Part 3\)](#)² are also relevant for the implementation of the early marriage sessions. There is also content included on the types of resistance facilitators may experience from caregivers and how to challenge harmful attitudes, which can be found in [Girl Shine \(Part 3\)](#).³

As stated, these sessions have been designed to allow trust to be built between facilitators and among caregivers; so, a lot of the sensitive content is included later in the curriculum, with the aim of reducing the potential resistance that could be faced.

1 Adapted from: https://www.girlsnotbrides.org/wp-content/uploads/2018/08/1.-GNB_Trainer_Manual_FINAL.compressed-1.pdf

2 Facilitation techniques : <https://rescue.box.com/s/p31j9tbz3mwyfur2amgijmlh2nx4b8af>

3 Challenging harmful attitudes: <https://rescue.box.com/s/eyqf8jtv69n1frcpl63b9aj6zfs1dltl>

Closing Out the Early Marriage Groups

While you can refer to the chapter on sustainability for more guidance as well as the guidance in [Girl Shine \(Part 1\)](#)⁴, there are a few key considerations for the immediate closure of groups.

Caregivers may be wondering what comes next as the sessions near an end. Female caregivers are encouraged to continue meeting, both for solidarity and support between each other; they should also ensure that girls remain at the center of their actions. Male caregivers are also encouraged to meet; girls and women must remain at the center of their actions, and they should both provide a supportive environment for women and girls to access their rights and advocate for women and girls' rights. If caregivers are interested in continuing to meet, there are a few things to consider:

- **Have caregivers developed a plan?** The last two sessions help prepare the caregivers for group closure and help them plan what they will focus their time on, based on feedback from girls. Caregivers are encouraged to develop feasible action plans that reflect the changes girls would like to see in the community.
- **Does the facilitator think caregivers are ready to move forward without the facilitator's guidance? Are there people in the group with harmful attitudes and beliefs?** The facilitator can continue to meet with caregivers on the same day and time, until they are ready to move forward without the facilitator's support. The facilitator does not need to be fully involved in the sessions but just there to support if the caregivers need guidance, e.g., the facilitator can be there at the start of the session but then leave.
- There may be Village Savings and Loans associations (VSLAs) that caregivers can be signposted to, or there may be other activities taking place in the community they could benefit from.

Caregivers' Graduation

Caregivers should have the opportunity to celebrate their participation and completion of the sessions, and to show girls what they have learned and how they intend to support girls moving forward.

There are a few key considerations:

- Will the graduation take place during the last session or at a separate date?
- Will anyone else be invited to the graduation? Girls and caregivers from the other group, community members? If yes, have safety risks been identified and managed?
- Will caregivers be expected to prepare anything in advance of the graduation? For example, will they be expected to give a speech?
- Has the team organized certificates for the group in advance?
- Has accessibility been considered, and have accommodations for access been made?

4 Group closures: <https://rescue.box.com/s/mdx2bd3mxzu1jln60z0o2bpj0v2p554x>

Female Caregiver Curriculum



Photo Credit: Meredith Hutchison

FEMALE CAREGIVER SESSIONS



SESSION I

Introduction To The Girl Shine Program

Session Aims

In this session, facilitators will:

1. Build trust with caregivers.
2. Introduce caregivers to the Girl Shine Caregiver Curriculum.
3. Help caregivers reflect on the hopes and dreams they have for their daughters.

Materials:

- ball
- stickers
- Resource 1.1 - Asset Cards
- Resource 1.2 Stages of Adolescence
- post-it notes
- pens
- tape
- flip chart paper
- markers
- comments box

Preparation:

- Internal and External Organs Diagrams, Health Resources 4.2 and 4.3 should be printed and placed on the wall or given as handouts.
- Review the guidance in Appendix 1 and 2 in the Girl Shine Caregiver Curriculum Part 3 to help facilitators in case they encounter harmful responses from caregivers.
- Print out Resource 1.1: Asset Cards.
- Print out Resource 1.2: Stages of Adolescence

Terminology: Refer to the Glossary ([Appendix A24](#)) for the type of words to familiarize yourself with for all sessions.

Facilitators' Note: Talking about transgender/intersex can be sensitive; be observant of the participants' expressions/emotions and try to use the local terminology for sex organs where possible. Sometimes, it is even good to ask the participants what these parts are named, especially if pictures are being used. Once this is done, these names can be used, though biological names should also be clarified/mentioned.

Duration: This session is 2 to 2.5 hours, as facilitators may need to give a brief introduction to the program and organization beyond what is included here.

Timing: Before the start of parallel to the start of Girl Shine Life Skills Curriculum with adolescent girls.

Welcome & Review (15 minutes)

- ✓ **Do:** Welcome caregivers to the first session of the Girl Shine Caregiver Curriculum.
- ✓ **Do:** Introduce yourself, your role, and your organization, and thank the group for coming and for their willingness to participate.



Explain:

There are a few reasons we have brought you all together:

- During our time together, we will go through a number of topics that cover issues related to women and girls. We will talk about our relationships with girls. We will share our concerns about safety; think about how to create a safe and open environment for girls; and practice ways we can show girls they are valued in the home and the community. All of us have girls who are participating in Girl Shine, and we will keep them in mind as we discuss many topics.
- We will discuss the marriage of girls. We'll talk about how we decide when the right time is for a girl to marry; what we can do to support married girls; and what the benefits and challenges of delaying marriage are.
- It is very important that the group feels this is a shared and comfortable space for everyone participating. To help achieve this, we want all group members to commit to attending all the sessions.

- ✓ **Do:** Encourage caregivers to talk to their neighbor, introduce themselves, and share how they are feeling about participating in the group. Then, ask caregivers to introduce their neighbor to the wider group. Remind them that it is okay if they forget things; their neighbor can assist them.
- ✓ **Do:** Give information about the women and girls' safe space and activities you provide. Let them know that you are available to answer any questions they have after the session each week, and that if the women would like to speak privately, they should find you (or a staff member who will be able to assist) after the session.

Group Agreements

- ✓ **Do:** Get the group to suggest some agreements and **ADD** the following if they don't mention them:
 1. We agree that the main purpose of these sessions is to learn how we can support our girls and each other. While some of the information we hear or topics we discuss might relate to all of our children, our priority here is to talk about adolescent girls, especially those participating in Girl Shine.
 2. Personal stories shared in the group are not to be shared outside the group.
 3. Stories shared about other people should not reveal their identity or be shared outside the group.
 4. We respect and listen to all; we won't interrupt or talk over each other.
 5. We support and encourage each other.
 6. We treat everyone equally.
 7. We keep an open mind.
 8. We won't judge others for things they share.
 9. We agree to meet on the days/times set. No new members will join this group after Session 3.
 10. If anyone wants to disclose sensitive information, it may be better to do this in a confidential space with the facilitator after the session.

Let's Explore (20 minutes)



Say: To help us achieve the goal of supporting girls in leading healthy and happy lives and achieving their

dreams, we feel it is critical to involve you, as important decision-makers in the lives of the girls.

✓ **Do:**

- Explain to caregivers how many sessions you would like them to be part of. Explain that caregivers need to commit to participating in as many sessions as possible. This is because each session will address a different topic and each topic has important information that caregivers can benefit from. Confirm their availability—weekly, monthly, etc. Ask them how many hours they would like to meet for each session.
- Explain that if caregivers are interested, facilitators can organize a mixed session with male caregivers at the end of the curriculum. The reason why the sessions are separate is because our experiences as women and men are different in relation to caregiving, and we want to make sure the sessions are relevant to our experience as women.
- Give caregivers a brief overview of the sessions you plan to cover with them:

Brief Overview of the Sessions

Session 1 — Introduction to the Girl Shine Program

Session 2 — Celebrating Our Family

Session 3 — My Experience as a Caregiver

Session 4 — Adolescent Girl Development (separate sessions for caregivers of married/unmarried girls)

Session 5 — Supporting Adolescent Girls (separate sessions for caregivers of married/unmarried girls)

Session 6 — The Family Environment

Session 7 — Exploring our Relationships with Adolescent Girls

Session 8 — Power in the Home

Session 9 — Parenting for Equality

Session 10 — Marriage in our Community (separate sessions for caregivers of married/unmarried girls)

Session 11 — Violence Women and Girls Experience

Session 12 — Supporting Girls Who Experience Violence

Session 13 — Our Vision for the Family

Session 14 — The Change Begins With Us

Session 15 — Supporting Girls in the Community

Session 16 — Leading the Way to Change

✓ **Do:** Ask caregivers for reflections on the topics, anything they are particularly interested in etc.

Activities (55 minutes)

Activity 1: Supporting Girls for the Future (25 minutes)

✓ **Do:**

- Print out the assets in Resource 1.1 (or select assets closest to those that are contextually relevant).
- On flip chart paper, list the ages 10-19, or draw pictures of girls, starting with a very young one to an older adolescent.

CONTEXTUALIZATION: If age is not a category used to determine maturity, switch this to relevant categories. You can use the marital status of the girls in the Girl Shine group (e.g., married/unmarried) or disability, for example.

- One by one, read the assets out to the group and ask them to decide at which age a girl should have received the information or skills that are listed on the card. They should make a decision as a group (or a majority decision).
- Once finished, ask caregivers to look at where the assets are placed: If you notice that the cards are listed mainly in later adolescence or after marriage, etc., point that out. Ask why caregivers have made

the choices they have.

- If you notice that cards are listed in early adolescence or before marriage, reinforce the point that it is clearly important for girls to receive this information as early as possible to help ensure their safety and well-being.



Ask: How do you think this information helps support a girl's future?



Explain:

- If girls have access to this type of information, it can help to protect them from harm.
- They can learn very important things that will help them make informed decisions and support their safety.
- The earlier they receive the information, the more helpful it will be.
- Through Girl Shine, girls will (or are) learning about many things that will be useful to them in their daily life. This includes information about reproductive health, how to communicate well with their caregivers, how to stay safe, early marriage, and recognizing the value of girls.
- Regardless of marital status, ability, or age, all girls have the right to receive the same information.



Ask: Does anyone have any questions or is there anything that you are concerned about girls learning?



Note: If their concern is related to information on adolescent sexual and reproductive health (ASRH), try to understand what their concerns are and what steps they believe should be taken to support girls in receiving this information (e.g., if it is given by the mother, if it is scientific, or if it is not too detailed).

Activity 2: Understanding Sex and Gender (20 minutes)



Explain: One thing we will discuss in many sessions is how our experiences are different, depending on whether we are women, men, girls, or boys. So, for us to understand this in a bit more detail, I want to tell you a story:

Requires CONTEXTUALIZATION



Say: Fatima is married to Salim and is pregnant. Salim and Fatima also have a baby boy who is one year old. Fatima gives their son milk from her breast some days.



Ask: Can Salim also get pregnant and breastfeed? Why not? (Because he does not have the organs to carry a baby in his body.)



Say: Salim goes to work every day and comes home at 7p.m.



Ask: Can Fatima also go to work? (Ask: Why? /Why not?)



Say: Fatima does go to work, two days a week. When she goes to work, a family member looks after the baby.




Ask: Is the family member male or female? (Either can look after a baby.)




Say: Fatima cooks dinner for the family, their favorite thing to eat is rice and vegetables.





Ask: Can Salim also cook? (Ask: Why? /Why not?)

 **Say:** Salim does cook, especially on the days that Fatima goes to work. Salim prepares dinner because Fatima cooks dinner on the other days.


 **Say:** With a small child at home and with two caregivers working, the household chores are sometimes forgotten. On the weekend, Fatima likes to make sure these chores are done.

 **Ask:** Who can take care of chores in the house?

 **Say:** Fatima and Salim split the chores between them. This way, it takes less time to do and is a fairer division of the labor.

 **Ask:** Did you notice that there were some things only Fatima could do and Salim couldn't, and there were other things they were both able to do? What were these things?

 **Explain:** The things that only males and females can do are related to their sex, but the things they can both do are related to their gender.

 **Do:** Use the internal and external organ resources from Girl Shine if you need help explaining this content. You can place the diagrams on the wall if helpful or share them in handouts.


 **Explain:**


- **"Sex"** refers to the physical body and the biological differences commonly found between females and males. Most females are born with female body parts and functions—such as breasts, a vagina, uterus, going through menstruation, etc. Most males are born with male body parts and functions—they have a penis, they ejaculate, they have sperm, etc.
- **"Gender"** refers to family, social, or community expectations of females and males. Most of the time it has nothing to do with the body parts we have, but it is related to the roles and behaviors society thinks are appropriate for females and males. For example, many women can give birth because of their sex, but the expectation that it is a woman's role to raise children and clean the house is about gender.⁵ I use the word expectation because many women and girls will enjoy raising children and doing chores, but if they decide they do not want to do it, there is still the expectation that they will do it, and if they don't or can't they will be judged by society. So, their choice about which roles they perform is decided by society.
- There are some people who may be mocked or shamed especially when they don't behave in ways society expects them to behave according to their perceived gender. For example, if a man cries, his community might say he is acting like a woman, since the society has decided that being emotional is something only women can be, even though it is very normal for a man to cry. Another example is that girls and women are expected by society to not have body hair and if they do not remove it, society may mock them and tell them they look like a man, even though it is very normal for women and girls to have hair.


***Intersex:** There are babies that are born with bodies that are different from the common "female" or "male" body. They might have a combination of male and female genitals as one example. We call these people "intersex."

***Transgender:** There are also some people who do not fit into society's ideas of a man or woman. They may have mixed features from both sexes, e.g., a person may have breasts as well as a beard. She may wear women's clothes and have a man's voice. They are referred to as transgender persons. Transgender people are also those persons who may be given the gender identity of a girl or boy since birth but do not feel comfortable with it. A boy may feel she would be more comfortable as a girl and the other way around. Or they may decide they don't want to be labelled a girl or a boy. They are as human as any man or woman and need to be equally accepted in society.

5 https://www.alignplatform.org/sites/default/files/2018-09/2-GCOE_GEN_Module_FA.pdf


 **Ask:** Is this something you have heard about before, or are these new ideas? What do you think about the information presented?


 **Explain:** Women and men are often told that they should do certain things because of their perceived gender. We learn that society expects us to behave differently and to fulfill certain gender roles. These expectations impact us throughout our lives and lead to unequal power between women and men. We can see this by looking at the positions men and women have in society, and who is in control of decision making. The different value placed on women and men can sometimes also lead to different access to rights. This affects women and girls, in particular those who are divorced, those who are living with a disability, and those who are experiencing other challenging situations due to their economic or nationality status. But people should not be treated differently because of these issues, and we should all have access to the same rights and opportunities and feel valued in the community.


 **Ask:** Can you think of any examples of expectations based on someone's gender or roles someone is supposed to perform because they are a man or woman?

Activity 3: Our Hopes and Dreams Circle (10 minutes)


 **Do:** Invite caregivers to make a circle.


 **Say:** As we do this activity, we want you to think about those daughters who are participating in Girl Shine in particular. Please note that when we say daughter, we also include girls living with caregivers who might not be their biological parents.

 **Say:** I am going to pass the ball to everyone in the circle, and each person will tell the group what they would like their daughter to learn or achieve or what their hopes and dreams are for her.

 **Note:** Some caregivers may ask about their sons or younger children, too. Acknowledge that caregivers of course have hopes and dreams for their other children, too, but for the purpose of Girl Shine, we are focusing only on adolescent girls.

 **Ask:** How did it feel to share your hopes and dreams for your daughters/daughters-in-law?

 **Note:** If some of the hopes and dreams caregivers mention were related to traditional gendered roles, for example, finding a good husband to take care of, becoming a good mother, etc., acknowledge the importance, but also ask them if they can think of things that they want for their daughters that are not based on gender.

 **Explain:** Adolescence is a time when a lot of things change in a girl's life. As this is a time of change, girls may feel scared or ashamed about what they are experiencing, but this change is a healthy and normal part of growing up. What happens in her adolescence will influence her life as an adult woman. We want to be able to support each other to give our daughters the opportunity to transition into adulthood in a healthy and safe way. We may worry more about girls compared to boys, and this can sometimes mean we limit girls in their movement and opportunities as they get older. Some girls may face more restrictions than others, for example, girls who are recently married, girls who are divorced, girls with disabilities, and/or girls who are new mothers. But we should try to make sure they have the same access to safe spaces, services, and opportunities as all girls and boys.



For girls that are recently married, we know that there are many challenges they face: new experiences and being away from their biological family. They may be expected to take on new roles and develop new relationships, and this can be scary and unknown. They need support from their biological family and their new family to navigate this situation.

Key Message



Say: We all have hopes and dreams for our daughters; sometimes girls' hopes and dreams for themselves may be different from the ones we have for them. It's important to talk to our daughters, listen to what they want, and involve them in decisions related to their life.

Check-in (5 minutes)

ASK caregivers how they found the session and if there are any changes they would like to make for the next one. (It is important that you act on or incorporate the changes suggested by participants or explain why it's not possible).

REMIND caregivers that they can leave more feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Each week, we will end the sessions with a Takeaway Activity. This is a small task that you will do on your own or with your daughter participating in Girl Shine. Some activities may involve a male caregiver, but this should only be practiced if the caregiver is participating in Girl Shine.

For today's Takeaway, discuss with your daughter/daughter-in-law what she is looking forward to learning in Girl Shine.

SESSION 2:

CELEBRATING OUR FAMILY

Session Aims

By the end of the session, caregivers will:

1. Develop positive relationships with daughters/daughters-in-law.
2. Learn to provide a supportive environment for recently married girls.
3. Begin to challenge ideas they hold about diverse girls.

Materials:

- comments box
- papers
- colored pens
- Resource 2.1: Rafiki's Story
- pebbles or colorful post-it notes—enough for each participant to have 5-6 (or more depending on family size)
- box to place all pebbles/post-it notes in

Preparation:

- Illustrations of family members for The Rafiki's Story: Resource 2.1.

Terminology: The concept of "celebrating our family" might make caregivers feel they require money to do this. Explain that celebrating your family can be simply showing appreciation, recognizing their achievements, spending family time together, etc.


Duration: 2 hours


Welcome & Review (5 minutes)

 **Do:** Welcome the caregivers.

 **Ask:** What did your daughters/daughters-in-law share about the Girl Shine Life Skills Sessions?

Let's Explore (15 minutes)

 **Say:** Today we are going to talk about and celebrate our families.

 **Ask:**

- When you think about your "family," who exactly do you think of? (Note whether there is mention of daughters-in-law.)
- What are some of the ideas we have about what a family is or does?
- Does the idea of family change over time or remain the same? What changes and what remains the same? (e.g., families may change when people move away, when they experience displacement/crisis, when children grow up and roles change, or when new members join the family, such as in-laws or grandchildren).



Say: Everyone's family is different, but one thing we all have in common is that we all have daughters or daughters-in-law participating in Girl Shine. As we think through our ideas of family, we will make sure these girls/young women are included in our discussions and actions.

Activities (75 minutes)

Activity 1: The Rafiki's Story⁶: (35 minutes)



Do: Read the following story to the participants. If possible, use illustrations for the different family members (See Resource 2.1):

▶ Part 1



Say: Mariam and Sayed of the Rafiki family, have five children: Yasmine—11 years old, Asma—14, Adam—18, Selina—19, and Osman—22. They also live with their daughter-in-law (Dina) and Miriam's mother (Amma).



Ask: Does this sound like your family or families you know? What are the similarities and differences?

▶ Part 2



Say: Adam, who is 18 years old, has a visual condition, which means he requires some extra support. Both his work and training college have improved their spaces to be more accessible to him, and Adam is performing very well.



Ask: What does this story tell us about the value in making adaptations to better accommodate people with disabilities? (By making adaptations, people with disabilities can thrive and benefit like people without disabilities).

▶ Part 3



Say: Selina is 19 years old and is divorced. She married at 16, and this led to a difficult marriage and a strained relationship with her in-laws. She is back home now and trying to understand what to do next.



Ask: What did the family learn about marrying Selina at a young age? (That it was better to wait until she was older and more mature.)

▶ Part 4



Say: Osman is 22 and recently got married to Dina, who is 21. Dina completed her education, had a lot of information on the consequences of marrying at a young age, and decided to wait for the right time. Her parents supported her decision to wait. When Dina joined the family, they felt they gained a daughter, not just a daughter-in-law.



Ask: What is the difference between the story in Part 3 and Part 4?



Say: This story showed us that getting married at an older age can lead to a healthier marriage environment.

Activity 2: The Positive Things We Bring to Our Family: (40 minutes)



Say: Now we've heard about the Rafiki's, we are going to think about our own families.



Do:

- Ask each participant how many people there are in their family. For each family member they have, give them a pebble or post-it note. There is no need to be prescriptive about who they include, but adolescent girls in the program should be included.
- Ask them to assign each family member to a pebble.
- Next, they should think about the positive things (strength, support, happiness) that they give to each of these people in their family and what these people contribute to the family.
- When they have finished, ask everyone to take a turn to come to the box placed at the front of the room.
- Ask them to share with the group the positive things that they thought of about their daughter. For example, they can say, "This pebble represents my daughter. The positive thing I give to her is support to attend school. The positive thing she brings to the family is her sense of humor."
- They can then place all their pebbles in the box.



*To ensure everyone is included, use the method that is accessible to everyone.



Explain: This activity has helped us to think about the strengths of our family. We looked at what individual members of the family bring to the family as a whole. It also helped us to see what we contribute to individual members of our family and the family as a whole. When things are difficult, we can use this activity to remind us of how special and important our family is to us, and to remind us that even when it is not easy sometimes, we have each other as a source of support.

Key Messages



Say:

- Recognizing and developing positive relationships with girls in our family will lead to a happier and more supportive environment.
- For recently married girls, support both from their in-laws and their parents can be really helpful as they navigate a new environment.
- Sometimes the community may stigmatize specific groups of people, including those with a disability, girls who are divorced, or women who have never married. But we can try to make sure that these girls in particular feel supported in the home and not further isolated or shunned.
- Everyone has the right to be treated equally and with dignity.

Check-in (5 minutes)

ASK caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you act on or incorporate the changes suggested by participants or explain why it's not possible.)

REMIND caregivers that they can leave more feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Try to be aware of a moment that you appreciate with your family generally but also more specifically with your daughters (especially those participating in Girl Shine) in the next week. We can share back our experiences in the next session.

SESSION 3:

MY EXPERIENCE AS A CAREGIVER

Session Aims:

By the end of the session, caregivers will:

1. Reflect on their experience of caregiving, especially in relation to girls, and how this has been shaped by internal and external factors.
2. Start (or continue) valuing girls as much as boys and begin associating a girl's value with more than solely childbearing and being a good wife.

Materials:

- paper
- colored pens
- flip chart paper
- markers
- post-it notes
- comments box

Facilitator Note:

- This session may be sensitive and bring up some past experiences for women. Be sure to remind them of the "Group Agreements" (Session 1) and check to see whether they want to have additional group agreements for this session.
- Be prepared with information about services that women can access if they need further support.
- This session may create lots of discussion, and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: Who would like to share any moments they appreciated with their daughters/daughters-in-law from last week's takeaway?



Say: Today we are going to talk more about our own experiences as caregivers and how this may be different from men's experience.

Let's Explore (20 minutes)



Ask: Can anyone think of any ways in which our experiences as women, raising and caring for children and fulfilling household responsibilities, are different from the experiences of men?



Explain: Within the family, women, girls, boys, and men may have different responsibilities. Some examples of situations are listed below.

CONTEXTUALIZATION (This should be based on the family structure of the caregivers you are working with.):

1. There is a caregiver who looks after the children at home, while the other caregiver goes to work.
2. Both caregivers work and share the caregiving responsibilities.
3. One caregiver is expected to do the caregiving responsibilities and earn an income while the other caregiver is just responsible for earning an income.
4. There is only one caregiver present, and children (especially adolescent girls) are expected to take on additional responsibilities.



Ask:

- Which situations sound familiar to you?
- Are there any situations that are not listed here but are common in our community?
- If both caregivers are working, who do you think should be responsible for caregiving? How is this different from who actually does it?
- If there is only one caregiver present and children need to take on additional responsibilities, are girls expected to take on more responsibilities than boys?



Note: Women might say that it is not a man's role to help with the household responsibilities. Facilitators should probe as to why women feel this way and whether in some situations it could be helpful for men to support in these tasks.



Explain:

- Sometimes society can place different expectations or limitations on the roles that women, girls, boys, and men play inside and outside of the home. These act like a set of rules that put limitations on a person—limitations on how they can behave or act and on what they can achieve.
- In some situations, women and men may see a shift in their roles. For example, a woman may need to be the main provider for the family in situations where traditionally this was seen as a man's role. But while the responsibilities of women may increase, sometimes they are not supported with the responsibilities they already had. While some women may be able to negotiate responsibilities with their partners, some are unable to because they have limited decision-making power in the household.
- Because of the experience of women in this situation, it is possible that the same expectations are then shifted to adolescent girls, or that girls are expected to take on additional burdens that their mothers inherit.

Activities (60 minutes)

Activity 1: Act Like a Woman, Act Like a Man⁷ (40 Minutes)



Say: We are going to do an activity that will help us understand in more detail the expectations society has of women and men and how this can influence us as caregivers.



Ask: Who can remind us of the difference between "sex" and "gender" that we discussed in the first session?



Explain: "Sex" refers to the physical body and the biological differences between females and males. "Gender" refers to the social status, opportunities, and restrictions that are faced by girls, women, boys, and men.



Do:

- Draw two boxes on the flip chart; label them "Gender Boxes"; give one box the title of "Men" and one the title of "Women."

- Participants stand in a circle and are asked in turn to mime a task or activity of daily life.
- Others in the circle guess the task or activity and say whether it is usually done by men or women.
- Facilitator notes each task/activity on post-it notes and adds the post-it to the flip chart in the “Women” or “Men” box based on participants’ suggestions.
- When everyone has had a turn invite people to continue at random if they have an idea.
- Ensure that “breast-feeding” and “washing children” are included in the roles.



Ask: Is there anything we want to add to the tasks on the chart? How do men and women learn these roles? (To help participants think about how men and women learn these roles more concretely, use the following questions:)

- What are women and girls supposed to wear? What about men and boys?
- How are women supposed to act in relationships/marriage? What about men?
- What kinds of tasks do women and girls do in the home and community? What about men and boys?



Explain: These are society’s expectations of who women and girls should be, how they should act, how they should feel, and what they should say. They are taught to us from the moment we are born, by many different people, the community and through experiences.



Do: Facilitate a discussion based around the questions below.

1. Are the ideas about what it means to be a woman that are listed on the flip chart that are helpful or harmful to women and girls?



Note: Emphasize that women and girls may enjoy or take pride in some of the characteristics listed (cooking, caretaking, etc.) and be limited and harmed by others (being submissive, passive, etc.), however, these ideas are harmful because they don’t allow people to fully express themselves and their emotions. For example, it’s harmful for women to feel that they’re not allowed to be independent, smart or assertive.

2. What happens to women and girls who step outside of the woman box, i.e., the list of characteristics identified as belonging to women? (For example, they can be mocked, raped, beaten, and shunned from community.)
3. How does this make women and girls feel?
4. What attitudes do we hold towards girls in particular? How does this impact the way we treat them?



Explain: We are taught to think that there is a right and a wrong way to be a woman or a girl. Women are taught to think about themselves in these ways by their families and communities. These messages begin the day we are born and continue throughout our lives. These ideas control and restrict the lives of women and girls—they set rules for women and girls to follow, and there are dangerous consequences to being seen as not following the rules. As women, we can empower our daughters to achieve their full potential by supporting them to reach their goals.

Activity 2: Visioning for the Future (20 minutes)



Say: We have now discussed how some of the rules placed on women, girls, boys, and men can be harmful, while also understanding that we may value some of these rules. Now I want you to think about your own experience growing up.



Ask:

For Caregivers of Unmarried Girls	For Caregivers/In-Laws of Married Girls
<ul style="list-style-type: none"> • When you were adolescent girls, a similar age to your daughters, what were the things that influenced you? • Who were the people that influenced you? 	<ul style="list-style-type: none"> • How did you feel when you first got married, what were your expectations or fears

✓ **Do:** Give caregivers some paper and colored pencils and explain that they are going to draw a picture of themselves when they were girls.

* **Note:** This activity may be triggering. Do not force caregivers to draw if they don't want to. Ask them to think of a way in which they would like to participate in the activity that makes them feel comfortable, for example closing their eyes and imagining, writing a story, etc.

☰ **Say:** When you are drawing your picture or imagining yourself, I want you to think about the following:

- What were your dreams and aspirations at the age similar to your daughters?
- Who were some of the people who made decisions in your life at this age?
- Was there anyone there to encourage you to follow your dreams or who supported you to reach your goals?
- Was there something or someone that could have provided you with support and encouragement that would have made a difference to you?

✓ **Do:** Once they have finished, ask if one or two volunteers want to share their drawings or share their reflections with the group.

☰ **Say:** I'd like to remind you: Please only share back what you feel comfortable and safe sharing in our group.

☰ **Say:** Now I want you to take a few minutes to think about your own daughters/in-law participating in Girl Shine.

- Do you know what their goals and aspirations are?
- Do you think they are likely to face barriers in reaching these?
- Who or what are the barriers?

* **Note:** Give them a few minutes to think about this.

? **Ask:** What can we do to support them? (Acknowledge that some things may be out of our control.)

Examples could include:

- Taking time to listen to girls.
- Encouraging them to think outside of the gender box.
- Not ridiculing them if they show an interest in something that is traditionally perceived to be a boys' role.
- Encouraging girls with disabilities to participate in activities that interest them.
- Supporting daughters-in-law in adjusting to their new environment.
- Being understanding and encouraging of divorced girls to continuing to live happy lives.

Key Message

☰ **Say:** Society places expectations of who women and girls should be, how they should act, how they should feel, and what they should say. They are taught to us from the moment we are born, by many different people and through experiences. Sometimes it can be difficult and even unsafe to challenge these, but we do have the power to take even small steps within our own home in the way we treat girls and boys. And these small steps can make a big difference.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by participants, or explain why it's not possible).

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Discuss with your daughter/in-law the hopes you have for her and ask what her hopes are for herself. Then share a story with your daughter about what it was like for you growing up and what was important to you at that age.

NOTE TO FACILITATORS, FOR THE NEXT SESSION :

- You may want to invite a health practitioner to the session or meet with your supervisor before the session, so you feel equipped to deliver the content.
- Prepare for the session ahead of time to ensure you have identified, discussed and simplified terminology for the context
- Read **Appendix A12** from Girl Shine Part 1 and familiarize yourself with the FAQs
- If you have funds available consider procuring/purchasing a medical model of the female reproductive system to aid demonstration.
- Procure dignity kits or obtain dignity kits from existing stock as part of session preparation and then have dignity kits available to give to each woman in the session

SESSION 4:

ADOLESCENT GIRL DEVELOPMENT⁸ (Caregivers of Unmarried Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- Resources 4.1 to 4.4.
- large printout of Resource 4.1: The Tanner Scale or handouts for smaller groups
- comments box

Preparation:

- You could consider inviting a health practitioner who has been trained in GBV core concepts and clinical care for sexual assault survivors, to support the facilitation of this sessions to clearly explain the adolescent development including terminologies or invite a health practitioner during the facilitators training to facilitate this session
- Contextualize the menstruation myths. Do this in collaboration and consultation with your technical advisor/specialist.
- If you have funds available, consider procuring/purchasing a medical model of the female reproductive system to aid demonstration
- Procure dignity kits or obtain dignity kits from existing stock as part of session preparation and then have dignity kits available to give to each woman in the session, if available.

Facilitator's Note:


- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls.
- It is important that facilitators refer to **Appendix A12** in [Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.

Duration: This session could take 2.5 hours, if it is not possible for caregivers to stay that long, you can split the session over two sessions.

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module.

This session may create lots of discussion and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Welcome & Review (10 minutes)


 **Ask:** Did you discuss with your daughter the hopes you have for her and ask what her hopes are for herself? Does anybody want to share how this went?

 **Say:**

- Today we are going to talk about the social, physical, and emotional changes that girls experience during adolescence. Adolescence is a stage girls and boys pass through between ages 10-19.
- It is a time of great change and opportunity. It can also generate confusion if girls and boys are not adequately supported in understanding the changes they are experiencing.
- When girls reach puberty, they are often perceived by society as “adults,” and are expected to fulfill certain roles and responsibilities that they might not be ready for because they are still developing and growing. They may be expected to get married, or may be restricted from going to school, spending time with friends, and accessing opportunities.
- Some of us may feel uncomfortable or strange talking about this topic. That reaction is normal. We don’t talk about these things in a large group every day. But by learning about this very normal process here in a safe space, you will be more comfortable talking about the changes with your adolescent girls and boys.


Let’s Explore (25 minutes)

 **Ask:** What do you understand by the term “puberty”?

 **Say:** Puberty is a process of hormonal and physical change where a girl or boy becomes capable of reproduction. This usually lasts between one to three years. It happens during the period of adolescence, where girls and boys go through social and emotional growth, and this period lasts from the age of 10-19.

 **Ask:**

- What were some of the things you experienced during puberty—physical and emotional?
- What were some of the restrictions or changes you experienced in your daily roles and responsibilities?

 **Do:** Use a large printout of the Tanner Scale⁹ (Resource 4.1) to demonstrate the various stages of adolescence.

 **Do:** Ask participants to gather around the poster (or distribute handouts for smaller groups).

 **Explain:**

- Adolescent girls, just like boys, go through a number of physical and emotional changes. These changes can be linked to chemical messengers in their bodies called hormones. These hormones affect things like our mood, our likes, and our dislikes, as well as physical and mental growth and development.
- In early adolescence (from 10-14) girls, like boys gain improved abilities to express themselves and develop close friendships, while less attention is shown to caregivers. Girls may also start developing breasts, begin menstruating, and may grow pubic hair. Boys may experience a deepening of their voice and also grow pubic hair.

 **Note:** Show examples of this from the Tanner Scale.

- As girls continue to grow in late adolescence (from 15-19), girls, like boys, want more independence, pay more attention to their appearance (because their body is changing), have an increasing ability to think through ideas and express those ideas in words. They may start showing an interest in people of the opposite or same sex*. Girls and boys may continue developing physically during late adolescence, while mental development will continue well into adulthood.

9 <https://www.advocatesforyouth.org/wp-content/uploads/storage/advfy/lesson-plans/lesson-plan-puberty-part-i-and-ii.pdf>

***Sexual Orientation and Gender Identity:** At this stage of life adolescents start to explore their identities, and this covers many different aspects of their lives. It can also include understanding who they are attracted to, whether this is people of the opposite sex, same sex, or both.

In the first session, we talked about transgender people. Again, as adolescents are exploring their identity, it may also include exploring their gender identity. This means that their gender identity might be the same as the sex assigned at birth, e.g., women who identify as women, or it might be different, like it is for transgender people.

- These changes in adolescence happen to all girls and boys across the world. There may be differences in what age this takes place and how they develop (e.g., girls and boys may be different shapes and sizes).
- Because everyone develops at different rates, there is no right or wrong answer to when a girl should start menstruating. This usually happens about two years after the first signs of puberty appear. The first signs tend to be breasts beginning to develop and pubic hair starting to grow. If girls haven't developed any signs of puberty by age 14, it is a good idea to see a health professional, and if girls haven't started menstruating by age 16, you should also get advice from a health professional. It is likely girls will be told to wait and see as in many cases periods will start naturally by the time a girl is 18¹⁰.



Ask:

- Does this sound similar to your own experiences?
- What other things may have been taking place in your life at the time that would have influenced your growth or development?



Explain: Adolescent girls may share common physical and emotional changes, but their experiences, environments, and settings do also play a big role in how these changes occur which make each one's experience unique, despite some of the similarities we mentioned. Adolescents with diverse life experiences will develop and grow at different ages due to these factors. For example, a girl who is 13 years old might have a disability and attends awareness sessions that developed her knowledge and capacities in problem solving and dealing with her emotions. Additionally, there are different factors (such as displacement, war, etc.) that might contribute to developing or limiting girls' capacities.



***Masturbation:** Hormones that cause a person to go through puberty also cause new or more sexual feelings and desires. This might result in someone having new romantic feelings for other people.

These hormones can result in some people choosing to touch their genitals for pleasure, called masturbation. Masturbation cannot harm someone physically and is a personal decision.



Ask: During your own adolescence, what kind of information would have been helpful to you?



Say: Supporting girls by providing them with information or helping them to access information during this stage can help them be better informed and prepared for the changes they go through.

Activities (1 hour 15 minutes)

Activity 1: Menstruation Discussion (30 minutes)



Say: One defining moment of adolescence is when girls begin menstruation. In small groups, let's discuss what this moment means to women and girls in this community.

¹⁰ There are some rare genetic disorders—e.g., Kallman Syndrome and Klinefelter Syndrome—that can prevent puberty/adolescent bodily changes. These can be treatable with medical support. There can also be other medical reasons why puberty/adolescent bodily changes are delayed, so please do talk to your daughter to see if she would like medical advice if this is concerning her.


✓ **Do:** Ask caregivers to work in small groups and have them think about the following questions:

- Is it common to talk about menstruation with girls? Why yes/no?
- What are some of the challenges faced talking about menstruation?
- What can we do to make this discussion easier for you to have with girls?

* **Note:** Potential answers include: Prepare caregivers with factual information, have trained staff or mentors provide information, start conversations about easier topics such as emotional changes, and then move on to more potentially sensitive information. You can **ADD** these if not mentioned and when/where appropriate.

✓ **Do:** When they have finished discussing, ask them to share their reflections with the rest of the group.

* **Note:** It is important to take notes and follow up on the suggestions caregivers have about how to make this discussion easier.

 **Say:** Menstruation is a normal and healthy part of being a woman or girl. When given the right support and information it can also be very easy to manage and completely possible to continue with your normal daily life like you do when not menstruating. But it can become difficult when women and girls don't have access to sanitary products and ways to manage the symptoms of menstruation. It's important to check in on girls to see if there is anything you can do to help them access information and supplies.

Activity 2: Menstruation Myths and Facts (45 minutes)

 **Say:**

- Menstruation may seem simple to you now, but remember when it was new and unfamiliar? Sometimes it can be difficult to have access to factual information about menstruation. So, it is important to understand what the facts and myths—or incorrect information—are.
- We are going to play a game about some common period myths that you can dispel for girls.
- I'm going to read some statements about menstruation.
- Please stand up if you think the statement is true. Remain seated if you think the statement is a myth.



* **Note:** An alternative activity if caregivers are not able/don't feel comfortable doing stand-up/sit down is: Give caregivers two signs; a cross sign "x" and a tick sign "✓". Ask them to hold up the sign that reflects their opinion.

✓ **Do:**

- Read the statements below one by one.
- Take a few responses from the caregivers for their choice and then explain the correct answer after each statement.
- Allow discussion after each as needed.

CONTEXTUALIZATION (Update with locally relevant myths or ask caregivers to share ones they have heard of):

1. The bleeding during periods is the discharge of "bad and dirty blood" from the body. (False)
2. When menstruating, girls can continue with their daily activities as normal. (True)
3. Once girls start to menstruate, they are capable of getting pregnant (True)
4. Just because it's possible to get pregnant doesn't mean girls bodies are ready for pregnancy (True)
5. Once a girl starts menstruating, she should get married. (False)

* **Note:** For some contexts, you may need to **ADD** the following:



Explain: Girls might say that they are not clean when they have their period because in Islam, a girl cannot pray if she has her period, and is considered “impure.” “Purity” is a religious term for when men and women are considered “physically and spiritually ready” to conduct certain religious duties or rituals, whereas “cleanliness” is related to hygiene. Clarify the difference between “purity” and “cleanliness.”



Explain: There is a difference between “purity” and “cleanliness.” If a girl is not considered by religion as “pure” when on her period, and cannot conduct certain practices, this doesn’t mean that she is dirty. “Cleanliness” is related to hygiene. When girls have their periods, they are not dirty.



Do: Use the Internal Organs and Menstrual Cycle Poster/medical anatomy model (if you have one) to highlight the different organs and explain the following to caregivers:



Explain:

- Every month, one of the eggs leaves one of the ovaries and travels through the fallopian tube. When the egg leaves the ovary, this is called ovulation. Different people have different days when they bleed depending on whether their cycle is long or short.
- At the same time, changes in our body’s hormones (natural chemicals that our body makes) prepare the uterus (the part where babies grow inside our body) for pregnancy. A soft spongy lining gets formed in the uterus.
- If an egg and male’s sperm meet to form a baby, the lining will provide nutrition. If an egg isn’t fertilized by a male’s sperm (from sexual intercourse), the uterine lining will begin to shed away, and the egg and the lining will pass through the uterus out of the body.
- The blood that is released from the shedding lining flows out through the vagina. This bleeding is the menstrual period and this whole cycle is called menstruation.



Do: Check to see if caregivers have any questions. If they have questions you don’t feel you are able to answer then please say “I will take a note of that, check it, and get back to you next time. Okay?” **WRITE** the question down, then please follow up; seek relevant support to be able to answer the caregivers’ question or to be able to refer them to someone who can.



Explain:

- Menstruation is the shedding of blood and tissue from the uterus that exits the body through the vagina. The blood and tissue that is shed is not dirty, but a normal and healthy process that women and girls experience.
- It is true that girls can get pregnant when they start menstruating. However, girls’ bodies are still in the process of developing and are not fully developed until they reach the age of 18. Even after the age of 18, some organs continue developing. Getting pregnant when a girl’s body is not fully developed increases the risks of health complications during pregnancy and delivery, not only on the girl but also on the baby.
- Girls who get pregnant when their bodies are not ready to carry a baby are at higher risk of going through miscarriage, pre-mature labor, and maternal death.
- Also, considering girls are going through emotional and brain growth, girls should wait until they are ready to take care of themselves as well as their new-born in order to ensure a safe, healthy and happy life for her and her family¹¹.



Do: Stop to take reflections from the group on the information presented.



Ask:

- Which information do you think is important to share with girls?
- What support do you need to provide this information?
- What do we think about supporting girls to delay pregnancy until after 18? (What are some of the challenges or benefits?)
- Is it important for our sons to have this information? How can we talk to our sons about it?

Key Message



Say: Adolescent girls know that something is happening to their bodies, and while it may be uncomfortable or uncommon to talk about these topics, it is important for girls to know about their bodies and the changes they are experiencing. This information can be really valuable coming from a caregiver, someone the girl trusts. There are also others who can provide girls with accurate information, such as at the safe space or at a health facility. Girls should be encouraged to learn about their bodies whether they are married, unmarried, have a disability or divorced.

Check-in (5 minutes)

ASK The caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND Caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Share information from the session that you feel comfortable with, with the girls in your life. If you don't feel comfortable, think about why this is and let's discuss in the next session.



NOTE TO FACILITATORS, FOR THE NEXT SESSION :

- If you haven't already, procure dignity kits or obtain dignity kits from existing stock as part of session preparation, then have dignity kits available to give to each woman in the session, if available

SESSION 4:

ADOLESCENT GIRL DEVELOPMENT¹² (Caregivers of Married Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive Sexual and Reproductive Health (SRH) information and are able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- Resources 4.1 to 4.5.
- large printout of the Tanner Scale (Resource 4.1) or handouts for smaller groups.
- comments box

Preparation:

- You could consider inviting a health practitioner who has been trained in GBV core concepts and clinical care for sexual assault survivors, to support the facilitation of this sessions to clearly explain the adolescent development including terminologies. Or invite a health practitioner during the facilitators training to facilitate this session.
- Contextualize the menstruation myths. Do this in collaboration and consultation with your technical advisor/specialist
- If you have funds available, consider procuring/purchasing a medical model of the female reproductive system to aid demonstration.
- Procure dignity kits or obtain dignity kits from existing stock as part of session preparation and then have dignity kits available to give to each woman in the session, if available

Terminology: Prior to the sessions, supervisors and facilitators go through the sessions, identify, discuss and simplify words; if possible, find a local word. This will help facilitators and translators properly discuss sessions with caregivers. For example, a word like "Puberty" might also be referred to as teens, adolescence, pubescence, etc.

Facilitator Note:


- As this is a sensitive topic, it is important to remind caregivers of the "Group Agreements" (Session 1) and ask if they would like to have any additional agreements specifically for this session.
- Facilitators may face some resistance from caregivers when trying to encourage them to pass on this information to girls on ASRH. **It is important that facilitators refer to Appendix A12 in [Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.**

Duration: This session could take 2.5 hours, if it is not possible for caregivers to stay that long, you can split the session over two sessions.

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module.

This session may create lots of discussion and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Welcome & Review (10 minutes)


 **Ask:** Did you discuss with your daughter/in-law the hopes you have for her and ask what her hopes are for herself? Does anyone want to share how this went?


 **Say:**

- Today we are going to talk about the social, physical, and emotional changes that girls experience during adolescence. Adolescence is a stage girls and boys pass through between ages 10-19.
- It is a time of great change and opportunity. It can also generate confusion if girls and boys are not adequately supported in understanding the changes they are experiencing.
- When girls reach puberty, they are often perceived by society as "adults," and are expected to fulfill certain roles and responsibilities that they might not be ready for because they are still developing and growing. They may be expected to get married, or may be restricted from going to school, spending time with friends, and accessing opportunities.
- Some of us may feel uncomfortable or strange talking about this topic. That reaction is normal. We don't talk about these things in a large group every day. But by learning about this very normal process here in a safe space, you will be more comfortable talking about the changes with your adolescent girls and boys.


Let's Explore (25 minutes)

 **Ask:** What do you understand by the term "puberty"?

 **Say:** Puberty is a process of hormonal and physical change where a girl or boy becomes capable of reproduction. This usually lasts between one to three years. It happens during the period of adolescence, where girls and boys go through social and emotional growth, and this period lasts from the age of 10-19.

 **Ask:**

- Can anyone remember what it was like when you went through puberty?
- What were some of the restrictions or changes you experienced in your daily roles and responsibilities?

 **Do:** Use a large printout of the Tanner Scale¹³ (Resource 4.1) to demonstrate the various stages of adolescence.

 **Do:** Ask participants to gather around the poster (or distribute handouts for smaller groups).

*Sexual Orientation and Gender Identity:

At this stage of life adolescents start to explore their identities, and this covers many different aspects of their lives. It can also include understanding who they are attracted to, whether this is people of the opposite sex, same sex, or both.

In the first session, we talked about transgender people. Again, as adolescents are exploring their identity, it may also include exploring their gender identity. This means that their gender identity might be the same as the sex assigned at birth, e.g., women who identify as women, or it might be different, like it is for transgender people.

13 <https://www.advocatesforyouth.org/wp-content/uploads/storage/advfy/lesson-plans/lesson-plan-puberty-part-i-and-ii.pdf>



Explain:

- Adolescent girls, just like boys, go through a number of physical and emotional changes during this stage. These changes can be linked to chemical messengers in their bodies called hormones. These hormones affect things like our mood, our likes and dislikes as well as our physical and mental growth and development.
- In early adolescence (10-14) girls, like boys gain improved abilities to express themselves, close friendships gain importance while less attention is shown to caregivers. Girls may also start developing breasts, begin menstruating and grow pubic hair while boys may experience a deepening of their voice and also grow pubic hair (show examples of this from the Tanner Scale).
- In late adolescence (15-19) girls, like boys, want more independence and pay more attention to their appearance (because their body is changing); they also have an increasing ability to think through ideas and express these in words. They may start showing an interest in people of the opposite or same sex*. They have an ability to make independent decisions and also show greater emotional stability. Girls and boys may continue developing physically, continuing on with the development experienced in younger adolescence, while mental development will continue well into adulthood.
- Changes in adolescence happen to all girls and boys across the world. Changes may be slightly different depending on the age this takes place and how they develop (e.g., girls and boys may be different shapes and sizes).
- So, there is no right or wrong answer to when a girl should start menstruating. Girls start menstruating when their body is ready. This is usually about two years after the first signs of puberty appear. In girls, the first signs of puberty tend to be breasts beginning to develop and pubic hair starting to grow. If girls haven't developed any signs of puberty by age 14, it is a good idea to see a health professional, and if girls haven't started menstruating by age 16, you should also get advice from a health professional. It is likely girls will be told to wait and see as in many cases periods will start naturally by the time a girl is 18¹⁴.



Ask:

- Does this sound similar to your own experiences?
- What other things may have been taking place in your life at the time that would have influenced your growth or development?



Explain: Adolescent girls may share common physical and emotional changes, but their experiences, environments, and settings do also play a big role in how these changes occur, which makes each one's experience unique, despite some of the similarities we mentioned. Adolescents with diverse life experiences will develop and grow at different ages due to these factors. For example, being married at a young age may mean that girls need to learn quickly how to manage adult responsibilities compared to girls who are not married at the same age. Additionally, there are different factors (such as displacement, war, etc.) that might contribute to developing or limiting girls' capacities. While girls may be able to adapt and cope in some ways, it is important to remember that they are still growing and developing in other ways that may seem invisible to us.



***Masturbation:** Hormones that cause a person to go through puberty also cause new or more sexual feelings and desires. This might result in someone having new romantic feelings for other people.

These hormones can result in some people choosing to touch their genitals for pleasure, called masturbation. Masturbation cannot harm someone physically and is a personal decision.



Ask:

- How old were you when you got married?
- Who supported you during your first few months or years of being married?
- What kind of health information or support would have been helpful to you during this time?

14 There are some rare genetic disorders—e.g., Kallman Syndrome and Klinefelter Syndrome—that can prevent puberty/adolescent bodily changes. These can be treatable with medical support. There can also be other medical reasons why puberty/adolescent bodily changes are delayed, so please do talk to your daughter to see if she would like medical advice if this is concerning her



Say: Supporting girls during adolescence in general is really important and married girls need extra support because they are expected to take on adult roles and responsibilities before they are fully capable of doing so. Access to information about their changing bodies, pregnancy, and healthy relationships will help them to make better decisions for themselves and their family. For girls moving in with their in-laws, having a mother-in-law that supports the girl to access information, giving her an opportunity to participate in opportunities in the community and letting her build her support network will make a valuable difference in the girl's life and that of her family.

Activities (1 hour 15 minutes)

Activity 1: Menstruation Myths and Facts (40 minutes)



Say: Menstruation often poses some challenges for women and girls. Some may be related to understanding what is happening to them and managing some symptoms, while others may be related to how the community supports (or doesn't support) girls who are menstruating.

Caregivers and mothers-in-law can be a source of support and strength to girls, especially, for example, to recently married girls who are menstruating in a new environment to one they are used to. Talking to recently married girls about menstruation lets them know that you are there to support them and helps them to understand how to navigate menstruation in their new environment.



Ask: Some of the following questions:

- Is it common to talk about menstruation with girls? Why yes/no?
- Who talks to girls about it? How do you support married girls manage their monthly cycle?



Say: When given the right support and information menstruation can also be very easy to manage. But it can become difficult when women and girls don't have access to sanitary products and ways to manage the symptoms of menstruation. It's important to check in on married girls to see if there is anything you can do to help them access information and supplies.

Sometimes it can be difficult to have access to factual information about menstruation. So it is important to understand what the facts and myths (incorrect information) are and to support girls to have the correct information.



Say:

- We are going to play a game now about some common period myths that you can dispel for ourselves and girls. I'm going to read some statements about menstruation.
- Please stand up if you think the statement is true. Remain seated if you think the statement is a myth.



Note: An alternative activity if caregivers are not able/don't feel comfortable doing stand-up/sit down is: Give caregivers two signs; a cross sign "x" and a tick sign "✓". Ask them to hold up the sign that reflects their opinion.




Do:


- Read the statements below.
- Take a few responses from the caregivers about their choice, and then explain the correct answer after each statement.
- Allow discussion after each as needed:


CONTEXTUALIZATION (Update with locally relevant myths or ask caregivers to share ones they have heard of):


1. The bleeding during periods is the discharge of “bad and dirty blood” from the body. (False)
2. When menstruating, girls can continue with their daily activities as normal. (True)
3. Once girls start to menstruate, they are capable of getting pregnant (True)
4. Just because it’s possible to get pregnant doesn’t mean girls bodies are ready for pregnancy (True)
5. Once a girl starts menstruating, she should get married. (False)

 **Note:** For some contexts, you may need to **ADD** the following:


 **Explain:** Girls might say that they are not clean when they have their period because in Islam, a girl cannot pray if she has her period, and is considered “impure.” “Purity” is a religious term for when men and women are considered “physically and spiritually ready” to conduct certain religious duties or rituals, whereas “cleanliness” is related to hygiene. Clarify the difference between “purity” and “cleanliness.”

 **Explain:** There is a difference between “purity” and “cleanliness.” If a girl is not considered by religion as “pure” when on her period, and cannot conduct certain practices, this doesn’t mean that she is dirty. “Cleanliness” is related to hygiene. When girls have their periods, they are not dirty.


 **Do:** Use the Internal Organs and Menstrual Cycle Poster (Resources 4.2 and 4.4) and the medical anatomy model if you have one to highlight the different organs and explain the following to caregivers:

 **Explain:**

- Every month, one of the eggs leaves one of the ovaries and travels through the fallopian tube. When the egg leaves the ovary, this is called ovulation. Different people have different days when they bleed depending on whether their cycle is long or short.
- At the same time, changes in our body’s hormones (natural chemicals that our body makes) prepare the uterus (the part where babies grow inside our body) for pregnancy. A soft spongy lining gets formed in the uterus.
- If an egg and male’s sperm meet to form a baby, the lining will provide nutrition. If an egg isn’t fertilized by a male’s sperm (from sexual intercourse), the uterine lining will begin to peel away, and the egg and the lining will pass through the uterus out of the body.
- The blood that is released from the broken lining flows out through the vagina. This bleeding is the menstrual period and this whole cycle is called menstruation.

 **Do:** Check to see if caregivers have any questions. If they have questions you don’t feel you are able to answer then please Say: “I will take a note of that, check it, and get back to you next time. Okay?”

WRITE the questions down, then please follow up; seek relevant support to be able to answer the caregivers’ questions or to be able to refer them to someone who can.

 **Explain:**

- Menstruation is the shedding of blood and tissue from the uterus that exits the body through the vagina. The blood and tissue that is shed is not dirty, but a normal and healthy process that women and girls experience.
- It is true that girls can get pregnant when they start menstruating. However, girls’ bodies are still in the process of developing and are not fully developed until they reach the age of 18. Even after the age of 18, some organs continue developing. Getting pregnant when a girl’s body is not fully developed increases the risks of health complications during pregnancy and delivery, not only on the girl but also on the baby. Some of the high risk includes miscarriage (unintentional loss of baby), pre-mature labor and maternal death.

- Also, considering girls are going through emotional and brain growth, girls should wait until they are ready to take care of themselves as well as their new-born in order to ensure a safe, healthy and happy life for her and her family¹⁵.

✓ **Do:** Stop to take reflections from the group on the information presented. Remember: If they have questions you don't feel you are able to answer then please say, "I will take a note of that, check it, and get back to you next time. Okay?" And, then please **WRITE** the questions down and follow up; seek relevant support to be able to answer the caregivers' questions or to be able to refer them to someone who can.



Ask:

- Which information do you think is important to share with girls?
- What are some of the challenges you may face when providing this information? What support do you need to provide this information?
- Is it important for our sons to have this information? How can we talk to our sons about this?



Say: Girls who get pregnant after the age of 18 are better prepared to deal with pregnancy and raising a family. They will have more information about their bodies, know where and how to access health services, and have increased ability to take well informed decisions.

Activity 2: Managing Menstruation (35 minutes)



Say: While we know that menstruation is a normal and healthy part of being female, we still need to take care of ourselves to stay clean and also manage any discomfort we are experiencing.



Ask: What are some of the things that girls or women experience when they are menstruating? (For example, being tired, having cramps, having no symptoms, being isolated, not having adequate means to stay clean, no privacy etc.)

For caregivers of girls with disabilities,



Ask: Are there specific things that affect girls with disabilities during menstruation?




Explain: Some women and girls may experience the following:

- **Abdominal pain from light to severe.** The shedding of the uterine wall, which is the source of monthly bleeding, can cause this.
- **Emotional changes.** Individual women and girls respond differently and can experience a range of emotions during menstruation and their menstrual cycle.
- **Not having the proper sanitary products to keep clothes clean.** Many girls and women do not have access to sanitary napkins or pads (or any other product) that can keep blood from staining their clothes. This is often a primary reason that girls do not leave the house, including missing school or work, during their time of the month.

Requires CONTEXTUALIZATION:

- In this environment, we may find that women and girls are expected to queue for long hours for food and non-food items, during menstruation, without access to sanitary materials it can prevent them from queuing and resulting in them not getting the things they need.

- Men may be responsible for collecting these items and may not bring sanitary materials for women and girls and conversations around this may not happen due to taboo or stigma attached to menstruation.
- Taboo and stigma may mean that girls and women cannot wash themselves or fetch water during the day and have to go at night which affects their safety. The water and sanitation infrastructure may not be suitable for the needs of women and girls, girls may not feel comfortable using them, especially during menstruation. And for girls with disabilities, they may not even be able to access them due to lack of ramps or unsuitable toilets and washing facilities.


 **Ask:** What are some of the strategies you use and girls can use to manage these things in this current environment?

 **Do:** Have the participants split into two groups, each group focusing on one point below.

- Group 1: What can you currently do to manage the situation for women and girls when menstruating.
- Group 2: What can the community, local authorities or NGOs do to improve the situation for women and girls when they are menstruating.

For caregivers of girls with disabilities,

 **Ask:** Are there specific considerations for girls with different disabilities?

 **Note:** Write down their recommendations for community and local authorities. NGOs should be fed back through appropriate channels, WASH partners, allies in the community, and coordination groups. Tell the female caregivers what you will do with this information they have provided. For example, share with your manager for advocacy, or for them to raise with the GBV sub-cluster etc. Be sure to follow up and do the action you committed to.

ADD the following to what the groups have suggested if contextually relevant:

Pain and Discomfort:

- Women and girls do not need to stay at home during menstruation unless they choose to (for example if they are experiencing a lot of pain) and not because it is expected from them.
- It is better not to make assumptions about what a girl can or cannot manage during menstruation, it is always best to check how the girl is feeling and whether she can or cannot continue with specific tasks.
- This also includes checking with girls who have disabilities as it may be harder for some girls with disabilities to communicate pain and discomfort.

Sanitary Materials:

There are different materials women and girls can use during menstruation. Some things are easier to access than others:

- Clean pieces of cloth or reusable pad: These are cut to fit in the panty area by sewing several layers of cotton cloth on top of each other. These must be clean. The used cloth should be washed separately with water and soap, then dried in the sun.
- Pads or sanitary towels: These are designed to fit the panty area close to the body. They have strips of tape that keep them attached to the panties. Pads are disposable and should be discarded after being used once. They must be disposed of in a pit latrine, buried, or burned after use. They should not be left in the garbage pile or flushed down the toilet.
- Other sanitary materials: the market for new sanitary materials is growing and so you may be aware of other types of products. Does anyone want to share what other sanitary products they are aware of/ have seen?

Note: If relevant, you can bring sanitary materials to the session if they are locally available and accessible and do a demonstration on how to prepare sanitary products. For example how to place a sanitary napkin or cloth inside knickers. How to remove and where to dispose. See illustration in Resource 4.5.

For caregivers of girls with disabilities,



Say: Menstruating girls and women with disabilities may have different needs. Those with mobility limitations with their upper body and arms may have difficulties placing their sanitary protection materials in the correct position, and washing themselves, their clothes, and the material.

Those with vision impairments (blind or low vision) may face challenges knowing if they have fully cleaned themselves and how much they have leaked. While those with intellectual and developmental impairments may need tailored support to manage menstruation. In all situations, it is important to find a way to communicate effectively with the girl to understand that her physical and emotional safety, comfort, and health is taken care of.

- Girls with disabilities may need additional support with applying sanitary materials depending on the type of disability they have. It is important that a trusted person asks the girl what kind of support she needs during this time.

Staying Clean:

During menstruation it is important to stay clean and healthy. Unhygienic management can lead to infections. These are some things you can **Do:**

- Clean yourself with soap and water, or whenever safe and possible to do so and dry yourself well to avoid infection.
- Wash underpants with soap and water to avoid stains whenever safe and possible to do so.
- Change the pad or cloth regularly to avoid soiling clothes and bad odor.
- Wash hands after changing sanitary pads or cloth when safe and possible to do so.
- Again, trusted persons of girls with disabilities should ask them what type of support they need during this time.



Ask:

- Can you apply this information?
- What else can we do to support girls during this time?

ADD any of the following examples if contextually relevant:

- Prepare in advance for menstruation by making sure girls have access to menstrual products.
- Help them to know how to take care of their bodies and how to stay clean during menstruation.
- Be close to them so they feel comfortable talking to you about anything they are worried about.
- Let them know that what they are experiencing is normal and nothing to be worried about.
- Allow them to continue enjoying their childhood; just because they have their period does not mean they are fully developed adults yet. They still have many changes they need to go through before they are fully developed and mature.
- Girls are not ready to get married because they have started menstruating. They are still growing and developing, and this continues well beyond their teenage years.
- For more information on supporting girls with disabilities during menstruation, look at the [Menstrual Hygiene Management Toolkit](#) in Emergencies. You can also check [UNICEF Guidance on Menstrual Health & Hygiene](#)

Key Message



Say: It may be uncomfortable or uncommon to talk about these topics, but not discussing it can lead to girls being unhealthy and unhappy. It is important for girls to know about their bodies and the changes they are experiencing. This information can be very valuable coming from a caregiver or mother-in-law, as someone the girl trusts. There are also others who can provide girls with accurate information, such as staff or facilitators at the safe space or at a health facility. Girls should be encouraged to learn about their bodies, whether they are married, unmarried, divorced, or have a disability.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers, or explain why it's not possible).

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Share information from the session that you feel comfortable with, with girls in your life. If you don't feel comfortable, think about why this is and let's discuss in the next session.



NOTE TO FACILITATORS, FOR THE NEXT SESSION :

- If you haven't already, procure dignity kits or obtain dignity kits from existing stock as part of session preparation, then have dignity kits available to give to each woman in the session, if available.

SESSION 5:

SUPPORTING ADOLESCENT GIRLS (Caregivers of Unmarried Girls)

Session Aims

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information

Materials:

- flip chart paper
- markers
- materials for menstrual hygiene demonstration (for example: sanitary pads, reusable cloth, etc.)
- Resource 4.1 to 4.5 and 5.1 to 5.2
- service mapping of SRH health providers for girls in the context/location/surrounding locations
- comments box

Preparation:

- If caregivers have daughters with disabilities, be prepared with information relevant for girls with disabilities; speak to local disability partner organizations to see if you are able to make any referrals. Information related to disabilities is included in boxes throughout the session.
- If there were questions asked by caregivers during the last session that you were not able to answer immediately, do some follow up with your manager/relevant colleagues so that you are ready to provide a response to them in Session 5.
- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls. **It is important that facilitators refer to [Appendix A12 in Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.**
- Procure dignity kits or obtain dignity kits from existing stock as part of session preparation and then have dignity kits available to give to each woman in the session, if available
- List/service map of health providers for girls in the context/location/nearby locations
- For Activity 2, be prepared with Resource 5.1 on contraceptives so you can share information with participants about the various contraceptive methods. Be sure to check that the methods you discuss are available in your context.

Facilitator Note:

- As this is a sensitive topic, it is important to remind caregivers of the “Group Agreements” (Session 1) and ask if they would like to have any additional agreements specifically for this session.
- Local law versus cultural statutes: clarifying adolescents rights to contraceptive services:
- Many people are unaware of the laws concerning adolescents’ rights to contraceptive services. In many countries around the world, young unmarried girls are legally able to access contraceptive services and do not require the consent of their partner or parent to do so. Check the national and local laws and help clarify any misunderstandings among participants.
- Caregivers may want more information about contraceptive methods and other information related to family planning or STIs, not covered here. There are plenty of resources included in Girl Shine which you can draw from to provide a separate session. This can be found in Part 2 of Girl Shine.

Duration: 2 hours**Timing:** Before the start of the Girl Shine Life Skills Health & Hygiene Module

Welcome & Review (15 mins)



Ask: What information did you share with girls from the last session? Which information didn’t you share and what were the reasons?



Say: Today we are going to continue the conversation, gain new information, and explore your perspectives and opinions on the topic. We will also discuss how we can help girls to access information and support on this topic.

Let’s Explore (10 minutes)

**Explain:**


- Menstruation often poses some challenges for most women and girls. This may be related to understanding what is happening to them and managing some symptoms, while others may be related to how the community supports (or doesn’t support) girls who are menstruating.
- Caregivers can be a source of support and strength as girls go through this stage of life. Talking to girls about your experiences and providing them with accurate information can help them prepare for the changes that happen during puberty. It also lets them know that you are there to support them.
- Women and girls might feel embarrassed about something that is a natural part of being female. Menstruation is a sign that we are healthy. It is not a disease or sickness. It is important that we explain this to girls and try to support them during this time, as well as support each other.


Activities (1 hour 25 minutes)


Activity 1: Managing Menstruation (40 minutes)



Say: First we are going to discuss how to manage some of the symptoms of menstruation for both women and girls and also think about how women can support girls at this time. We will also discuss ways for you and adolescent girls to manage the monthly cycle in a way that is hygienic, dignified, and supportive.

 **Say:** While we know that menstruation is a normal and healthy part of being female, we still need to take care of ourselves—to stay clean and also manage any discomfort we are experiencing.


 **Ask:** What are some of the things that girls or women experience when they are menstruating? (For example, being tired, having cramps, having no symptoms, being isolated, no privacy, not having adequate means to stay clean, etc.)

 **Explain:** Some women and girls may experience the following:

- **Abdominal pain from light to severe.** The shedding of the uterine wall, which is the source of monthly bleeding, can cause this.
- **Emotional changes.** Some women and girls feel more irritable during menstruation. However, this is not universal. Individual women and girls respond differently and can experience a range of emotions during menstruation and their menstrual cycle.
- **Not having the proper sanitary products to keep clothes clean.** Many girls and women do not have access to sanitary napkins, pads or other products that can keep blood from staining their clothes. This is often a primary reason that girls do not leave the house, including missing school, during their time of the month.


Requires CONTEXTUALIZATION:

- In this situation, we may find that women and girls are expected to queue for long hours for food and non-food items, without access to sanitary materials, this may prevent them from going and missing out on the things they need.
- Men may be responsible for collecting some of these items and may not bring sanitary materials for women and girls and conversations around this may not happen due to taboo or stigma.
- Taboo and stigma may mean that girls and women cannot wash themselves or fetch water during the day and have to go at night which affects their safety. The water and sanitation infrastructure may not be suitable for the needs of women and girls, girls may not feel comfortable using them, especially during menstruation. And for girls with disabilities, they may not even be able to access them due to lack of ramps or unsuitable toilets and washing facilities.

 **Ask:** What are some of the strategies you use, and girls can use, to manage these things in this current environment?


 **Do:** Have the participants split into two groups, each group focusing on one point below.

- **Group 1:** What can **you** currently do to manage the situation for women and girls when menstruating.
- **Group 2:** What can the **community, local authorities, or NGOs** do to improve the situation for women and girls when they are menstruating.

 **Note:** Write down their recommendations for community and local authorities. NGOs should be fed back through appropriate channels, WASH partners, allies in the community, and coordination groups

For caregivers of girls with disabilities:

 **Ask:** Are there specific considerations for girls with different disabilities?

 **Do:** Tell the female caregivers what you will do with this information they have provided. For example, share with your manager for advocacy, or for them to raise with the GBV sub-cluster etc. And, be sure to follow up and do the action you committed to.


ADD the following to what the groups have suggested if contextually relevant:

Pain and Discomfort

- Women and girls do not need to stay at home during menstruation unless they choose to (for example if they are experiencing a lot of pain) and not because it is expected from them.
- To help ease the pain, you can use a hot water bottle or warm cloth and place it on the abdomen. Light exercise can also help.
- It is better not to make assumptions about what a girl can or cannot manage during menstruation, it is always best to check how the girl is feeling and whether she can or cannot continue with specific tasks.
- This also includes checking with girls who have disabilities as it may be harder for some girls with disabilities to communicate pain and discomfort.

Sanitary Materials:

- There are different materials women and girls can use during menstruation. Some things are easier to access than others.
- Clean pieces of cloth or reusable pad: These are cut to fit in the panty area by sewing several layers of cotton cloth on top of each other. These must be clean. The used cloth should be washed separately with water and soap, then dried in the sun.
- Pads or sanitary towels: These are designed to fit the panty area close to the body. They have strips of tape that keep them attached to the panties. Pads are disposable and should be discarded after being used once. They must be disposed of in a pit latrine, buried, or burned after use. They should not be left in the garbage pile or flushed down the toilet.
- Other sanitary materials: the market for new sanitary materials is growing and so you may be aware of other types of products. Does anyone want to share what other sanitary products they are aware of/ have seen?


 **Note:** If relevant, you can bring sanitary materials to the session if they are locally available and accessible and do a demonstration on how to prepare sanitary products. For example how to place a sanitary napkin or cloth inside knickers. How to remove and where to dispose. See illustration in Resource 4.5.

- Girls with disabilities may need additional support with applying sanitary materials depending on the type of disability they have, it is important that a trusted person asks the girl what kind of support she needs during this time.

Staying Clean:


During menstruation it is important to stay clean and healthy. Poor hygiene management can lead to infections. These are some things you can **Do:**

- Clean yourself with soap and water, or whenever safe and possible to do so and dry yourself well to avoid infection.
- Wash underpants with soap and water to avoid stains whenever safe and possible to do so.
- Change the pad or cloth regularly to avoid soiling clothes and bad odor.
- Wash hands after changing sanitary pads or cloth when safe and possible to do so.
- Again, trusted persons of girls with disabilities should ask them what type of support they need during this time.

 **Ask:** What else can we do to support girls during this time?

For caregivers of girls with disabilities,



 **Say:** Menstruating girls and women with disabilities may have different needs. Those with mobility limitations with their upper body and arms may have difficulties placing their sanitary protection materials in the correct position, and washing themselves, their clothes, and the material.

Those with vision impairments (blind or low vision) may face challenges knowing if they have fully cleaned themselves and how much they have leaked. While those with intellectual and developmental impairments may need tailored support to manage menstruation.


In all situations, it is important to find a way to communicate effectively with the girl to understand that her physical and emotional safety, comfort and health is taken care of.

ADD any of the following examples if contextually relevant:

- Prepare in advance for menstruation by making sure girls have access to menstrual products.
- Help them to know how to take care of their bodies and how to stay clean during menstruation.
- Be close to them so they feel comfortable to talk to you about anything they are worried about.
- Let them know that what they are experiencing is normal and nothing to be worried about.
- Allow them to continue enjoying their childhood, just because they have their period does not mean they are fully developed adults yet. They still have many changes they need to go through before they are fully developed and mature.
- Girls are not ready to get married because they have started menstruating. They are still growing and developing and this continues well beyond their teenage years.

 **Note:** For more information on supporting girls with disabilities during menstruation, look at the [Menstrual Hygiene Management Toolkit in Emergencies](#)¹⁶.

Activity 2: How Pregnancy Happens (45 Minutes)

 **Say:** Now that we know it is possible to get pregnant once you start menstruating, let's talk about challenges or solutions to talking about pregnancy.

 **Do:** In groups, ask caregivers to discuss the following questions for 10 minutes.

- When you were a girl, who gave you information on pregnancy? Did you know about this before you were married?
- What kind of information do you have now that you think would have been helpful at the time?
- What did you know about family planning and the various methods?

 **Do:** Give the group a few minutes to share back some of their reflections.

ADD information they may not have mentioned below:

- A person who intends to have sex but does not want a pregnancy can use a contraceptive.
- Contraceptives can also be used by women and men who want to plan when to have babies and how many.
- Most contraceptive methods are for women and girls to use, but there are also methods that men can use (e.g., condoms). There are many methods to choose from; in our context, these are the methods that are easily available to you: _____.

ADD methods according to context: condoms, pills, injectables, implants, IUDs, and/or permanent methods.

- Using contraceptives allows many people to enjoy their intimacy without having to worry about unwanted pregnancy. Male and female condoms in particular allow people to enjoy sex with less worry about Sexually Transmitted Infections¹⁷.
- No contraceptive method is perfect, and every method has its own characteristics. Some methods vary in their effectiveness at preventing pregnancy. Some methods have side effects, and some require a visit to a health clinic.
- Pregnancy before a girl is fully matured can be really harmful. Complications in pregnancy and childbirth are the leading cause of death in girls 15-19 globally.
- Supporting recently married girls to access family planning methods can help prevent pregnancy-related dangers. Also, supporting girls to visit a health service provider to monitor the development of the embryo/baby is essential because sometimes medical decisions need to be taken if the girl or woman's life is at risk due to pregnancy.

¹⁶ <https://www.rescue.org/sites/default/files/document/2113/themhminemergenciestoolkitfullguide.pdf>

¹⁷ Sexually transmitted infections (STIs) are passed from one person to another through unprotected sex or genital contact. Some examples of STIs are HIV/AIDS and Chlamydia

- If girls experience being turned away from health providers or they experience a negative or inappropriate response from a health facility staff member, they should inform someone at the safe space who can raise this with the relevant people. Girls have the right to access health services whether they are married, unmarried, divorced, have a disability, etc.
- **CONTEXTUALIZATION:** If available in your context mention: There are discreet methods (such as injectables or IUDs) that can be used discreetly and would require fewer visits to the health facility. Women and girls often try different methods to figure out which one works best for them. A health care provider can offer more information about the benefits, disadvantages, efficacy, and side effects of different methods.



Ask:

- What are some of the challenges we are faced with when accessing contraceptives?
- What can we do to deal with some of those challenges in our community?



Do: Note down the strategies they mention on how to deal with these challenges and add them to the key messages at the end of the session.



Ask: Can you share this information with girls? Why, why not?



Explain:

- Having information about sex and pregnancy doesn't increase the likelihood of girls engaging in sex but it does help girls to be more prepared with factual information and gives them the tools to take decisions about sex and pregnancy (when the time is right).
- It is better for girls to talk with a safe family member, rather than getting wrong information from peers or other adults. We can connect you to health providers in your communities if you have more questions or if you daughter is having ongoing health issues.



As we discussed earlier, during puberty, adolescents may have more desires to have sex due to changes in hormones. Even if sex between adolescents is taboo in society, some adolescents will choose to have sex. However, though adolescents might look more like adults, they do not have the same level of knowledge about sex and pregnancy, or the necessary life experience, to always make the best decisions. That is why it is important for them to have accurate information.

Key Message



Say: It may be uncomfortable or uncommon to talk about these topics, but it is important that we change this because not discussing it can lead to girls being unhealthy and unhappy and because it is important for girls to know about their bodies and the changes they are experiencing. This information can be really valuable coming from a caregiver or someone the girl trusts. There are also others who can provide girls with accurate information, such as at the safe space or at a health facility. Girls should be encouraged to learn about their bodies, whether they are unmarried, have a disability, are married or divorced.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Talk to girls about a way for them to let you know when they need to talk about something privately, whether it is related to menstruation or something else. Some ways to do this may include:

- A code word
- A request to take a walk
- A special time of the day where you talk to her one-on-one

SESSION 5:

SUPPORTING ADOLESCENT GIRLS (Caregivers of Married Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- medical model of female reproductive system (if available)
- Resources 4.3, 5.1 and 5.2
- service mapping of SRH health providers of girls in the context/location/surrounding locations
- comments box

Preparation:

- If caregivers have daughters with disabilities, be prepared with information relevant for girls with disabilities, speak to local disability persons organizations to see if you are able to make any referrals. Information related to disabilities is included in boxes throughout the session.
- If there were questions asked by caregivers during the last session that you were not able to answer immediately, do some follow up with your manager/relevant colleagues so that you are ready to provide a response to them in Session 5.
- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls. **It is important that facilitators refer to [Appendix A12 in Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.**
- List/service map of health providers for girls in the context/location/nearby locations.
- For Activity 1, be prepared with the contraceptive resource so you can share information with participants about the various contraceptive methods. Be sure to check that the methods you discuss are available in your context.

Facilitator Note:

Caregivers may want more information about contraceptive methods and other information related to family planning or STIs, not covered here. There are plenty of resources included in Girl Shine which you can draw from to provide a separate session. This can be found in Part 2 of Girl Shine.

Duration: 2 hours

Welcome & Review (15 mins)



Ask: What information did you share with girls from the last session? Which information didn't you share and what were the reasons?



Note: Try to understand if this was because they disagreed with the information, were uncomfortable or because they didn't feel they knew enough.

Let's Explore (10 minutes)



Say: Today we are going to talk about pregnancy, family planning and accessing sexual and reproductive health information and services. This topic can be sensitive, but this information can be life saving for women and girls, and women and girls have the right to have information about their bodies and health so let's try to find a way to talk about it that makes us feel comfortable and safe.

- Remind the group of the group agreements and ask them whether they want to have any more agreements in place for this session.



Ask: Please think back to when you were first married. Think about:

- The information they had access to about sex and family planning, including services that they could visit to get help.
- Participants don't need to give their answers to the group, but if there is anything they want to share about their reflections, they can.



Say:

- Having information gives us more control over our bodies and helps us to be more informed about our rights and choices
- All women and girls benefit from information about their bodies, this includes unmarried women and girls, women and girls with disabilities, divorced women and girls and other groups that might not always receive this information.

Activities (1 hour 25 minutes)

Activity 1: How Pregnancy Happens (45 Minutes)



Say: We know that it is possible to get pregnant once you start menstruating, now let's talk about challenges and solutions to talking about pregnancy.



Do: In groups, ask caregivers to discuss the following questions:

- When you were a girl, what did you know about pregnancy and how it happens? Who gives the information?
- What kind of information do you have now that you think would have been helpful at the time?
- What kind of information do you think is missing?
- What did you know about family planning and the various methods? Is that different to what you know now?

- ✓ **Do:** Ask the group to share back some of their reflections.

ADD information they may not have mentioned below:

- A person who intends to have sex but does not want a pregnancy can use a contraceptive – a contraceptive is something that can prevent us from getting pregnant.
- This can also be used by women and men who want to plan when to have babies and how many.
- Many contraceptive methods are for use by women and girls, but there are also methods that can be used by men. List out the available contraceptives in your context.
- Using contraceptives allows many people to enjoy their intimacy without having to worry about unwanted pregnancy. Male and female condoms in particular allow people to enjoy sex with less worry about Sexually Transmitted Infections¹⁸.
- No contraceptive method is perfect, and every method has its own characteristics. Some methods vary in their effectiveness at preventing pregnancy. Some methods have side effects, and some require a visit to a health clinic.
- **CONTEXTUALIZATION:** If available in your context mention: There are discreet methods (such as injectables or IUDs) that can be used discreetly and would require fewer visits to the health facility. Women and girls often try different methods to figure out which one works best for them. A health care provider can offer more information about these.



Ask:

- Did you know about these methods?
- What are some of the challenges faced with accessing contraceptives?
- What can we do to deal with some of those challenges in our community?

WRITE DOWN the strategies they mention on how to deal with these challenges and add them to the key messages at the end of the session.



Say: It's especially important for recently married girls to have access to this information so that they are better prepared with information about the available forms of contraception to help them make decisions about family planning.



Explain:


- Pregnancy before girls are fully matured can be really harmful. Complications in pregnancy and childbirth are the leading cause of death in girls 15-19 globally. When a mother is under the age of 20, her child is more likely to be stillborn or die in the first weeks of life than a baby born to an older mother¹⁹.
- Supporting recently married girls to access family planning methods can help prevent pregnancy related dangers. Also, supporting girls to visit a health service provider to monitor the development of the embryo/baby is essential as sometimes medical decisions need to be taken if the girl's/woman's life is at risk due to pregnancy.
- If girls experience being turned away from health providers (or they experience a negative or inappropriate response from a health facility staff member), they should inform someone at the safe space who can raise this with the relevant people. Girls have the right to access health services, whether they are married, divorced, have a disability, unmarried etc.




Ask: Can you share this information with married girls? Why, why not?


18 Sexually transmitted infections (STIs) are passed from one person to another through unprotected sex or genital contact. Some examples of STIs are HIV/AIDS and Chlamydia

19 <https://www.girlsnotbrides.org/themes/health/>

 **Note:** There may be some resistance on sharing information about contraceptive methods due to value placed on fertility of girls. Try to get stories on the positive impacts from participants of sharing information with girls to highlight the importance of this information.

 **Explain:** Having accurate information about contraceptives and family planning helps girls and their husbands to think about when the right time is to have children, helps them to plan better and make better informed decisions.


Activity 2: Sexual Health and Decision Making: (40 mins)


 **Say:** Now I'm going to share with you Rima's story, and we'll use that to talk about sexual health and decision making.


Rima's Story

Rima is 16 years old and recently married. Just before her wedding, her female relatives told her about sex and pregnancy. She didn't have time to ask any questions. The first time she had sex she was scared and couldn't remember what her relatives told her. There was no discussion with her husband about whether she wanted to have sex or not or if they would use a contraceptive. Soon after, Rima found herself pregnant. Rima struggled to cope, moving to a new home, experiencing sex for the first time, being in a relationship and now pregnancy was a lot for a young girl to cope with.


 **Ask:** Does this sound similar to other stories you know?

 **Say:** Let's try to reimagine Rima's story. If we could change anything about Rima's experience in the story, what would it be?

 **Do:** Split participants into small groups and ask them to imagine they were Rima's mother or mother-in-law. Ask the groups what they would do to support Rima in this story? When finished, ask them to share their ideas back to the group.

 **Explain:** Only when we have accurate information about sexual and reproductive health can we make the best decisions about intimate relationships, sex, and childbearing. If women and girls have the right to make decisions about when and with whom they will marry, they will have more power over when, with whom, and under what circumstances to have sex, they have a better chance to negotiate condom use or other methods of contraception, they can decide whether or when to become pregnant or have children and therefore prevent pregnancy under the age of 18 that can lead to serious health effects.

Key Message

 **Say:** It is better for recently married girls to talk with a safe family member or trusted adult, rather than getting wrong information from peers or other adults. We can connect you to health providers in your communities if you or your daughter/in-laws have more questions or if your daughter/in-law is having ongoing health issues or concerns. Think about a way for girls to let you know when they need to talk about something privately, whether it is related to menstruation, sex, relationship problems or something else. Some ways to do this may include:

- A code word
- A request to take a walk
- A special time of the day where you talk to her one-on-one

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Discuss with girls about the different ways in which they can talk to you if there is something they need to discuss in private. Decide on a strategy together that you are both comfortable with.

SESSION 6:

THE FAMILY ENVIRONMENT

Session Aims:

By the end of the session, caregiver will:

1. Recognize the importance of a healthy family environment.
2. Learn tips and techniques to help them contribute towards a healthy family environment.

Materials:

- flip chart paper
- markers
- colored pencils/pens
- A4 paper
- comments box

Facilitator Note: This session may be sensitive and bring up some difficult experiences for caregivers. Be sure to remind caregivers of the “Group Agreements” (Session 1) and check to see whether they want to have additional group agreements for this session. Be prepared with information on services that women can access if they need further support.

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: Did you talk to girls about the different ways in which they can talk to you if there is something they need to discuss in private? How did that go?

Let's Explore (20 minutes)



Note: In this session, be aware of gender norms that reinforce the idea that it is women's responsibility to raise their children in the home. It's important to clarify that taking care of children is a shared responsibility.



Say: Today we are going to talk about the family environment. By this we mean the relationships and experiences we have within our family structure.



Ask: When we imagine a family environment, what are the things we think of?



Explain: The family environment can include a number of things:

- **Physical environment** — for example, a house or a specific physical space;
- **Emotional environment** — for example, stressful, tense, happy, relaxed, safe space, open communication;
- **Learning environment** — for example, stimulating/stunting, modelling good/bad behavior, encouraging/discouraging communication and ideas.

**Ask:**

- What makes a family environment unsafe, tense, or stressful? (Physical or verbal violence directed at children, daughters-in-law or between a couple – for example, fighting, yelling, arguing, harsh punishments, etc.)
- What do we think the impact of stress in the home is on girls, daughters-in-law, and boys?
- What about the impact on us as women?



Explain: As they grow, children who are exposed to a stressful home environment and violence may show signs of problems. Children and young adolescents may have more trouble with schoolwork and show poor concentration and focus. Others feel socially isolated, unable to make friends easily, and may also show signs of aggressive behavior²⁰. Each situation is unique, and some children may or may not experience these problems depending on the support they have and their coping mechanisms.

**Ask:**

- How do you think this impacts girls who are married? How is the situation the same or different for them compared to unmarried girls?
- What about girls who are divorced? What about girls with disabilities?

**Say:**

- There may be some things we cannot control, such as the setting or structure in which we live, but there are things we can do to make those spaces safe, and supportive to our family.
- Girls who have a disability, and those who are married or divorced, may have additional needs that should be considered. For example, married girls may be expected to take on adult responsibilities before they are ready, girls with disabilities may require additional support from a caregiver, and divorced girls may experience stigma and therefore isolation in the community and their immediate family.



Note: Some caregivers may not fully understand the idea of how an environment can shape a child. They may believe that a child is either “blessed” to succeed in life or not. It is important to emphasize that environment is an essential factor in shaping a child’s experiences and opportunities.



Say: As caregivers, we have control over whether we choose to use violence with our children or not. If we want our children to grow up healthy, we should use our power to choose to be non-violent.




Note: Women may say they have no control over their family environment, and it is men who influence the experience in the environment. Encourage women to think about their one-to-one interactions with their children and daughters-in-law, and also how they can negotiate for more decision-making power.

Activities (1 hour 5 minutes)

Activity 1: Healthy Relationships (25 minutes)




Say: I want us as a group to think about what a “healthy relationship” looks like.

 **Ask:** What do we understand by the term “healthy relationships”? (They are relationships based on respect, trust, and honesty. They are relationships that make us feel good and happy and where we have shared power with our partner.)

 **Do:**


- Divide the caregivers into 2 to 4 groups.
- Give the participants five minutes to brainstorm the many characteristics of a healthy relationship between caregiver-daughter, husband-wife, and boyfriend-girlfriend. It doesn't need to be reflective of the women themselves or their current situation.
- Ask the group to share their ideas with the group.

 **Ask:** What does this list tell us about the things that make a healthy and safe relationship between two people?


ADD the following, if not mentioned:

- Talking to each other in kind ways without shouting or calling names
- Women having shared power and decision-making with men on raising children, educating children, and how to spend the family's money
- Listening to each other and showing empathy
- Being able to express feelings with each other
- Respecting each other as people and supporting each other's goals, hopes, and dreams

 **Ask:** Do the things we mentioned reflect our actual experience as caregivers?

 **Say:** Women may be experiencing anger, stress, or even violence from their husbands/boyfriends, or due to other causes like displacement, and so on. They may express their anger or frustration towards their children, in particular adolescent girls, because of girls' position within the family. Violence is a choice; this choice creates an unsafe environment for children in the home and might influence their long-term development.

Activity 2: Steps Towards a Healthy Family Environment (40 minutes)

 **Do:** Read the following story to the caregivers, then split them into two groups and give each group a question to think about. They will report their reflections back to the group.

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
Jihan (14 years old) usually helps her mother Amira, with the chores at home, but recently Jihan has not been doing her chores. One day, Amira comes home and Jihan has not prepared dinner. Amira is very annoyed. She asks Jihan why she hasn't cooked dinner; Jihan tells Amira that she has to finish her school work as she has exams. Amira is annoyed at Jihan and tells her that she is being disrespectful.	Jihan usually helps her mother/mother-in-law, Amira, with the chores at home, but recently Jihan has not been doing her chores. One day, Amira comes home and Jihan has not prepared dinner. Amira is very annoyed. She asks Jihan why she hasn't cooked dinner; Jihan tells Amira that she has many things she is juggling for her husband and her baby. Amira is annoyed at Jihan and tells her that she is being disrespectful.



Say: I want you to take a few minutes to think about what happened. [Repeat the story if necessary.] And then in your groups, answer the following questions:

- **Group 1:** What emotions was Amira experiencing? What emotions was Jihan experiencing? How can they express what they are feeling to each other?



Note: Facilitators should get women to try to think from the perspective of both Amira and Jihan.

- **Group 2:** How can Amira improve her communication with Jihan?



Note: Facilitators should get women to think about practical things they can say and do in these situations.



EXPLAIN²¹: When dealing with a similar situation experienced by Amira and Jihan, we can consider the following:

- **Be empathic:** Put yourself in the other person's shoes and think about how they will feel about what you are telling them. How would you feel if the roles were reversed? Give others time to ask questions and explain themselves.
- **Think about your body language:** Make eye contact and try to sit or stand in a relaxed way. Do not use confrontational language or aggressive body language.
- **Listen:** When we are stressed, we tend to listen poorly. It is important to give the person your full attention.
- **Stay calm and focused:** Communication becomes easier when we are calm. Take some deep breaths and try to maintain an air of calmness. Others are more likely to remain calm if you do.
- **Use "I statements":** If the situation is tense, using "I statements" can help to focus on the effects of the actions of a person, instead of the actions themselves. It may be easier for family members to communicate when an action is not singled out for blame, and young adults and adolescents in particular may be more receptive to hearing how their actions have affected others when the language used is not accusatory. Some examples of "I statements" include:
 - o "I feel disrespected when someone raises their voice at me."
 - o "I feel very sad when I hear rude words because they hurt my feelings."



Do: Ask participants to spend a few minutes doing role-play focused on how Amira could deal with this situation, thinking about "I statements" and body language. Ask a few participants to share their roleplay with the group.

Key Message



Say: While we may not have the power to change everything around us, there are small steps we can take to strengthen communication with our children which includes our daughters and daughters-in-law. Strong communication can lead to healthy relationships which can support a supportive family environment.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)

✓ **Do:** Ask the caregivers to practice the communication techniques we learned today with adolescent girls and daughters-in-law. Specifically ask them to think about using “I statements” and share feedback on whether this technique was helpful or not.

* **NOTE TO FACILITATORS, FOR THE NEXT SESSION**

□ Prepare the stories of Jane and Leia in advance of the session through some basic illustrations.

SESSION 7:

EXPLORING OUR RELATIONSHIPS WITH ADOLESCENT GIRLS

Session Aims:

By the end of the session caregivers will:

1. Explore the concept of empathy and practice techniques to increase empathy towards their daughters.
2. Be aware of and supportive of girls accessing their rights.
3. Continue to build positive relationships with girls.

Materials:

- flip chart paper
- markers
- pens
- A4 paper
- Resource 7.1: Communication Tips
- Resource 7.2: Blame vs Empathy Scenarios
- Resource 7.3: Steps of Empathy
- comments box

Preparation: Print out the following resources:

- Resource 7.1: Communication Tips
- Resource 7.2: Blame vs Empathy Scenarios
- Resource 7.3: Steps of Empathy

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: Did you practice the communication techniques we learned in the last session with adolescent girls and daughters-in-law? Which ones did you use?



Say: Last session we discussed what it means to have a healthy family environment, and one of the things we discussed was the emotional environment. One of the key factors we discussed with regard to creating a healthy family environment was good communication. Today we are going to talk in more detail about how we communicate with adolescent girls and how we can strengthen our relationships with them during this time of transition for girls.

Let's Explore (15 minutes)



Ask: What are some of the challenges or issues caregivers face with adolescent girls they care for?



Say:

- Sometimes the issues you have with girls may be due to things beyond your control and may not be the girls' fault either.
- Living in difficult situations, caregivers face many pressures and stress which may affect the way they treat their children.
- It is important to listen to and communicate with girls as they are growing. This helps build a healthy family environment.
- Relationship-building takes some time, and it is normal to experience difficulties starting conversations that are different from our usual patterns or routine, but we can do so with continuous efforts.

For caregivers of married girls, ADD:

- Married girls may not see their caregivers often and it may be difficult for mothers to know how their daughters are feeling or what they are experiencing.
- For mothers-in-law, they may still be learning about their daughter-in-law and going through adjustments that happen when a new person joins the family.



Ask:

- Who is responsible for developing a healthy relationship with girls? (Both the male and female caregivers and mothers-in-law.)
- Why is it important to build the relationship between you and your daughter/daughter-in-law?

Caregivers of Unmarried Girls:	Caregivers of Married/Divorced Girls:
<ul style="list-style-type: none"> • Especially during times of uncertainty, crisis or displacement, it is important to try as much as possible to continue building relationships with all your children. • This is essential if you want to ensure they are healthy, happy, and safe. • Doing so will help your daughters be more open to discussing their concerns, needs, and worries with you. • Trying to put yourself in their shoes opens space for dialogue and will alert you to any potential risks or issues they may be facing. • During these situations, sometimes caregivers might think it is best for a girl to be married and think this might be the best option for her future. There are other options that can be explored before going down the route of marriage. • Communicating with girls and exploring their wants and needs for the future could help prevent issues they may face if married at a young age. 	<ul style="list-style-type: none"> • Especially during times of uncertainty, crisis or displacement, it is important to try as much as possible to continue building relationships with all your children, including married girls and daughters-in-law. • Your relationship with your married daughters in particular may change as you may not see them as often, but this doesn't mean they don't need you. If anything they need you more as they will be experiencing many new things. • In times of uncertainty and displacement, girls might get married at an even younger age than they would have done, before displacement. • Girls are still growing and they may struggle to take on adult responsibilities and this could lead to tension in their new home. • Even if girls are married, they are still young and should be encouraged and supported to access the same opportunities as their unmarried counterparts. Caregivers can have an important role in championing this for married girls. • Communicating with girls and exploring their wants and needs could help prevent issues they may face during the marriage.

Activities (1 hour 5 minutes)

Activity 1: Communicating with Girls (25 minutes)

- ✓ **Do:** Read the following scenarios to the group. After each scenario, ask volunteers to come forward to act out the scenario to show how they would respond in each situation.


- * **Note:** If caregivers suggest harmful ways of dealing with the situation, for example, punishing the girl by hitting, yelling, etc., ask them what the risks or benefits are to responding in this way. You can also ask other caregivers if they have alternative suggestions about how to handle the situation.


Requires CONTEXTUALIZATION: Not all scenarios are relevant to all contexts. Please choose the ones that are most relevant to yours. You do not need to do all scenarios.

Caregivers of Unmarried Girls:

Scenario 1:


Betty is going through puberty and is experiencing many changes. Betty has many questions about puberty. This is not normally something that is discussed openly, and Alice (her mother) doesn't have all the answers.


 **Ask:** What would you advise Alice to do?

 **Note:** It is important to mention that it is Betty's right to have information about her body. Alice can seek help from the safe space or health provider if she is unsure how to explain to Betty.

Scenario 2:

Asha has been feeling very sad lately and Dana, her female caregiver, is worried. One day, Dana overheard a conversation between Asha and a friend about a boy that had upset Asha. Dana thinks Asha may be having a relationship and facing some problems.


 **Ask:** How would you handle this situation?


 **Note:** Try to encourage caregivers to have a conversation with girls that is non-judgmental so that girls don't feel they have to keep secrets from their mother and that if the girl is experiencing any risks, she can turn to her mother without fear of judgment or rejection. This applies to the current scenario, but also more broadly in case it is not appropriate to talk about boyfriends.

Caregivers of Married/Divorced Girls:

Scenario 1:

Betty is recently married and wants to continue going to school. She wants information about family planning so she can delay getting pregnant. She asks Alice - her mother/in-law. Alice doesn't know how to respond to Betty.


 **Ask:** What would you advise Alice to do?

 **Note:** It is important to mention that it is Betty's right to have information about her body. Alice can seek help from the safe space or health provider if she is unsure how to support Betty's request for information.

Scenario 2:

Asha has been feeling very sad, and Dana, her mother/in-law, overheard an argument between Asha and her husband, and it was very bad. Dana is concerned that the relationship is not going well.


 **Ask:** How should Asha handle this situation?

 **Note:** Try to encourage caregivers to have a conversation with the girl to see how she is feeling. The mother/in-law should try not to take sides and should try to talk to girls in a way that is non-judgmental. This will help girls speak to their mother/in-law about what is happening from the girl's perspective. Often, we are quick to blame the woman or girl in these situations and as women, we should show solidarity to other women and girls, knowing how difficult some of these situations can be for us

Scenario 3:


Randa is growing up and begins to challenge and question her caregivers much more than she did before. One day, her mother asks her to fetch water. Instead of doing what her mother says, she asks her mother why she never asks her brothers to fetch the water. Randa says she has a lot of homework and she wants her brothers to take more responsibility around the house.


 **Ask:** How would you handle this situation?


 **Note:** It's important to mention that Randa has the right to go to school and also to have free time and that it is beneficial for everyone if chores are spread out fairly and equally so they don't fall to one person.

Scenario 3:

Randa got married recently and is struggling with all the responsibilities that have been given to her. She doesn't talk to anyone in the house, and seems sad all the time. One day her mother/in-law asked her why she is behaving badly and Randa got angry and told her mother/in-law to leave her alone.

 **Ask:** What would you do if you were Randa's mother/in-law?

 **Note:** Her mother/in-law can try to talk to Randa about what is bothering her and see if they can find a way to make things easier for her. It is better to open the conversation in a way that is not blaming.


 **Say:** Here are some additional tips that you can use to improve communication with your daughters.


 **Do:** Summarize the following points using Resource 7.1:


Communication Tips


- Encourage girls to express their opinions.
- Explore ways to help girls express themselves, especially girls who may have a disability and are unable to communicate their opinions verbally.
- Try to put yourselves in their shoes and try to understand what they are feeling and what is on their mind. For mothers-in-law, ask them to remember what it was like for them when they were first married.
- Give them your time and attention, even if your own life is very busy.
- Don't judge girls harshly, as this can close down communication and opportunities to become closer to the girl.
- Encourage girls and allow them opportunities to be helpful. Use of praise makes everyone, both the giver and the receiver, feel good!
- Encourage girls to form solutions on their own, by asking questions and encouraging them to think through the possible positive and negative consequences of any situation.
- If you're concerned about girls going to certain places and doing certain things, instead of saying "no," try to provide reasons why you think it's not a good idea or say what it is you're worried about so that you can come to an understanding.

Activity 2: Effective Communication Takes Time (40 minutes)

 **Say:** We are going to talk about how to respect and understand others' thoughts, feelings, and views. Some people use the word "empathy" to describe this feeling of respect and care.

 **Note:** It is not necessary to use the word empathy, as long as its main concept and rationale is communicated. You could choose, for example, to use the phrase "respect for or understanding of others' thoughts, views, and feelings."

 **Ask:** Does anyone know what we mean by “empathy”?







 **Explain:** When I think of “empathy,” I think of working to understand the situation from the perspective of another, seeing with the eyes of another, hearing with the ears of another, and feeling with the heart of another. Empathy is the ability of one person to walk in the shoes of another person and feel what that is like.

 **Say:** Empathy, simply, is the ability to understand and act with care towards our daughters.

Blame vs. Empathy Scenario:

Use Resource 7.2 to help you explain the following scenario

Requires **CONTEXTUALIZATION**

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p> Say: I want to read you a story about Jane and Leila:</p> <p>Jane is 11 years old and lately has been yelling at her siblings and refuses to talk to her mother, Leila. One day after school, she comes home and throws her things on the floor. Her mother asks her what's wrong. Jane tells her mother that she doesn't want to go to school anymore! She says that some of the girls in class have begun to tease her now that she started menstruating.</p> <p> Ask: How do you think Jane is feeling?</p>	<p> Say: I want to read you a story about Jane and Leila:</p> <p>Jane recently got married and is visiting her mother, Leila, and her siblings. It is the first time she has been home since getting married. When Leila asks Jane how married life is going, Jane responds to tell Leila that it is very difficult and her husband shouts at her.</p> <p> Ask: How do you think Jane is feeling?</p>
<p> Say: Now I am going to read some of the potential responses from Leila. After each response, I would like you to move to the front of the room if you think that Leila was blaming Jane, and to the back of the room if you think Leila was being understanding/empathetic to Jane's situation and her feelings. You can stand in the middle if you're unsure.</p> <p> Note: If participants are struggling with mobility issues, you can change the activity so everyone raises their hands, or shouts out.</p>	


1. Leila said, "You must have done something to provoke these girls. I can't understand why anyone would do this to you."

(Pause for five seconds.)

 **Say:** Leila's blaming her.

2. Leila said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. School is very important, so what can we do to try to solve this problem?"

(Pause for five seconds.)

 **Say:** Leila's showing empathy.


1. Leila said, "You must have done something to provoke your husband or failed him as a wife somehow. I can't understand why he would shout at you."

(Pause for five seconds.)

 **Say:** Leila's blaming her.

2. Leila said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. What can we do to try to solve this problem?"

(Pause for five seconds.)

 **Say:** Leila's showing empathy.

 **Ask:**

- Which of the responses given by Leila did you prefer? Which responses would you like to hear if you were Jane?
- Why is empathy necessary in order to be a caregiver/mother-in-law of an adolescent girl?

ADD the following points if they are missing from the responses:

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<ul style="list-style-type: none">• Being empathetic helps ensure your daughters get their needs met and they feel safe.• Caregivers can have empathy for each other and themselves, and this teaches children to care for themselves and others.• When we respond empathetically to our daughters, we are supporting their healthy social and emotional development.• Being empathetic allows our daughters to openly share and discuss their problems and the risks they are facing, without the fear of being blamed.	<ul style="list-style-type: none">• Being empathetic helps ensure your daughters/in-law get their needs met and they feel safe.• Caregivers can have empathy for each other and themselves, and this teaches the family, including daughters-in-law to care for themselves and others.• When we respond empathetically to our daughters/in-laws, we are communicating that they are important and they matter, they are part of the family no matter if they live with us or are living with in-laws.• Being empathetic allows our daughters/in-law to openly share and discuss their problems and the risks they are facing, without the fear of being blamed.• Girls need to have someone they can trust to talk to about the challenges they may experience as a married girl.



Say: I'm going to share with you a simple technique to help you improve your empathy, to understand your daughters' feelings better, and be able to be responsive to them. This technique has four Steps: **Show Resource 7.3: Steps of Empathy.**

- **Step 1–Identify the Feeling:** Try to identify or label what someone is feeling. For example, “Mariam, you look like you are worried right now—are you?”
- **Step 2–Determine the Reason:** Understand why they are feeling that way. “Would you like to tell me why you are worried?” Mariam can tell you, or she may choose not to right now. You can say to Mariam, “Feel free to come and talk to me when you are ready.”
- **Step 3–Honor the Feeling:** Mariam might have had a disagreement with a friend or been rejected by her peers at school. Don't dismiss that reason. If you make your daughter think that her feelings are not important, she might not talk to you anymore about the things bothering her. “I understand that this makes you feel sad/upset/tired.”
- **Step 4–Take Action:** Deal with those feelings with your daughter. You can brainstorm with her what, if anything, needs to be done. Sometimes the situation may require the caregiver and the girl to come up with possible actions that may help remedy the situation. Sometimes the situation doesn't need an action other than just comforting your daughter/in-law or sharing in her joy. “Let's sit down together and discuss how to address this problem.”



Say: Now we are going to practice the four steps of empathetic communication.



Do:

- Ask caregivers, who would like to demonstrate the Steps of Empathetic Communication, using the example of Jane and Leila.
- Refer caregivers to the flipchart with Jane and Leila's story on it, so they can recall the specifics.
- Ask one pair to demonstrate for the rest of the group. If there is time, you can have another group also demonstrate.



Ask:

- Were these new skills for you, or have you used these before?
- Do you feel this is something you can practically use in your interactions with your daughters? If not, what alternatives do you suggest?



Note: Let them know that this may not come to them naturally, since it may be new and we may be used to different ways of dealing with these situations. However, since they have a vision to support girls and help them to achieve their goals, the use of this technique will lead them towards their vision.

Key Message



Say: Being empathetic helps us to strengthen our relationships with our daughters/in-laws, sons and other family members. It is a great way to create a happy and healthy environment for the entire family.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)

✓ **Do:** Explain to caregivers this week's home assignment is to practice the four Steps of empathetic communication with their daughters/in-law. They should provide feedback as to which ones they used and whether or not they were effective in the next session.

* **NOTE TO FACILITATORS, FOR THE NEXT SESSION**

- The next session may lead to disclosures of violence experienced. Be prepared with information about available services that can be shared with women.
- Read Resource 8.1:** Common Resistance Responses ahead of the session.

SESSION 8:

POWER IN THE HOME

Session Aims:

By the end of the session, female caregivers will:

1. Explore the idea of power in the home.
2. Learn strategies to make decisions that are important in their lives.

Materials:

- art box
- comments box

Preparation:

- Prepare a flip chart for the “Who Decides What?” Activity
- Read Resource 8.1: Common Resistance Responses ahead of the session

Facilitator Note:

- This session may lead to disclosures of GBV the women have experienced, or violence committed against adolescent girls. Facilitators should be prepared in advance with how they will deal with this. For violence disclosed, you can refer women to a caseworker. For violence committed, you can check in with your supervisor on the best interest of the child, in case anything arises that may need to be followed up on, and can read through the guidance provided in the introduction of the Girl Shine Caregivers Curriculum.
- Be prepared with up-to-date contact information on GBV services for women and girls. (You should have this from your service mapping.)
- Be sure to remind caregivers of the “Group Agreements,” and check to see whether they want to have additional group agreements for this session.

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: Did you practice the four steps of empathetic communication? How did it go?



Say: Today we are going to talk about power. In particular, we'll talk about power in the home and how this relates to our relationships with men and children (especially adolescent girls) and daughters-in-law.

Let's Explore (25 minutes)



Ask: What do you think we mean by power?



Explain: Power is the ability to control and access resources, opportunities, and decision-making processes. We all have some kind of power in the community, but we all choose whether to use this power for good or for bad.

Forms of power are:

- **“Power with”**—“Power with” is the strength felt when two or more people join together to do something, they may not have done alone. “Power with” includes supporting those in need, those trying to change and those speaking out. It means joining power with others for positive change, creating a sense of support in the community. Power with also includes asking for help and holding men who use violence accountable.
- **“Power over”**—“Power over” is the influence that one person or group uses to control another person or group. This control might be used directly in the form of violence, such as physical violence, early marriage or intimidation. It can also be used indirectly, such as through the norms and practices that position men as superior to women. Using ones “power over” another is an injustice. Respecting everyone’s “power within” and balancing “power with” others are positive alternatives.
- **“Power within”**—This is our own power that comes from us recognizing our uniqueness and the contribution we can make when we are free to reach our potential.



Ask:

- Who do you think has power in our community?
- Can you think of times when you felt powerful or not powerful? Sharing is voluntary.
- Who do you think has power inside the home? Is it women, girls, boys, or men? Or a combination?



Explain: As a community, we generally tend to assign women and girls a lower status than men and boys—and this results in women and girls being treated differently than men and boys, and having different day-to-day lives than men and boys.



Ask:

- How does power influence the choices that we have as women, or that men, boys, or girls have?
- Are there some women and girls who have more power than other women and girls in our community? Why might this happen?



Explain:

- Society generally tends to assign women and girls to a lower status than men and boys, but within that, women and girls may experience further barriers or challenges due to their marital status, citizenship status, economic status, ability, etc., but they deserve to be treated equally and with dignity.
- It is also necessary to share power to ensure that everyone is able to access the rights they are entitled to under international and many national laws. When power is used over others, this can also be a violation of their rights.



In the event that exploitation or abuse is disclosed as being perpetrated by an NGO/UN/ humanitarian agency, this should be documented separately and reported to your supervisor immediately. You could approach the individual(s) after the session to let them know that you need to share this information with your supervisor, but will consult with them before you take any steps.



Say: I am going to read you some scenarios and I want you to tell me if the power described is being used positively or negatively.

Requires CONTEXTUALIZATION:

- **Scenario 1:** A woman needs to feed her children but does not have enough money. A merchant says that he will forgive her credit at the store if she gives him a sexual favor in the backroom. (Negative)
- **Scenario 2:** A young man stands up in the bus and allows an elderly woman to take his seat. (Positive)
- **Scenario 3:** Men march with women to demand an end to domestic violence. (Positive)
- **Scenario 4:** After a flood, families from the dominant ethnic group help rebuild the school that is primarily used by children from the minority group. (Positive)

Activities (1 hour 15 minutes)

Activity 1: Who Decides What?²² (25 minutes)



Say: The power we have or do not have influences the decisions we are able to make or not make. To help us understand this further, we are going to start by reviewing what kind of decisions we make in our home.



Do:

- Place the flipchart in the middle of the group.
- Explain that you are going to go through areas of decision-making we might encounter in our life.
- For each area you mention, participants should discuss and agree on who makes decisions about this issue in the majority of cases (there will be always be exceptions, but you have to come to a decision quickly on each point and not spend too much time discussing specific cases).
- You will mark on the flipchart who makes the decision, whether it is men, women, or men and women together.

Requires **CONTEXTUALIZATION**,



Ask:

This is a generic list, including a range of different areas of decision, but it can be adapted to the context.

- Who decides the number of children to have in a family?



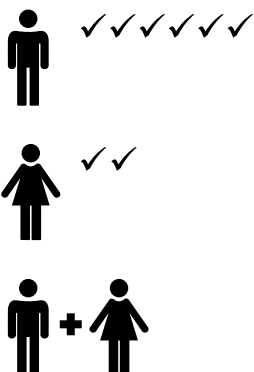
Note: Women may say that it is men who decide how many children to have in a family. Remind women that it is their body, and it is their right to decide whether to get pregnant or not. It is their right to have control over their own bodies. There are options to delay or prevent pregnancy, such as contraceptive methods.

- Who decides how to spend family income?
- Who makes decisions about women’s health care, such as attending the health center during pregnancy, delivering in a health facility, going to the clinic when sick?
- Who decides what to cook for family meals?
- Who decides when children should get married and to whom?

If group includes mothers-in-law, ASK:

- Who decides how daughters-in-law should spend money?
- Who decides if daughters-in-law can attend health appointments?
- Who decides what daughters-in-law can do with their free time?

Example 1: Who Decides? Flipchart



Note: Due to the perception of power and its dynamics in the household, it is likely that caregivers might perceive themselves as the decision makers for their daughters and daughters-in-law. Be prepared to probe and ask them to explain why they think so. Say: "Power is about being able to have access to and control over decision-making. As caregivers, it is important to use the power we have in a positive way in supporting our daughters and daughters-in-law."

Say: Through this activity, we have seen that there is a difference in the types of decisions that men make alone without consulting women in the house or community, and that women make alone without consulting men in the house or the community.

Ask: What do you think are the barriers or obstacles that women face when making decisions?

Note: If women are struggling to identify barriers, you can **ADD** some of the points below that are relevant to your group to facilitate the discussion:

- Low level of education
- Illiteracy
- Lack of experience in negotiations and decision-making
- Heavy workload, lack of time
- Feeling that it is impossible to change things or make a difference (hopelessness)
- Feeling that it is not a woman's role or responsibility
- Lack of freedom to go outside of the house
- Fear of the consequences of a wrong decision
- Men's negative attitudes (father, brother, husband, etc.)
- Fear of punishment for speaking out (by husband, father, mother-in-law, etc.)

Say: We have seen that there are many barriers that can prevent women from making decisions that affect them and their family. Some of these barriers are more difficult to remove and require both men and women in the community to make changes. However, there are barriers that we can try to remove ourselves, using the power that we have.

Activity 2: Mary's Story (25 minutes)




Do: Read the following story to the group:

Caregivers of Unmarried Girls:	Caregivers of Married/Divorced Girls:
<p>Mary's father says that because she is now 18 years old, he has arranged her marriage to a rich man. Mary's mother tries to ask questions about the man, but Mary's father simply says the marriage is arranged and it will be a good one. Mary feels afraid because he is much older than she is. She asks her mother to speak to her father and convince him to stop the marriage, but her mother tells her that it is up to her father and she cannot do anything to change his mind.</p>	<p>Mary is 15 and recently got married/in a union. She is now living in the home of her in-laws. Mary is excited about starting her new life with her new family but she is feeling overwhelmed with all the new responsibilities and expectations. Her sister in-law has been rude to Mary and this has made it hard for her to feel comfortable. When she shared her experience with her mother-in-law, she told Mary that Mary needs to learn how to deal with it, all women have been in the same situation.</p>

 **Ask:**

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<ul style="list-style-type: none">• Who has power in this scenario?• What kind of power does the father have? What kind of power does the mother have?• Does Mary have any power?	<ul style="list-style-type: none">• Who has power in this scenario?• What kind of power does the sister in-law have?• What kind of power does the mother-in-law have?• Does Mary have any power?

 **Do:** Break participants into small groups and ask them to discuss the following and to prepare a role play:

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p> Say:</p> <ul style="list-style-type: none">• Imagine you are a friend of Mary's mother and she tells you about the situation. She is upset that her husband won't even talk with her about who will be marrying her daughter.• Prepare a role play showing how you would support Mary's mother	<p> Say:</p> <ul style="list-style-type: none">• Imagine you are the friend of Mary's mother-in-law and the mother-in-law tells you about the issues with Mary at home. She tells you Mary is not adapting well and not managing her chores well.• Prepare a role play showing what you would say to Mary's mother-in-law. <p> Note: We should not expect people to take action where they are not comfortable or when it's not appropriate, but they can think through some of the pros and cons in case they do decide to.</p>

 **Do:** After 10 minutes, ask for volunteers to share their role-plays with the larger group.

 **Ask:** probing questions:

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<ul style="list-style-type: none">• If you were Mary's mother, what would you want to do so that your daughter was better supported?	<ul style="list-style-type: none">• What would be the negative impact of getting involved?• What could be the positive impact of getting involved?



Explain: Those with more power in the home and community are usually the ones who make the rules for how things run and what people do. In order for things to become more equal, we have to re-think the ideas that we have about women and men and develop new kinds of power that is shared—power with rather than power over. We also need to consider the power we have within ourselves and how together as a group of women we can support each other to unlock our power within to benefit ourselves and each other.

Activity 3: Decision-Making Power (25 minutes)



Ask:

- What would happen if women asked their husbands to share tasks or said they want to be involved in making more decisions in the household?
- Does anyone have ideas or experience on how to negotiate for more decision-making power with men?



Say: There are certain steps you can take to negotiate for more decision-making power:

1. Check whether the person that currently holds the decision-making power is ready to talk.



Ask: How do you know if someone is ready to talk?

(For example: Think about their body language—do they look relaxed, or do they look distracted or busy with other tasks?)

2. Be prepared! If they are ready to talk, make sure you have prepared what you want to discuss and what you are asking for.



Ask: How can you prepare what you want to say?

(For example: Make sure you are explaining what you want to happen, and the reason why. If you are presenting a problem, try to also think about your preferred solution to the problem.)

3. If the result is not what you wanted, think about a better time to have the discussion, or think about who else you can turn to for support.
4. If this still doesn't work, think about other options/solutions. Is there anyone else who can negotiate on your behalf?



Say: Sometimes it is hard to negotiate with those who have more power, and we can feel tired and hopeless. If safe to do so and if you feel you have the energy, you can keep trying. Sometimes it takes many attempts before we are able to convince someone of something.



Ask:

- Do you think this is something you can realistically try? What do you think will be the result?
- Do you think women can share decision making more equally among other women and girls in the household, e.g., with daughters-in-law?
- Do you think this is something you can realistically try? What do you think will be the outcome?

Key Message



Say: Power can be positive or negative. While certain people hold more power than others, everyone has some kind of power. We can use our power to influence others who have more power than we do, but we can also use our power by sharing it with others who do not hold as much power as we do.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Think about and practice talking with men in the household on the decisions men make and the ones women make, and see if you both can come to an agreement on involving women in more decisions. If you don't have a male partner to talk to, think about how you could share your decision-making power with the girls in your family.



Note: They should only practice with men who are participating in Girl Shine.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

Print out the resources outlined in the preparation section

SESSION 9:

PARENTING FOR EQUALITY

Session Aims:

By the end of the session caregivers will:

1. Explore further the idea of gender roles and how they relate to adolescent girls.
2. Learn about how they can contribute to upholding the rights of girls.

Materials:

- flip chart paper
- markers
- pens
- A4 paper
- tape/string
- Resource 9.1: Activity Clock
- Resource 9.2: Children's Rights
- small box/bag for rights cut-outs
- comments box

Preparation:

- Print out resources listed in materials section

Facilitator Note: Women might say that they have no control over the rights that their children have, because their own rights are violated. Get caregivers to go through the list and identify where they can work on strengthening access to some of these rights for girls. Emphasize that even if they cannot address all of the rights, they do have some power to address some things for their daughters. You can also remind the women that they are welcome to seek support services for themselves and attend activities at the WGSS where they can discuss issues related to their own rights.

Duration: 2 hours

Welcome & Review (10 minutes)



Ask:

- Did you think about the ways in which women can negotiate for more decision-making power? What were some of your ideas?
- Did you practice with men in your household? Or talk to girls about how to share power with them?



Say: Today we are going to talk about parenting techniques and what these look like in our community.

Let's Explore (15 minutes)



Ask:

- In your home, what are the rules or expectations for how children are supposed to behave? (Ask volunteers to share some examples.)
- Are there differences in the rules and expectations for girls and boys? (Ask volunteers to share some examples.)



Note: If caregivers only have female children, ask them how they treat them differently based on age.

- For caregivers of married girl group: Are there differences in the rules and expectations for daughters and daughters-in-law? (Ask volunteers to share some examples.)



Ask: Why do we have different rules or expectations for girls and boys, especially during adolescence?



Explain:

- Adolescence is a critical period in which the way we treat girls and boys significantly changes from how we treated them when they were younger children.
- When they reach the age of puberty, many things change for our children, especially for girls. Caregivers and society sometimes have different expectations of girls than of boys. They might expect girls to leave school, get married, and focus on having a family.
- Because of these expectations, girls are not given the same opportunities as boys. Long before they reach this age, we start to prepare girls and boys for their “gender roles.” For example, girls may be given more household tasks than boys, or boys are expected to go out to work. The rules and expectations we place on girls and boys are, in many cases, based on what we previously discussed—the gender box. This can influence the way we treat girls, and the opportunities, expectations, and rules we place on girls and boys.

Activities (1 hour 25 minutes)

Activity 1: Equal Opportunities for Girls and Boys (20 minutes)



Ask: What do we mean when we talk about “our rights”?



Explain: Our rights are what every girl, woman, boy, and man deserves, no matter who they are or where they live, so that all can live in a world that is fair and just. We are protected by many of these rights through laws or agreements that our own countries or the countries hosting us have signed on to.



Ask: Can anyone think of any rights that we have as women?

Possible answers to **ADD— Requires CONTEXTUALIZATION:**

- Right to be treated equally to men and without discrimination and to live free from violence
- Right to work
- Right to education
- Right to live with freedom and safety
- Right to say and think what we want



Ask: Does anyone know what the rights of girls and boys are? **WRITE DOWN** their answers on a flip chart.



Explain: Girls and boys, like us, are protected by a number of rights; it is our responsibility to make sure their rights are protected. We are going to hear about some of the rights girls and boys have.



Do: Place the cut-out rights in a small bag/box. Ask each caregiver to pull one out of the box/bag and ask her if she wants to read it out or if she would like to ask the facilitator to read it out.

Once finished, Ask:

- What do we think about the rights I mentioned?
- Do we think that we give these rights equally to girls and boys?
- What can we do to ensure girls also have access to these rights?



Say:

- It is important to remember that these rights apply to adolescent girls, including married girls, divorced girls and girls with disabilities as much as they apply to boys. When making decisions on a girl's role in the family or determining her future, it is important that we consider the rights that she has. It is the responsibility of caregivers to ensure girls are accessing their rights.
- We also have a role to play in making sure we are not stopping someone from securing their rights. We can start by supporting each other and women we know, because when women support other women incredible things can happen in the world and supporting another woman's success, for example, does not take away from your own personal successes and achievements. Some of the things we can do are:
 - » Respecting the ideas of other women even if their ideas are different from mine.
 - » Respect the privacy of my friends.
 - » Treat other women and girls equally, even if they are different from me.
 - » Welcome those women and girls who are from a different culture or background.
 - » Share information with women and girls on where they can learn about their rights (if safe to do so).

Activity 2: Girls' and Boys' Experience of the Family Environment (25 minutes)



Do: Place tape or string down the length of the room.



Say: I will read a number of statements, and you will decide whether you agree or disagree with them.



Say: Those who agree will stand at one end of the line and those who disagree will stand on the other end of the line. Those who are not sure can stand somewhere along the line, according to how much they agree or disagree with statement.



Adaptation: If participants have difficulty walking, you can adapt the activity to have them raise two hands for "agree," one for "disagree" and no hands for "not sure" or it can take place as a discussion with everyone sharing their opinion verbally.



Note: For caregivers who demonstrate negative attitudes and beliefs about the roles of girls, women, boys, and men, do not engage in a one to one confrontation with the participants on their opinion towards a specific statement, but use the opportunity to discuss this issue in the larger group.

Caregivers of Unmarried Girls	Caregivers of Married Girls
<ul style="list-style-type: none"> • Girls, not boys, are responsible for taking care of their younger siblings. • Girls and boys should equally support their family with household responsibilities. • Girls are responsible for the honor of the family. • It is more important for boys to go to school than girls when families have limited money for school fees. • Girls should be given the same amount of free time as boys to play and study. • Boys can date and have girlfriends, but girls aren't allowed to. 	<ul style="list-style-type: none"> • Daughters-in-law should do as their husband and in-laws tell them. • Daughters-in-law and their husbands should equally support their family with household responsibilities. • Girls should have an equal say as their husbands when it comes to family planning and using contraception. • Girls can't/shouldn't be budget holders at home as the husband can manage this better. • A daughter-in-law's role is to stay in the home.



Ask:

- What difference did you notice about how we perceive or treat girls/daughters-in-law and boys?
- How do you think this impacts and influences girls/daughters-in-law and boys?



Explain:

- Girls/daughters-in-law usually have fewer opportunities and are expected to take on more responsibilities in the home (leaving them less time for studying or other opportunities, for example).
- Because girls are expected to be nurturing and not demanding, they are sometimes not allowed to express what is important to them.
- Sometimes caregivers might express their frustrations more towards girls than boys, because girls are expected to be forgiving and accepting.
- They may also expect girls to take on more responsibilities and help more within the home, due to the belief that this is the role of a girl; this may particularly be the case for daughters-in-law.



Explain: The expectations we put on girls can mean that we might limit their potential and hinder them from developing their skills and competencies.

Activity 3: Gender Roles in My Home²³ (40 minutes)



Do: Break into two groups and give each group an Activity Clock. Assign them the following task:

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p>Group 1: What do girls do during the different hours of the day listed on the clock?</p> <p>Group 2: What do boys do during the different hours of the day listed on the clock?</p> <p> Note: They may not agree exactly on all points, but ask them to decide on the most common things.</p>	<p>Group 1: What do daughters-in-law do during the different hours of the day listed on the clock?</p> <p>Group 2: What do their husbands do during the different hours of the day listed on the clock?</p> <p> Note: They may not agree exactly on all points, but ask them to decide on the most common things.</p>

23 Adapted from IRC, Engaging Men through Accountable Practice (EMAP) - <http://gbvresponders.org/prevention/emap-tools-resources/>

✓ **Do:** After 10 minutes, bring the groups back together and ask them to share their timelines.

? **Ask:**

- What do you notice about these timelines?
- Who has the longer list of tasks to do each day? Why?
- How are tasks assigned to girls and boys or daughters-in-law and their husbands?
- Are they consulted? What choice do they have in accepting these tasks or not?

* **Note:** Clarify any differences between girls and boys, daughters-in-law, and their husbands.

- Should girls be consulted on the tasks that are assigned to them?

... **Explain:**

- Girls and women often do not have a choice about the activities and tasks that they are expected to do each day, and they tend to take on more tasks than boys and men.
- This means that girls have less time than boys to focus on homework and develop life skills, and that they have less time to simply be children. Daughters-in-law have less time to engage in training or skills building, and have less time to themselves to do the things they like.
- Developing life skills helps girls to make healthy decisions, solve problems, take care of themselves, and protect themselves from harm. Without these life skills, girls will find it more difficult to deal with the pressure that comes with adulthood and marriage and may not have the capabilities to take care of themselves or those around them.
- Girls may also be expected to take on tasks that are beyond their physical development capacity (e.g., girls who are young and expected to carry frequent and heavy loads).
- Boys, brothers, men, and women can be a great support to girls in task-sharing and this can strengthen family bonds and also help boys/men learn more skills, too.

? **Ask:**

- How can our sons benefit from taking on more responsibility in the home?
ADD if not mentioned: They will learn essential skills for taking care of themselves and their family. They will also learn to support their sisters and wives and treat them as equals. They will learn to think about the well-being of others, which will help them to build healthy and happy relationships as adults.
- How can we make sure that household responsibilities are distributed more equally?
- What challenges do we think we will face?

* **Note:** Caregivers may say that men and boys might be resistant to this idea. Get them to think of ways they can address this in their family.

✓ **Do:** Ask caregivers, in pairs, to discuss how they can introduce the idea of shared decision-making into the family.

Introducing Shared Decision Making into the Family



Explain: Here are some tips on how to introduce shared decision making into the family regarding household responsibilities:

- **Step 1:** Discuss your suggestions with male decision-makers in the house if safe to do so.



Note: Ask caregivers to recall the communication techniques discussed during the session on a healthy family environment.

- **Step 2:** Ask girls/daughters-in-law what tasks they would like more support with. Make sure you listen to their opinions and ideas and address the ones that are realistic.
- **Step 3:** Ask your sons to think about the future they wish for their sisters/wives. Then explain to your sons that this means they need equal time for school, homework, or other interests and activities. For married girls this may involve spending more time with family and friends who can be a great support during this new transition for girls.



Note: Remind caregivers to use “I statements” and other communication techniques that can help them with this process.

- **Step 4:** Give girls encouragement and praise when they are supporting each other and you to make them feel valued.
- **Step 5:** Check in with girls and boys and/or sons and daughters-in-law regularly to see how the new distribution of chores is working.



Do: Split women into three groups. Each group will practice a role-play based on the scenarios below.



Note: Encourage them to incorporate the suggestions and tips discussed.

- **Scenario 1:** You are telling your husband that you would like your sons to take on more responsibility in the house.
- **Scenario 2:** You are asking your daughter/daughter-in-law what kind of support she needs so she can have more time to do the things that are important to her.
- **Scenario 3:** You are talking to your son (or male family member) about taking on more responsibility in the house and supporting your daughter/daughter-in-law.



Ask: How did you find this activity? Do you think you can practice some of these things at home with your family?

Key Message




Say: Rights are things every girl, boy, woman and man should have or be able to do and everyone has the same rights. As caregivers, we have a responsibility to support girls and boys to secure their rights and make sure we are not stopping other people from securing their rights. One way we can start is by supporting each other and girls that we care for.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)

 **Say:** Try to introduce shared decision making into the family, including with boys with regard to household responsibilities using the steps discussed. You can also talk to men in your family who are participating in Girl Shine. If it is not possible (or safe) to do this, or if you are in a single parent household, talk to girls to raise their awareness about some of the rights we discussed today.

NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Know the legal framework for marriage in the context.
- Prepare illustrations for the story of Zeina in advance.
- There is a video to be shared during the session, please organize for a laptop or projector to show the video if possible and check it works (may require internet connection) if possible.

SESSION 10:

MARRIAGE IN OUR COMMUNITY

(Caregivers of Unmarried Girls)

Session Aims:

By the end of the session caregivers will:

1. Understand the root causes of early marriage.
2. Understand the consequences of early marriage.
3. Identify alternative coping mechanisms to early marriage.

Materials:

- art box
- comments box
- flip chart paper
- markers
- A4 paper
- pens
- tape/string
- projector
- laptop and speakers if showing the Girl Effect video: <https://www.youtube.com/watch?v=1e8xgF0JtVg>
- Resource 10.1: The Story of Zeina

Preparation:

- Make sure the video is prepared in advance and ready to show to participants. If you don't have the resources for this, you can skip this part of the session. There is an option to change language on the subtitles, so make sure this is practiced ahead of the session.
- Print Resource 10.1 for the story of Zeina to help guide the story.


Facilitator Note:


- In countries where it is illegal to marry under the age of 18, some caregivers may hide marriages of girls. Conversely, caregivers may report marriages to the authorities if the girl herself makes the decision to marry; this may happen in contexts where girls are in a "love" marriage that the caregivers disapprove of. Both scenarios can be problematic if it means that girls are not receiving the support they need. It is important as a facilitator to focus on highlighting the risks to girls of marrying young and how caregivers can continue to support girls if they are married.
- If girls or caregivers want to report a case of early marriage to the facilitator in settings where it is illegal, you can refer the girl or her female caregiver to a caseworker as the first step. Even in contexts where marriage is legal under 18, some caregivers may be reluctant to admit their daughters are married under 18 because they're often afraid of the reaction of society, NGOs, and humanitarian workers. It's therefore important to not pass judgments as this might place barriers between girls' access to services.

Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.

Timing: Before the corresponding Male Caregivers' session

Welcome & Review (10 minutes)

 **Ask:** Were you able to introduce shared decision making into the family with regard to household responsibilities using the steps discussed. How did it go? If not, did you talk to girls to raise their awareness about some of the rights we discussed?


 **Say:** Today we are going to discuss marriage and what it means and looks like in our community.

Let's Explore (20 minutes)

 **Ask:** What does marriage look like in our community?

Probing questions to aid discussion:


- At what age do women get married? What about men?

 **Note:** In some contexts this question may be sensitive due to legal frameworks, be sensitive how it is asked in contexts where this is the case.

- What is the best age for women and men to marry?
- Who makes decisions about who to marry and when to marry? Is it different for women and men?
- Is the situation the same now as it was before displacement? How is it different or the same?
- What does marriage look like for women and girls with disabilities?
- How are women who are divorced treated in the community?


 **Say:**

- Marriage is something that many people choose to do. It is when two people decide they want to build a partnership together, and sometimes this includes having children.
- Marriage can take many forms. Sometimes two people can fall in love and decide to get married.
- Sometimes, it may involve other family members who help women or men to find a potential wife or husband. The important thing to remember is who has power to choose to say yes and to choose whom to marry.

 **Ask:** Who can think of examples of when power may not be equal?






ADD to examples if not mentioned by the group and appropriate to context:

- When the parents force or influence a girl to get married to someone.
- When the girl is a child (under 18) and the man is an adult.
- When the age difference between the woman and the man is very large.
- When the power of the community and society makes girls and parents believe that girls should be married at a younger age.







 **Say:** Today we will discuss the wonderful things that come with marriage and also the unhealthy aspects that can come if the process of marriage is not equal for girls and women.

Activities (1 hour and 25 minutes)

Activity 1: The Concept of Marriage (20 minutes)

-  **Say:** Marriage is something that is part of our culture and community. We have many ways of valuing and marking marriage in our community.
-  **Note:** This doesn't necessarily mean a wedding ceremony, as in many situations, marriage is marked without a ceremony.
-  **Do:** Split participants into 2–3 groups and ask them to briefly discuss the positive aspects of marriage. *Once finished, ask them to come and share back their discussion with the wider group.*
-  **Ask:** What are some of the challenges that come with marriage?
-  **Explain:** There are positive aspects of marriage and there are also challenges. Sometimes however, the challenges can be increased when the power in the marriage is not equal like in the examples we discussed. So, we are going to dig deeper into some of these examples, and will discuss early marriage.

Activity 2: Why Early Marriage Happens (35 minutes)

-  **Ask:** Does anyone know what we mean by the terms “early marriage,” “child marriage” or “forced marriage”? Have you heard them before?
-  **Say:**
- “Early marriage” and “child marriage” are terms that are used to describe marriage that happens to girls and boys when they are under the age of 18.
 - According to many international agreements marriage that occurs before the age of 18 can be harmful to girls, even if the legal framework or religious laws allow it.
 - The term “forced marriage” can apply to girls who marry under 18, but it can also apply to a marriage at any age where one person is forced to marry another person.
-  **Ask:** What do you think about this information?
-  **Say:** Some of us were either married under the age of 18 or know someone who was, it is something that is very common. It is also possible that we married young and had no complications so are not sure why this might be a problem. But over time, we have more information and scientific evidence that highlights to us that marriage at a young age can be harmful and also difficult for girls.
-  **Say:** I am going to tell you a story about Zeina. We will stop at specific points in the story to reflect on some questions.
-  **Note:** It is possible that not everyone is aware of the legal framework in countries they are citizens of or are hosted in. If marriage is illegal under 18, highlight to the group so they have this information. And if the age of marriage is different in the country they are hosted in compared to the country that they may return to (e.g., Syria and Lebanon), it is important they have this information as well as information related to how to navigate that process.

✓ **Do:** Use Resource 10.1 to tell the following story:

► Part 1

Zeina is 15 years old and her parents want her to get married. They are worried that she is getting older and spending a lot of time out of the house. Zeina's parents are also struggling financially and since moving to this current location, they have not been able to work. They think Zeina is getting too old to share the space with her siblings, especially now she is menstruating. Marriage will help them to manage the finances better and also stop people from talking about Zeina not being married already.

? **Ask:** What are the reasons contributing to the decision to marry Zeina?

... **EXPLAIN** (if not mentioned):

- There are different expectations placed on girls and women in society compared to boys and men. This includes keeping girls in the "woman box" and controlling how she behaves, who she should spend time with and the things she is allowed to do.
- This is because in many places, girls may not be valued as boys in the same way. Boys are expected to take care of their parents when they get older and go out to work to provide an income whereas girls are seen to be an economic burden instead.
- When situations like displacement happen, many families might decide to marry their daughters as a way to relieve the financial burden and to give girls what they think is a better chance at life. There are many examples of girls who earn an income for their family or take care of parents in their old age, but because of the "woman box"²⁴ there is a perception that girls cannot do those things.

► Part 2

Zeina's parents approach her about the idea of marriage. Zeina is confused. She is happy attending school. But she has seen some of her friends get married, and she likes the idea of having her own room and not having to share with her siblings. And she is worried that if she doesn't marry soon, she might not get a good husband.

? **Ask:** What are Zeina's reasons for wanting to get married?

... **EXPLAIN** [if not mentioned]: Zeina is influenced by the community expectations and peer pressure. Her reason for wanting to get married is because society has told girls like Zeina that if they don't marry young, they might not marry at all.


- They have told Zeina that when a "good catch" comes along you should marry him immediately because you don't know if another will come along. Also because of the difficult situation at home, Zeina thinks married life will be an escape from hardship.
- While it may seem like Zeina is making a choice to marry, she is influenced by the environment she lives in.

► Part 3

Zeina does get married, and married life isn't exactly how she imagined. She left school, and there are new pressures she is experiencing that are placed on her from her new family, such as having children or taking on all the household chores. Zeina doesn't feel she has the power to ask for the things she wants or needs.


? **Ask:** What is the emotional or physical impact on Zeina?

24 We discussed in session 3 that the man and woman box was about society's expectations of who women and girls or boys and men should be, how they should act, how they should feel and what they should say. They are taught to us from the moment we are born, by many different people, the community and through experiences.

 **Explain:** What Zeina experienced happens to many girls. And some of us would have experienced a similar situation. Girls in a similar situation as Zeina can feel isolated, unhappy and overwhelmed with marriage. They can also experience risks to their health which can be very severe.

 **Ask:** What are some of the consequences of Zeina marrying young?

 **Do:** Share ideas with the group and **ADD** anything that's missing.

 **Note:** If you have the resources, you can show participants the Girl Effect Video. Translation is available in a number of languages, including French and Arabic: <https://www.youtube.com/watch?v=1e8xgF0JtVg>

 **Explain:**

- Girls who marry young are often pulled out of school and miss important years of their education. Because of this, they will have limited knowledge, skills, and experience to negotiate adult marital roles.
- Girls who marry at a young age are more likely to experience violence in their marriage. The larger the age difference, the more likely they are to experience violence. Girls who marry young are more likely to describe their first sexual experience as forced.
- Childbearing is frequently expected after marriage, with first births being the riskiest for young adolescent mothers. Pregnancy at this time is very dangerous, and doctors recommend that girls finish puberty and adolescence before attempting to have children.
- Pregnant young adolescents face a significantly higher risk of dying in or after childbirth.
- For instance, girls who become pregnant at an early age often have difficult deliveries because their pelvis is too small. This could lead to needing an operation to deliver the baby.
- Young girls are also at high risk of delivering babies too early—before the baby is ready to come out.


 **Ask:**

- What do you think about the information presented?
- Do you think this information could help someone make an informed decision about early marriage? Why/why not?
- What can caregivers do if it is the girls themselves that are requesting to get married?
- If you have daughters that are already married, what are some of the things you think they need support with to ensure a safe and healthy married life?

Activity 3: Strategies to Delay Marriage (30 minutes)

 **Explain:**

- We respect that marriage is an important part of the community and that it is something many people will do. But we also think that given the harms associated with marrying at a young age, there are things we can do to delay marriage of young girls until they are older (above 18).
- This will help girls to have a better chance of a healthy marriage and life. To be able to support girls to delay marriage until they are older, it takes the decisions of caregivers but also takes influencing community members, when it comes to deciding when and who to marry.

 **Say:** In groups you will come up with strategies on how the family in the scenario can delay the marriage of their daughter. When deciding on strategies, there are two things you need to do:

1. Think about who you can include in your strategy, e.g. the girl, caregiver, community decision makers and/or the potential husband (and his family).
2. Think about what impact delaying marriage will have on the girl and her family; if there are some negative impacts, what can be done to resolve this?

✓ **Do:**

- Split participants into 2 groups and give each group a scenario. If unable to read, you can read the scenarios to the group.
- Participants can share back their scenarios and strategies through role play.

CONTEXTUALIZATION *required:*

Scenario 1: Yusra has three children and is raising them on her own. She earns some money by tailoring, but it is not enough to support her children. She had to remove her eldest daughter from school and thinks that it is better that her daughter gets married. This will reduce the financial burden on her. She loves her daughter very much and thinks this is what is best for her. Yusra's daughter is 14 years old. Yusra wants your advice.

- * **Note:** They should ask Yusra to think about the pros and cons of the decision to get her daughter married. They should encourage Yusra to think about alternative strategies before marrying her daughter and ask her to think about how she can seek support.

Scenario 2 (for contexts where adolescent pregnancy can lead to forced marriage):

Nancy is 15 and recently discovered she is pregnant. She is worried about telling her mother as she is afraid her mother will force her to marry the man who got her pregnant. Nancy does not want to marry him, she wants to finish her education and stay with her family. How can Nancy's mother respond in this situation?

- * **Note:** This scenario can be quite challenging. Mothers may say that the girl has no other choice but to marry. Encourage them to think about alternative ideas to marriage. How can Nancy continue to go to school when she has a baby, what will make it possible for Nancy to stay at home and not marry?

Scenario 2 (for sensitive contexts): Adam's family is growing and recently his cousin also moved into the house. Adam's children are all sharing one small room. His eldest, Nancy is 16 and is too old to be sharing with her younger siblings. Adam thinks the best solution is to get Nancy married. This way she will have her own space and the house will not be as overcrowded. Should Nancy's marriage be delayed? How can this be done?

- * **Note:** They should think about the pros and cons of the decision to get Nancy married (e.g., health risks to Nancy, school drop-out, isolated etc.). They should think about alternative strategies that can help to delay the marriage.

Key Message



Say: There are many harms associated with girls marrying at a young age, so helping girls marry at a later age will help them to have a better chance of a healthy marriage. To be able to support girls to delay marriage until they are a little older, it takes the decision of caregivers but also takes influencing the community, particularly men and boys, who have a lot of decision-making power when it comes to deciding when and whom to marry.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Have a conversation with your daughter or someone else in your family you feel comfortable talking to about the issue of early marriage and some of the information we discussed today. See what their ideas are, if they are different or the same as what we discussed.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Be prepared with information about GBV services.
- Check the preparation section of the session to familiarize yourself with key resources and concepts in advance.

SESSION 10:

MARRIAGE IN OUR COMMUNITY (Caregivers of Married Girls)

Session Aims:

By the end of the session caregivers will:

1. Understand the impact of early marriage on adolescent girls.
2. Understand how to support married girls.

Materials:

- art box
- comments box
- flip chart paper
- markers
- A4 paper
- pens
- tape/string
- projector
- laptop and speakers if showing the Girl Effect video: <https://www.youtube.com/watch?v=1e8xgF0JtVg>
- Resource 10.1: The Story of Zeina

Preparation:

- Make sure the video is prepared in advance and ready to show to participants. There is an option to change language on the subtitles, so make sure this is practiced ahead of the session. If you don't have the resources for this, you can skip this part of the session.
- Print Resource 10.1: The story of Zeina to help guide the story


Facilitator Note:


- In countries where it is illegal to marry under the age of 18, some caregivers may hide marriages of girls. Conversely, caregivers may report marriages to the authorities if the girl herself makes the decision to marry; this may happen in contexts where girls are in a "love" marriage that the caregivers disapprove of. Both scenarios can be problematic if it means that girls are not receiving the support they need. It is important as a facilitator to focus on highlighting the risks to girls of marrying young and how caregivers can continue to support girls if they are married.
- It is important as a facilitator not pass judgement on caregivers of girls who are already married to allow for an honest conversation about the situation so they can better support girls.
- If girls or caregivers want to report a case of early marriage to the facilitator in settings where it is illegal, you can refer the girl or her female caregiver to a caseworker as the first step.
- Even in contexts where marriage is legal under 18, some caregivers may be reluctant to admit their daughters are married under 18 because they're often afraid of the reaction of society, NGOs, and humanitarian workers. It's therefore important to not pass judgments as this might place barriers between girls' access to services.

Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.

Timing: Before the corresponding Male Caregivers' Session

Welcome & Review (10 minutes)

 **Ask:** Were you able to introduce shared decision making into the family with regard to household responsibilities using the steps discussed. How did it go? If not, did you talk to girls to raise their awareness about some of the rights we discussed?


 **Say:** Today we are going to discuss marriage and what it means and looks like in our community.

Let's Explore (15 minutes)

 **Ask:** What does marriage look like in our community?

Probing questions to aid discussion:


- At what age do women get married? What about men?

 **Note:** In some contexts, this question may be sensitive due to legal frameworks, be sensitive how it is asked in contexts where this is the case.

- What is the best age for women and men to marry?
- Who makes decisions about who to marry and when to marry? Is it different for women and men?
- Is the situation the same now as it was before displacement? How is it different or the same?
- What does marriage look like for women and girls with disabilities?
- How are women who are divorced treated in the community? What about women who are widowed? What is your opinion on how they are treated?


 **Say:**

- Marriage is something that many people choose to do. It is when two people decide they want to build a partnership together and sometimes this includes having a family.
- Marriage can take many forms. Sometimes two people can fall in love and decide to get married. Sometimes it may involve other family members who help women or men to find a potential wife or husband.
- The important thing to remember is who has power to choose to say yes and to choose who to marry as such a big life decision should involve the wishes of women and girls as much as men and boys.

 **Ask:** Who can think of examples of when power may not be equal?

ADD to examples if not mentioned by the group (and appropriate to context):

- When the parents force or influence a girl to get married to someone
- When the girl is a child (under 18) and the man is an adult
- When the age difference between the woman and the man is very large
- When the power of the community and society makes girls and parents believe that girls should be married at a younger age

 **Say:** Today we will discuss the wonderful things that come with marriage and also how we can support married and divorced girls that we know and love.

Activities (1 hour 25 minutes)

Activity 1: The Concept of Marriage (20 minutes)



Say: Marriage is something that is part of our culture and community. We have many ways of celebrating this moment.



Note: This doesn't necessarily mean a wedding ceremony, as in many situations, as in refugee contexts, marriage is marked without a ceremony.



Do: Split participants into 2–3 groups and ask them to briefly discuss the positive aspects of marriage. Once finished, ask them to come and share back highlights from their discussion with the wider group.



Ask: What are some of the challenges that come with marriage?



Explain: There are positive aspects of marriage and there are also challenges. Sometimes however, the challenges can be increased when the power in the marriage is not equal like in the examples we discussed earlier. So, we are going to dig deeper into some of these examples and talk about how we can strengthen our support to married and divorced girls.

Activity 2: The Impact of Early Marriage (35 minutes)



Ask: Does anyone know what we mean by the terms “early marriage,” “child marriage” or “forced marriage”? Have you heard them before?



Say:

- “Early marriage” and “child marriage” are terms that are used to describe marriage that happens to girls and boys when they are under the age of 18.
- According to many international agreements marriage that occurs before the age of 18 can be harmful to girls, even if the legal framework or religious laws allow it.
- The term “forced marriage” can apply to girls who marry under 18, but it can also apply to a marriage at any age where one person is forced to marry another person.



Ask: What do you think about this information?



Note: It is possible that not everyone is aware of the legal framework in countries they are citizens of or are hosted in. If marriage is illegal under 18, highlight this to the group so they have this information. And if the age of marriage is different in the country they are hosted in compared to the country they may return to (e.g., Syria and Lebanon), it is important they have this information as well as information related to how to navigate that.



Explain: We are here because we all have daughters or girls in our care who were married at a young age; it is something that is very common, despite the fact that there are a number of risks associated with it. It is also possible that we also married young and had no complications, so are not sure why this might be a problem. But over time, we have more information and scientific evidence that highlights to us that marriage at a young age can be harmful and difficult for girls. But there are some things that we can do to support girls who are already married to ensure that they have a better experience and are not at risk of harm. But first, we need to understand what the issue is.



Note: It is important to not identify parents who have married daughters under the age of 18 in countries where it is illegal; be sensitive on the language used and adapt it according to your context.

Story requires CONTEXTUALIZATION:



Note: In groups where mothers-in-law are also present, some sensitivity may be required in facilitating this activity. These areas are highlighted below.



Say: I am going to tell you a story about Zeina. We will stop at specific points in the story to reflect on some questions.



Do: Use Resource 10.1 to tell the following story:

▶ Part 1

Zeina is 15 years old, and her parents want her to get married. They are worried that she is getting older and spending a lot of time out of the house. Zeina’s parents are also struggling financially, and since moving to this current location they have not been able to work. They think Zeina is getting too old to share the space with her siblings, especially now she is menstruating. Marriage will help them to manage the finances better and also stop people from talking about Zeina not being married already.



Ask: What are the reasons contributing to the decision to marry Zeina?



Explain (if not mentioned already):


- There are different expectations placed on girls and women in society compared to boys and men. This includes keeping girls in the “woman box” and controlling how she behaves, who she should spend time with and the things she is allowed to do.
- This is because in many places, girls may not be as valued as boys in the same way. Boys are expected to take care of their parents when they get older—to go out to work and provide an income—whereas girls are seen to be an economic burden. When situations like displacement happen, many families might decide to marry their daughters²⁵ because there is a perception that girls cannot help their families.

▶ Part 2

Zeina’s parents approach her about the idea of marriage. Zeina is confused. She is happy attending school. But she has seen some of her friends get married and she also likes the idea of having her own room and not having to share with her siblings. And she is worried that if she doesn’t marry soon, she might not get a good husband.

²⁵ We discussed in session 3 that the man and woman box was about society’s expectations of who women and girls or boys and men should be, how they should act, how they should feel and what they should say. They are taught to us from the moment we are born, by many different people, the community and through experiences.


 **Ask:** What are Zeina's reasons for wanting to get married?

 **Explain** (if not mentioned already):
Zeina is influenced by the community expectations and peer pressure. Her reason for wanting to get married is because society has told girls like Zeina that if they don't marry young, they might not marry at all. They have told Zeina that when a "good catch" comes along you should marry him immediately because you don't know if another will come along. Also because of the difficult situation at home, Zeina thinks married life will be an escape from hardship. While it may seem like Zeina is making a choice to marry, she is influenced by the environment she lives in.


► **Part 3**

***May require adaptation if mothers-in-law are present.**

Zeina does get married and married life isn't exactly how she imagined. She left school, and there are new pressures she is experiencing that are placed on her from her new family, such as having children or taking on many household chores. Zeina doesn't feel she has the power to ask for the things she wants or needs.

 **Ask:**


- What is the emotional or physical impact on Zeina?
- How could her situation have been different?

 **Explain** (if not mentioned already):
What Zeina experienced happens to many girls. And some of us would have experienced a similar situation. Girls in the same situation as Zeina can feel isolated, unhappy and overwhelmed with marriage. They can also experience risks to their health and can be very severe.


► **Part 4**

***May require adaptation if mothers-in-law present.**


Zeina's husband and in-laws are not understanding of Zeina's situation and what she is experiencing. Eventually they tell Zeina's family that they want Zeina to return back to her family home as she is not doing the things they expect of her.

 **Ask:**

- Is it common for girls to get divorced when they marry at an early age?
- How are these girls treated by their families and in the community?

 **Note:** There are many expectations placed on women when they marry. As adolescent girls are still growing and learning it is understandable that they are not able to manage the pressures that come with adult responsibilities.

 **Ask:** What are some of the consequences of Zeina marrying young?

 **Note:** If you have the resources, you can show participants the Girl Effect Video. Translation is available in a number of languages, including French and Arabic. <https://www.youtube.com/watch?v=1e8xgF0JtVg>



Explain:

- Girls who marry young are often pulled out of school and miss important years of their education. Because of this, they will have limited knowledge, skills, and experience to negotiate adult marital roles.
- Girls who marry young are more likely to describe their first sexual experience as forced.
- Childbearing is frequently expected after marriage, with first births being the riskiest for young adolescent mothers. Pregnancy at this time is very dangerous, and doctors recommend that girls finish puberty and adolescence before attempting to have children.
- Pregnant young adolescents face a significantly higher risk of dying in or after childbirth.
- Girls who become pregnant at an early age often have difficult deliveries because their pelvis is too small. This could lead to needing an operation to deliver the baby.
- When we spoke to divorced girls through our research, they told us that marrying at an early age was a main reason for divorce. They also felt stigmatized and blamed for the marriage breakdown and faced many restrictions. But with the right support, girls who were divorced also went on to pursue their interests, gained opportunities and were able to remove themselves from a violent situation.
- When we spoke to married girls through our research, they told us that one of the key consequences of early marriage was experiencing violence. They also said that early marriage led to negative relationships with their husbands and health risks were very high.



Ask:

- What do you think about the information presented?
- Is this a conversation that is easy for caregivers to discuss with each other? Why/why not?
- If you have daughters that are already married or if you have a daughter-in-law, what are some of the things you think they need support with to ensure a safe and healthy married life?

Activity 3: Supporting Married, Widowed and Divorced Girls (30 minutes)



Say: We have learned about some of the risks married and divorced girls face. But there is something we can do! We are going to think of ways in which we can support married and divorced girls in our lives and in the wider community.



Do:

- Split participants into 3 groups, one focusing on married girls, one on widowed girls and the other on divorced girls.
- Ask them in their groups to discuss ways in which they can support these girls even if they are not in their care.

ADD the points below if not already mentioned in the discussions.

- If possible, check on married, widowed, and divorced girls' material needs (specifically food, money, sanitary pads, clothes, and school materials). In-laws might not be able to provide adequate support, so always check with the girl. If you are an in-law you can also check on girls' material needs.
- Check in and support girls' emotional needs. If you're a mother-in-law, give them time to see friends and family. And if you're a caregiver, make time to visit and spend time with girls.
- If possible, check on married, widowed, and divorced girls' educational or vocational needs; perhaps she wants to go back to school, learn new skills, attend a course, or generate some income to become independent.
- If possible, check on married, widowed, and divorced girls' health needs. Girls may need access to medicine, health care, family planning services, antenatal care, etc. Encourage girls to wait until after 18 to have children, even if they had a child already; each birth is different, and they should delay pregnancy until their body is fully developed to prevent health risks such as death of the mother or baby.

Key Message



Say: While there are many challenges associated with girls marrying young, as mothers and mothers-in-law, there are many things we can do to help support girls in this situation. Some of the things include checking in on their material, emotional, and health needs. And delaying pregnancy until after 18 is key to ensuring their health and the health of their babies. As caregivers, we may not have the resources to take care of all these needs, but one thing we do have control over is supporting girls' emotional needs in particular.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Have a conversation with your daughter or daughter-in-law to check what their needs are and see how you can support them. Even if you are unable to provide material help, there are other things you can do to support their emotional needs or in accessing health care.

NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Be prepared with information about GBV services.
- Check the preparation section of the session to familiarize yourself with key resources and concepts in advance.
- Familiarize yourself with Resource 11.1: GBV Tree and Resource 11.2: Types of Violence ahead of the session to remind you of root causes and consequences of GBV and types of GBV.

SESSION II: VIOLENCE WOMEN AND GIRLS EXPERIENCE

Session Aims:

By the end of the session caregivers will:

1. Discuss safety issues that women and girls face inside and outside of the home.
2. Learn how not to stigmatize girls who experience GBV; learn how to provide a supportive space for girls.

✳ **Note:** This session should not replace other GBV risks assessment activities that take place, it can be done in parallel.

Materials:

- flip chart paper
- markers (in at least four different colors)
- post-it notes
- pens
- comments box

Preparation:

- Familiarize yourself with Resource 11.1: GBV Tree and Resource 11.2: Types of Violence ahead of the session to remind you of root causes and consequences of GBV and types of GBV.
- Ensure you have information about case management services prepared, including contact details and focal point. You could prepare leaflets, IEC materials, or flyers that can be left in the room for women to collect (should they want to) or give them the opportunity to memorize the details.
- This session can be very sensitive and cause discomfort to some participants during discussion. Ensure there are small energisers included in the session to help break the content up.
- Some participants may not agree with all the definitions or examples of types of violence. It is important to be prepared to deal with conflict and to know how to respond. All relevant content is included in the session, but you will need to read it and prepare in advance to feel comfortable with facilitation.


Facilitator Note:


- Understand the international and national landscape of Violence Against Women and Girls (VAWG) laws. International laws that address VAWG include Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Universal Declaration of Human Rights and Convention on the Rights of the Child. You should check if the country you are working in has signed up to it. A number of countries will also have national laws in place that criminalize domestic violence; it is important to know the status in your country.
- Violence against Women and Girls is often considered a taboo subject and not openly discussed, despite being experienced by many adolescent girls and women. This topic may make some participants feel uncomfortable, and may also remind some of them of their own personal experiences. Be prepared with information about case management services available to women and girls.
- However, given that this session comes much later in the curriculum, it is hoped that a certain amount of trust would have been built which will make it easier to discuss these topics.
- Also be aware of any violence disclosed, especially against adolescent girls. This may need to be followed up with your supervisor, especially if you believe a girl is in immediate harm.
- This session may be quite sensitive, so it is important to check in with caregivers to see how they are feeling as you move through each activity

Duration: 2 hours

Timing: Before the Male Caregivers' Session 11 on Safety and Violence takes place.


Welcome & Review (10 minutes)


 **Ask:** Did you have a conversation with your daughter or daughter-in-law to check what their needs are and see how you can support them? How did it go?


 **Say:** Today we are going to talk about safety and violence against women and girls.

Let's Explore (15 minutes)


 **Ask:** What do you think about when I say the word "safety"?


 **Say:** When we talk about safety, we mean being free from harm, danger, threats, or risks, both inside and outside the home. Harm, danger, threats, and risks can be caused by a number of things. For example, the environment can make people unsafe if there is an earthquake or storm.


 **Ask:** Can anyone think of other types of harm, danger, threats, or risks that make people unsafe? (For example, war, conflict, lack of money, being homeless, violence, etc.).

 **Say:**

- For the purpose of this session, we are going to focus on the issue of violence and the types of violence that people inflict onto women and girls to make them unsafe. It is important to remember that violence is not something that "just happens" to you because you are a woman or girl. It is a choice that other people make to be violent towards women and girls.
- Violence against women and girls is a violation of their human rights and is written in many international laws (add national laws too, if applies)

 **Ask:** What do you think are some specific safety risks and threats that people create for women and girls in the community and at home?

 **Do:** Write their answers on a flip chart.

 **Explain:**

- Women, girls, boys, and men can all experience harm, danger, threats, or risks, but there are some safety issues that are directed towards women and girls. These safety issues are types of violence that women and girls face because of their gender. (Remind them of the gender box.) This type of violence is done to women and girls because men use their power over women and girls.
- Sometimes women may use violence towards a girl because of their power as an adult over a child. Sometimes, women and girls accept this violence because they may not realize that it is actually a type of violence. It may be something very common in the community, and therefore it is perceived as normal and acceptable for this to happen.

- Sometimes, women may be violent towards girls, or have certain expectations of girls based on their own experiences and the expectations society placed on them at that same age. (For example, marrying girls early because this is what happens in the community, or girls having to leave school earlier than boys.)



Ask: Do you think that women and girls deserve to have less power and safety than men and boys?



Note: You may explain in a contextually sensitive manner that women and girls deserve to have the same power and safety that men and boys have; women and girls are as capable, smart, and important as men and boys and deserve to be treated equally.



Explain: The definition of violence against women and girls is “any threat or act (physical, emotional, sexual, and economic) directed at a girl or woman that causes harm and is meant to keep a girl or woman under the control of others.”



Say: This is a safe space, and if anyone is feeling uncomfortable at any point during the session, it is OK to voice this. There is also a caseworker available to talk to, and I can give you more information about this at the end of the session, or you can come and see me afterwards.

Activities (1 hour 20 minutes)

Activity 1: Types of Violence (40 minutes)²⁶



Say: We talked about safety and the fact that girls and women face different forms of violence because they are women and girls. We call this gender-based violence, or GBV. Any form of violence is harmful and a violation of our rights; this includes all forms of gender-based violence.



Do: Draw an outline of a woman on a large piece of flip chart paper and divide the paper into 4 parts (see example below). Have some post-it notes ready.

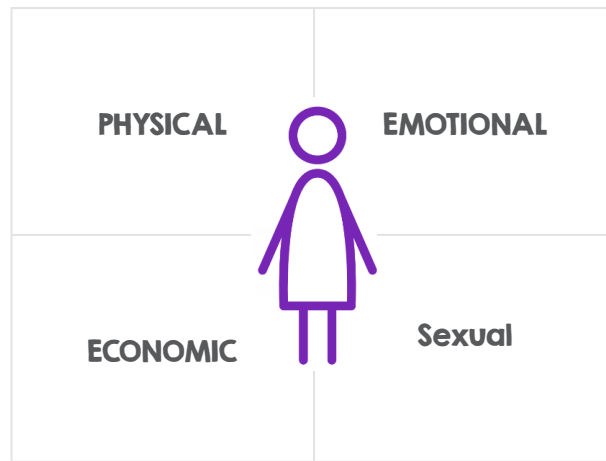


Say:

- I want you to take a few moments to think about violence, risk, harm, or dangers that women and girls experience.
- Remember, there are many forms of violence against women. They are usually categorized into four types: **physical** (hurts the body), **emotional** (hurts feeling and self-esteem), **sexual** (controls sexuality), and **economic** (controls access to money, property, or resources).

ASK participants to take a few moments to discuss with the person next to them the different types of violence and then to share their ideas with the wider group.

²⁶ Adapted from SASA http://raisingvoices.org/wp-content/uploads/2013/03/downloads/resources/Unpacking_Sasa1.pdf



* **Note:** You may need to give some examples to help participants make the distinction between GBV and other forms of violence. You can say to participants “Before you discuss your answers, think to yourself: do men or boys experience these things as often as women and girls do?” If they need further guidance, you can give them some examples such as: early marriage, rape, sexual comments, etc.

✓ **Do:** When participants are sharing with the wider group, write the ideas on the post-it notes and then ask participants which type of violence it is categorized as. If the categories mentioned are incorrect, correct them before you place them on the paper.

* **Note:** Some types of violence may belong in a number of categories. Those post-its can go in the middle. So, for example if someone suggests slapping, you can place it in the “physical violence” square. If someone suggests sexual assault it could be in sexual and physical, so it can go in the middle.

✓ **Do:** When they have finished, gather everyone around the outline

? **Ask:**

- Does anyone have a question or something to share or add about **physical violence**?
- Does anyone have a question or something to share or add about **emotional violence**?
- Does anyone have a question or something to share or add about **economic violence**?
- Does anyone have a question or something to share or add about **sexual violence**?

✓ **Do:** Once people return to their seats/the circle, go back to the definition of violence against women. Read the last phrase: “is meant to keep a woman or girl under the control of others.” Ask participants what they think that means; they can discuss in pairs for a few minutes if they prefer.

? **Ask:** Why do you think violence against women is linked to power? (Again, give them a few minutes to discuss and share answers.)

... **Explain:**

- Gender-based violence is linked to power because as a society we expect men to demonstrate that they hold power over their partners or daughters.
- As a community, it is seen by many as normal for men to have more power than women. It is thought that without men using power over women, women are unable to manage themselves (and this is of course incorrect).

? **Ask:** Is violence against women ever not an abuse of power for controlling a girl or woman? Give them a few minutes to discuss and share answers.



Explain:

- All violence is abuse of power.
- Violence is used to control another person through fear.



Ask: Even if men experience some of the same acts as women, how is the violence men experience different than that experienced by women? Give them a few minutes to discuss and share answers.



Explain:

- Men as a group do not live in fear of violence from women as a group. The majority of women live in fear of violence from men (partners or strangers). Women have this fear because society accepts men's power over them and men's violence against them.
- Most often, when a man experiences violence from his partner, the woman is defending herself from the violence he has used against her.
- Men do experience violence from other men—for example, a male employer may be violent towards a male employee. But the violence is not related to the gender of the male employee; it could be related to other factors of discrimination that places the man in a marginalized category.



Note: Refer to Resource 11.2 for more information on types of violence.



Ask: If someone experiences sexual violence, what should they do?



Explain: If a woman or girl experiences physical or sexual violence, she should tell someone she trusts to help her seek medical attention, if required. To prevent STIs it is advisable to seek help within three days/72 hours. To prevent pregnancy, it is advisable to seek help within 5 days/120 hours.



Do: Give participants the contact information for the safe space and explain case management services that are available there or in the community.

Activity 2: Effects of Violence on Adolescent Girls (40 minutes)



Say: We discussed how violence and control are linked and the ways in which violence is experienced by women and men.



Ask: How do you think this is different for girls? (Take some responses.)



Explain:

- In the same way that violence against women is used to keep women under control, the same applies to girls. Especially when they reach puberty. The way in which girls are treated changes, and violence can be used to control them, especially in relation to honor or intimate relations.
- This treatment towards girls may be new for them and as they are navigating a time in their lives where they are getting used to other changes related to their body and emotions, they are also realizing that their freedoms are narrowing. As adolescent girls are not yet adults, they have even less power than adult women to be able to claim their right to be free from violence.



Do: Divide women into three groups and provide each group with a case study. Read each case study to the group and ask each group to think about the questions under each case study. They will provide a summary to the wider group.

Caregivers of Unmarried Girls

Case Study 1: Tania is 11 years old and loved school. But, now she has a new teacher who treats the girls and boys differently. During the break, the boys play outside and the girls stay inside to clean up. One day, Tania refuses to clean up and tells her teacher she wants to play outside. The teacher hits her and tells her that it is not appropriate for girls to play outside!



Ask:

- Is this a type of gender-based violence? Why yes/why no? *(Yes, because Tania’s teacher is discriminating against Tania and being violent towards her because she is a girl.)*
- What are the potential physical and emotional effects of what is happening to Tania? *(In addition to what participants share, **ADD:** Over time, Tania may lose confidence or start to believe that she is limited by the “woman box” she may not achieve her full potential because of the limitations placed on her.)*
- Is what happened to Tania her fault?
- *(No. Tania is not to blame. The teacher does not need to resort to violence towards students in any situation. Additionally, the teacher is not treating girls and boys equally.)*

Caregivers of Married/Divorced Girls

Case Study 1: Betty is 16 and recently got married. Betty does all of the things that are asked of her by her husband. But, when Betty wants to do something for herself, like meet her friends, Betty’s husband shouts at her, sometimes telling her she is not allowed to leave the house and even threatening to hit her.



Ask:

- Is this a type of gender-based violence? Why yes/why no? *(Yes, Betty’s husband is using violence to threaten her, make her feel scared and control her behavior and her freedom to do the things she wants to.)*
- Is what happened to Betty her fault? *(No. Betty is not to blame for the way she is being treated. There are many ways Betty’s husband can express himself that do not involve violence or controlling Betty.)*
- What can the people around Betty (caregivers, mother-in-law) do to support her?

Case Study 2: Rebekah has a hearing disability and was married at the age of 16. Rebekah didn't want to get married, but then her parents told her that she would have her own room and more space and if she didn't marry this man, she may miss her chance at marriage. Rebekah didn't see any other options. So, while her parents didn't "force" her to marry, Rebekah didn't feel she had a real choice.



Ask:

- Is this a type of gender-based violence?
- *(Child marriage, or marriage under 18, is a form of gender-based violence as it disproportionately affects girls and is a violation of a girl's most basic rights. Girls are not able to fully consent to the marriage due to their age and circumstances. Also, girls that marry at a young age are at increased risk of experiencing other forms of GBV that we already discussed such as violence from their partner or in-laws.)*
- What are the individual, family, community and society factors that have led to Rebekah's marriage?
- *(Societal acceptance and encouragement of marriage at a young age for girls (gender inequality), family believing Rebekah's situation will improve if she leaves the home. Rebekah not seeing any other opportunities for herself, lack of encouragement or aspiration from her family of what she can achieve beyond marriage etc.)*
- What alternatives could be to marriage for girls like Rebekah? *(Education, vocational training, employment, small businesses)*
- Are these alternatives realistic, happening in our communities?


Case Study 2: Amal is 17 and divorced. She moved back home with her parents and her baby. Amal wants to go back to school or continue with further learning or training, but her parents said no due to the shame of Amal's divorce. Amal feels isolated and trapped and doesn't see any opportunities for her future.



Ask:

- Is this a type of gender-based violence? Why yes/why no? *(Yes, Amal's parents are using violence against her by limiting her movements and keeping her in the house due to shame and "dishonor." They are not supporting Amal to secure her basic rights.)*
- What are the potential physical and emotional effects of what is happening to Amal?
- Is what happened to Amal her fault? *(Many times, society blames the girl when divorce happens. There are many reasons why a relationship breaks down. In the case of Amal, being an adolescent girl and getting married before she was ready could have been a contributing factor to divorce. Families and potential husbands have a responsibility to make sure girls are not put in a position where they are married before they are ready)*
- What can the people around Amal (caregivers, in-law) do to support her? *(Caregivers and in-laws can support girls like Amal to continue with education, normalize her participation in the community and stand up for girls like Amal when the community stigmatize her.)*

Case Study 3: Betty is 16 years old and is married/has a boyfriend/fiancé. Sometimes Betty has bruises on her body. Her friend notices that she is sad and upset. Betty's friend tries to talk to her and tell her that she should leave her boyfriend/fiancé because he is bad for her. Betty tells her friend she cannot leave him as she is scared of what he will do to her.

 **Note:** Caregivers may say that girls should not have boyfriends and that this is the solution. It is important for them to think of the ways in which they can support girls who are experiencing violence without forcing girls to be secretive.



Ask:

- Is Betty experiencing a type of gender-based violence? (Yes, the violence Betty is experiencing is being used to control her and make her fearful)
- What are the potential physical, emotional, and social effects of what is happening to Betty?
- What can Betty's friend do to support her in this situation? (Betty's friend should make it clear that she is there to support and listen to Betty if she needs to talk. She could check in with Betty regularly to see whether she is OK. She should tell Betty that it is not her fault and also inform her about places that might be able to help her, such as the WGSS)

Case Study 3: Lina is 15, married and the main earner in her household. Her husband is not working, but all of Lina's income goes to her husband who controls the household finances. He doesn't tell Lina what he is spending the money on, and sometimes there is no money left for food, so Lina has to work even more. She also has no access to the money she is earning.



Ask:

- Is this a type of gender-based violence? Why yes/why no? (Yes, this is a type of economic violence which Lina's husband is using to unequally control access to money in the household.)
- What are the potential physical and emotional effects of what is happening to Lina?
- What can the people around Lina (caregivers, mother-in-law) do to support her?



Explain:

- In each situation, the girls have experienced violence.
- All of the girls may be experiencing stress, injury, and feelings of hopelessness, isolation, or trauma.
- The girls may experience blame or rejection from their family or the community.
- They may experience depression, poor performance in school, fear of or distrust of adults, bullying, etc. This can seriously impact their lives as adults.



Ask: What can we do to create a safer environment for girls who may be facing the different types of violence we discussed?

ADD the following if participants don't mention them:

- Don't blame girls for violence they experience.
- Create an open and non-judgmental space for girls to feel comfortable to discuss violence they may be experiencing. This is especially important for girls who may be experiencing violence from boyfriends, partners, fiancé's and husbands.
- Create an open space for girls to talk to you about the things concerning them.
- Respect girls' rights to a life free from violence, the right to have free time, the right to be children, to get an education even after marriage. This applies to all girls, unmarried, married, with a disability, divorced, a widow etc.
- Praise girls for being bold and confident, and for standing up for themselves and saying "no" to people

who might want to harm them.

- Encourage girls to exercise their right to say “no” firmly. This includes all girls, for girls with disabilities that may not be able to express themselves verbally, find ways to support them to exercise this right.
- Encourage them to communicate assertively, even at the risk of “offending” someone who may be perceived as holding more power. This includes all girls, for girls with disabilities that may not be able to express themselves verbally, find ways to support them to communicate their needs and wants.
- Use open communication and show empathy in order to help girls develop positive and healthy relationships, especially when they are recently married.
- Use non-violent strategies to deal with disputes and disagreements in the family.
- Treat and value girls equally to boys, regardless of their age, ability, sexuality, etc.

- ✓ **Do:** Give women information about case management services should they want to seek services for themselves or girls.

Key Message



Say: Even though we know that violence against women and girls is used as a means of control, there are things we can do, because we do hold power. While it may not always be possible to stop the violence (as it is men who should take the responsibility for their own behavior), we can support each other, be there for one another, and not blame ourselves or other women and girls who experience violence. We can come together to create a better environment for girls so that they do not experience violence when they grow up. We can show them they are valued, let them know they can turn to us if they are having any problems, and advocate for them if it is safe to do so.



Do: Remind women of the availability of case management services and if a caseworker is present, ask her to share more information with the women about how to access the services. Inform women that there are leaflets, IEC materials, or flyers available. Remind them to take the information home with them only if safe to do so. And if not, give them a few minutes to memorize the information.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Use one of the strategies we discussed on how to create a safer environment for girls. You can share which one you used next week and let us know what the result was.



NOTE FOR FACILITATORS, FOR THE NEXT SESSION

- Read the session guide to prepare in advance.

SESSION 12:

SUPPORTING GIRLS WHO EXPERIENCE VIOLENCE

Session Aims:

By the end of the session caregivers will:

1. Explore the concept of blame in relation to the violence adolescent girls experience.
2. Explore how to protect girls from violence in ways that don't cause them further harm.

Materials:

- flip chart paper
- markers (in at least four different colors)
- post-it notes
- pens
- comments box

Preparation:

- Review Resource 11.1: GBV Tree ahead of the session as a reminder of root causes and consequences of GBV.


Facilitator Note:


- During this discussion, victim blaming may arise. Women may blame other women or girls for violence they experience because of the way society places blame on women and provides a justification for violence towards women and girls. If women express thoughts such as, "Sometimes women/girls ask for violence by misbehaving," make sure to ask what other caregivers think, to get a range of perspectives. Describing acts of violence that happen outside our own homes is typically much easier than commenting on or sharing about violence within the home. Talking about violence we have committed is even harder. If caregivers share violence they have committed, they will often seek to justify their actions or blame others. It is important to pay special attention to behaviors like minimizing, justifying, or blaming the survivor.
- Ask caregivers who describe physical punishment as a result of "misbehaving" what the reasons are why adolescent girls "misbehave." Remind them that it is a difficult period of life where girls are going through many changes, have many questions, are exploring boundaries and limits, and need caregivers to support and listen to them.
- Violence against Women and Girls is often considered a taboo subject and not openly discussed, despite being experienced by many adolescent girls and women. This topic may make some participants feel uncomfortable, and may also remind some of them of their own personal experiences. Be prepared with information about case management services available to women and girls.
- Also be aware of any violence disclosed, especially against adolescent girls. This may need to be followed up with your supervisor, especially if you believe a girl is in immediate harm.
- This session may be quite sensitive, so it is important to check in with caregivers to see how they are feeling as you move through each activity.

Duration: 2 hours


Timing: Before the Male Caregivers' Session 12 on Supporting Girls Who Experience Violence takes place.

Welcome & Review (10 minutes)

 **Ask:** Did you use any of the strategies we discussed on how to create a safer environment for girls? How did it go?

 **Say:** Today we are going to continue the discussion from the last session we had and talk about how we can support girls who experience violence.

Let's Explore (15 minutes)


 **Note:** This story may be challenging. Women may not be willing to accept supporting a girl who is in a relationship if this is uncommon or hidden in their culture. It is important to get participants to focus on the danger the girl may be in and why it is important to ensure her safety.

 **Ask:** Who remembers the story of Betty from last session?

 **Do:** Remind participants of Betty's story:


Requires **CONTEXTUALIZATION**:


Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
Betty is 16 years old and has a boyfriend/fiancé. Sometimes Betty has bruises on her body. Betty tells her friend she cannot leave him as she is scared of what he will do to her. She says she doesn't want to talk to her about what is happening in her relationship.	Betty is 16 and recently got married. Betty does all of the things that are asked of her by her husband. But when Betty wants to do something for herself Betty's husband shouts at her, sometimes telling her she is not allowed to leave the house and even threatening to hit her.

 **Ask:**

- Imagine Betty comes home one day and is covered in bruises and her caregiver sees her. What should Betty's caregiver say to her?
- Can anyone remember when we discussed empathy? Can anyone remember what empathy means?

 **Explain:** Empathy, put simply, is the ability to understand and act with care towards our daughters.

 **Ask:** And why is empathy important, especially when talking to girls about violence?

 **Explain:**

- Being empathic helps ensure that girls feel safe.
- Being empathic allows girls (or anyone experiencing violence) to openly share and discuss the problems and risks they are facing without the fear of being blamed.



Explain:

- Betty’s caregiver should not blame Betty for what happened. She could make Betty feel comfortable and safe to express what happened to her. Betty’s caregiver could try to talk to Betty and explain to her that what she is experiencing is a type of violence.
- She can also tell Betty what some of the consequences of the violence could be and talk to Betty about seeing a caseworker at the Women and Girls Safe Space, who can help Betty put a safety plan together.
- Betty’s caregiver should make it clear to her that she is there to support and she should check in with Betty regularly to see whether she is okay and if wants to share anything.



Ask: Why is it important that Betty’s caregiver responds in that way?



Explain: It is important that she responds that way so she can fully understand what the risks are and support Betty to be safe from those risks or threats.

For caregivers of married girls, ADD: Married girls still need their caregivers to check in with them, as we know, marriage can be very challenging and the roles and responsibilities are new to girls and they can be experiencing a lot of pressure, it’s important to check they are ok and to see if they need any support.

Activities (1 hour)

Activity 1: Blame–Hands Up, Hands Down (30 minutes)



Explain: As we have already discussed, sometimes people fully or partly blame girls for the violence they experience. They may tell girls that it is their fault violence happened to them, that they could have done something to stop it or otherwise avoid it.



Say: I am going to read two scenarios, and we are going to decide who is to blame. I will ask you who is to blame, so follow the instructions.

- **Scenario 1:** A girl is talking to a boy in the market who she thinks is cute. When she bumps into him later, he tries to kiss her, but she doesn’t want to. Put your hands up if you think the boy is to blame. *(The boy is to blame; just because he got the impression the girl liked him, does not mean he can try to kiss her without her agreement.)*
- **Scenario 2:** A husband and wife are arguing because his wife refused to do as he requested. The husband pushes the wife, and she hurts her arm. Put your hands up if you think the husband is to blame. *(It is important to tell them that under no circumstances is she to blame for being physically assaulted by her husband. There are ways other than violence to solve problems.)*



Ask: Is the person experiencing violence ever to blame? Or is it the person inflicting the violence who is to blame?



Say:

- It is never the fault of the person who experiences violence (the survivor). Violence is a choice. In many cases, we place the blame on the survivor, expecting the survivor to be responsible for her own safety or thinking she could have done something to prevent it. This means we are taking responsibility away from the person that decided to use violence in the first place.
- In many international and national laws (check to see if this applies to your context), it says that that violence against women and girls is a violation of their rights, and no one should be exposed to violence. The blame lies with the person who is being violent and violating the rights of girls and women.

**Ask:**

- Sometimes, when a person experiences violence, they might not want to discuss it with anyone. Why do you think this is? *(For example, they don't know who to trust, they are scared of the news spreading or judgement from people, they think they are to blame, they are scared that others will blame them.)*
- What can we do to be more supportive of girls (and women) who might want to disclose violence? *(Believe them, listen to them, don't be judgmental, and help them access services).*
- Can anyone remember the session we had on our relationships with adolescent girls? We discussed empathy. Can anyone remember what empathy means?



Say: Empathy, put simply, is the ability to understand and act with care towards our daughters.



Ask: And why is empathy important, especially when talking to girls about violence?

**Explain:**

- Being empathic helps ensure girls feel safe.
- Being empathic allows girls (or anyone experiencing violence) to openly share and discuss the problems and risks they are facing, without the fear of being blamed.

Activity 2: Protecting Girls from Violence (30 minutes)

**Ask:**

- Are there some things we allow boys to do but not girls, because we want to keep girls safe?
- What are the things we let boys do and not girls?
- What do we think the risks for girls would be if they did the same things as boys?

**Explain:**

- It is important to protect our children from violence. Sometimes, people may think that protection means keeping a girl inside the home and restricting her freedom. But people may not realize that this can lead to another form of harm. It can cause a girl to become isolated, which can affect her when she is older, leaving her with limited skills and information on how to navigate life.
- But because we realize that there may be certain issues that affect girls more than boys, let's think of ways we can reduce the risk, without preventing girls from being active members of the community.



Do: Split caregivers into two groups. The groups will answer the following questions:

- **Group 1:** How can we protect girls from violence inside the home?
- **Group 2:** How can we protect girls from violence outside of the home?




Note: If women express that violence inside the home is perpetrated by men and that they themselves are experiencing violence, ask them to think of strategies they can use to protect themselves and their children. For example, remove or hide harmful tools that could be used to hurt someone, or move into a room where you can escape or others can hear you. Also remind them of the availability of case management services.

**Say:**


- In your groups, I want you to think about the things you can do to support girls to stay safe from harm inside or outside the home (depending on the group you have been assigned to).
- Think back to previous sessions where we discussed safety and protection. For those in the **Inside-of-the-home** Group, think about the impact that corporal punishment can have on children and some of the alternative strategies you can use.

- For the **Outside**-of-the-home Group, let's remember that we do not want to make girls feel isolated or put limitations on them. We want them to be active members of the community where they are free from harm.

 **Do:** Once caregivers have finished, ask them to share their ideas with the group.

ADD the following:

- Listen to girls and believe what they are telling you.
- Pay attention to the clues girls may send that indicate they are experiencing a problem.
- Don't tolerate violence among any family members, including amongst siblings.
- Speak openly about safety issues; girls will be less likely to come talk to you if the issue is considered to be a secret or shameful.
- Find opportunities to practice "what if" scenarios. For example, "What if someone says something to you that makes you uncomfortable?" or "What if you need to see a doctor and need help getting there?" etc.
- They also need to know that it is okay to tell someone they trust if they experience any violence.
- Request that community leaders and other influential members of the community commit to listening to the experiences of women and girls and tackling violence against women and girls

 **Note:** Be sure to challenge any harmful strategies that are suggested, such as locking girls up or not allowing them to go anywhere, etc.


 **Ask:** We have discussed how you can support girls to keep safe from violence, but what can we do so girls can also help themselves stay safe from violence? [**WRITE DOWN** their comments.]

 **Do:** Have a discussion on what can be taught to girls/is being taught in the Girl Shine Life Skills Curriculum.

ADD the following examples:

- Raise awareness with girls of the different types of violence. Explain "good touch" and "bad touch."
- Encourage girls to exercise their right to say "no" firmly.
- Encourage them to communicate assertively, even at the risk of "offending" someone who may be perceived as holding more power.
- Explain to girls that they can come and tell you if they feel threatened, without fear or judgment. Tell them they will not be blamed.
- Let girls know that it is their right to be treated with respect and dignity.
- Encourage girls to meet together to discuss issues of safety and support.
- Give girls the opportunity to raise awareness of these issues in the broader community if they want to.

Key Message

 **Say:** The survivor is never to blame for the violence that happens to her. Even if some people may think that the survivor could do something to prevent the violence from happening, it is important to understand that the perpetrator has a choice not to abuse, and the responsibility always lies with the perpetrator. But we can think of ways to stay safe ourselves and to keep girls safe in the short term, until the threat of violence against women and girls is fully removed.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Talk to your daughters about how they can keep themselves safe. Explain how you plan to protect them by using the ideas you came up with in Activity 2 and get their opinions/feedback on this.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Check preparation section and prepare resources in advance.

SESSION 13:

OUR VISION FOR THE FAMILY²⁷

Session Aims:

By the end of the session caregivers will:

1. Think about how family reputation can influence their decisions.
2. Reflect on their vision for their family.

Materials:

- art box,
- comments box
- paper
- pens
- colored pens
- Print Resource 13.1: Linda and Maya's Stories

Facilitator Note:

- Talking about reputation might be sensitive and caregivers might not be willing to share their personal experiences. Be mindful of the atmosphere in the room and move the conversation from personal to general if needed.
- Some caregivers may be resistant to the ideas and conversations around reputation and honor. Be mindful of resistance and check guidance on common resistance strategies.
- A thorough **CONTEXTUALIZATION** will help facilitators to be better prepared for this session.

Duration: 2 hours

Timing: Before the corresponding Male Caregivers' Session.

Welcome & Review (10 minutes)



Ask: Did you talk to your daughters about how they can keep themselves safe? How did the conversation go?

Let's Explore (20 minutes)




Ask:

- Has anyone heard the saying "What will people say?" or "What will people think?"?
- What does it mean?
- When is it used?



Say: This phrase (or a similar phrase) is something that many of us are familiar with; it is related to our "reputation."

 **Ask:** What do we mean by reputation? (Take some answers.)


 **Explain:** Someone’s reputation is based on general beliefs or opinions about them, how other people look at us (and how we look at them). There are many things that influence our “reputation.” It is usually based on a set of expectations or standards set by the wider community about how people should behave, and sometimes, the way people think about us can be very influential in shaping how we behave or interact with others. As individuals, we try to keep a “good name” or reputation for ourselves and our family.

 **Ask:** Can you think of the characteristics of a family with a good reputation? (Take a few answers.)


 **Ask:** Can you think of the characteristics of a family with a bad reputation? (Take a few answers.)

Example Answers - Requires CONTEXTUALIZATION:

Good Reputation	Bad Reputation
<ul style="list-style-type: none">• Father brings home money• Boys bring home money• Father makes good decisions• Wife and children are obedient• Wife is loyal• Children are polite• Girls do not go out with boys• Children study hard and get good grades	<ul style="list-style-type: none">• Father is lazy• Father drinks/smokes too much• Wife is lazy• Wife and children go out and do whatever they want• Girls are seen with boys• Children misbehave and are a bad influence on their friends


 **Ask:**

- Why is reputation so important for our families and the communities or societies we come from?
- What will happen if our family has a bad reputation?
- How do you think the concept of family honor or reputation influences people’s action when it comes to marriage of daughters?

 **Explain:** We know that family reputation is very important in our community. Family reputation affects our social relations at all levels and can bring great pride or great shame. It may also lead us to take decisions that we think may not be the best for ourselves or our family, but we do it because that is what we think other people expect from us.

Activities (1 hour 20 minutes)

Activity 1: Reputation and the Community (50 minutes)

 **Say:** We will now have the opportunity to see how family reputation may affect decisions people take related to their daughters.

✓ **Do:** Divide participants into 3 groups and give each group a scenario. For low literacy groups, you can read the scenarios to them. Each group will discuss the scenario they have been assigned and answer the questions (below).

1. What risks to their reputation do you think the people in the story were concerned about?
2. How did this impact the daughter in the story?
3. Could there have been an alternative ending? What could the caregivers in the story do differently (grounded in reality)?

WRITE DOWN the answers to this question on a flip chart.

✓ **Do:** Give participants 20 minutes in their groups to discuss the scenario. They should each get 5 mins to present back their scenario and answers to the questions. Give them a handout of Resource 13.1.

Scenarios (Requires **CONTEXTUALIZATION**)

Scenario 1: Linda's Story

Linda wants to move to the city to attend university after she finishes school. Her parents are supportive of this, but recently people have been telling Linda's parents that they should get her married before she moves. They say that girls who go to the city get corrupted and don't get married. One day, Linda's mother Victoria tells Linda that maybe she should consider it; Victoria says that when Linda leaves for the city, it is the parents who will stay behind and have to listen to the opinions of people. Linda really doesn't want to get married right now, but is wondering if she should do it for her parents. .

Scenario 2: Maya's Story

Maya got married when she was 15 to the boy who got her pregnant. She didn't want to get married but her parents told her she must, as otherwise it would bring shame on the family. Now she is 17 with a small child and back at home with her parents. Maya wants to go back to school to complete her education, and then find a job so she can support her child. Maya's mother tells her that it is not an option for a divorced girl; people in the community will talk about her. She should just get married to someone else who will accept her and her child.

Scenario 2: Maya's Story (Sensitive Contexts)

Maya got married when she was 15. She didn't want to get married but her parents really wanted her to. Now she is 17 with a small child and back at home with her parents as the marriage did not work. Maya wants to go back to school to complete her education, and then find a job so she can support her child. Maya's mother tells her that it is not an option for a divorced girl; people in the community will talk about her. She should just get married to someone else who will accept her and her child.


✓ **Do:** After each group presents, ask others if they have any responses to add. (Take answers.)


? **Ask:** What did we learn from these stories?


⋮ **Explain:**

- All of these stories showed us how risks to reputation may influence the decisions people make.
- They also showed us how this can impact the girls and families in the stories. But more importantly, it showed us that there could have been an alternative ending to these stories.
- Sometimes, people may prioritize family reputation over the well-being of their family members; when this happens, their family members might struggle to have a happy and healthy future.
- We can be examples for other women and role models to girls in the community. We can support other women and girls by not reinforcing the "What will people say?" practices. And work together to make sure that people know we value women and girls in our community and that we will support them to stay safe and secure a healthy future.
- When we do this, we begin to break down stigmas and we can slowly make change in our homes and communities.


Activity 2: Our Vision for Our Family (30 minutes)

 **Say:** In our very first session together, we discussed our hopes and dreams for our daughters. We discussed what we wanted them to learn or achieve and what dreams and hopes we had for them.


 **Ask:** Does anyone recall what their hopes and dreams for their daughters were? (Take some answers.)


 **Explain:** In this activity, we will revisit those thoughts and build on them. We will start with some guided questions and will be closing our eyes, so you might start to feel very relaxed and maybe even sleepy. But try to stay active with your imagination.

Once everyone is comfortable,

 **Say:**

- Please close your eyes or look downward for the next few minutes.
- If you need me to repeat anything, you can raise your hand at any point and I will go over the instructions

 **Note:** Leave a few seconds for participants to have time to reflect on the questions being asked before moving on to the next instruction.

 **Say:**

- I want you to think about your daughters. Stop and think about each girl—including those who are married and no longer live with you and also your daughters-in-law. What do you like and appreciate about each of them?
- Now let's think about the other women, girls, boys, and men in your family and in your life; what do you like and appreciate about each of them?
- Now let's think about you as a mother, caregiver, friend, and partner. What do you like or appreciate about yourself and the relationships you keep with the people we discussed?
- Looking down the road, two years from now, what do you want your relationship with each of your daughters (married or unmarried) and daughters-in-law to look like? Has anything changed from how it is now?
- What will be different for you as a mother, caregiver, friend, or partner? What will be different for your family? How will the lives of each of your children be different, especially for girls?
- Slowly and when you're comfortable, you can begin to open your eyes and stretch.

**Ask:**

- Would anyone like to share their thoughts and ideas so far?
- How can you turn these thoughts and ideas into reality? What could be some of the challenges you face in the community or in the home along the way?
- How can we overcome these challenges? Think about 2-3 concrete steps you can take. The idea of concrete steps means try to think about things you can actually achieve, even if it is very small steps.



Do: Ask participants to share some of the steps they thought of and write these on the flip chart.



Ask: How can you discuss your vision with your family, especially your daughters and daughters-in-law and include their ideas in your own vision so that you have a collective vision for the family? Think about 2-3 concrete steps you can take.



Do: Ask participants to share some of the steps they thought of and write these on the flip chart.



Say: Now that your vision and your steps are clear, make a note of the vision and steps on a paper or in your mind. We will be asking you to share these with your family, so make sure to include the things you would like to share with them.



Do: Distribute pens, colored pens, and paper to the group if they are writing this down. For those unable to write, they can discuss this for a few minutes with their partner.

**Ask:**

- How are your dreams for girls different now compared to the first time we thought about this?
- How are you going to share this with your family and how will you involve them in the visioning process?



Say: Some ideas for this include:

- Asking girls (and other family members) for feedback on the vision.
- Asking girls (and other family members) what they would like to change about this vision, for example, what they want to add or remove.
- Asking if the vision reflects the girl's own vision.



Note: Some women may not feel comfortable discussing this with their husbands/partners. Discuss how they can work around this, what their limits are, and what they feel comfortable doing.

Key Message



Say: Family and personal reputation has a big influence on all of us. Sometimes this can be positive and other times it can make us make decisions that we might not make if we didn't have this pressure from others. But during this session, we came up with suggestions and alternatives that were practical, and that we could consider when we ourselves experience pressure being placed on our family. Before we make any decision, we can always think twice, considering the risks and benefits of our decisions and consulting with our family, especially with those whom the decision affects, to see what the alternatives could be.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Share your concrete steps for a joint family vision with members of your family, including your daughters. Ask them for their feedback, if they have other suggestions update your vision according to what the family suggests.



Note: If male caregivers are not participating in Girl Shine, women may not feel comfortable having these conversations with them. Discuss what is within their power to do and make sure they only do what they are comfortable with.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Check preparation section and prepare resources in advance.

SESSION 14:

CHANGE BEGINS WITH US²⁸

Session Aims:

By the end of the session caregivers will:

1. Understand the control they have and how to create change for girls
2. Identify areas they have influence over and who their allies are who will make a change for girls

Materials:

- art box
- comments box
- paper
- pens
- colored pens
- paper or personal booklets
- flip chart paper
- markers
- different colored post-it notes to the last session

Preparation: Prepare Resource 14.1: Discrimination Pyramid and Resource 14.2: Circle of Change

Duration: This session could take up to 2.5 hours and can be split over two sessions if there isn't enough time to complete.

Timing: Before Male Caregivers' Session 14 takes place.

Welcome & Review (10 minutes)

Did you share your concrete steps for a joint family vision with members of your family? Who did you talk to? What feedback or suggestions did they have?

Let's Explore (20 minutes)



Explain: to participants that they are nearing the end of the program. Thank them for their ongoing interest, enthusiasm, and participation.



Say:

- For the opening of the session today, we want to take some time to reflect on what we have achieved and learned so far.
- Make yourself comfortable; choose a part of the room where you have some space to sit or stand comfortably. You will be asked to close your eyes and I will say a series of statements. If you agree with the statements you will raise your hand. If you disagree with the statement your hand will remain down.
- Your eyes will be closed so nobody else will know what your opinion is, only myself (and any co-facilitators, volunteers present).

 **Note:** If caregivers do not feel comfortable closing their eyes, ask them to look down towards the ground. Also remind them of the group agreements and maintaining confidentiality.


 **Do:**

- Check that the instructions are clear and let participants know that they can ask you to repeat or rephrase any statements that are unclear.
- Once everyone is ready, read the statements below. After each statement, remind participants to raise their hand if they agree and to keep it down if they disagree.


Statements:


1. Girls' education should be valued as much as boys' education.
2. Girls and boys should equally contribute to house chores in the home.
3. Girls are never to blame if they experience violence.
4. Girls have the right to socialize with friends and build their support networks.
5. Girls have the right to make choices about their own sexual and reproductive health.
6. Girls should be involved in decisions that affect them.
7. Girls have a right to make their own choice of whom to marry, and when.
8. Marriage before a girl is fully grown (18 years or older) is harmful to the girl.
9. Girls with disabilities should be given opportunities like their peers.
10. Married and divorced girls should be given the same opportunities (e.g., education, building social networks etc.) as their unmarried peers.

 **Do:** Once finished, ask them what they learned through this process about their thoughts and opinions.

 **Note:** This activity will give facilitators a sense of where participants are in their journey. If participants hold some attitudes that are harmful to girls, it may be important to factor this into the action planning in future sessions. Talk to your supervisor if you have any concerns.

If you do find there are still many harmful attitudes in the group, you can:

 **Explain** We might not all agree on these statements. Maybe some statements are difficult for us to accept because they are very different from our own beliefs. As we move through this session and the next, it is important to be aware of this, as we will be doing some activities in the community by the end of our time together. As we move forward, think about your reactions to some of the activities, and how comfortable you are feeling. In the next session, we will talk about our limits, and we can use it as an opportunity to reassess how we engage in the vision we are working on.

 **Do:** If possible, use this opportunity to address harmful attitudes immediately, explaining which ones are harmful and why.

Activities (1 hour 40 minutes)

Activity 1: We Have the Power to Make a Difference (50 minutes)



Explain: In our everyday lives, we may witness things that we can easily identify as violence or harm, and other times, it may not be as easy to identify it or know what to do.



Ask: Does anyone have examples of what some of these things might be? (*Take some answers.*)



Explain: This could range from witnessing someone being violent towards another person to hearing discriminatory comments about someone. For example, it could be seeing somebody shout at a woman in the street, or beating on a woman or girl, or mocking someone for their disability, religion, or ethnicity.



Say: For this activity we are going to explore the power we have in ending violence and harm against women and girls in our community. You will work in small groups and each group will be given a scenario. You will discuss in your group how you would respond if you witnessed this scenario in real life.



Do: Split participants into 3 groups and distribute the scenario. For low-literate groups, you can read the scenario to the group. Give them 10 minutes to discuss the scenario and to write down (or memorize) the steps they would take. Once finished, give each group 5 minutes to share their scenario and steps with the wider group.

Scenarios (Requires **CONTEXTUALIZATION**):

Scenario 1: Your friend tells you that her husband wants to marry their daughter off at the first offer he receives because he believes “girls are nothing but a burden on the family.” She comes to you for advice on what to do.

Scenario 2: You are gathered with your friends, drinking tea, and chatting. Victoria says that her husband has been helping her with the cooking lately. The other women laugh; they tell her that she shouldn’t be having her husband to help with “women’s duties,” and they start questioning his manliness. What could you do in this situation?

Scenario 3: Your neighbor discloses to you that her husband is violent towards her, and she doesn’t know what to do.



Do: After each scenario is presented, see if anyone in the larger group has feedback for the group that presented.



Note: If group members suggest harmful steps, ask what the pros and cons could be. Pros and cons could be risks or benefits associated with any harmful steps suggested by group members.

Once all groups finish,



Do:

- Present the flip chart; it should contain the tips below (points in bold).
- After reading the tip, ask the group what they think it means. Take one or two answers for each and then give them the following explanation.



Explain:

If someone discloses violence being committed against a woman or girl:

1. **Be non-judgmental/non-blaming:**

Do not blame women and girls who have experienced violence. If a woman or girl discloses violence they have experienced to you, you can tell them that the violence they experienced was not their fault.

2. **Maintain confidentiality:**

Do not gossip or share others' stories. People trust you before confiding in you or telling their stories; use their trust in you to build them up, not to break them.

3. **Prioritize safety:**

Do not put yourself at risk or do anything to put the survivor at further risk. A survivor is any woman or girl who is experiencing or has experienced violence. Never take a decision about a survivor into your own hands. Always help the survivor seek support from a person trained to help her (like a caseworker at the safe space).

4. **Know how to describe services available and how to access them:**

Make sure you know what's available in your area to support women and girls who have experienced violence so that if any woman or girl asks for your support, you have information about how to access services. You can always ask the caseworkers for updated information on available services in case there are changes.



Say: Always, the best course of action is supporting access to services. Leaving it to the professionals assures everyone is safe. As a woman, you can be a vital support to other women and girls in your community by being a trusted person and providing them with information on where to seek support.



Say: Now, let's discuss what to do when responding to harmful attitudes and beliefs.



Explain:

- In **scenarios 2 and 3**, we saw those around us demonstrating harmful attitudes. They might seem harmless and perceived as jokes, but they can also reinforce ideas and attitudes that are used to limit women and girls choice and safety.
- In these situations, we might indicate to others that we don't agree with their comments. We might say "I do not agree with that belief," "I believe men can help women in the home," or "I do not think it is appropriate to talk about divorced women in that way."
- Using "I Statements" is a way of expressing an opinion without making someone feel defensive or feel attacked. This may not automatically change someone's mind, but it breaks the silence and acceptability of some of these behaviors.
- As women, we can make a difference in how women and girls who experience violence are treated. We can also make a difference by highlighting harmful attitudes that might exist among us. Together we are powerful, and we can improve the situation for women and girls and help them stay safe and become empowered.



Do: Give participants a few more minutes with their groups from before and ask them to look at their steps again. Are there things already included from the tips just shared? Are there new tips or steps they would like to include?

Activity 2: Circle of Change²⁹ (50 minutes)



Explain: In the last activity, we discussed how together, we have the power to make a difference in our community. But we might not always feel that we have the power to make a change because, as discussed in previous sessions, there are other groups that try to hold power over women in the community. We may also not feel that we can stand up to certain powerful people in the home or the community. The burden to change this shouldn't just fall on women; there are limitations to what we feel comfortable doing, and we may fear certain risks or backlash. Our safety comes first. And as we move into the next activity and think about the things we can influence, we should always put our safety first.



Say: In this activity, we will explore what change girls want to see in the community, what is in our control to change, and what is in our control to influence.



Do: Share with caregivers the areas girls want to see change in, based on your discussion with the facilitator of the adolescent girl sessions.



Ask: What do you think of what girls want to action in the community? Are you willing to support them?

► Part 1



Do: On a flip chart paper, show participants your pre-prepared Circle of Influence Diagram (see Resource 14.2).



Say: Let's take the outermost circle in this diagram. We call this the Circle of Change. Here we can list down the things girls want to see change in our community.

► Part 2



Ask: Thinking about the themes girls mentioned, is there anything else you'd like to add? Participants can either shout these out and the facilitator adds to the circle of control, or they can take time to discuss for a few minutes in pairs before feeding back.

► Part 3



Say: Now we will move to the innermost circle. This is called the Circle of Control. By this we mean the things we personally or as a group have control over. Looking at the things listed in the Circle of Change, we will think about what we personally or as a group can do to make that change happen.




Ask: Looking at the examples in the Circle of Change, can anyone think of things within our control personally or as a group that we can do to make change happen?





Do: As a group, go through each theme or idea listed and ask participants to share their ideas on what's in their control to do, based on the girls' ideas. If things are outside of their control, that's okay. Write the things in their control on the inner circle and keep a note of the things outside of their control.

29 <https://www.thensomehow.com/wp-content/uploads/2019/06/TS-Circle-of-Influence-Worksheet-2.0.pdf>


 **Note:** If you are concerned about risky suggestions, ask participants what the pros and cons could be from using that technique and try to provide a safe alternative or explain that we will put this aside. If participants suggest things that don't address the issues girls are requesting, remind them of the change girls want to see and ask them if their suggestions will help achieve that change.


► Part 4


 **Explain:** Now we will focus on the middle circle. This circle is called our Circle of Influence. This is a very important circle as this circle focuses on the things that are outside of our direct control but that we can still influence.


 **Note:** Please explain what "influence" means if people don't understand, e.g., to be able to change something in an indirect but usually important way.

 **Say:** Going back to our Circle of Change, these are the things you listed as outside of your control.

 **Do:** Read them the list outside of their control.


 **Ask:** What can we do to influence these things?


 **Note:** It could help to start with one idea listed in the circle of change to use as an example. For example, you can Say: "If one of the things in our circle of change is to see 'girls have more decision making power,' but it is outside of our control, we can identify who has influence and how we can influence them to see this change. We might for example put 'talk to male family members on value of girls participating in decision making' in the circle of influence."

 **Note:** Check that the suggestions are realistic and assess them for potential risk. If you are concerned about potential risk, ask participants what the pros and cons are for their idea and try to provide a safe alternative or explain that we will put this aside.

► Part 5

 **Do:** Summarize their Areas of Change, their Circle of Control, and their Circle of Influence.

 **Say:** You have identified (1) the change you want to see, (2) what is in your control to change, (3) how you can influence the things that are outside of your control, and (4) who you need to work with to do this (these are your allies).

 **Ask:**

- How do you feel about this plan?
- How do you think girls will feel about the support you can offer?
- What do you want male caregivers to know about how they can support you, especially on the issues outside of your control?

Key Message



Say: Each of us has the power to make a change in our community. While we may not be able to change things overnight and there may be things that are outside of our control, we can start by making a change to the things we do have control over and by identifying who we can influence. These small concrete steps are the building blocks to help us achieve our overall vision for protecting and empowering women and girls in the home and in the community.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Now we have started to think about the areas we can influence. We would like you to share the ideas from the last activity with men (if they are participating in Girl Shine) if you feel comfortable and with girls in your life.



Do: Check to see how girls feel about your ideas and if they would like to change or add anything.



Say: We would like to share your ideas anonymously with the facilitators of the male caregiver groups if you agree to it, so they can know how you would like them to support you.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- As this is the second to last session, check in with participants what they want to do for the graduation and start putting in place some plans.
- Make time to meet with the facilitators of the girls' sessions and male caregiver sessions to know what girls' ideas were, share some of the ideas that women shared and what they want men's support with.

SESSION 15:

SUPPORTING GIRLS IN THE COMMUNITY³⁰

Session Aims:

By the end of the session caregivers will:

1. Start planning for their community activities.
2. Recognize what their limits are and how to find safe ways to support girls and women in the community.

Materials:

- art box
- comments box
- paper
- pens
- colored pens
- paper or personal booklets

Facilitator Note:

- During this session, the group may come up with a range of ideas. It's good to check the ideas are practical and based on reality, and also to assess them for risk. If you are unsure of any of their suggestions, you can ask what the risks or pros and cons would be to that specific suggestion. You can also ask them if they discussed the idea with girls directly.
- If you feel the activity or suggestion is not workable, you can ask them to suggest an alternative. If they struggle to think of one, you can either propose one or ask them to take it to other women and girls as part of their homework. This will also give you time to discuss with your supervisor and come up with a proposal in the next session.

Duration: 2 hours

Timing: Before Male Caregivers' Session 15

Welcome & Review (10 minutes)



Ask: How did you find the takeaway activity of getting feedback from girls and sharing your ideas with men on your Circle of Influence? Were girls comfortable in sharing their feedback with you?



Note: Here we are only looking for feedback on how they found the activity; they don't have to list everything girls and men told them, as there will be time to share in the first activity.



Do: Share some of the ideas that you learned from the facilitator of the girl group.

Let's Explore (25 minutes)



Say: We are coming to the end of our sessions together, and soon it will be time to organize yourselves, to keep these conversations going, and to work on your vision for your family and the circle of change you want to see in the community, especially in terms of women and girls' safety and empowerment. Today we will continue to build on the activity from the last session and include the feedback that girls shared with us.



Ask: Does anyone have ideas on how we can keep the conversation going and how we can organize ourselves so we don't stop all the amazing efforts we have made once these sessions end? (Take some answers.)



Note: Participants may say that change takes time, resources, patience, and confidence. Acknowledge this, as it is grounded in reality. To follow up, you can Say: "There are many things we can achieve without concrete resources (i.e., by using patience, confidence, etc.), but there are also things we do need resources for. If this is something outside of our control, how can we influence this?"
If not mentioned, **ADD:** "We can do this through community leaders or through community groups that might offer support, etc."



Do: anything the group may have missed:

- **Consistency:** Have a regular time and place that you meet. While not everyone will be able to attend all the meetings, the meetings themselves should continue with consistency as much as possible.
- **Identity:** Set up a name for your group. This will help develop your group identity and in the future, if you decide you want others to know your group exists, they will be able to easily locate you.
- **Compassion:** Make space to connect, talk and support each other in addition to working on your plans. Your time together shouldn't just be focused on tasks, but also include time to take care of yourselves and each other.
- **Collaboration:** You may need to identify people for specific roles and responsibilities (divide and allocate tasks). For example, someone to organize where you meet, someone to remind everyone, someone to keep you on track for the vision, etc.
- **Decision Making:** As a group, you may not always agree; voting on certain decisions will help to ensure decision making is more equal. There may be other ways you decide to do this, but decisions should be collective.
- **Hopefulness:** There will be challenges and maybe some backlash along the way, but stay hopeful. You are already making a difference in the lives of women and girls, and you should also celebrate the small achievements along with the big ones.



Note: If women **are** able to meet at the safe space for their ongoing meetings once the sessions end, please inform them of this. If the safe space is also able to provide them with stationary, tea/coffee and snacks, or small funds for their activities, please also inform them. If possible, help the group to connect with VSLA groups or IGA activities to support the sustainability of their initiative. Resourcing and connecting the group to existing opportunities and structures will support their sustainability.

Activities (1 hour 15 minutes)

Activity 1: Women and Girls' Vision (30 minutes)



Explain: Each of you spoke to girls in your life about your Circle of Change Activity to get their feedback (and you may also have shared some ideas with the men in your life).

**Ask:**

- How did that go?
- What was the feedback from girls? Was there anything they wanted you to do differently?

**Do:**

- Recap the Circle of Change Activity, including the Circle of Influence, from the previous session.
- Add anything new to the poster based on the girls' feedback.
- Add feedback provided by the facilitator of the girls' sessions.

Activity 2: Understanding our Limits and Risks (30 minutes)

Say: You highlighted some great ideas on what can be done and how and updated it with feedback from girls.



Ask: From the circles we have built upon, can anyone think of any new risks or limits associated with each of the suggestions that we may not have covered in the last session? Were there risks that the girls themselves highlighted?

(For example, if the idea is to intervene if they witness a case of early marriage taking place, the risks could be anger that somebody interfered, and potentially repercussions on the girl as a result. If the idea is to convince a religious or community leader about the risks of early marriage, a limit may be that the person doesn't feel comfortable approaching someone in authority in this way.)



Do: Have them to go through each suggestion (that was just written down) one by one, highlighting risks or limits for each. There may be some that come with no risks or limits and that's also okay; the idea is to assess the risk.



Do: Once finished, ask them what is possible to do and how can they replace some of the riskier ideas with ideas that are less risky, within their limits?



Ask: Can anyone think of the things that we can do to replace the risky activities?



Do: Let them discuss briefly in pairs or in groups of three and share back their ideas.

ADD the following if not mentioned:

- We can give people information about services that exist for women and girls where they can go to get specialized support.
- We can encourage people to seek the opinions and needs of women and girls in these situations and to listen to girls.
- We can also let women and girls in our community know that they are never to blame for the violence they experience. We may do this when we hear someone making blaming comments.
- We can also speak up and share information on the opportunities that women and girls deserve.
- We can speak out against discrimination that all women and girls are faced with, especially those who have disabilities or are divorced.
- Where we feel we have limits, we can start with ourselves and our circles of influence, which will have a ripple effect.

Activity 3: Creating a Supportive Environment for Girls (15 minutes)



Say: As these sessions come to a close, we want to discuss the ideas you have about continuing to create a supportive environment for girls, so that they can continue practicing the skills and knowledge they gained from the sessions.



Ask: Does anyone have any ideas on how we can continue creating a supportive environment?

ADD if they don't mention it:

- Check in with girls regularly to ask how their plan is coming along and what ongoing support they need to make it happen.
- Make time to talk to girls and see how they are and ask if there is anything they'd like to share with you.
- Connect girls to people in the community who can help them act on their ideas, e.g., female community leaders or other influential people you have access to.
- Give them opportunities to share their knowledge with other girls in the family or community.

Key Message



Say: We can all make a difference in the lives of each other and the lives of other women and girls in our community. A simple step is to continue to get together and be supportive of one another; together, we can make a change. We must always put our safety first, but we have also discussed many great ideas of what we can practically and safely do to support women and girls in our community. As always, we want to make sure what we do also considers the safety and wellbeing of other women and girls. No matter what comes our way, together we can bring about change and make the community safe, supportive, and empowering.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Before next session, let the girls and men that you communicate with know how you progressed on your plan, if it is safe to do so. Ask the girls if there is anything further you can do to support them.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Make time to meet with the facilitators of the girls group (if they haven't ended) and the male caregiver group to share some of the ideas that are coming out of the female caregiver group.
- Read the preparation section for this session in advance. If the graduation is taking place on the same day, you will need to put plans in place for that too (including procuring specific items).

SESSION 16:

LEADING THE WAY TO CHANGE

Session Aims:

By the end of the session caregivers will:

1. Finalize their action plans based on feedback from girls and men.
2. Decide on their next meeting date, place, and time.
3. Celebrate their achievement of completing the sessions.

Materials:


- art box
- comments box
- paper
- pens
- colored pens
- paper or personal booklets
- If the graduation is taking place on the same day, procure certificates of completion, and T-shirts with messaging (if budget allows)
- If the graduation is taking place on the same day, snacks and drinks for the celebration.

Preparation:


- Read the "Let's Explore" section in advance of the session so you are prepared with all the relevant information.
- Prepare a closing activity to celebrate the group's completion of the curriculum. Ask the group how they would like to celebrate this and plan accordingly. If women want to be involved in the planning, this is encouraged so they feel they have ownership of the group and how it comes to an end.
- If they would like a public ceremony, ensure they have invited individuals they wish to attend, if men will be joining the celebration, ensure that the space chosen is external to the WGSS and that the necessary safety checks have been conducted. As the ceremony is added to the end of the session, if it is public it may need to take place at a different time or day to the rest of the session.
- If possible, having girls, women, and men come together to celebrate how far they have come would be ideal. Check in with all groups to ensure consent, if girls or women are not comfortable with this, ask them how they would like to celebrate and honor their wishes.
- Have up-to-date services and referral information to provide to women.


Duration: This session could take up to 2.5 hours. Add more time if the celebration and certificates are taking place on the same day. If the session is done jointly for men and women, you may need to allow more time for introduction and discussion.


Timing: Before Male Caregivers' Session 16 or done jointly with the men, if women agree to this.

 **Note:** If done jointly, the activities will need to be adjusted to make space for this. For more information, see the "Adaptation" prompts below.



Welcome & Review (10 minutes)

 **Say:** Today the opening activity will be a bit different because it is the last session. I want to start by saying it's such a great achievement for us to be here together completing our final session. Today, I am feeling _____. (Share with the group how you're feeling about reaching this point.)


 **Ask:** Would anyone like to share how they are feeling?


 **Say:** We should all feel very proud of ourselves for making space for this group, being open to discussions and willing to learn from one another.

Adaptation (for mixed session):

-  **Do:** If this is a mixed session, do an icebreaker so that caregivers feel comfortable, and do a round of introductions. You could ask the female caregivers to introduce the male caregivers, and the male caregivers to introduce the female caregivers, for example.
-  **Do:** Make sure participants suggest some simple Group Agreements for this joint session. Make sure agreements are set that emphasize the importance of listening to each other, and make sure there is a balance between how much the women and men speak.

Let's Explore (20 minutes)

 **Say:** This is our last session together. For this part of the session, instead of exploring new ideas, we will review some important information.

-  **Do:**
 - Check that they have decided on a name for their group (identity) and have decided on a regular time and place to meet (consistency).
 - Reiterate any details about the group meetings if they are to continue at the women and girl safe space (WGSS) such as time, date, who their focal point is, how to request resources, etc.
 - Make them aware of any specific protocols in place at the WGSS that they need to be aware of or familiar with.
 - If possible in your location, you can suggest having them trained on becoming community focal points; these are people who support the team to disseminate service information and refer GBV cases from the community that seek support.
 - Explain that they can still access the services available to them at the WGSS, which includes case management services which will always remain accessible and open to them. If there are any other activities taking place at the safe space or drop-in sessions, inform them that they are still able to participate, in addition to participating in the ongoing activities of their group.
 - If there is an update to other services and activities in the community that they have access to, use this opportunity to inform them and explain how they can continue to access (and share) this information.
 - Answer any questions the group may have and check they feel they have all the information they need before moving into the activities.


Adaptation (for mixed session):

- ✓ **Do:** For mixed sessions, get the group to split into single-sex groups. The women can discuss the questions outlined above and for the men, DO the following:
 - Check to see what plans they have for continuing work on their action plan.
 - Finalize any details about the group meetings if they are to continue in the same space e.g. time, date, who their focal point is, how to request for resources etc.
 - Make them aware of specific protocols in place that they need to be aware of or inducted into.
 - Explain that you would like to bring them back together for a FGD in about one month, to discuss their experience of the sessions and any changes that have taken place in their lives since the end of the sessions. Check to see they are happy to be contacted for their participation and decide how best to reach them.
 - Explain that their action plan should complement the plans of women and girls. Their role is to act as allies to women and girls and support their action plan by being in women and girls' circle of influence. They should decide how to ensure they maintain communication and receive continuous feedback from women and girls as they progress with their own plans.
 - Answer any questions the group may have and check they feel they have all the information they need before moving into the activities.


- ✓ **Do:** Once finished, bring the groups back together and ask the women if they would like to share anything with the men about their action plan. Ask the men to share their ideas with women and ask the women to provide feedback on whether the men's plans complement that of the women.


Activities (1 hour 30 minutes)

Activity 1: Action Plan (30 minutes)

-  **Explain:** We have individual plans for the change in our family, and we now have a joint plan for our community. We hope that for your individual plans, you will continue to discuss and work on this with your families, especially girls. Today we will focus on the next steps for our community plan.

- ✓ **Do:** Show them the Circle of Change poster. Confirm they are happy with the final plan.

-  **Say:** Now we have our actions, we need to decide how to achieve these actions, and who will be the focal point. As we discussed in the last session, we will need to identify women for specific roles and responsibilities to keep this plan moving. At this stage, you don't need to make a detailed plan for every single action, but you may:
 - Choose someone/a few people to be a focal point for the planning of meetings at the WGSS; this person will preferably have a way of connecting with WGSS staff to know when they can access a room, if they need any materials for their meetings, or if there are cancellations.
 - Choose someone/a few people to remind the group of the meetings.
 - Choose someone who can be a timekeeper for the meetings.

-  **Say:** We also need to decide how to make decisions. As we are many, we may not always agree. So how will we make decisions on how to move forward with actions in a way that is equal? What do we do when not all members are present at a group meeting and we need to make a decision? We want to be inclusive but also want to be able to move forward with actions.

- ✓ **Do:** Once these decisions have been taken, see if there is anything else outstanding that the group wants to discuss.

Adaptation (for mixed sessions):

You can carry out the activity above, giving men and women space to develop their own action plans. Give women the opportunity to present to men first, indicating any tasks they need men's support on in particular. Ask men to present their action plan to women and ask women to provide feedback on the men's action plan, indicating if there is anything they want men to change or include/remove etc.

Activity 2: Supporter or Protector³¹ (30 minutes)



Say: As we continue to support girls having space and voice in the community, we can also think about whether our own actions are those of a supporter or a protector.



Do: Explain to the group that you are going to read them statements and after each one, you will ask whether the action is being a supporter or a protector.

- **Statement 1:** "If I notice that people aren't listening to a girl in the community, I interrupt to make her point for her."
(This is acting as a protector as the man/woman is interrupting the girl to talk for her, rather than addressing the larger problem that people are ignoring her.)
- **Statement 2:** "I encourage my daughter to dress conservatively so that she doesn't experience violence."
(This is acting as a protector because it puts the focus on the actions of the girl rather than focusing on helping men and boys learn to respect women and girls regardless of what they are wearing.)
- **Statement 3:** "If I hear a boy say something rude about a girl, I let them know that I found the comment offensive."
(This is being a supporter. It is strengthening girls' power by letting men and boys know that it is not ok to talk about them in rude ways.)



Ask: Why can acting as the "protector" for girls be a problem?



Say:


- When acting as a protector, the focus becomes on the girl's behavior or action, rather than on the larger environment that is creating the problem. It also exerts power over them to behave as you think they should behave, act or dress. It also implies that the responsibility for the problem (e.g. abuse, violence, child marriage) is the girls' and not the person who perpetrated it. Girls are not to blame for the violence, abuse, or injustice to them; this is the responsibility of the perpetrators.
- Acting as a protector, even when well-intended, can actually perpetuate harmful power imbalances.
- This reduces girls' power, voice and agency rather than increasing it.




Explain: Some key questions for caregivers to keep in mind as they work to be supporters are:

- Is what I'm doing right now helping to strengthen the voice and power of girls? Or is it serving to strengthen my own voice or status?
- Is what I'm doing helping to increase or decrease safety for girls?
- Is my action addressing the larger context that creates the situation (i.e., men ignoring women, men touching women's bodies without their permission, women blaming girls for the violence they experience, etc.)
- How do I know this is what girls want or need? How could I know if this is helpful to girls and not harmful?


31 Adapted from CARE: Tipping Point Facilitator's Manual for Boys and Parents Activists https://www.care.org/wp-content/uploads/2020/11/FM_Boys_Parents_Activists_with-citation.pdf


 **Say:** The best way to know if what you are doing is helpful or harmful is to ask girls directly and then take their responses seriously; don't try to convince them of your point of view.

 **Explain:**


- Girls have identified their issues and are making plans to tackle those issues themselves.
- Our support is important to encouraging their leadership.

Activity 3: Reflections (30 minutes)


 **Explain:** Because today is the last session, we want to reflect on the changes we have experienced since we started participating in these sessions.


 **Say:** Let's do something fun and creative to help us summarize our experiences of the sessions!


 **Do:** Split participants into three groups.

 **Say:** You can summarize your experiences in any way you like. This can be through a song, drama, drawing a beautiful piece of art, a poem, etc.; it can be whatever you agree on with the group. Some of the things we are really interested to know about are:

- Have your relationships in the family changed?
- Has your relationship with your daughter or daughter-in-law changed?
- Has the way you view the different roles of your family members changed?
- Have your feelings around early marriage changed?
- How do you feel about the relationships built in this group?

 **Do:** Give participants some time to think and prepare. Once they have finished, ask them to present this to the group.

 **Do:** After they finish, probe further into the questions listed above to gather more information from participants about their experiences and anything else they would like to share.


 **Explain:** When you share the positive benefits you have experienced with your friends, community members, or even community leaders, these positive examples can encourage change and are likely to inspire others to support adolescent girls, too.

Adaptation (for mixed sessions):

This could be an opportunity for mixed groups, giving space for women and men to share their experiences and find common themes they want to summarize (or different themes). If women are not comfortable with mixed groups, single sex groups can do the activity, presenting back to the wider group. You may need to have 2 female and 2 male groups to allow more time.

EVALUATION: Use the evaluation jars to see how caregivers like the activity. Take note on of the number of pebbles.

Certificates Ceremony

-  **Note:** For this activity, you may have organized a public or closed ceremony depending on the wishes of women. Women may have invited girls or men participating in the male sessions to the ceremony. The ceremony should be led by the wishes of women. Use this space as an opportunity to recognize women's participation.

-  **Do:** Ensure there are snacks and drinks available. Certificates should be printed and presented to women. Leave open space for them to celebrate their achievements. They may want to prepare some messages if this will be a public ceremony or share the reflections from the activity at the ceremony.

Male Caregiver Curriculum



Photo Credit: E. Holland

MALE CAREGIVER SESSIONS



SESSION 1:

INTRODUCTION TO THE GIRL SHINE PROGRAM

Session Aims:

1. Build trust with caregivers.
2. Introduce caregivers to the Girl Shine Caregiver Curriculum.
3. Reflect on the hopes and dreams caregivers have for their daughters.

Materials: *(These materials can also be adapted based on the local context.)*

- ball
- stickers
- Resource 1.1: Asset Cards
- Resource 1.2: Stages of Adolescence
- post-it notes
- pens
- tape
- flip chart paper
- markers
- comments box

Preparation:

- Internal and External Organs Diagrams Resources 4.2 and 4.3, printed and placed on the wall or given as handouts.
- Review the guidance in **Appendix 1 and 2** in the Girl Shine Caregiver Curriculum Part 3 to help you in case you encounter harmful responses from caregivers.
- Print out Resource 1.1: Asset Cards.
- Print out Resource 1.2: Stages of Adolescence


Terminology:

- Refer to the Glossary (**Appendix A24**) for the type of words to familiarize yourself with for all sessions.
- Talking about transgender/intersex can be sensitive; be observant of the participants' expressions/emotions and try to use the local terminology for sex organs where possible. Sometimes, it is even good to ask the participants what these parts are called especially if pictures are being used. Once this is done, you can use these names, making sure to clarify the biological names.
- It may also be sensitive to talk about HIV in some contexts. Think about ways to talk about this that would be acceptable in your context.

Duration: This session could take up to 2.5 hours to allow participants time to ask questions about the program.

Timing/When to Schedule: Before the start/or parallel to the start of Girl Shine Life Skills Curriculum with adolescent girls.


Welcome & Review (15 minutes)

- ✓ **Do:** Welcome caregivers to the first session of the Girl Shine Caregiver Curriculum
- ✓ **Do:** Introduce yourself, your role and your organization, and thank the group for coming and for their willingness to participate.
-  **Explain:** The reason we have brought you all together is to:
 - Draw upon our collective experience and knowledge to understand how to support adolescent girls to achieve their hopes and dreams and how to keep them safe, happy, and healthy.
 - Learn information and skills to help strengthen relationships with our daughters and family in general.
 - Discuss marriage of girls. We will discuss how we decide when the right time is for a girl to marry; what we can do to support married girls; and what the benefits and challenges of delaying marriage are. We will also think about how we can use what we have learned in our homes and community.
- ✓ **Do:** Get caregivers to talk to their neighbor, introduce themselves, and share how they are feeling about participating in the group. Then ask caregivers to introduce their neighbor to the wider group. It is okay if they forget things; their neighbor can assist them.

Group Agreements

- ✓ **Do:** Get the group to suggest some agreements and add the following if they don't mention them:
 1. We agree that the main purpose of these sessions is to learn how we can be a support to women and girls. While some of the information we hear and the discussions we have might relate to all of our children, our priority here is to talk about adolescent girls, especially those participating in Girl Shine.
 2. Personal stories shared in the group are not to be shared outside the group.
 3. Stories shared about other people should not reveal their identity or be shared outside the group.
 4. We respect and listen to all. We won't interrupt or talk over each other.
 5. We support and encourage each other.
 6. We treat everyone equally.
 7. We keep an open mind.
 8. We don't judge others for things they share.
 9. We agree to meet on the days/times set. No new members will join this group after Session 3.

Let's Explore (20 minutes)

-  **Say:** To help us achieve the goal of supporting girls in leading healthy and happy lives and achieving their dreams, we feel it is critical to involve you, as important decision-makers in the lives of girls.
- ✓ **Do:**
 - Explain to caregivers how many sessions you would like them to be part of. Explain that we need caregivers to commit to participating in as many sessions as possible. This is because each session will address a different topic and each topic has important information that caregivers can benefit from.

- Confirm their availability—weekly, monthly, etc. Ask them how many hours they would like to meet for each session.



Explain: The reason the sessions are separate is because our experiences as men and women are different in relation to caregiving, and we want to make sure the sessions are relevant to your experience as men. We might have the opportunity to have a mixed group for the last session, but this will be decided later.

- ✓ **Do:** Give caregivers a brief overview of the sessions you plan to cover with them.

Brief Overview of the Sessions



- Session 1** — Introduction to the Girl Shine Program
- Session 2** — Celebrating Our Family
- Session 3** — My Experience as a Caregiver
- Session 4** — Adolescent Girl Development (separate sessions for caregivers of married/unmarried girls)
- Session 5** — Supporting Adolescent Girls (separate sessions for caregivers of married/unmarried girls)
- Session 6** — The Family Environment
- Session 7** — Exploring Our Relationships With Adolescent Girls
- Session 8** — Power in the Home
- Session 9** — Parenting for Equality
- Session 10** — Marriage in Our Community
- Session 11** — Safety and Violence
- Session 12** — Supporting Girls Who Experience Violence
- Session 13** — Our Vision for the Family
- Session 14** — Change Begins With Us
- Session 15** — Supporting Girls in the Community
- Session 16** — Leading the Way to Change

- ✓ **Do:** Ask caregivers for reflections on the topics—anything they are particularly interested in, etc.

Activities (1 hour 5 minutes)

Activity 1: Supporting Girls for the Future (25 minutes)


- ✓ **Do:**

1. Print out the assets in Resource 1.1 (or select assets closest to those that are contextually relevant).
2. On flip chart paper, list the ages 10-19, or draw pictures of girls, starting with a very young one to an older adolescent. See Resource 1.2 for an example.

CONTEXTUALIZATION: If age is not a category used to determine maturity, swap this out with relevant categories. You can use the marital status of girls in the Girl Shine group (e.g. married/unmarried) and disability for example.

One by one, read the assets out to the group and ask them to decide at which age a girl should have received the information or skills that are listed on the card. They should make a decision as a group (or a majority decision).

3. See Resource 1.2 for an example

 **Note:** In some contexts, the information related to ASRH may be sensitive to discuss with men. Be sure to gauge acceptability before including these information cards. Where safe to do so, these cards should be included.

4. Once finished, ask caregivers to look at where the assets are placed. If you notice that the cards are listed mainly in later adolescence or after marriage etc. probe as to why caregivers have made the choices they have.
5. If you notice that cards are listed in early adolescence or before marriage, reinforce the point that it is important for girls to receive this information as early as possible to help ensure their safety and well-being.



Explain:

- If girls have access to this type of information, it can help to protect them from harm.
- They can learn very important things that will help them make informed decisions and support their safety.
- The earlier they receive the information, the more helpful it will be.
- Through Girl Shine, girls will (or are) learning about many things that will be useful to them in their daily life. This includes information about reproductive health, how to communicate well with their caregivers, how to stay safe, and how to make good decisions about their future, trust, early marriage challenges and benefits and the value of girls.
- Regardless of marital status, ability or age, all girls should be able to receive the same information.



Ask: Does anyone have any questions or is there anything that you are concerned about girls learning?



Note: If their concern is related to information on adolescent sexual and reproductive health (ASRH), try to understand what their concerns are and what steps they believe should be taken to support girls in receiving this information (e.g., if it is given by the mother, if it is scientific, or if it is not too detailed).

Activity 2: Understanding Sex and Gender (20 minutes)



Explain: One thing we will discuss in many sessions is how our experiences are different, depending on whether we are women, men, girls, or boys. So, for us to understand this in a bit more detail, I want to tell you a story:

Requires CONTEXTUALIZATION:



Say: Fatima is married to Salim and is pregnant. Salim and Fatima also have a baby boy who is one year old. Fatima gives their son milk from her breast some days.



Ask: Can Salim also get pregnant and breastfeed? Why not? (Because he does not have the organs to carry a baby in his body.)



Say: Salim goes to work every day and comes home at 7p.m.



Ask: Can Fatima also go to work? (Ask: Why? /Why not?)



Say: Fatima does go to work, two days a week. When she goes to work, a family member looks after the baby.



Ask: Is the family member male or female? (Either can look after a baby.)



Say: Fatima cooks dinner for the family, their favorite thing to eat is rice and vegetables.



Ask: Can Salim also cook? (Ask: Why? /Why not?)



Say: Salim does cook, especially on the days that Fatima goes to work. Salim prepares dinner because Fatima cooks dinner on the other days.



Say: With a small child at home and with two caregivers working, the household chores are sometimes forgotten. On the weekend, Fatima likes to make sure these chores are done.



Ask: Who can take care of chores in the house?



Say: Fatima and Salim split the chores between them. This way, it takes less time to do and is a fairer division of the labor.



Ask: Did you notice that there were some things only Fatima could do and Salim couldn't, and there were other things they were both able to do? What were these things?



Explain: The things that only males and females can do are related to their sex, but the things they can both do are related to their gender.



Do: Use the internal and external organ resources from Girl Shine if you need help explaining this content. You can place the diagrams on the wall if helpful or share in handouts.



Explain:


- **"Sex"** refers to the physical body and the biological differences commonly found between females and males. Most females are born with female body parts and functions—such as breasts, a vagina, uterus, going through menstruation, etc. Most males are born with male body parts and functions—they have a penis, they ejaculate, they have sperm, etc.
- **"Gender"** refers to family, social, or community expectations of females and males. Most of the time it has nothing to do with the body parts we have, but it is related to the roles and behaviors society thinks are appropriate for females and males. For example, many women can give birth because of their sex, but the expectation that it is a woman's role to raise children and clean the house is about gender.³² I use the word expectation because many women and girls will enjoy raising children and doing chores, but if they decide they do not want to do it, there is still the expectation that they will do it, and if they don't or can't they will be judged by society. So, their choice about which roles they perform is decided by society.





***Intersex:** There are babies that are born with bodies that are different from the common "female" or "male" body. They might have a combination of male and female genitals as one example. We call these people "intersex."

***Transgender:** There are also some people who do not fit into society's ideas of a man or woman. They may have mixed features from both sexes, e.g., a person may have breasts as well as a beard. She may wear women's clothes and have a man's voice. They are referred to as transgender persons. Transgender people are also those persons who may be given the gender identity of a girl or boy since birth but do not feel comfortable with it. A boy may feel she would be more comfortable as a girl and the other way around. Or they may decide they don't want to be labelled a girl or a boy. They are as human as any man or woman and need to be equally accepted in society.

There are some people who may be mocked or shamed especially when they don't behave in ways society expects them to behave according to their perceived gender. For example, if a man cries, his community might say he is acting like a woman, since the society has decided that being emotional is something only women can be, even though it is very normal for a man to cry. Another example is that girls and women are expected by society to not have body hair and if they do not remove it, society may mock them and tell them they look like a man, even though it is very normal for women and girls to have hair.


 **Ask:** What do you think about the information presented?


 **Explain:** Women and men are often told that they should do certain things because of their perceived gender. We learn that society expects us to behave differently and to fulfill certain gender roles. These expectations impact us throughout our lives and lead to unequal power between women and men. We can see this by looking at the positions men and women have in society, and who is in control of decision making. The different value placed on women and men can sometimes also lead to different access to rights. This affects women and girls, in particular those who are divorced, those who are living with a disability, and those who are experiencing other challenging situations due to their economic or nationality status. But people should not be treated differently because of these issues, and we should all have access to the same rights and opportunities and feel valued in the community.


 **Ask:** Can you think of any examples of expectations based on someone's gender or roles someone is supposed to perform because they are a man or woman?

Activity 3: Our Hopes and Dreams Circle (10 minutes)


 **Do:** Invite caregivers to make a circle.

 **Say:** As we do this activity, we want you to think about those daughters who are participating in Girl Shine in particular. Please note that when we say daughter, we also include girls living with caregivers who might not be their biological parents.

 **Say:** I am going to pass the ball to everyone in the circle, and each person will tell the group what they would like their daughter to learn or achieve or what their hopes and dreams are for her.

 **Note:** Some caregivers may ask about their sons or younger children, too. Acknowledge that caregivers of course have hopes and dreams for their other children, too, but for the purpose of Girl Shine, we are focusing only on adolescent girls.

 **Ask:** How did it feel to share your hopes and dreams for your daughters/daughters-in-law?

 **Note:** If some of the hopes and dreams caregivers mention were related to traditional gendered roles, for example, finding a good husband to take care of, becoming a good mother, etc., acknowledge the importance, but also ask them if they can think of things that they want for their daughters that are not based on gender



Explain: Adolescence is a time when a lot of things change in a girl's life. As this is a time of change, girls may feel scared or ashamed about what they are experiencing, but this change is a healthy and normal part of growing up. What happens in her adolescence will influence her life as an adult woman. We want to be able to support each other to give our daughters the opportunity to transition into adulthood in a healthy and safe way. We may worry more about girls compared to boys, and this can sometimes mean we limit girls in their movement and opportunities as they get older. Some girls may face more restrictions than others, for example, girls who are recently married, girls who are divorced, girls with disabilities, and/or girls who are new mothers. But we should try to make sure they have the same access to safe spaces, services, and opportunities as all girls and boys.



For girls that are recently married, we know that there are many challenges they face: new experiences and being away from their biological family. They may be expected to take on new roles and develop new relationships, and this can be scary and unknown. They need support from their biological family and their new family to navigate this situation.

Key Message



Say: We all have hopes and dreams for our daughters, sometimes girls' hopes and dreams for themselves may be different to the ones we have for them. It's important to talk to our daughters and listen to what they want too and involve them in decisions related to their life.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Do: Ask caregivers to discuss with their daughters what the girls are looking forward to learning in the Life Skills Sessions. They can share feedback during the next session. Although it shouldn't be the case, if you have caregivers who don't have girls participating in the sessions, ask them to talk to their daughters about their hopes and dreams for the future.

SESSION 2:

CELEBRATING OUR FAMILY

Session Aims:

By the end of the session, caregivers will:

1. Develop positive relationships with daughters.
2. Learn to provide a supportive environment for recently married girls.
3. Begin to challenge ideas they hold about diverse girls.

Materials:

- comments box
- papers
- colored pens
- pebbles or colorful post-it notes—enough for each participant to have 5-6 (or more depending on family size)
- box to place all pebbles/post-it notes in

Preparation:

- Illustrations of family members for The Rafiki's Story: Resource 2.1

Terminology: The concept of “celebrating our family” might make caregivers feel they require money to do this. Explain that celebrating your family can be simply showing appreciation, recognizing their achievements, spending family time together, etc.


Duration: 2 hours


Welcome & Review (5 minutes)

 **Do:** Welcome the caregivers.


 **Ask:** What did your daughters share about the Girl Shine Life Skills Sessions?

Let's Explore (15 minutes)

 **Say:** Today we are going to talk about and celebrate our families.


 **Ask:**

- When you think about your “family” who exactly do you think of?
- What are some of the ideas we have about what a family is or does, what the role of a family is, etc.?
- Does the idea of family change over time or remain the same? What changes and what remains the same? (e.g., families may change when people move away, when they experience displacement/crisis, when children grow up and roles change, or when new members join the family such as in-laws or grandchildren).


 **Say:** Everyone’s family is different but one thing we all have in common in this group, is that we all have daughters or daughters-in-law participating in Girl Shine, and as we think through our ideas of family, we will make sure these girls/young women are included in our discussions and actions.


Activities (1 hour 15 minutes)

Activity 1: The Rafiki’s Story³³ (45 minutes)


 **Do:** Read the following story to the participants. If possible, use illustrations for the different family members (See Resource 2.1):


▶ Part 1

 **Say:** Mariam and Sayed of the Rafiki family, have five children: Yasmine—11 years old, Asma—14, Adam—18, Selina—19, and Osman—22. They also live with their daughter-in-law (Dina) and Miriam’s mother (Amma).


 **Ask:** Does this sound like your family or families you know? What are the similarities and differences?

▶ Part 2

 **Say:** Adam, who is 18 years old, has a visual condition, which means he requires some extra support. Both his work and training college have improved their spaces to be more accessible to him, and Adam is performing very well.


 **Ask:** What does this story tell us about the value in making adaptations to better accommodate people with disabilities? (By making adaptations, people with disabilities can thrive and benefit like people without disabilities).

▶ Part 3


 **Say:** Selina is 19 years old and is divorced. She married at 16 and this led to a difficult marriage and a strained relationship with her in-laws. She is back home now and trying to understand what to do next.

 **Ask:** What did the family learn about marrying Selina at a young age? (That it was better to wait until she was older and more mature).


▶ Part 4

 **Say:** Osman is 22 and recently got married to Dina, who is 21. Dina completed her education, had a lot of information on the consequences of marrying at a young age, and decided to wait for the right time. Her parents supported her decision to wait. When Dina joined the family, they felt they gained a daughter, not just a daughter-in-law.

 **Ask:** What is the difference between the story in Part 3 and Part 4?

 **Say:** This story showed us that getting married at an older age can lead to a healthier marriage environment.


Activity 2: The Positive Things We Bring to Our Family (30 minutes)

 **Say:** Now that we've heard about the Rafiki's, we are going to think about our own families.

 **Do:**

1. Ask each participant how many people there are in their family. For each family member they have, give them a pebble or post-it note. There is no need to be prescriptive about who they include, but adolescent girls in the program should be included.
2. Ask them to assign each family member to a pebble.
3. Next, they should think about the positive things (strength, support, happiness) that they give to each of these people in their family and what these people contribute to the family.
4. When they have finished, ask everyone to take a turn to come to the box placed at the front of the room.
5. Ask them to share with the group the positive things that they thought of about their daughter. For example, they can say, "This pebble represents my daughter. The positive thing I give to her is support to attend school. The positive thing she brings to the family is her sense of humor."
6. They can then place all their pebbles in the box.

 *To ensure everyone is included, use the method that is accessible to everyone.

 **Explain:** This activity has helped us to think about the strengths of our family. We looked at what individual members of the family bring to the family as a whole. It also helped us to see what we contribute to individual members of our family and the family as a whole. When things are difficult, we can use this activity to remind us of how special and important our family is to us, and even when it is not easy sometimes, we have each other as a source of support.

Key Message

 **Say:**

- Recognizing and developing positive relationships with girls and women in our family will lead to a happier and more supportive environment.
- For recently married girls, support both from their in-laws and their parents, can be really helpful as they navigate a new environment.
- Sometimes the community may stigmatize specific groups of people, including those with a disability, or girls who are divorced, women who have never married. But we can try to make sure that these girls in particular feel supported in the home and not further isolated or shunned.
- Everyone has the right to be treated equally and with dignity.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Try to be aware of a moment that you appreciate with your family generally but also more specifically with your daughters (especially those participating in Girl Shine). We can share back our experiences in the next session.

SESSION 3:

MY EXPERIENCE AS A CAREGIVER

Session Aims:

By the end of the session, caregivers will:

1. Reflect on their experience of caregiving, especially in relation to girls, and how this has been shaped by internal and external factors.
2. Start (or continue) valuing girls as much as boys and begin associating a girl's value with more than solely childbearing and being a good wife.

Materials:

- paper
- colored pens
- flip chart paper
- markers
- post-it notes
- ball
- comments box

Facilitator Note:

- This session may be sensitive. Be sure to remind the caregivers of the "Group Agreements," and check to see whether they want to have additional group agreements for this session.
- This session may create lots of discussion and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: Who would like to share any moments they appreciated with their daughters from last week's takeaway?



Say: Today we are going to talk more about our own experiences as caregivers and how this may be different from women's experiences.

Let's Explore (20 minutes)



Ask: Can anyone think of any ways in which our experiences of raising and caring for children and household responsibilities as men is different to those of women?



Explain: Within the family, women, girls, boys, and men may have different responsibilities. Some examples of situations are listed below:

CONTEXTUALIZATION *(This should be based on the family structure of the caregivers you are working with.):*

1. There is a caregiver who looks after the children at home, while the other caregiver goes to work.
2. Both caregivers work and share the caregiving responsibilities.
3. One caregiver is expected to do the caregiving responsibilities and earn an income while the other caregiver is just responsible for earning an income.
4. There is only one caregiver present, and children (especially adolescent girls) are expected to take on additional responsibilities.



Ask:

- Which situations sound familiar to you?
- Are there any situations that are not listed here but are common in our community?
- If both caregivers are working, who do you think should be responsible for caregiving? How is this different from who actually does it?
- If there is only one caregiver present and children need to take on additional responsibilities, are girls expected to take on more responsibilities than boys?



Note: Men might say that it is the responsibility of women and girls to do the things related to caregiving, and that it wouldn't be appropriate or acceptable for men to do it. They might also say that women do not want men to support these things, as women don't think men can do these tasks. Try to identify men in the room who disagree with this and ensure they are given space to give their opinion.



Explain:

- Sometimes society can place different expectations or limitations on the roles that women, girls, boys, and men play inside and outside of the home.
- These rules set limitations on a person and on how they can behave, act, or what they can achieve.
- We can refer to the limitations these rules put on men and women as "boxes" that we are confined to.
- There are times, when we open up the gender boxes and we do not pressure men to stick to their boxes and be the main providers for the family. For example, in some situations, men might find it difficult to find work. Instead, they can support their families in other ways, taking on responsibilities like taking care of the children or cooking or supporting children with their schoolwork. At the same time, men and women can share the decisions on how to spend the money and how to divide the expenses and the tasks in their families, so that both are part of the family decision-making.
- It is important to open up the gender boxes and to be aware of these limitations, because they limit men, women, and societies as a whole.



Ask: Does this sound familiar to anyone?

Activities (1 hour)

Activity 1: Act Like a Woman, Act Like a Man³⁴ (40 minutes)



Say: We are going to do an activity that will help us understand in more detail the expectations society has of women and men and how this can influence us as caregivers.



Ask: Who can remind us of the difference between "sex" and "gender" that we discussed in the first session?



Explain: “Sex” refers to the physical body and the biological differences between females and males. “Gender” refers to the social status, opportunities, and restrictions that girls, women, boys, and men face.

Do:

- Draw two boxes on the flip chart; label them “Gender Boxes”; give one box the title of “Men” and one the title of “Women.”
- Participants stand in a circle and are asked in turn to mime a task or activity of daily life.
- Others in the circle guess the task or activity and say whether it is usually done by men or women.
- Facilitator notes each task/activity on post-it notes and adds the post-it to the flip chart in the “Women” or “Men” box based on participants’ suggestions.
- When everyone has had a turn, invite people to continue at random if they have an idea.
- Ensure that “breast-feeding” and “washing children” are included in the roles.



Ask: Is there anything we want to add to the tasks on the chart? How do men and women learn in these roles?

(To help participants think about how men and women learn these roles more concretely, you can use the following questions:)

- What do people say about boys who cry or who show any kind of emotion apart from anger? What about girls?
- How are men supposed to act around women? What about women?
- How are men supposed to act around other men?



Explain: These are society’s expectations of who women and girls should be, how they should act, how they should feel, and what they should say. They are taught to us from the moment we are born, by many different people, by the community, and through experiences.



Do: Facilitate a discussion around the following questions.

1. Are the ideas about what it means to be a man that are listed in this flipchart helpful or harmful to men and boys?



Note: Emphasize that men and boys may enjoy or take pride in some of the characteristics of the box (being a provider, having great responsibility, etc.) and be limited and harmed by others (having to be strong, unable to express emotions, etc.).

2. What happens to men and boys who step outside of the box? What actions can happen (for example, being teased, beaten, bullied)? What are they called by others?



Note: Use examples that the group has generated to demonstrate what this means - i.e. men who cry, men who stay at home to take care of their children, etc. Write responses on post-it notes and stick them outside of the box.

3. What do the ideas both inside and outside of the box teach people about what it means to be male?



Note: The box teaches us that there is a right and a wrong way to be a man or a boy. The names and violent behaviors listed outside of the box are punishments for breaking these rules. They are ways of policing behavior and making sure that men “act like real men.” These ways of acting may directly harm women and girls.

4. What are the advantages and disadvantages of staying inside the box?



Note: The consequences for women of stepping out of the box are generally much more severe than for men, but men are affected negatively as well by gender roles.



Explain:

- Sometimes, because we grew up with these rules, we expect our sons and daughters to have the same rules we did—rules that say, “This is the place of a girl or a boy in society.” We may also treat the women in our lives in a way that doesn’t give them opportunities to participate in decision-making.
- As men, we can try to empower all the members of our family to achieve their full potential, especially the female members of our family, who traditionally may not have been given the opportunity to think of possibilities outside of the gender box.

Activity 2: Exploring Fatherhood (20 minutes)



Say: A male caregiver is one of the most important people in an adolescent girl’s life. Caregivers can love, teach, and raise their children in very positive ways. Most caregivers know this, and want to be responsible, engaged and loving to their daughters, especially as they grow up and navigate the challenging period of adolescence. This love is equally important for girls who are already married. Sometimes male caregivers get busy with other activities, or do not know how to act in certain situations.



Ask: Have you seen examples of responsible, engaged, and loving caregivers to learn from (e.g., yourself, your own caregivers, family, friends, or neighbors)?



Say: We wanted to take some time to talk together and learn from each other about how to be supportive of our daughters so they can be healthy, safe, and fulfill their dreams.



Ask: What are some of the qualities that you admire in a caregiver?



Note: If very traditional ideas are shared about fatherhood being only about providing economically for the family, or protecting and disciplining them, then ask follow-up questions:

- Are there other ways to show you care about your family?
- Is fatherhood different now than it was in the past?



Ask: How can and do male caregivers express their love and support for their daughters?



Note: For example, share decision-making in the house, spend quality time with girls and listen to them, encourage them to think about their dreams and aspirations.



Do: Get participants to make a circle, passing the ball to each participant, and ask each man who receives the ball to share one hope or dream they have for their daughters.



Note: If they mention hopes and dreams that limit girls, ask them if they would like to think about other hopes or dreams in addition to the ones they have already mentioned.



Ask: How can we support our daughters in achieving their dreams?

Key Message



Say: Male caregivers have a big role to play in the lives of adolescent girls. The way we interact with girls at this age helps to shape who they become as adults and can make a big impact on the opportunities they receive, and on their confidence and health. When caregivers continue to show this love towards their married daughters, it can help them to settle into their new environment knowing that they still have the continuous love and support from their caregiver.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Discuss with your daughter the hopes you have for her and ask what her hopes are for herself. Then share a story with your daughter about what it was like for you growing up and what was important to you at that age.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Identify discuss and simplify the terminology in the next session for your context. You may want to invite a health practitioner to meet with facilitators before the session, so they feel equipped to deliver the content.

SESSION 4:

ADOLESCENT GIRL DEVELOPMENT³⁵ (Caregivers of Unmarried Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- Resources 4.1 to 4.4.
- Large printout of the Tanner Scale (Resource 4.1) or handouts for smaller groups.
- comments box

Preparation:

- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls. **It is important that facilitators refer to [Appendix A12 in Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.**
- You could consider inviting a health practitioner who has been trained in GBV core concepts and clinical care for sexual assault survivors, to support the facilitation of this session to clearly explain the adolescent development including terminologies. Or invite a health practitioner during the facilitators training to facilitate this session.


Terminology: Prior to the sessions, supervisors and facilitators go through the sessions, identify, discuss, and simplify words; if possible, find a local word. This will help facilitators and translators properly discuss sessions with caregivers. For example, a word like "Puberty" might also be referred to as teens, adolescence, pubescence, etc.

Facilitator Note: As this is a sensitive topic, it is important to remind caregivers of the "Group Agreements" (Session 1) and ask if they would like to have any additional agreements specifically for this session.

Duration: This session could take 2.5 hours, if it is not possible for caregivers to stay that long, you can split the session over two sessions.

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module
This session may create lots of discussion and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Welcome & Review (10 minutes)


 **Ask:** Did you discuss with your daughter the hopes you have for her and ask what her hopes are for herself? Does anybody want to share how it went?


 **Say:**


- Today we are going to talk about the social, physical, and emotional changes that girls experience during adolescence. Adolescence is a stage girls and boys pass through between ages 10-19.
- It is a time of great change and opportunity. It can also generate confusion if girls and boys are not adequately supported in understanding the changes they are experiencing.
- When girls reach puberty, they are often perceived by society as “adults,” and are expected to fulfill certain roles and responsibilities that they might not be ready for because they are still developing and growing. They may be expected to get married, or may be restricted from going to school, spending time with friends, and accessing opportunities.
- Some of us may feel uncomfortable or strange talking about this topic. That reaction is normal. We don’t talk about these things in a large group every day. But by learning about this very normal process here in a safe space, you will be more comfortable talking about the changes with your adolescent girls and boys.

Let’s Explore (25 minutes)

 **Ask:** What do you understand by the term “puberty”?

 **Explain:** Puberty is a process of hormonal and physical change where a girl or boy becomes capable of reproduction. This usually lasts between one to three years. It happens during the period of adolescence, where girls and boys go through social and emotional growth and this period lasts from the age of 10-19.

 **Ask:** Why do you think girls may be restricted from certain spaces or opportunities during this time?

 **Say:** This may be due to how girls could be perceived in the community or because of fears related to her safety or honor. Today we want to explore some of these perspectives and know from you what your opinions are on this topic.

 **Ask:**

- What were some of the things you experienced during puberty—physical and emotional?
- What changes did you see your sisters go through when they were young? What were some of the restrictions or changes to their daily roles and responsibilities?

 **Do:** Use a large printout of the Tanner Scale³⁶ (Resource 4.1) to demonstrate the various stages of adolescence.

*Sexual Orientation and Gender

Identity: At this stage of life adolescents start to explore their identities, and this covers many different aspects of their lives. It can also include understanding who they are attracted to, whether this is people of the opposite sex, same sex, or both.

In the first session, we talked about transgender people. Again, as adolescents are exploring their identity, it may also include exploring their gender identity. This means that their gender identity might be the same as the sex assigned at birth, e.g., women who identify as women, or it might be different, like it is for transgender people.

36 <https://www.advocatesforyouth.org/wp-content/uploads/storage/advfy/lesson-plans/lesson-plan-puberty-part-i-and-ii.pdf>

✓ **Do:** Ask participants to gather around the poster (or distribute handouts for smaller groups).



Explain:

- Adolescent girls, just like boys, go through a number of physical and emotional changes during this stage. These changes can be linked to chemical messengers in their bodies called hormones. These hormones affect things like our mood, our likes and dislikes, as well as physical and mental growth and development.
- For example, in early adolescence (10-14) girls, like boys, gain improved abilities to express themselves and develop close friendships, while less attention is shown to caregivers; they can show occasional rudeness and also return to childish behavior.
- **If possible, ADD:** Girls may also start developing breasts and menstruating and may grow pubic hair. Boys may experience a sudden height/growth spurt and also grow pubic hair. (Show examples of this from the Tanner Scale.)
- In late adolescence (15-19), girls, like boys, want more independence and pay more attention to their appearance (because their body is changing). They also have an increasing ability to think through ideas and express these in words.
- **If possible, ADD:** They may start showing an interest in people of the opposite or same sex.
- They have an ability to make independent decisions and also show greater emotional stability. Mental development will continue well into adulthood.
- These changes happen to all girls and boys across the world. There may be differences in what age this takes place and how they develop.
- Because everyone develops at different rates, there is no right or wrong answer for when girls should start menstruating. This usually happens about two years after the first signs of puberty appear. If girls haven't developed any signs of puberty by age 14, it is a good idea for them to be supported to see a health professional and if girls haven't started menstruating by age 16, they should be supported to get advice from a health professional. It is likely girls will be told to wait and see as in many cases periods will start naturally by the time a girl is 18.³⁷



Explain: Adolescent girls may share common physical and emotional changes, but their experiences, environments, and settings do also play a big role in how these changes occur, which make each girl's experience unique. Adolescents with diverse life experiences will develop and grow at different ages; for example, a girl who is 13 years old might have a disability and attend awareness sessions that develop her knowledge and capacities in problem solving and dealing with her emotions.



***Masturbation:** Hormones that cause a person to go through puberty also cause new or more sexual feelings and desires. This might result in someone having new romantic feelings for other people.

These hormones can result in some people choosing to touch their genitals for pleasure, called masturbation. Masturbation cannot harm someone physically and is a personal decision.



Ask: Knowing what you know now, what kind of information do you think it is important for girls to receive about their physical and emotional changes they may experience as they go through adolescence?



Say: Having the support of her father as well as her mother is essential for ensuring girls are well supported and have the information she needs to be better informed and prepared as they transition in to adulthood.

37 There are some rare genetic disorders—e.g., Kallman Syndrome and Klinefelter Syndrome—that can prevent puberty/adolescent bodily changes. These can be treatable with medical support. There can also be other medical reasons why puberty/adolescent bodily changes are delayed, so please do talk to your daughter to see if she would like medical advice if this is concerning her.

Activities (50 minutes)

Activity 1: Showing an Interest in Your Daughter's Life (20 minutes)



Ask:

- When you were an adolescent boy, what kind of things were happening in your life?
- Do you know about the things happening in your daughter's life currently? For example, what is she thinking or feeling? Who are her new friendships or favorite games? What has changed in her behavior?



Ask: What are the things you do to show interest in your daughter's life?

ADD the following points to the list, after the caregivers have responded, if needed:

- Listening without interrupting.
- Affirming and validating feelings. For example, "I see why you would be upset about that" and "What you are feeling now is normal; I understand your frustration."
- Offering support, if needed.
- Praising good decisions, actions, and character traits, e.g., "Thank you for helping me today," "You have very good ideas," or "Thank you for helping your little brother/sister."
- Encouraging her to communicate with you on issues that are important to her now and in the future. For example: "I am there for you when you want to talk to me," "I want you to feel comfortable coming to see me if you have something to tell me," or "I am your father; I care about your happiness."



Do: Read the following scenario to the group and ask them in pairs to practice how they could show an interest in the adolescent girl in the scenario.

Scenario (requires CONTEXTUALIZATION): A girl comes home from school one day and she seems to be upset. When her male caregiver asks her what is wrong, the girl says that some boys were teasing her when she was on her way home.



Do: Have a couple of participants share their role play with the group. Make sure the role-plays include the following main points. If they don't, the facilitator can play the role of the male caregiver and ask a volunteer to play the adolescent girl in order to show participants how they can convey interest.

Role-Play Key Points — Caregiver:

- Engages by stopping what they are doing to listen to their daughter.
- Encourages daughter to share more about what happened. For example, "Oh, I am sorry to hear that! Tell me more about it."
- Uses empathic skills³⁸, putting yourself in your daughter's shoes. For example, "You look like this is really bothering you."
- Supports daughter with decision-making or provides support as necessary. For example, "What can I do to make this situation better?" "What would you like to do?" or "What can I help with?"



Note: Some caregivers may suggest solutions that involve blaming or using physical punishment towards the girl in the scenario or restricting her movement. It is important to emphasize the importance of supporting their daughter and coming to a solution together that doesn't involve violence or place limits on girls.

³⁸ "Empathy" is being able to step into another person's shoes and experience their feelings with them, and then helping them with those feelings. We all know what it feels like to be sad when someone hurts our feelings. Empathy is about letting the other person know that you understand their feelings.

Activity 2: Physical and Emotional Changes Discussion (30 minutes)



Say: There are many physical and emotional changes girls and boys go through during adolescence. Let's talk about the changes we know about.



Do: Ask caregivers to work in small groups and have them think about the following questions:

Questions:

- Is it common for men to talk about some of the physical and emotional changes boys go through in adolescence?
- What about girls? (If possible, **Ask:** What about talking about menstruation?)
- Who told you about the physical and emotional changes boys go through? What about the ones girls go through? (If possible, **Ask:** Who told you about menstruation?)
- For those who have daughters who are older than 19, how did you support your daughters during this time? Or, if you had that time over again, how would you like to improve the support you gave your daughter at that time?



Do: When they have finished discussing, ask them to share their reflections with the rest of the group.



Note: It is important to take notes and follow up on the suggestions caregivers have about how to make this discussion with women and girls easier.



Explain:

- Adolescents know that something is happening to their bodies, and it is better that girls and boys receive factual information from a person they trust (like a caregiver).
- Communication builds trust and positive relationships with adolescent girls (and boys). This will help them feel more comfortable talking to you about their problems. Puberty can be new and sometimes challenging and having a loving parent who shows understanding, who is available and gives comfort, will help adolescents with an easier transition into adulthood.




Ask: What can we do to make this discussion with women and girls easier? (Prepare caregivers with factual information, have trained staff or mentors provide information, start conversations about easier topics such as emotional changes, and then move on to more potentially sensitive information.)


SELECT: Please select Option A or Option B depending on your context.


- If possible, implement Option A.
- If not possible please implement Option B for sensitive contexts.


Activity 2 - Option A: Menstruation Myths and Facts (25 minutes)


Consider asking men if they are willing and open to discussing the topic of menstruation. If there are men who indicate strong resistance to it and say they can't talk about it then consider Activity 2 option B.

 **Say:** We are going to play a game now about some common period myths that you can dispel for girls. I'm going to read some statements about menstruation.

 **Ask:** The group if they want to set any group agreements for this activity (non-judgmental, confidentiality etc.).

 **Say:** Please stand up if you think the statement is true. Remain seated if you think the statement is a myth.

 **Note:** An alternative activity if caregivers are not able/don't feel comfortable doing stand-up/sit down is: Give caregivers two signs; a cross sign "x" and a tick sign "✓". Ask them to hold up the sign that reflects their opinion.

 **Do:**
Read the statements below one by one, or invite caregivers to share their own beliefs about menstruation.

Wait for the caregivers to stand up or sit down or hold up their signs.


Take a few responses from the caregivers about their reasons for taking that position, and then explain the correct answer after each statement.

Allow discussion after each as needed.

Activity 2 - Option B: Physical and Emotional Changes Myths and Facts (25 minutes)

 **Say:**

- We are going to play a game now about some common myths that you can dispel for girls. I'm going to read some statements about physical and emotional changes.
- Please stand up if you think the statement is true. Remain seated if you think the statement is a myth.

 **Note:** An alternative activity if caregivers are not able/don't feel comfortable doing stand-up/sit down is: Give caregivers two signs; a cross sign "x" and a tick sign "✓". Ask them to hold up the sign that reflects their opinion.

 **Do:**


- Read the statements below one by one, or invite caregivers to share their own beliefs about changes.
- Wait for the caregivers to stand up or sit down or hold up their signs.
- Take a few responses from the caregivers about their reasons for taking that position, and then explain the correct answer after each statement.
- Allow discussion after each as needed.

Facts and Myths

(Requires **CONTEXTUALIZATION**:

Update with locally relevant myths)

1. The bleeding during periods is the discharge of “bad and dirty blood” from the body. (False)
2. When menstruating, girls can continue with their daily activities as normal. (True)
3. Once girls start to menstruate, they are capable of getting pregnant. (True)
4. Just because it’s possible to get pregnant doesn’t mean girls’ bodies are ready for pregnancy. (True)
5. Once a girl starts menstruating, she should get married. (False)
6. A girl who has had her period has uncontrolled sexual desires. (False)

 **Note:** Some caregivers might not realize that some of these myths are actually myths. They may need further information. Refer to the Resource Sheet in the Health & Hygiene Module of the Girl Shine Life Skills Curriculum.

Facts and Myths

(Requires **CONTEXTUALIZATION**:


Update with locally relevant myths)

1. Once girls menstruate, they are ready to be married. (False)
2. Girls and boys brains are fully developed by the time they are 15. (False)
3. Girls can continue with their daily activities as normal while they are going through changes. (True)
4. Girls and boys are ready to take on adult responsibilities and give up their childhood ones (e.g., school). (False)
5. Girls and boys experience a wide range of emotions that may be new to them. (True)



Explain:

- Our brains are not fully formed until we are in our early- to mid-20s! Different parts of our brain develop and mature at different rates.
- The parts of our brain that help us control our impulses and use good judgment are the last to mature. This part of the brain helps us to plan, focus attention, remember instructions, and juggle multiple tasks successfully.
- These hormones affect things like our mood, our likes and dislikes, growth and development. This is a great time to talk to your daughters about what they are thinking and feeling during all of these changes.
- Adolescence is the second most productive time of brain development, after early childhood.
- It is important that girls continue to have opportunities for learning, to help their brains develop in a healthy way, to make good decisions, take appropriate risks, and plan for their future.



*** Special Note:** Men might say that girls are not clean when they have their period because in Islam, a girl cannot pray if she has her period, and is considered “impure.” “Purity” is a religious term for when men and women are considered “physically and spiritually ready” to conduct certain religious duties or rituals, whereas “cleanliness” is related to hygiene. Clarify the difference between “purity” and “cleanliness.”

Explain: There is a difference between “purity” and “cleanliness.” If a girl is not considered by religion as “pure” when on her period, and cannot conduct certain practices, this doesn’t mean that she is dirty. “Cleanliness” is related to hygiene. When girls have their periods, they are not dirty.

This is a normal part of being a girl or a woman. They just need to be able to keep their bodies clean, just like everyone should regardless of if they have a period or not, if they are a girl, woman, boy, or man. Because otherwise we may get infections and become unwell.

✓ Do: Using the Internal Organs and Menstrual Cycle Poster (Resource 4.3 and 4.4), highlight the different organs (and the medical model of the female reproductive system if you have one) and explain the following to caregivers:

Explain:

- Every month, one of the eggs leaves one of the ovaries and travels through the fallopian tube. When the egg leaves the ovary, this is called ovulation. Different people have different days when they bleed depending on whether their cycle is long or short.
- At the same time, changes in the body’s hormones (natural chemicals that our body makes) prepare the uterus (the part where babies grow inside our body) for pregnancy. A soft spongy lining gets formed in the uterus.
- If an egg and male’s sperm meet to form a baby, the lining will provide nutrition. If an egg isn’t fertilized by a male’s sperm (from sexual intercourse), the uterine lining will begin to peel away, and the egg and the lining will pass through the uterus out of the body.

- The blood that is released from the broken lining flows out through the vagina. This bleeding is the menstrual period and this whole cycle is called menstruation. This blood is not dirty, it is a normal part of a female's body processes.

✓ Do: Check to see if caregivers have any questions. If they have questions you don't feel you are able to answer then please say, "I will take a note of that, check it, and get back to you next time. Okay?" And, then please follow up and seek relevant support to be able to answer the caregivers' question or to be able to refer them to someone who can.



Ask:

- From what was presented, what information was new for you?
- Which information do you think is important to share with women and girls?
- Is it important for our sons to have this information?
- How do the changes during puberty that we've discussed and the information girls need influence their health needs, especially their sexual and reproductive health needs?

Key Message



Say: It may be uncomfortable or uncommon to talk about these topics, but it is important for girls to know about their bodies and the changes they are experiencing. This information can be really valuable coming from a caregiver, someone the girl trusts. There are also others who can provide girls with accurate information, such as at the safe space or at a health facility. Girls should be encouraged to learn about their bodies whether they are married, unmarried, have a disability or divorced.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Share information with girls from the session that you feel comfortable with. If you don't feel comfortable, think about why this is and let's discuss in the next session.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- If possible, procure dignity kits ahead of the session for women and girls which can be given to them by their male caregivers (if they haven't already received them)

SESSION 4:

ADOLESCENT GIRL DEVELOPMENT³⁹ (Caregivers of Married Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive Sexual and Reproductive Health (SRH) information and are able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- Resources 4.1 to 4.4
- large printout of Resource 4.1: Tanner Scale, or handouts for smaller groups
- comments box

Preparation:

- Facilitators may face some resistance from caregivers when trying to encourage them to pass on this information to girls on ASRH. **It is important that facilitators refer to Appendix A12 in [Girl Shine Part 1](#) on introducing ASRH topics to caregivers before the session as part of your facilitator preparation.**
- Have sample sanitary materials for menstruation.
- You could consider inviting a health practitioner who has been trained in GBV core concepts and clinical care for sexual assault survivors, to support the facilitation of this sessions to clearly explain the adolescent development including terminologies. Or invite a health practitioner during the facilitators training to facilitate this session.


Terminology: Prior to the sessions, supervisors and facilitators go through the sessions, identify, discuss, and simplify words; if possible, find a local word. This will help facilitators and translators properly discuss sessions with caregivers. For example, a word like "Puberty" might also be referred to as teens, adolescence, pubescence, etc.

Facilitator Note: As this is a sensitive topic, it is important to remind caregivers of the "Group Agreements" (Session 1) and ask if they would like to have any additional agreements specifically for this session.

Duration: This session could take 2.5 hours, if it is not possible for caregivers to stay that long, you can split the session over two sessions

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module This session may create lots of discussion and it may not be possible to cover all the content. That's okay. If caregivers want to use the time for discussion on a particular topic, you can cover the rest of the content in another session or let caregivers decide if they want to move on to the rest of the content or continue with a particular discussion.

Welcome & Review (10 minutes)

 **Ask:** Did you discuss with your daughter/married daughter the hopes you have for her and ask what her hopes are for herself? Does anybody want to share how this went?

 **Say:**


- Today we are going to talk about the social, physical, and emotional changes that girls experience during adolescence. Adolescence is a stage girls and boys pass through between ages 10-19.
- It is a time of great change and opportunity. It can also generate confusion if girls and boys are not adequately supported in understanding the changes they are experiencing.
- When girls reach puberty, they are often perceived by society as “adults,” and are expected to fulfill certain roles and responsibilities that they might not be ready for because they are still developing and growing. They may be expected to get married, or may be restricted from going to school, spending time with friends, and accessing opportunities.
- Some of us may feel uncomfortable or strange talking about this topic. That reaction is normal. We don’t talk about these things in a large group every day. But by learning about this very normal process here in a safe space, you will be more comfortable talking about the changes with your adolescent girls and boys.


Let’s Explore (25 minutes)

 **Ask:** What do you understand by the term “puberty”?

After parents have responded, if necessary, **ADD:**


- Puberty is a process of hormonal and physical change where a girl or boy becomes capable of reproduction. This usually lasts between one to three years. It happens during the period of adolescence, where girls and boys go through social and emotional growth and this period lasts from the age of 10-19.

 **Ask:** Why do you think girls may be restricted from certain spaces or opportunities during this time?

 **Say:** This may be due to how girls could be perceived in the community because of fears related to her safety or honor. Today we want to explore some of these perspectives and know from you what your opinions are on this topic.

 **Ask:**

- Can anyone remember what it was like when you went through puberty?
- What were some of the restrictions or changes you experienced in your daily roles and responsibilities?
- What were some of the restrictions or changes to your sisters’ daily roles and responsibilities?

 **Do:** Use a large printout of the Tanner Scale⁴⁰ to explain the various stages of adolescence. The Tanner Scale explains the different physical stages, so you can use the information included there and explain the concepts below to explain the emotional stages.

 **Do:** Ask participants to gather around the poster (or distribute handouts for smaller groups).

40 <https://www.advocatesforyouth.org/wp-content/uploads/storage/advfy/lesson-plans/lesson-plan-puberty-part-i-and-ii.pdf>



Explain:

- Adolescent girls, just like boys, go through a number of physical and emotional changes during this stage. These changes can be linked to chemical messengers in their bodies called hormones. These hormones affect things like our mood, our likes and dislikes, as well as our physical and mental growth and development.
- For example, in early adolescence (10-14), girls, like boys, gain improved abilities to express themselves and develop close friendships, while less attention is shown to caregivers. They can show occasional rudeness and also return to childish behavior.
- **If possible, ADD:** Girls may also start developing breasts and menstruating and may grow pubic hair. Boys may experience a sudden height/growth spurt and also grow pubic hair. (Show examples of this from the Tanner Scale.)
- In late adolescence (15-19), girls, like boys, want more independence, pay more attention to their appearance (because their body is changing), they also have an increasing ability to think through ideas and express these in words. They may start showing an interest in people of the opposite or same sex*. They have an ability to make independent decisions and also show greater emotional stability. Girls and boys mental development will continue well into adulthood.
- These changes happen to all girls and boys across the world. There may be differences in what age this takes place and how they develop.
- Because everyone develops at different rates, there is no right or wrong answer for when girls should start menstruating. This usually happens about two years after the first signs of puberty appear. If girls haven't developed any signs of puberty by age 14, it is a good idea for them to be supported to see a health professional and if girls haven't started menstruating by age 16, they should be supported to get advice from a health professional. It is likely girls will be told to wait and see as in many cases periods will start naturally by the time a girl is 18.⁴¹



*Sexual Orientation and Gender

Identity: At this stage of life adolescents start to explore their identities, and this covers many different aspects of their lives. It can also include understanding who they are attracted to, whether this is people of the opposite sex, same sex, or both.

In the first session, we talked about transgender people. Again, as adolescents are exploring their identity, it may also include exploring their gender identity. This means that their gender identity might be the same as the sex assigned at birth, e.g., women who identify as women, or it might be different, like it is for transgender people.



Ask:

- What things may have been taking place in your life at the time that would have influenced your growth or development?
- What about your female family members? What do you recall of their experiences of adolescence?



Explain: Adolescent girls may share common physical and emotional changes, but their experiences, environments, and settings do also play a big role in how these changes occur, which make each girl's experience unique, despite some of the similarities we mentioned. Adolescents with diverse life experiences will develop and grow at different ages due to these factors. For example, being married at a young age may mean that girls need to learn quickly how to manage adult responsibilities compared to girls who are not married at the same age. Additionally, there are different factors (such as displacement, war, etc.) that might contribute to developing or limiting girls' capacities. While girls may be able to adapt and cope in some ways, it is important to remember still that they are growing and



***Masturbation:** Hormones that cause a person to go through puberty also cause new or more sexual feelings and desires. This might result in someone having new romantic feelings for other people.

These hormones can result in some people choosing to touch their genitals for pleasure, called masturbation. Masturbation cannot harm someone physically and is a personal decision.

⁴¹ There are some rare genetic disorders—e.g., Kallman Syndrome and Klinefelter Syndrome—that can prevent puberty/adolescent bodily changes. These can be treatable with medical support. There can also be other medical reasons why puberty/adolescent bodily changes are delayed, so please do talk to your daughter to see if she would like medical advice if this is concerning her.

developing in other ways that may seem invisible to us and that this can place pressure on them.



Ask:

- How old was your wife/partner when you both got married/entered a union?
- What kind of information or support would have been helpful for her to receive about the physical and emotional changes she may have experienced through adolescence and marriage during this time?



Say: Supporting girls during adolescence in general is really important, and married girls need extra support because they are expected to take on adult roles and responsibilities before they are fully capable of doing so. Supporting these girls with access to information about their changing bodies, pregnancy, and healthy relationships will help them to make better decisions for themselves and their family. For girls moving in with their in-laws, having that continuous support from her father/male caregiver (as well as her mother) is essential to ensuring she is healthy and doing well as she transitions to adulthood.



Ask: Can you think of ways you can support a girl once she is married?

Activities (1 hour 15 minutes)



Special Note: In your context, if it is not appropriate to give this information, you can skip Activity 1 and move to Activity 2.

Activity 1: Menstruation Myths and Facts (40 minutes)



Note: Consider asking men if they are willing and open to discussing the topic of menstruation. If there are men who indicate strong resistance to it, and say they can't talk about it, then move to Activity 2.



Say:

- One defining moment of adolescence is when girls begin menstruation. It often poses some challenges for women and girls. Some challenges may be related to understanding what is happening to them and managing some symptoms, while others may be related to how the community supports (or doesn't support) girls who are menstruating.
- Caregivers can be a source of support and strength especially to recently married girls who are menstruating in a new environment to one they are used to. Talking to recently married girls about menstruation lets them know that you are there to support them and helps them to understand how to navigate menstruation in their new environment.
- In small groups, let's discuss what menstruation means to women and girls in this community.



Do: Ask caregivers to work in small groups and have them think about the following questions:

- Is it common to talk about menstruation in the community? Why yes/no?
- How are women and girls treated when they are menstruating?
- How do you support married girls manage their monthly cycle?



Do: When they have finished discussing, ask them to share their reflections with the rest of the group.

**Say:**

- When given the right support and information menstruation can be easy to manage, and it's completely possible to continue with normal daily routines. But it can become difficult when women and girls don't have access to sanitary products and ways to manage the symptoms of menstruation. It's important to check in on married girls to see if there is anything you can do to help them access information and supplies.
- Sometimes it can be difficult to have access to factual information about menstruation, so it is important to understand what the facts and myths (information that is not correct) are and to support girls to have the correct information.

**Say:**

- We are going to play a game now about some common period myths that we can dispel for ourselves and girls. I'm going to read some statements about menstruation.
- Please stand up if you think the statement is true. Remain seated if you think the statement is a myth.



Note: An alternative activity if caregivers are not able/don't feel comfortable doing stand-up/sit down is: Give caregivers two signs; a cross sign "✖" and a tick sign "✓". Ask them to hold up the sign that reflects their opinion.

**Do:**

- Read the statements below one by one, or invite caregivers to share their own beliefs about menstruation.
- Wait for the caregivers to stand up or sit down or hold up their signs.
- Take a few responses from the caregivers about their reasons for taking that position, and then explain the correct answer after each statement.
- Allow discussion after each statement as needed.

Facts and Myths

Requires **CONTEXTUALIZATION**: Update with locally relevant myths


1. The bleeding during periods is the discharge of "bad and dirty blood" from the body. (False)
2. When menstruating, girls can continue with their daily activities as normal. (True)
3. Once girls start to menstruate, they are capable of getting pregnant. (True)
4. Just because it's possible to get pregnant doesn't mean girls' bodies are ready for pregnancy. (True)
5. When a girl is menstruating, she shouldn't touch anything as she is dirty. (False)




Special Note: Men might say that girls are not clean when they have their period because in Islam, a girl cannot pray if she has her period, and is considered "impure." "Purity" is a religious term for when men and women are considered "physically and spiritually ready" to conduct certain religious duties or rituals, whereas "cleanliness" is related to hygiene. Clarify the difference between "purity" and "cleanliness." You can explain using the following language:




Explain: There is a difference between "purity" and "cleanliness." If a girl is not considered by religion as "pure" when on her period, and cannot conduct certain practices, this doesn't mean that she is dirty. "Cleanliness" is related to hygiene. When girls have their periods, they are not dirty. This is a normal part of being a girl or a woman. They just need to be able to keep their bodies clean, just like everyone should regardless of if they have a period or not, if they are a girl, woman, boy, or man. Because otherwise we may get infections and become unwell.

 **Note:** Some caregivers might not realize that some of these myths are actually myths. They may need further information.

 **Do:** Using the Internal Organs and Menstrual Cycle Poster Resource 4.3 and 4.4. (and the medical model of the female reproductive system if you have one), highlight the different organs and explain the following to caregivers:


 **Explain:**

- Every month, one of the eggs leaves one of the ovaries and travels through the fallopian tube. When the egg leaves the ovary, this is called ovulation. Different people have different days when they bleed depending on whether their cycle is long or short.
- At the same time, changes in the body's hormones (natural chemicals that our body makes) prepare the uterus (the part where babies grow inside our body) for pregnancy. A soft spongy lining gets formed in the uterus.
- If an egg and male's sperm meet to form a baby, the lining will provide nutrition. If an egg isn't fertilized by a male's sperm (from sexual intercourse), the uterine lining will begin to shed away, and the egg and the lining will pass through the uterus out of the body.
- The blood that is released from the shedding lining flows out through the vagina. This bleeding is the menstrual period, and this whole cycle is called menstruation.

 **Do:** Check to see if caregivers have any questions. If they have questions you don't feel you are able to answer then please say, "I will take a note of that, check it, and get back to you next time. Okay?" And, then please follow up and seek relevant support to be able to answer the caregivers' question or to be able to refer them to someone who can.

 **Explain:**

- Menstruation is the normal, healthy shedding of blood and tissue from the uterus that exits the body through the vagina. The blood and tissue that is shed is not dirty, but a normal and healthy process that women and girls experience.
- It is true that girls can get pregnant when they start menstruating. However, girls' bodies are still in the process of developing and are not fully developed until they reach the age of 18. Even after the age of 18, some organs continue developing. Getting pregnant when a girl's body is not fully developed increases the risks of health complications during pregnancy and delivery, not only on the girl but also on the baby.
- Girls who get pregnant when their bodies are not ready to carry a baby are at higher risk of going through miscarriage/spontaneous abortion (unintentional loss of baby), pre-mature labor and maternal death.
- Also, considering girls are going through emotional and brain growth, girls should wait until they are ready to take care of themselves as well as their new-born in order to ensure a safe, healthy, and happy life for her and her family⁴².

 **Do:** Stop to take reflections from the group on the information presented.

 **Ask:**

- Which information do you think is important to share with girls and which one do you already share?
- What support do you need to provide this information?
- What do we think about supporting girls to delay pregnancy until after 18?
- Who provides our sons with this information?
- How do the changes during puberty that we've discussed and the information girls need influence their health needs, especially their sexual and reproductive health needs?



Say: Girls who get pregnant after the age of 18 will be better prepared to deal with pregnancy and raising a family. They will have more information about their bodies, know where and how to access health services and have increased ability to make well-informed decisions.

Activity 2: Supporting Girls During Emotional and Physical Changes (35 minutes)



Say:

- One of the biggest changes girls go through during adolescence is menstruation, and this is a very natural and normal process. This process can be uncomfortable for some women and girls if they are not given the right support and access to materials to help them during this time. If they do get the right support, they can successfully manage their symptoms and challenges.
- As men, we can support our daughters, those that are unmarried and those that are married and may be trying to navigate this process in their new homes. Men can support by helping girls with access to materials and products that will help them during this time.

For caregivers of girls with disabilities,



Ask: Are there other things you can do to support girls with disabilities?



Ask: What are some of the things that girls or women experience when they are menstruating? (For example: being tired, having cramps, having no symptoms, being isolated, not having adequate means to stay clean, no privacy etc.)



Explain: Some women and girls may experience the following:

- **Abdominal pain from light to severe.** Not all women and girls experience this; everyone is different.
- **Emotional changes and feeling tired.** Not all women and girls experience this; everyone is different.
- **Not having the proper sanitary products to keep clothes clean.**

(The following information may need

CONTEXTUALIZATION:)


- In this environment, we may find that women and girls are expected to queue for long hours for food and non-food items, during menstruation, without access to sanitary materials it can prevent them from queuing and resulting in them not getting the things they need.
- Men may be responsible for collecting these items and may not bring sanitary materials for women and girls and conversations around this may not happen due to taboo or stigma attached to menstruation.
- Taboo and stigma may mean that girls and women cannot wash themselves or fetch water during the day and have to go at night which affects their safety. The water and sanitation infrastructure may not be suitable for the needs of women and girls, and girls may not feel comfortable using them, especially during menstruation. And for girls with disabilities, they may not even be able to access them due to lack of ramps or unsuitable toilets and washing facilities.

For caregivers of girls with disabilities,




Say: Menstruating girls and women with different disabilities may have different needs. Those with mobility limitations with their upper body and arms may have difficulties placing their sanitary protection materials in the correct position, and washing themselves, their clothes, and the material. Those with vision impairments (blind or low vision) may face challenges knowing if they have fully cleaned themselves and how much they have leaked. While those with intellectual and developmental impairments may need tailored support to manage menstruation.

In all situations, it is important to find a way to communicate effectively with the girl to understand that her physical and emotional safety, comfort and health is taken care of.

 **Ask:** What are some of the strategies you can use to support girls in this current environment?


 **Do:** Have the participants split into two groups.

- **Group 1:** What can they currently do to manage the situation for girls who are going through physical and emotional changes—get them to especially think of their married daughters?
- **Group 2:** What can the community, local authorities or NGOs do to improve the situation for women and girls when they are experiencing some of these symptoms?

 **Note:** Take note of their recommendations for community and local authorities. NGOs should be fed back through appropriate channels, WASH partners, allies in the community, coordination groups.

For caregivers of girls with disabilities,

 **Ask:** Are there specific considerations for girls with different disabilities?

 **Do:** Tell the male caregivers what you will do with this information they have provided. For example, share with your manager for advocacy, or for them to raise with the GBV sub-cluster etc. And, be sure to follow up and do the action you committed to.

ADD the following to what the groups have suggested if contextually relevant:

Pain and Discomfort:

- Asking women and girls (or asking a trusted female to check) how they are feeling and if there is anything you can do to support is a good way to see how you can support.
- It is better not to make assumptions about what a girl can or cannot manage during menstruation.
- Girls with disabilities may have different symptoms that they experience. It is important not to make assumptions about their experiences and to support them in communicating on this issue.

Sanitary Materials:

There are different materials women and girls can use during menstruation. You could ask women and girls (or ask a trusted female to check) which materials the girl prefers to use. Not having access to sanitary materials can really impact their school attendance, confidence, and self-esteem. Girls can become withdrawn and isolated if not given the right support during this critical time.

Some materials include:

- Clean pieces of cloth or reusable pad
- Pads / sanitary towels

Staying Clean:

- Ensuring girls have safe access to spaces where she can clean is important. This can include helping her to fetch water, making sure she has access to soap and dry, clean underwear etc.
- Again, trusted persons of girls with disabilities should ask them what type of support they need during this time.


 **Ask:** Do you feel this information is relevant to you as a man? How so?

ADD any of the following examples if contextually relevant:

- As men in our society, we have control over many things in our household, including how money is allocated and the roles women and girls have. Therefore, ensuring men have information about the needs of women and girls during this time is important; we need to know what resources should be allocated to girls' basic needs, so that girls do not need to resort to unhygienic or risky methods to take

care of themselves.

- Girls who are developing are not yet fully adults. They still have many changes they need to go through before they are fully developed and mature.
- Girls are not ready to get married because they have started menstruating. They are still growing and developing and this continues well beyond their teenage years.
- For girls already married, it's important to raise awareness of the risks of getting pregnant before they are 18. This increases the risks of health complications and can have a devastating impact on her and her baby.

 **Note:** For more information on supporting girls with disabilities during menstruation, look at the [Menstrual Hygiene Management Toolkit in Emergencies](#)⁴³. You can also check UNICEF Guidance on [Menstrual Health & Hygiene](#)⁴⁴.

Key Message




Say: It may be uncomfortable or uncommon to talk about these topics, but it is important for girls to know about their bodies and the changes they are experiencing. This information can be really valuable coming from a caregiver, someone the girl trusts. There are also others who can provide girls with accurate information, such as at the safe space or at a health facility. Girls should be encouraged to learn about their bodies, whether they are married, unmarried, have a disability or divorced. If you are not comfortable giving this information to girls directly, you should find someone the girl trusts to provide this information.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

 **Note:** Invite caregivers who have questions about menstruation, or need more information to support their daughter's health, to stay after the session is finished to get more information.

Takeaway (5 minutes)



Say: Share information with girls (or women) from the session that you feel comfortable with. If you don't feel comfortable, think about why this is and let's discuss in the next session how we can ensure girls get this information.

NOTE TO FACILITATORS, FOR THE NEXT SESSION

- If possible, procure dignity kits ahead of the session for women and girls which can be given to them by their male caregivers (if they haven't already received them).

43 <https://www.rescue.org/sites/default/files/document/2113/themhminemergenciestoolkitfullguide.pdf>

44 <https://www.unicef.org/media/91341/file/UNICEF-Guidance-menstrual-health-hygiene-2019.pdf>

SESSION 5:

SUPPORTING ADOLESCENT GIRLS (Caregivers of Unmarried Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information.

Materials:

- Flip chart paper
- markers
- materials for menstrual hygiene demonstration (for example, sanitary pads, reusable cloth, etc.)
- Resources 4.1 to 4.4
- Resources 5.1 to 5.2
- comments box

Preparation:

- If caregivers have daughters with disabilities, be prepared with information relevant for girls with disabilities, speak to local disability partner organizations to see if you are able to make any referrals. Information related to disabilities is included in boxes throughout the session.
- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls. **It is important that facilitators refer to [Appendix A14 in Girl Shine Part 1](#) on introducing ASRH topics to caregivers ahead of the session.**
- Have dignity kits available to share, if available.
- For Activity 2, be prepared with Resource 5.1 so you can share information with participants about the various contraceptive methods. Be sure to check that the methods you discuss are available in your context.
- Refer to [Appendix 1](#) and [2](#) of the Girl Shine Caregiver Curriculum Part 3 on Common Resistance Responses and Steps to Challenging Harm to prepare for potential sensitive discussions.

Facilitator Note:

- As this is a sensitive topic, it is important to remind caregivers of the "Group Agreements" (Session 1) and ask if they would like to have any additional agreements specifically for this session.
- Local law versus cultural statutes: clarifying adolescents rights to contraceptive services:
- Many people are unaware of the laws concerning adolescents' rights to contraceptive services. In many countries around the world, young unmarried girls are legally able to access contraceptive services and do not require the consent of their partner or parent to do so. Check the national and local laws and help clarify any misunderstandings among participants.
- Caregivers may want more information about contraceptive methods and other information related to family planning or STIs, not covered here. There are plenty of resources included in Girl Shine which you can draw from to provide a separate session. This can be found in Part 2 of Girl Shine.

Duration: 2 hours

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module

Welcome & Review (15 minutes)



Ask: What information did you share with girls or women from the last session? Which information didn't you share and what were the reasons?



Say: Today we are going to continue the conversation, gain new information, and explore your perspectives and opinions on the topic. We will also discuss how we can help girls to access information and support on this topic.

Let's Explore (10 minutes)



Explain:

- The changes girls go through can pose some challenges. Some challenges may be related to understanding what is happening to them and managing these new physical and emotional changes, while other challenges may be related to how the community supports (or doesn't support) girls who are going through these changes.
- Caregivers can be a source of support and strength as girls go through this stage of life. Talking to girls or women about their needs and offering support can be a good way to support them during this time.

Activities (1 hour 20 minutes)

Activity 1: Supporting Girls During Emotional and Physical Changes (35 Minutes)



Say:

- One of the biggest changes girls go through during adolescence is menstruation, and this is a very natural and normal process. This process can be uncomfortable for some women and girls if they are not given the right support and access to materials to help them during this time. If they do get the right support, they can successfully manage their symptoms and challenges.
- As men, we can support our daughters, those that are unmarried and those that are married, who might be trying to navigate this process in their new homes. Men can support by supporting girls with access to materials and products that will help them during this time.

For caregivers of girls with disabilities,



Ask: Are there other things you can do to support girls with disabilities?



Ask: What are some of the things that girls or women experience when they are menstruating? (For example, being tired, having cramps, having no symptoms, being isolated, not having adequate means to stay clean, no privacy etc.)




Explain: Some women and girls may experience the following:

- **Abdominal pain from light to severe.** Not all women and girls experience this; everyone is different.
- **Emotional changes and feeling tired.** Not all women and girls experience this; everyone is different.
- **Not having the proper sanitary products to keep clothes clean.**


(The following information may need **CONTEXTUALIZATION**!)

- In this environment, we may find that women and girls are expected to queue for long hours for food and non-food items, during menstruation, without access to sanitary materials it can prevent them from queuing and resulting in them not getting the things they need.
- Men may be responsible for collecting these items and may not bring sanitary materials for women and girls and conversations around this may not happen due to taboo or stigma attached to menstruation.
- Taboo and stigma may mean that girls and women cannot wash themselves or fetch water during the day and have to go at night which affects their safety. The water and sanitation infrastructure may not be suitable for the needs of women and girls, and girls may not feel comfortable using them, especially during menstruation. And for girls with disabilities, they may not even be able to access them due to lack of ramps or unsuitable toilets and washing facilities.

 **Ask:** What are some of the strategies you can use to support girls in this current environment?


 **Do:** Have the participants split into two groups.

- **Group 1:** What can they currently do to manage the situation for girls who are going through physical and emotional changes—get them to especially think of their married daughters?
- **Group 2:** What can the community, local authorities or NGOs do to improve the situation for women and girls when they are experiencing some of these symptoms?

 **Note:** Take note of their recommendations for community and local authorities. NGOs should be fed back through appropriate channels, WASH partners, allies in the community, coordination groups.

For caregivers of girls with disabilities,

 **Ask:** Are there specific considerations for girls with different disabilities?

 **Do:** Tell the male caregivers what you will do with this information they have provided. For example, share with your manager for advocacy, or for them to raise with the GBV sub-cluster etc. And, be sure to follow up and do the action you committed to.

ADD the following to what the groups have suggested if contextually relevant:

Pain and Discomfort:

- Asking women and girls (or asking a trusted female to check) how they are feeling and if there is anything you can do to support is a good way to see how you can support.
- It is better not to make assumptions about what a girl can or cannot manage during menstruation.
- Girls with disabilities may have different symptoms that they experience. It is important not to make assumptions about their experiences and to support them in communicating on this issue.

Sanitary Materials:

There are different materials women and girls can use during menstruation. You could ask women and girls (or ask a trusted female to check) which materials the girl prefers to use. Not having access to sanitary materials can really impact their school attendance, confidence, and self-esteem. Girls can become withdrawn and isolated if not given the right support during this critical time.

Some materials include:

- Clean pieces of cloth or reusable pad
- Pads / sanitary towels


Staying Clean:

- Ensuring girls have safe access to spaces where she can clean is important. This can include helping her to fetch water, making sure she has access to soap and dry, clean underwear etc.
- Again, trusted persons of girls with disabilities should ask them what type of support they need during this time.


 **Ask:** Do you feel this information is relevant to you as a man? How so?

ADD any of the following examples if contextually relevant:

- As men in our society, we have control over many things in our household, including how money is allocated and the roles women and girls have. Therefore, ensuring men have information about the needs of women and girls during this time is important; men need to know what resources should be allocated to girls' basic needs, so that girls do not need to resort to unhygienic or risky methods to take care of themselves.
- Girls who are developing are not yet fully adults. They still have many changes they need to go through before they are fully developed and mature.
- Girls are not ready to get married because they have started menstruating. They are still growing and developing and this continues well beyond their teenage years.
- For girls already married, it's important to raise awareness of the risks of getting pregnant before they are 18. This increases the risks of health complications and can have a devastating impact on her and her baby.


 **Note:** For more information on supporting girls with disabilities during menstruation, look at the [Menstrual Hygiene Management Toolkit in Emergencies](#)⁴⁵. You can also check UNICEF Guidance on [Menstrual Health & Hygiene](#)⁴⁶.

For caregivers of girls with disabilities,

 **Say:** Menstruating girls and women with different disabilities may have different needs. Those with mobility limitations with their upper body and arms may have difficulties placing their sanitary protection materials in the correct position, and washing themselves, their clothes, and the material. Those with vision impairments (blind or low vision) may face challenges knowing if they have fully cleaned themselves and how much they have leaked. While those with intellectual and developmental impairments may need tailored support to manage menstruation.

In all situations, it is important to find a way to communicate effectively with the girl to understand that her physical and emotional safety, comfort and health is taken care of.

Activity 2: Supporting Contraceptive Use (45 minutes)

 **Say:** We discussed that when girls get married, it doesn't mean that they are ready to have children immediately. We want to understand further who makes these decisions and what options there are to delay pregnancy.

 **Do:** In groups, ask caregivers to discuss the following questions.

- When you were a boy, what did you know about pregnancy and how it happens?
- Who gave you this information?
- What information do you still think you are missing?
- What did you know about family planning and the various methods?

45 <https://www.rescue.org/sites/default/files/document/2113/themhminemergenciestoolkitfullguide.pdf>

46 <https://www.unicef.org/media/91341/file/UNICEF-Guidance-menstrual-health-hygiene-2019.pdf>



Explain:

- While having a baby can be a life-changing and wonderful experience, it can also be harmful to both the mother and the baby if the mother is below the age of 18. This is because a girl's body is not fully developed to be able to bear a child and it can lead to complications during pregnancy or childbirth.
- There are other reasons that people may choose to wait to have children. They may want to finish their studies or may not be fully aware of how to take care of a baby. It may be that their family already has so many children that they don't want to have any more or it may be because it is too expensive. Or it may be that the mother's health may prevent her from wanting to have children.
- Every person has the right to choose how many children to have, when to have them, and what method of contraception they want to use.



Say: Let's go through some scenarios and see if we think the couple should use family planning methods or not.



Do: Split the men into groups and give each group a scenario. Ask them to discuss the scenario and answer these two questions:

1. Should the couple in your scenario have a baby?
2. When is the right time for them to have babies?

(Scenarios require **CONTEXTUALIZATION**!)

Scenario 1

Alan and Beatrice have been in a relationship/married for two months. She is 17 years old. Alan wants to start having children. Should they have a baby or should they use prevention methods?

(Suggested Answer: If a girl gets pregnant at 17, it can be very dangerous for the mother and the baby, as the mother is not fully developed.)

Scenario 2

Farah and Amir are living in a small house with many people. They are looking to move somewhere to live with fewer people so they can start a family, but they don't know when this is going to happen.

(Suggested Answer: If they get pregnant now, it could cause additional stress and pressure due to their current living situation.)

Scenario 3

Mira is 15 and has been married for six months. She is still at school and completing her education. They don't have any children yet, but in the future they plan to have a family.

(Suggested Answer: Mira should complete as much of her education as she is able to attain and wait until her body is fully developed before she gets pregnant.)



Do: Ask the group to share their thoughts with the wider group.



Note: This discussion may be sensitive. The facilitator should refer to Appendix 1 and 2 in Girl Shine Caregiver Curriculum Part 3 for further guidance on how to handle difficult situations.



Ask:

- Who is usually responsible for taking contraception? (Most contraceptive methods are for use by women, only a few methods are used by men.)
- What are the ones that can be used by men? (Condoms.)

- What do you think are some of the barriers someone can face when trying to practice family planning? (e.g., lack of information or access to contraceptives, perceptions and suspicions about contraceptives, religious beliefs, and unwillingness of one of the spouses).
- If a woman wants to access contraceptives, how can men support her? (e.g., ensure she can access the health center and get contraceptives from an official health center, talk about plans and ideas on family planning together, share information about the methods you know and discuss what would be most suited to both partners, allow the woman to use the contraceptive if she desires).

Key Message



Say: It is better for girls to talk with a safe family member, rather than getting wrong information from peers or other adults. We can connect you to health providers in your communities if you have more questions or if your daughter is having ongoing health issues.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Practice talking to girls about the different ways in which they can talk to you if there is something they need to discuss in private. If not possible to speak to girls directly, ask women if there is anything you can do to support girls.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Read the preparation section in advance of the session, including additional reading materials.

SESSION 5:

SUPPORTING ADOLESCENT GIRLS (Caregivers of Married Girls)

Session Aims:

By the end of the session, caregivers will:

1. Gain information on the physical and emotional changes girls go through during adolescence.
2. Learn how to support girls' physical and emotional well-being during this time.
3. Support girls to receive SRH information and be able to provide girls with basic SRH information.

Materials:

- flip chart paper
- markers
- Resources 4.1 to 4.4.
- Resources 5.1 to 5.2
- comments box

Preparation:

- If caregivers have daughters with disabilities, be prepared with information relevant for girls with disabilities, speak to local disability partner organizations to see if you are able to make any referrals. Information related to disabilities is included in boxes throughout the session.
- Facilitators may face some resistance from caregivers when trying to encourage them to pass on ASRH information to girls. **It is important that facilitators refer to [Appendix A12 in Girl Shine Part 1](#) on introducing ASRH topics to caregivers ahead of the session.**
- For Activity 1, be prepared with Resource 5.1, so you can share information with participants about the various contraceptive methods. Be sure to check that the methods you discuss are available in your context.

Facilitator Note:

- As this is a sensitive topic, it is important to remind caregivers of the "Group Agreements" (Session 1) and ask if they would like to have any additional agreements specifically for this session.
- Caregivers may want more information about contraceptive methods and other information related to family planning or STIs, not covered here. There are plenty of resources included in Girl Shine which you can draw from to provide a separate session. This can be found in part 2 of Girl Shine.

Duration: 2 hours

Timing: Before the start of the Girl Shine Life Skills Health & Hygiene Module

Welcome & Review (15 minutes)



Ask: What information did you share with women or girls from the last session? Which information didn't you share and what were the reasons?



Say: Today we are going to continue the conversation from last week, gain new information and explore your perspectives and opinions further. We will also discuss how we can help girls to access information and support on this topic.

Let's Explore (10 minutes)



Ask: participants to think back to when they were first married. Ask them to think about:

- The information they had access to about sex, family planning and also services that they could visit to get help.
- The information their partner had on sex, family planning, and the services available to them.



Note: Participants don't need to give their answers to the group, but if there is anything they want to share about their reflections, they can.



Say: Having information gives us more control over our bodies and helps us to be more informed about our rights and choices.

Activities (1 hour 25 minutes)

Activity 1: Supporting Contraceptive Use (45 minutes)



Say: We discussed that when girls get married, it doesn't mean that they are ready to have children immediately. We want to understand further who makes these decisions and what options there are to delay pregnancy.



Do: In groups, ask caregivers to discuss the following questions.

- When you were a boy, what did you know about pregnancy and how it happens?
- Who gave you this information?
- What information do you still think is missing?
- What did you know about family planning and the various methods?



Explain:

- While having a baby can be a life-changing and wonderful experience, it can also be harmful to both the mother and the baby if the mother is below the age of 18. This is because a girl's body is not fully developed to be able to bear a child, and it can lead to complications during pregnancy or childbirth.
- There are other reasons that people may choose to wait to have children. They may want to finish their studies or may not be fully aware of how to take care of a baby. It may be that their family already has so many children that they don't want to have any more or it may be because it is too expensive.
- Every person has the right to choose how many children to have, when to have them, and what method of contraception they want to use.



Say: Let's go through some scenarios and see if we think the couple should use family planning methods or not.



Do: Split the men into groups and give each group a scenario. Ask them to discuss the scenario and answer these two questions:

1. Should the couple in your scenario have a baby?
2. When is the right time for them to have babies?

(Scenarios require **CONTEXTUALIZATION**.)

Scenario 1

Alan and Beatrice have been in a relationship/married for two months. She is 17 years old. Alan wants to start having children. Should they have a baby or should they use prevention methods?

(Suggested Answer: If a girl gets pregnant at 17, it can be very dangerous for the mother and the baby, as the mother is not fully developed.)

Scenario 2

Farah and Amir are living in a small house with many people. They are looking to move somewhere to live with fewer people so they can start a family, but they don't know when this is going to happen.


(Suggested Answer: If they get pregnant now, it could cause additional stress and pressure due to their current living situation.)

Scenario 3

Mira is 15 and has been married for six months. She is still at school and completing her education. They don't have any children yet, but in the future they plan to have a family.

(Suggested Answer: Mira should complete as much of her education as she is able to attain and wait until her body is fully developed before she gets pregnant.)


 **Do:** Ask the group to feedback their thoughts to the wider group.

 **Note:** This discussion may be sensitive. The facilitator should refer to **Appendix 1** and **2** in Girl Shine Caregiver Curriculum Part 3 for further guidance on how to handle difficult situations.

 **Ask:**

- Who is usually responsible for taking contraception? (Most contraceptive methods are for use by women, only a few methods are used by men.)
- What are the ones that can be used by men? (Condoms)
- What do you think are some of the barriers someone can face when trying to practice family planning? (e.g., lack of information or access to contraceptives, perceptions and suspicions about contraceptives).
- If a woman wants to access contraceptives, how can men support her? (e.g., ensure she can access the health center and get contraceptives from an official health center, talk about your plans and ideas on family planning together, share information about the methods you know and discuss what would be most suited to both partners.)
- If a married girl wants to access this information and her husband/in-laws refuse, what options does the girl have?

Activity 2: The Story of Rima (40 minutes)

 **Say:** Now we're going to talk about Rima's Story.

Rima's Story

Rima is 16 years old and recently married. Before her wedding, her female relatives told her about sex and pregnancy. She didn't have time to ask any questions. The first time she had sex she was scared and couldn't remember what her relatives told her. There was no discussion with her husband about whether she wanted to have sex or if they would use a contraceptive. Soon after the marriage, Rima found herself pregnant and struggling to cope with the new role as a mother and as a wife. Her in-laws and husband just expected her to manage because "all women have to go through this."



Ask: Does this sound similar to other stories you know? What is the same and what is different?



Say: Let's try to reimagine Rima's story. Let's see what we would suggest to Rima's caregivers (especially male caregivers) on what they could have done before Rima's marriage, before she got pregnant, and after she became a mother.



Do: Split participants into small groups and ask them to imagine they were Rima's father. How would they support her?



Ask: participants to share their ideas back to the group.



Explain: If women and girls have the right to make decisions about when and with whom they will marry, they will have more power over when, with whom, and under what circumstances to have children, which can help to prevent pregnancy under the age of 18 that can lead to serious health effects.

Key Message



Say: It is better for recently married girls to talk with a safe family member or trusted adult, rather than getting the wrong information from peers or other adults. We can connect women and girls to health providers in your communities if women and girls have more questions or if they are having ongoing health issues or concerns. It's important that men give their permission and encouragement for women and girls to seek official health services.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Talk to women and girls about the health services that exist in the community. Ask girls' mothers if they have spoken to your married daughters about any challenges they may be facing or any help the girls may need that they might not feel comfortable asking their husband or mothers-in-law about.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Read the preparation section in advance of the session, including additional reading materials.

SESSION 6:

THE FAMILY ENVIRONMENT

Session Aims:

By the end of the session, caregivers will:

1. Recognize the importance of a healthy family environment.
2. Learn tips and techniques to help them contribute towards a healthy family environment.

Materials:

- flip chart paper
- markers
- colored pens
- comments box
- A4 paper


Facilitator Note:

- This session may lead to disclosures of GBV committed. Facilitators should be prepared in advance with how they will deal with this. Check in with your supervisor on the best interest of the child, in case anything arises that may need to be followed up on, and read through the guidance provided in the introduction of the Girl Shine Caregivers Curriculum.
- Some men may identify their abusive behavior directly and ask for help to deal with their violence. It is important that facilitators know that the IRC does not provide interventions that are designed to help men deal with the violence they perpetrate.
- Be sure to remind caregivers of the "Group Agreements" (Session 1) and check to see whether they want to have additional group agreements for this session.
- The session may create a lot of discussion, as a facilitator, it is important to know when to move participants on to the next part of the session. For example, take answers from one or two participants instead of the whole group. If the session really does require more time, it can be divided over two weeks or extended so that there is time to finish discussion. You can say, "We can definitely hear from the whole group, but it means we will run out of time. Would you like to stay longer so we can get through all your reflections?"

Duration: 2 hours


Welcome & Review (10 minutes)

For caregivers of unmarried girls,

 **Ask:** Did you talk to girls about the different ways in which they can talk to you if they have something they need to discuss in private?

If not, did you talk to women about how you can support girls?

For caregivers of married girls,

 **Ask:** Did you talk to women and girls about the health services that exist in the community?

If not, did you ask mothers what you can do to help married girls with any challenges they are facing?

Let's Explore (20 minutes)



Say: Today we are going to talk in more detail about the family environment. By this we mean the relationships and experiences we have within our family structure.



Ask: When we imagine a family environment, what are the things we think of?



Explain: The family environment can include a number of things:

- **Physical environment** – for example, a house or a specific physical space
- **Emotional environment** – for example, stressful, tense, happy, relaxed, safe space, open communication
- **Learning environment** – for example, stimulating/stunting, modelling good/bad behavior, encouraging/discouraging communication and ideas.



Ask:

- What makes a family environment unsafe, tense, or stressful? (When we use our power over others to be physically or verbally violent towards women, girls, and other children, fighting, yelling, arguing, harsh punishments, and other forms of violence used to control someone's behavior, etc.)
- What do we think is the impact on women, girls and boys?



Note: Make sure caregivers identify the impact on these groups separately.



Explain: As they grow, children who are exposed to a stressful home environment and violence may show signs of problems. Children and young adolescents may have more trouble with schoolwork and show poor concentration and focus. Others feel socially isolated, unable to make friends easily, and may also show signs of aggressive behavior⁴⁷.



Ask: Were you aware of the consequences on adolescents?



Say: There may be some things we cannot control, such as the setting or structure in which we live, but there are things we can do to make those spaces nurturing, safe, and supportive to our family.



Explain: Women who are exposed to a stressful home environment, especially violence, can suffer from many illnesses. They may feel depressed or anxious and may also develop physical symptoms, such as regular severe pain in their body, problems with eating, issues related to their stomach, or inability to sleep.





Ask:


- Were you aware of these consequences on women?
- How do you think this impacts girls who are married or, divorced? How is the situation the same or different for them compared to unmarried girls? What about girls or boys with disabilities? How is the situation the same or different for them compared to girls without disabilities?



Say: Girls who have a disability, who are married, and who are divorced have additional needs that should be considered. For example, married girls may be expected to take on adult responsibilities before they are ready, girls with disabilities may require additional support from a carer and divorced girls may experience stigma and therefore isolation in the community.


 **Note:** Some caregivers may not fully understand the idea of how an environment can shape a child. They may believe that a child is either “blessed” to succeed in life or not. It is important to emphasize that environment can shape a child’s experiences and opportunities.


 **Ask:** Does anyone have any examples of how they make their family environment nurturing, supportive, and safe? *(Probe for examples related to girls who are married, girls with disabilities, etc.)*

 **Explain:** It is important to think about what the impact is on women, girls and children when men choose to use their power over them and choose to be violent. This significantly impacts the family environment, with a harmful effect on all family members.

Activities (1 hour 5 minutes)


Activity 1: Healthy Relationships (25 minutes)

 **Say:** I want us individually to think about what a “healthy relationship” looks like.


 **Ask:** What do we understand by the term “healthy relationships”? (They are relationships based on respect, trust, and honesty. They are relationships that make those in the relationship feel good and happy, where power is shared equally between partners.)

 **Do:**

- Divide the caregivers into 2 to 4 groups.
- Give groups 5 minutes to brainstorm as many characteristics of healthy/successful relationships as possible (for example, relationships in which partners respect and trust each other, practice good communication, value each other, etc.).
- Tell participants that the relationships can be between a caregiver/daughter or husband/wife, boyfriend/girlfriend, etc. It doesn’t need to be reflective of them or their current situation.

 **Ask:** each group to share their ideas with the large group.


WRITE caregivers responses on a flip chart. Ask for further suggestions and add to the lists. You may want to leave these lists up around the room while covering this topic to remind the group how to identify if a relationship is a healthy.


 **Ask:** What does this list tell you about the things that make a healthy/well/successful, safe relationship between two people?


ADD the following, if not mentioned:

- Talking to each other in kind ways without shouting or calling names.
- Women having equal power and decision-making around raising children, educating children, how to spend the family’s money
- Listening to each other and showing empathy.
- Being able to express feelings to each other.
- Respecting each other as people and supporting each other’s goals, hopes, and dreams.


 **Ask:** Do women have equal decision-making power within the family? Why/why not?

 **Note:** Some men may say that women control everything in the household and do not let men interfere. Probe further to understand if they are referring to managing the household chores, or whether women have more influence in financial matters and whether they are free to make it known when they need more support from men, etc.

 **Note:** For some issues, men may say that it is better for women to make decisions (for example, about the marriage of daughters). Probe as to whether men should equally have more say on issues related to this, particularly if they disagree with the decision.


 **Explain:** Being in a healthy relationship requires thinking about your partner as valuable and deserving of respect. It also means you must make choices, all the time, to demonstrate those beliefs. It means sharing power with your partner. This also applies to how you interact with the rest of your family members.

Activity 2: Steps Towards a Healthy Family Environment (40 minutes)


 **Do:** Read the following story to the caregivers, then split them into groups and give each group some questions to think about. They will share their reflections with the group.


The Story of Amira and Khalil


Amira and Khalil have three children. Amira has been struggling with managing the household responsibilities and working at the same time. Khalil has been having a very difficult time at work. One day, Khalil comes back from work, and dinner is not prepared. He starts shouting at Amira and tells her to hurry up! Amira shouts at Khalil and tells him that she is trying her best. Khalil gets angry and hits Amira. Their youngest daughter is standing in the kitchen and watching what happens; she begins to cry.

 **Say:** I want you to take a few minutes to think about what happened. (Repeat the story if necessary.) And then in your groups, answer the following questions:


- **Group 1:** What emotions was Amira experiencing? What emotions was Khalil experiencing? How did Amira and Khalil's daughter feel?
- **Group 2:** How does Khalil feel after he hit Amira? How did it feel seeing his daughter crying? How did he feel about himself?

 **Do:** Bring the group back together and ask each group to share what they discussed.

 **Note:** It is important to identify those contributions from participants that demonstrate positive attitudes towards women and girls to help counter any harmful social and gender norms.

 **Ask:** How can Khalil express his feelings to Amira in a way that doesn't cause harm to her or their children?

For caregivers of married girls,

 **Ask:** Imagine Amira comes and tells her father what happened. What could her father do to support Amira in this situation?

**Explain⁴⁸:**

- Khalil's violence toward his wife was not about losing control or being angry. Rather, he made the choice to demonstrate his power over his wife. Khalil also knows that there will most likely be no consequences for this choice. The anger and violence are **SELECTIVE** towards his wife.
- The "gender box" teaches men that anger is one of the few emotions that they can express and still be respected. Therefore, men often do not know how to express their emotions in healthy ways, and so, for example, they can mis-express pain and other emotions as anger, and take it out on women.



Do: Ask them to find a comfortable place to sit and to close their eyes.



Note: This should be conducted as a reflection exercise, so give men enough time between questions to really think about their examples.

**Say:**

- First we will start by focusing on our breathing, let's take a deep breath in and then release. Let's do this a few times until we are feeling comfortable.
- I will ask a series of questions and I want you to take your time to think about your answers and how you were thinking or feeling at the time. You do not have to share your answers with anyone, only if you wish to at the end.



Say: I want you to think about a recent argument you had with your wife/girlfriend.

Questions:

- What happened?
- What were you thinking at the time?
- How were you feeling during the argument (physical changes to the body, certain emotions)?



Say: Let's focus on our breathing again and take a deep breath in and then out. When you are ready, you can open your eyes.



Do: Once finished, ask if there are any volunteers that want to share their thoughts, feelings, and body sensations that they experienced with the group. Take one or two reflections.



Ask: What are some of the ways we can deal with situations like these when they happen?



Do: Get participants to brainstorm some ideas and clarify with the following explanations if not mentioned.



Explain⁴⁹: When dealing with a similar situation experienced by Amira and Khalil, we should consider the following:

- **Be Empathic:** Put yourself in the other person's shoes and think about how they will feel about what you are telling them. How would you feel if the roles were reversed?
- **Think About Your Body Language:** Give eye contact and try to sit or stand in a relaxed way. Do not use confrontational language or aggressive body language.
- **Listen:** When we are stressed, we tend to listen less well. Try to relax and listen carefully to the views, opinions, and feelings of the other person/people.

48 Adapted from IRC, Engaging Men in Accountable Practice (EMAP) <http://gbvresponders.org/prevention/emap-tools-resources/>

49 Adapted from Skills You Need <https://www.skillsyouneed.com>

- **Stay Calm and Focused:** Communication becomes easier when we are calm. Take some deep breaths and try to maintain an air of calm. If you need to, take a break from the conversation and come back to it later when you are calm.
- **Use “I Statements”:** “I statements” may allow couples to work through their disagreements in a way that allows them to express their opinions and feelings to each other without assigning blame. Some examples of “I statements” include:

- » “I’m feeling annoyed right now.”
- » “I’ve had a bad day.”
- » “I feel very frustrated when I think someone is not listening to me.”

 **Do:** Ask participants, if there is a pair willing to role-play being Amira and Khalil using the tips we discussed.



Explain: In the case of Amira and Khalil, he was expressing his frustration towards her and using “power over” her through violence. The solution is not to hide this aggression from the children in order to create a healthy family environment, but not to commit violence to begin with. Men like Khalil need to find alternative ways of dealing with their emotions. This aggression creates an unsafe environment in the home for female members of the family in particular, but also boys. To create a healthy, safe, and nurturing family environment, men and women can have open discussions about how to support each other and deal with their problems in a way that doesn’t cause harm to others.

Key Message



Say: Working on communication with our daughters and sons is a good way to establish healthy relationships and a healthy environment for our family. We can also support our daughters who are married (and may not be within our immediate family home) to feel supported by strengthening communication with them, too. You can ask women, girls, and boys in your life what you can all do together to create a good environment for everyone.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it’s not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Notice the differences in the way you treat girls and boys at home. Also try to observe differences between how your married and unmarried daughters are treated. Share your observation during the next session.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Prepare the illustrations for the story for Jane and Leila in advance

SESSION 7:

EXPLORING OUR RELATIONSHIPS WITH ADOLESCENT GIRLS

Session Aims:

By the end of the session caregivers will:

1. Explore the concept of empathy and practice techniques to increase empathy towards their daughters.
2. Be aware of and supportive of girls accessing their rights.
3. Continue to build on their relationships with girls.

Materials:

- flip chart paper
- pens
- A4 paper
- markers
- comments box
- Resource 7.1: Communication Tips
- Resource 7.2: Blame vs Empathy Scenarios
- Resource 7.3: Steps of Empathy

Preparation: Print out the following resources:

- Resource 7.1: Communication Tips
- Resource 7.2: Blame vs Empathy Scenarios
- Resource 7.3: Steps of Empathy

Duration: 2 hours

Welcome & Review (10 minutes)



Ask: What did you notice about any differences in how you communicate with girls compared to boys in your family and any differences in how they are treated?



Say: Last session we discussed what it means to have a healthy family environment, and one of the things we discussed was the emotional environment. One of the key factors we discussed with regard to creating a healthy family environment was good communication. Today we are going to talk in more detail about how we communicate with adolescent girls and how we can strengthen our relationships with them during this time of transition for them.

Let's Explore (15 minutes)



Ask: What are some of the challenges or issues caregivers face with adolescent girls they care for? (E.g., challenging behavior, not wanting to spend time with family members, etc.)





Say:

- Sometimes the issues you have with girls may be due to things beyond your control and may also not be the girls' fault either.
- Living in difficult situations, caregivers face many pressures and stressors which may affect the way they treat their children.
- Listening, being supportive, and communicating with girls helps build a healthy and nurturing family environment.
- Relationship-building takes some time, and it is normal to experience difficulties starting conversations that are different from our usual patterns, but we can do so with continuous effort.
- **For caregivers of married girls, ADD:** Married girls may not see their caregivers often and it may be difficult for fathers to know what their daughters are experiencing. Even if, as a father, you are no longer living in the same household as your daughter, it is still important to keep up this communication.



Ask: Why is it important to build the relationship between you and your daughter or daughter-in-law?

Caregivers of Unmarried Girls:	Caregivers of Married/Divorced Girls:
<p> Say:</p> <ul style="list-style-type: none"> • Especially during times of uncertainty, crisis, or displacement, it is important to try as much as possible to continue building relationships with all your children. • This is essential if you want to ensure they are healthy, happy, and safe. • Building relationships will help your daughters be more open to discussing their concerns and worries with you. Trying to put yourself in their shoes opens space for dialogue and will alert you to any potential risks or issues they may be facing. • During these situations, sometimes caregivers might think it is best for a girl to be married and think this might be the best option for her future. There are other options that can be explored before going down the route of marriage. • Communicating with girls and exploring their wants and needs for the future could help prevent issues they may face if married at a young age. 	<p> Say:</p> <ul style="list-style-type: none"> • Especially during times of uncertainty, crisis, or displacement, it is important to try as much as possible to continue building relationships with all your children, including married girls and daughters-in-law. • Your relationship with your married daughters/in-law in particular may change as you may not see them as often, but this doesn't mean they don't need you. If anything, they need you more as they will be experiencing many new things. • A girl's new family may expect girls to take on more responsibilities that she didn't have before and may be new to the girl. • Girls are still growing, and they may struggle to take on adult responsibilities and this could lead to tension in their new home. • In times of uncertainty, crisis, and displacement, girls might get married at an even younger age than they would have done before displacement. • Even if girls are married, they are still young and should be encouraged and supported to access the same opportunities as their unmarried counterparts. Caregivers can have an important role in championing this for married girls. • Communicating with girls and exploring their wants and needs could help prevent issues they may face during the marriage.

Activities (1 hour 5 minutes)

Activity 1: Communicating with Girls (25 minutes)

- ✓ **Do:** Read the following scenarios to the group. After each scenario, ask one to two volunteers to come forward to act out the scenario and how they would respond in each situation.
- * **Note:** If caregivers suggest harmful ways of dealing with the situation, for example, punishing the girl by hitting, yelling, etc., ask them to consider the harm that can be done to girls, families, and communities when we treat girls harshly. You can also ask other caregivers if they have alternative suggestions about how to handle the situation.

(Scenarios require **CONTEXTUALIZATION**: Not all scenarios are relevant to all contexts. Please choose the ones that are most relevant to yours. You do not need to do all scenarios.)

Caregivers of Unmarried Girls:

Scenario 1

Betty is going through puberty and is experiencing many changes. Betty has many questions about puberty. This is not normally something that is discussed openly in the family and especially not with male caregivers. How can we ensure that Betty gets the information she needs?

- * **Note:** It is important to mention that it is Betty's right to have information about her body. Betty's male caregiver can be supportive of Betty receiving this information from her mother, a health facility, or a WGSS where girls can receive accurate information.

Scenario 2

Randa is growing up and her caregivers have noticed that her behavior is changing. Randa is beginning to challenge and question her caregivers much more than she did before. One day, her father asks her to fetch him something. Instead of doing what her father said, like she normally does, she asks her father why he never asks her brothers to fetch things for him. Randa says she has a lot of homework since going into a higher class and she wants her brothers to take more responsibility around the house. How would you handle this situation?

- * **Note:** It's important to mention that Randa has the right to go to school and also to have free time and that it is beneficial for everyone if chores are spread fairly and equally so they don't fall to one person.

Caregivers of Married/Divorced Girls:

Scenario 1

Betty is recently married and wants to continue going to school. She wants information about family planning so she can delay getting pregnant. She asks her caregivers what to do. How can we ensure Betty gets the information she needs?

- * **Note:** It is important to mention that it is Betty's right to have information about her body. Betty's male caregiver can be supportive of Betty receiving this information from her mother, a health facility, or a WGSS where girls can receive accurate information.


Scenario 2

Asha has been feeling very sad lately and Dana and Rahul (her parents) notice this when she comes to visit them from her husband's home. One day, when both Asha and her husband came to visit, her father, Rahul, overheard an argument between them, and it was very bad. Rahul is concerned that the relationship is not going well but is unsure what he can do. How could Rahul handle this situation?

- * **Note:** Try to encourage caregivers to have a conversation with the girl to see how she is feeling. Fathers should try not to take sides, and should try to talk to girls in a way that is non-judgmental. This will help girls speak to their caregivers about what is happening from the girl's perspective. Often, we are quick to blame girls and women in these situations without thinking about the role that men play and the responsibility they have.


Scenario 3

Ruth has been going out late at night and even though her parents tell her they don't want her to go, Ruth is still going and ignoring her parent's wishes. People in the neighborhood are talking about Ruth and her friends, saying they have spotted them at discos. Ruth's father is worried about what happens at these discos and is frustrated that people are talking about Ruth. How can her father respond?

 **Note:** This question may raise strategies which involve marrying Ruth off. Try to get caregivers to think about talking to Ruth, understanding and having a conversation with Ruth to see together if the discos are safe/unsafe for Ruth to attend and how they can set boundaries that both can agree on.

Scenario 3

Randa got married recently and is struggling with all the responsibilities that have been given to her in her new home. She struggles to cope, and this has led to some problems. She doesn't talk to anyone in the house; she is withdrawn and seems sad all the time. One day when she was visiting her family, her father asked her why she is behaving so badly and Randa got very mad. She started to cry and told her father to leave her alone. What would you do if you were Randa's father?

 **Note:** Her father can try to talk to Randa about what is bothering her and see if they can find a way to make things easier for her. It is better to open the conversation in a way that is not blaming.



Say: Here are some additional tips that you can use to improve communication with your daughters.



Do Summarize the following points using Resource 7.1:

Communication Tips

1. Encourage girls to express their opinions.
2. Explore ways to help girls express themselves, especially girls who may have a disability and are unable to communicate their opinions verbally.
3. Try to put yourselves in their shoes and try to understand what they are feeling and what is on their mind.
4. Give them your time and attention. Even if your own life is very busy
5. Don't judge girls harshly, as this can close down communication and opportunities to become closer to the girl.
6. Encourage girls and allow them opportunities to be helpful. Use of praise makes everyone both the giver and the receiver feel good!
7. Encourage girls to form solutions on their own, by asking questions and encouraging them to think through the possible positive and negative consequences of any situation.
8. If you're concerned about girls going to certain places and doing certain things, instead of saying "no," try to provide reasons why you think this or what it is you're worried about so that you can come to an understanding.

Activity 2: Effective Communication Takes Time (40 minutes)



Say: We are going to talk about how to respect and understand others' thoughts, feelings, and views. Some people use the word "empathy" to describe this respect and care.

*** Note:** It is not necessary to use the word empathy, as long as its main concept and rationale is communicated. You could choose, for example, to use the phrase “respect and understanding of others’ thoughts, views, and feelings.”

? Ask: Does anyone know what we mean by “empathy”?

⋮ Explain: When I think of “empathy,” I think of working to understand the situation from the perspective of another, seeing with the eyes of another, hearing with the ears of another, and feeling with the heart of another. Empathy is the ability of one person to walk in the shoes of another person and feel what that is like.

= Say: Empathy, simply, is the ability to understand and act with care towards our daughters.

Blame vs. Empathy Scenario:


Requires **CONTEXTUALIZATION**

Use Resource 7.2 to help you explain the following scenario

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p>= Say: I want to read you a story about Jane and Hassan:</p> <p>Jane is 11 years old and lately she has been yelling at her siblings and refuses to talk to her mother, Leila and father, Hassan. She comes home one day and throws her things on the floor. Her father asks her what’s wrong. Jane tells her father that she doesn’t want to go to school anymore. She says that some of the girls in class are teasing her.</p> <p>? Ask: How do you think Jane is feeling?</p>	<p>= Say: I want to read you a story about Jane and Hassan:</p> <p>Jane recently got married and is visiting her mother, Leila, and her father, Hassan. It is the first time she has been home since getting married. When Hassan asks Jane how married life is going, Jane responds to tell Hassan that it is very difficult, and that her husband shouted at her.</p> <p>? Ask: How do you think Jane is feeling?</p>
<p>= Say: Now I am going to read some of the potential responses from Hassan. After each response, I would like you to move to the front of the room if you think that Hassan was blaming Jane, and to the back of the room if you think Hassan was being understanding/empathetic to Jane’s situation and her feelings. You can stand in the middle if you’re unsure.</p> <p>* Note: if participants are struggling with mobility issues, you can change the activity so everyone raises their hands, or shouts out.</p>	


1. Hassan said, "You must have done something to provoke these girls. I can't understand why anyone would do this to you."

(Pause for five seconds.)

 **Say:** Hassan's blaming her.


2. Hassan said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. School is very important, so what can we do to try to solve this problem?"

(Pause for five seconds.)

 **Say:** Hassan is being empathetic.

1. Hassan said, "You must have done something to provoke your husband. I can't understand why he would shout at you."


(Pause for five seconds.)

 **Say:** Hassan's blaming her.


2. Hassan said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. What can we do to try to solve this problem?"

(Pause for five seconds.)


 **Say:** Hassan is being empathetic.

 **Ask:** Which of the responses given by Hassan did you prefer? Why? Which responses would you like to hear if you were Jane?

 **Ask:** Why is empathy necessary in order to be a caregiver of an adolescent girl?

 **Do:** Have caregivers discuss; **ADD** to their list if any of the following is missing:

- Being empathetic helps ensure your daughters get their needs met and they feel safe.
- Caregivers can have empathy for each other and themselves, and this teaches the family, including daughters-in-law to care for themselves and others.
- When we respond empathetically to our daughters, we are supporting their healthy social and emotional development.
- Being empathetic allows our daughters and in-laws to openly share and discuss their problems and the risks they are facing, without the fear of being blamed.
- Girls need to have someone they can trust to talk to about the challenges they may experience as a married girl.

 **Say:** I'm going to share with you a simple technique to help you improve your empathy, to understand your daughters' feelings better, and be able to be responsive to them. This technique has four steps:

Show Resource 7.3: Steps of Empathy.

- **Step 1 – Identify the Feeling:** Try to identify or label what someone is feeling. For example, "Mariam, you look like you are worried right now—are you?"
- **Step 2 – Determine the Reason:** Understand why they are feeling that way. "Would you like to tell me why you are worried?" Mariam can tell you, or she may choose not to right now. You can say to Mariam, "Feel free to come and talk to me when you are ready."
- **Step 3 – Honor the Feeling:** Mariam might have had a disagreement with a friend or been rejected by her peers at school. Don't dismiss that reason. If you make your daughter think that her feelings are not important, she might not talk to you anymore about the things that are bothering her. "I understand that this makes you feel sad/upset/tired."

- **Step 4 – Take Action:** Deal with those feelings with your daughter. You can brainstorm with her what, if anything, needs to be done. Sometimes the situation may require the caregiver and the girl to come up with possible actions that may help remedy the situation. Sometimes the situation doesn't need an action other than just comforting your daughter/in-law or sharing in her joy. "Let's sit down together and discuss how to address this problem."



Say: Now we are going to practice the Four Steps of Empathetic Communication.



Do:

- Ask caregivers who would like to demonstrate the Steps of Empathetic Communication, using the example of Jane and Hassan.
- Refer caregivers to the flipchart with Jane's story on it, so they can recall the specifics.
- Ask one pair to demonstrate for the rest of the group. If there is time, you can have another group also demonstrate.



Ask: Were these new skills for you, or have you used these before?



Ask: Do you feel this is something you can practically use in your interactions with your daughters? If not, what alternatives do you suggest?



Note: Let them know that this may not come to them naturally, since it may be new, and they may be used to different ways of dealing with these situations. However, since they have a vision to support girls and help them to achieve their goals, the use of this technique will lead them towards their vision.

Key Message



Say: It is important to listen to and communicate with girls, including married girls, because they are still growing and need the support of their family. Relationship-building takes some time, and it is normal to experience difficulties starting conversations or communicating in ways that are different from our usual patterns or routine, but we can do so with continuous and persistent effort. This will lead to healthy, supportive, and nurturing relationships.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)

- ✓ **Do:** Explain: to caregivers this week's home assignment is to practice the Four Steps of Empathetic Communication with their daughters or daughters in law. In the next session, they should provide feedback as to which ones they used and whether they were effective.

* **NOTE TO FACILITATORS, FOR THE NEXT SESSION**

- Read preparation notes in advance.

SESSION 8:

POWER IN THE HOME

Session Aims:

By the end of the session, caregivers will:

1. Explore the idea of power in the home.
2. Have the opportunity to analyze their own use of power and recognize the benefits of sharing power with women and girls to reduce inequality, discrimination, and violence against women and girls.

Materials:

- flip chart
- markers
- a deck of playing cards
- Resource 8.1
- comments box

Facilitator Note:

- This session may lead to men disclosing past or current use of violence against women and girls and speaking about these incidents or patterns of abuse. Facilitators should be prepared in advance for how they will deal with this. Check in with your supervisor on the best interest of the child, in case anything arises that may need to be followed up on, and read through Resource 8.1
- Some men may identify their abusive behavior directly and ask for help to deal with their violence. It is important that facilitators know that IRC does not provide interventions that are designed to help men deal with the violence they perpetrate.
- Be sure to remind caregivers of the “Group Agreements” (Session 1), and check to see whether they want to have additional group agreements for the session.
- Due to the perception of power and its dynamics in the household, it is likely that caregivers might perceive themselves as the decision makers for their daughters and daughters-in-law. Be prepared to probe and ask them to explain why they think that: “Thank you for the contribution. Can you tell us more? Why do you think so?” If their response prompts negative feedback and disagreement from other caregivers, remind them of the group agreements. Ask members of the group to share their views. Remind them of the discussion on the types of power and emphasize that power is about being able to have access to and control over decision-making. As caregivers, it is important to use the power we have in a positive way to support our daughters and daughters-in-law.


Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.


Welcome & Review (10 minutes)





Ask: Did you practice the communication techniques we learned in the last session with adolescent girls and daughters-in-law? How did it go?

Let's Explore (15 minutes)


 **Ask:** What do you think we mean by power?

 **Explain:** Power is the ability to control and access resources, opportunities, privileges, and decision-making processes. This does not mean that power is always negative. We all have some kind of power in the community, but we all choose whether to use this power for good or for bad.

 **Ask:** Who do you think has power inside the home? Is it women, girls, boys, or men? (Or a combination?)

 **Explain:**

- As a community, we generally tend to assign women and girls a lower status than men and boys—and this results in women and girls being treated differently. This normally happens because these ideas and behaviors have been considered as normal and because this way of behaving has been supported by those with “power over” others, i.e., dominant, powerful people. We can work together to undo this system that oppresses men and women alike. It is important for us as men to understand how we can use our power to bring about positive change to create a more equal, fairer society, which benefits men, women, girls, and boys. As a group of men, we need to consider how we can set a positive example to the future generation so that men and masculinity is not associated with violence and hurting others.
- It is also necessary to share power to ensure that everyone is able to access the rights they are entitled to under international and many national laws. When power is used over others, this can also be a violation of their rights.


 **Ask:**


- How does power influence the choices that we have as men, or that women, girls, or boys have?
- What happens when power is abused? What are some forms of power abuse or power inequality you see in your environment?


Activities (1 hour 25 minutes)

Activity 1: Forms of Power⁵⁰ (35 minutes)


 **Do:** Shuffle a deck of playing cards.


 **Say:** I am going to ask each of you to choose a card from the deck of playing cards.

 **Explain:** The highest value in the deck is Ace, then the King, Queen, Jack, 10, 9 and all the way to the lowest value which is 2. [If the Ace is confusing to people, remove it]. You will choose a card and you should NOT look at it.

 **Do:** Walk around the room and ask each person to choose a card and put it FACE DOWN on their lap. Emphasize to participants that they should not look at the card they have chosen.

When every participant has a card,


 **SAY** and **DEMONSTRATE:** Now, hold your card up to your forehead without looking at it. Everyone should now be able to see everyone else's card except his own.

 **Explain:** that when you clap your hands, participants can get up from their chairs and mingle with each other. Participants should not talk but greet others according to the status or social position of their card. So, for example, the King may be treated with utmost respect, while a person holding a card worth 2 may be ignored or excluded.

Do:


- Before starting, make sure that participants understand what status means and use other words if they are easier or more relevant.
- Encourage participants to greet each other and demonstrate their reaction to other people's status through gestures and facial expressions rather than words.
- After a few minutes ask the participants to go back to their seats still holding their card to their forehead.
- Go around the circle and ask each participant to guess her/his card and explain the guess.

 **Ask:** How did it feel to be treated according to your card?

 **Explain:** For those with higher cards, it might have felt good to be treated with respect, honor, etc., while for those with lower cards, it might have felt bad to be ignored, dismissed, or treated as unimportant.


 **Ask:**

- Does this happen in our real lives? Do certain people get treated better or worse in our families and communities?
- Who in the community gets treated like the higher value cards and who gets treated like the lower value cards?


 **Do:** If working with participants that have higher levels of literacy, use flip chart paper to fill out a list with one side for the people who are treated like the higher value cards and the other for those who are treated like the lower value cards. See the sample list below. After participants have given responses, lead a brief discussion about status and power using the following questions as a guide and emphasizing the following points.

 **Ask:**

1. What is status?

 **Explain:** that status is one's social standing in the community. This refers to how they are viewed by others and how much power they are thought to have.

2. What is power?

 **Explain:** Power is the ability to influence or control people, opportunities, or resources. There are many types of power:

- **Power To** can be used to help others, bring about change, or expand opportunities.
- **Power With** is the strength felt when two or more people join together to do something they may not have done alone. Power with includes supporting those in need, those trying to change and those speaking out. It means joining power with others for positive change, creating a sense of support and possibility in the community. Power with also includes asking for help and holding men who use violence accountable. When we join others without bias or discrimination to positively improve our own and others' lives.

- **Power Over** is the influence that one person or group uses to control another person or group. This control might be used directly in the form of violence, such as physical violence, early marriage or intimidation. It can also be used indirectly, such as through the norms and practices that position men as superior to women. Using one’s power over another is an injustice. Respecting everyone’s power within and balancing power with others are positive alternatives. When our words or actions make it difficult, frightening, or even dangerous for others to use their own power.



Explain:

- Everyone has some sort of power. For example, even your daughters and daughters-in-law have the power to influence their mothers or mothers-in-law. However, different groups of people have been given different amounts of control and opportunities in society; therefore, some groups tend to have more overall power than others. These groups also tend to be the groups that have higher status.
- Those who have more power are able to hurt and exploit others if they misuse their power. Those who have the least power—who are very often women and girls—are most likely to be exploited and abused. Traditionally, men and boys have more power than women and girls. However, men, who usually have more power, can choose whether they want to use their power “over” women and girls or “with” women and girls. By utilizing our power with women and girls, we can work on dismantling the power imbalances and minimizing forms of “power over,” thus creating harmonious families and communities. The more power people have in society, the more they are responsible for reducing the exploitation of power.



Note: If any of the men in the group mention that they do not feel powerful because they are in a vulnerable situation (as refugees, as unemployed, in poverty, displaced, etc.), explain that sometimes we might not feel powerful as individuals, but men still belong to a more powerful group in society. Power comes from a number of sources. For example, in this case, the men might feel less powerful than other groups because of their economic situation. However, their sex as males entitles them to be part of a more powerful group in society, which gives them more privileges and opportunities than those offered to women. At the same time, some women might have more power than some men, if for example, their economic, education, or citizenship status is advantageous but when you compare men and women who have similar status, the men still hold more power than the women do.

Activity 2: Analyzing My Power in the Home⁵¹ (20 minutes)



Do:

- Let the group know that you are now going to read some statements aloud. For these statements, caregivers should just silently acknowledge whether their response is **“Always,” “Sometimes,”** or **“Never.”**
- Tell the men that this is a personal exercise of self-reflection and that answers will not be recorded, collected, or shared with others, so to please answer silently and honestly.
- Make sure to pause after each statement to give the group time to reflect.
- Ask the group to keep in mind the conversation that you just had about power.

CONTEXTUALIZATION: Adapt the statements below based on the context. Then choose some of the phrases below to read aloud, giving a moment for men to reflect after each.

Examples of statements:

- I feel that I can have several sexual partners without telling my partner.
- I beat my children when they don’t listen.
- I control all the financial decisions in the house.
- I like to have the final decision in all matters at home.
- I feel I do not need to listen to the opinion of my wife or children because I know what’s best.

51 IRC, Engaging Men through Accountable Practice (EMAP) <http://gbvresponders.org/prevention/emap-tools-resources/>

**Ask:**

- What was it like for you to complete this reflection?
- What did your answers tell you about how you use your power in the home?
- Do you use more “power with” or “power over”? In what situations?
- How does your use of power affect the discussions and decision-making you have with your wife and female and male children? Think about these groups separately to explore any differences.
- When we think about power with, does this only apply to women or does it apply to our female children too? How and where can we involve girls in decision-making, too?



Note: Describing acts of violence that happen outside our own homes is typically much easier than commenting on or sharing about violence within the home. Talking about violence we have committed is even harder. If caregivers share violence that they have committed, they will often seek to justify their actions or blame others. It is important to pay special attention to responses that minimize, justify, or blame the victim for violence that may arise. Refer to Resource 8.1 on Common Resistance Responses.

Activity 3: How to Make Change (30 minutes)



Ask: Can you think of positive examples of men who share power with their family?



Explain: A healthy family requires inputs, opinions, and ideas from all members of the family. Sometimes with the pressures we face, we might forget to do this or feel we don't have the time to. But if we want to have more equal, healthy and fair relationships, we need to listen to what girls and women need from us, and we need to make changes. We also need to focus on HOW we make those changes. We know that the gender box (remind them of the activity: Act Like a Man, Act Like a Woman) teaches men to be dominant and in charge, so we need to know that we may act in those ways, even when we are trying to do something different.



Do: Split participants into three groups, giving each a scenario. For each scenario the group should answer the following questions:

- Was the behavior of the man displaying “power over” or “power with” the women and girls?
- Who was making the decisions in the situation?
- How could this situation have been different? Create a role-play to demonstrate this.

Scenario 1

You have been thinking about all of the work your wife is expected to do around the house. You decide that she should no longer do the dishes and that your daughters will do them (not your sons) instead, and your wife can do the laundry, which you think she will like better.

Scenario 2


You decide you want to talk to your family about what you are learning in the group. When you come home, you tell everyone to stop what they are doing so you can talk to them. You tell them about the Man Box and the Woman Box and after you have finished talking, you allow them to get back to their activities.

Scenario 3

You ask your wife if it would be ok for you both to discuss some of the ways that you think you would like to support your daughter together, so that you can have a better relationship with your daughter. You ask your wife if she would like to talk about this and check to see when would be good for her to have this discussion.



Do: Ask the groups to present their role plays to the wider group.

 **Note:** Make sure to explain to men that it is expected that they will have challenges at first in learning how to talk to women in ways that are respectful and equal. This is because of how they have been taught to think about men vs. women. Emphasize that it is very important that men are honest about the challenges they are having so they can overcome them.



Explain: Here are some steps we can think about when talking to women about power in the home:

- **Step 1:** Explain that you want to discuss how you can help to make things fairer and more equal in your home. “I have realized that you do many more household tasks, and I would like to help out.” Note—helping out could, for example, include supporting directly or assigning tasks to other members of the family so it doesn’t fall only to girls.
- **Step 2:** Ask if she is willing to discuss this with you. If so, when would be a good time to talk?
- **Step 3:** When she is ready, explain that you want to make things fairer and more equal in your home. Listen to what she thinks about this and what she feels would be helpful. “In my group we are learning about how much more women and girls have to do each day in the home. I would like to help out, so things are more equal. What might be helpful to you?”
- **Step 4:** If she is comfortable with you making certain changes, work together to select two to three actions you can take. Work together to select two to three actions you can take.
- **Step 5:** Respect what your wife wants. If she is not comfortable with you making changes, seek to understand why and respect her feelings. Do not make decisions for her or insist that change happens in any particular way.



Do: After reviewing the steps, ask for a pair of volunteers to practice the discussion. Practice the discussion with a few different male volunteers if there is time.



Note: The focus is to help men reflect on how they are communicating with the women and girls in their life. The emphasis is NOT on improving women and girls’ communication skills in this instance.

Key Message



Say: Everyone has some form of power in society, even if some people hold more power than others. As men, we can use our power with women and girls to try to change the power imbalance that exists in society. This helps to create harmonious families and communities and improves the situation for everyone as stress/tension and violence is reduced.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it’s not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: If you're ready, have the conversation with women about how you can support them more, practicing the skills we learned today. Share your reflections during the session next week



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Prepare cut-outs for the rights-based activity.

SESSION 9:

PARENTING FOR EQUALITY

Session Aims:

By the end of the session caregivers will:

1. Explore further the idea of gender roles and how they relate to adolescent girls.
2. Learn about how they can contribute to upholding the rights of girls.

Materials:

- flip chart paper
- markers
- A4 paper
- pens
- tape/string
- Activity Clock (Resource 9.1)
- Print out of rights in Resource 9.2
- small box/bag for rights cut-outs
- comments box

Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.

Timing: Before the start, or parallel to, the adolescent girls' participation in the sessions entitled "Our Relationships," Parts 1 and 2.

Welcome & Review (5 minutes)



Ask: Did you talk to women about how you could help them more? How did it go?

Let's Explore (10 minutes)



Ask:

- In your home, what are the rules or expectations for how children are supposed to behave? Are there differences between girls and boys? (Ask volunteers to share some examples.)



Note: If men only have female children, ask them how they treat them differently based on age.

- Are there differences in the rules and expectations for daughters and daughters-in-law? (Ask volunteers to share some examples.)



Ask: Why do we have different rules or expectations for girls and boys, especially during adolescence?



Explain:

- Long before they reach adolescence, we start to prepare girls and boys for their “gender roles.” For example, girls may be given more household tasks than boys, and boys may be expected to go out to work. The rules and expectations we place on girls and boys are, in many cases, based on what we previously discussed—the gender box. For example, boys are told not to cry, not to fear, not to be forgiving, but instead be assertive and strong. Girls, on the other hand, are asked not to be demanding, but to be forgiving, accommodating, and nurturing.
This can influence the way we treat girls and boys, and the opportunities, expectations, and rules we place on them.



Ask: Do we think that when we stick to fixed rules about what girls should do and what boys should do, that we gain the greatest success for them, our families, and society?

Activities (1 hour 25 minutes)

Activity 1: Equal Opportunities for Girls and Boys (20 minutes)



Ask: What do we mean when we talk about “our rights”?



Explain: Our rights are what every girl, woman, boy, and man deserves, no matter who they are or where they live, so that we can live in a world that is fair and just. We are protected by many of these rights through laws or agreements that our own countries or the countries hosting us have signed on to.



Ask:

- Can anyone think of any rights that we have as men?
- What about the rights that women have?

ADD to the list **Requires CONTEXTUALIZATION:**

- Right to be treated equally to men and without discrimination and to live free from violence
- Right to work
- Right to education
- Right to live with freedom and safety
- Right to say and think what we want



Ask: Does anyone know what the rights of girls and boys are?

WRITE DOWN their answers on a flip chart. **Requires CONTEXTUALIZATION.**



Explain: Girls and boys, like men and women, are protected by a number of rights, and as their caregivers, it is our responsibility to make sure their rights are protected. We are going to hear about some of the rights girls and boys have.



Do: Place the cut-out rights (**Appendix 2**) in a small bag/box. Ask each caregiver to pull one out of the box/bag and ask her if she wants to read it out of if she would like to ask the facilitator to read it out.

Once finished,



Ask:

- What do we think about the rights I mentioned? Do we give these rights to girls and boys equally?
- What can we do to ensure girls also have access to these rights?



Say: It is important to remember that these rights apply to all adolescent girls—including married girls, divorced girls, and girls with disabilities—as much as they apply to boys.



Say: We also have a role to play in making sure we are not stopping someone from securing their rights. We can start by supporting each other and the women we know. Some of the things we can do are:

- Respect the ideas of women and girls even if their ideas are different from ours.
- Treat women and girls equally, regardless of whether they are married, unmarried, have a disability, or are divorced or widowed.
- Welcome women, girls, boys, and men who are from different cultures or backgrounds.
- Share information with women, girls, boys, and men on where they can learn about their rights.

Activity 2: Girls' and Boys' Experience of the Family Environment (25 minutes)



Do: Place tape or string down the length of the room.



Say: I will read a number of statements, and you will decide whether you agree or disagree with them.



Say: Those who agree will stand at one end of the line, and those who disagree stand on the other end of the line. Those who are not sure can stand along the line, according to how much they agree or disagree with the statement.



Note: For caregivers that demonstrate harmful attitudes and beliefs about the roles of girls, women, boys, and men, do not engage in a one-to-one confrontation with the participants on their opinion towards a specific statement, but use the opportunity to discuss this in the larger group.





Adaptation:

If participants have difficulty walking, you can adapt the activity to have them raise two hands for “agree,” one for “disagree” and no hands for “not sure” or it can take place as a discussion with everyone sharing their opinion verbally.

Statements (CONTEXTUALIZATION:)


Caregivers of Unmarried Girls	Caregivers of Married Girls/Divorced Girls
<ul style="list-style-type: none"> • Girls and boys should both support their family with household and caring responsibilities equally. • It is the responsibility of women, not men, to take care of the children. • Boys are less emotional than girls. • It is more important for boys to go to school than girls when families have limited money for school fees. • Girls should be given the same amount of free time as boys to play and study. • Women should be able to have equal decision-making opportunities as men. 	<ul style="list-style-type: none"> • Daughters-in-law should do as their husbands or in-laws tell them. • Daughters-in-law and their husbands should both support their family with household and caring responsibilities equally. • Girls should have an equal say as their husbands when it comes to family planning and using contraception. • Girls can't/shouldn't be budget holders at home as the husband can manage this better. • Daughters-in-law should be given the same amount of free time as other family members. • Women should be able to have equal decision-making opportunities as men.

 **Ask:** What differences did you notice about how we perceive or treat girls/daughters-in-law and boys?


 **Explain:**

- Girls usually have fewer opportunities and are expected to take on more responsibilities in the home, leaving them less time for studying or other opportunities.
- Sometimes caregivers express their frustrations more towards girls than boys because girls are expected to be forgiving and accepting. They may also sometimes express this more towards daughters-in-law than daughters.
- They may also expect girls to take on more responsibilities and help more within the home due to the belief that this is the role of a girl.
- The expectations we put on girls can mean that we might limit their potential and hinder them from developing their skills and competencies.

Activity 3: Gender Roles in My Home (40 minutes)⁵²

 **Do:** Break into two groups and give each group an Activity Clock (**Appendix 1**). Assign them the following tasks:

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p>Group 1: What do girls do during the different hours of the day listed on the clock?</p> <p>Group 2: What do boys do during the different hours of the day listed on the clock?</p>	<p>Group 1: What do daughters-in-law do during the different hours of the day listed on the clock?</p> <p>Group 2: What do their husbands do during the different hours of the day listed on the clock?</p>

 **Note:** They may not agree exactly on all points, but ask them to decide on the most common things. Men might not be very familiar with the tasks that women, girls, and boys are doing in the home. Probe further to ask them, “Who does the laundry? How do you think this gets done? Who collects the water? Who buys the vegetables?” etc.

52 Adapted from IRC, Engaging Men through Accountable Practice <http://gbvresponders.org/prevention/emap-tools-resources/>

✓ **Do:** After 10 minutes, bring the groups back together and ask them to share their timelines.

? **Ask:**

- What do you notice about these timelines?
- Who has the longer list of tasks to do each day? Why?
- How are tasks assigned to girls and boys or daughters-in-law and their husbands?

* **Note:** Clarify any differences between girls and boys, or daughters-in-law and their husbands.

- Should girls/daughters-in-law be consulted on the tasks that are assigned to them?

... **Explain:**

- Ensuring girls have the opportunity to develop life skills is essential. As girls may not have as much free time as their male siblings, they may not have the opportunity to learn skills important to their development.
- For married girls, without these life skills, girls will find it more difficult to deal with the pressure that comes in adulthood or in marriage and may not have the skills and capabilities to take care of themselves or those around them.
- While it is expected for children and daughters-in-law to help in the home, especially in difficult times, these chores can be more equally distributed among girls and boys. That way, girls will also have some of the free time that usually only boys are able to have.

? **Ask:** How can we make sure that household responsibilities can be distributed more equally and support the family more?

* **Note:** Men might say that this is not something they get involved with, that this is the responsibility of women to manage. Get them to think of ways that they can show women and girls that they are taking more of an interest in the responsibilities that women and girls have and how they can offer support.

= **Say:** Boys/brothers can be a great support to their sisters in task sharing; this can strengthen family bonds and also help boys learn more skills, too.

For Caregivers of Unmarried/Divorced Girls:

✓ **Do:** Build off of the discussion they had with women on how men could support them more in the house.

? **Ask:** Caregivers, in pairs, to discuss how they can introduce this idea of shared decision-making with girls and boys in the family.

For Caregivers of Married Girls:

? **Ask:** What are some ways you can talk to your wives/partners about how to support your married daughters?

For Caregivers of Unmarried/Divorced Girls:

For caregivers of unmarried or divorced girls, introduce decision making into the family



Explain: Here are some tips on introducing shared household responsibilities in your family:

Step 1: Discuss the issue with female decision-makers in the house.

- Say that building off your last conversation, you also want to talk to the girls and boys about how they can also be part of creating a supportive family environment.
- Ask them how they would like to address this, for example, "So what would you suggest we need to do to bring this up with them?"

Step 2: Once agreed, ask girls what tasks they would like more support with. Make sure you listen to their opinions and ideas and address the ones that are realistic. Alternatively, women may prefer to have these conversations with girls.

Step 3: Ask boys to think about the future they want for their sisters. Do they want them to succeed in school/employment and be successful in their lives? Then explain to boys that this means girls need equal time for school, homework, and activities.

Step 4: Give girls and boys encouragement and praise when they are supporting each other. It makes them feel valued.

Step 5: Check in with women, girls, and boys regularly to see how the new distribution of chores is working.



Ask: Do you think these steps are realistic? What should we change to make it suit your situation more? How did you find this activity? Do you think you can practice some of these things at home with your family?

For Caregivers of Married Girls:

For caregivers of married girls, there are some tips we can use to help us have this conversation:

Step 1: Discuss the issue with women in the house.

- Say that building off your last conversation, you also want to talk to your daughters who are married to understand how we can create a supportive environment for her. For example, "I want to ask how you think we can talk to our married daughters about how we can support her even though she no longer lives with us."
- Ask them how they would like to address this, for example, "So what would you suggest we need to do to bring this up with them?"

Step 2: Once agreed, ask married girls how you can be a support to them even though they are married now. Make sure you listen to their opinions and ideas and address the ones that are realistic. Alternatively, women may prefer to have these conversations with girls.

Step 3: Check in with girls regularly to see if they feel the new actions are working or if they need anything else.

Key Message



Say: Rights are things every girl, boy, woman, and man should have or be able to do and everyone has the same rights. As caregivers, we have a responsibility to support girls and boys to secure their rights and also make sure we are not stopping other people from securing their rights. One way we can start is by supporting each woman and girl that we care for.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Try using the steps discussed in the last activity with women, girls, and boys in your family; try using them with married girls in your family, too.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Know the legal framework for marriage in the context.
- Prepare illustrations for the story of Zeina in advance.
- There is a video to be shared during the session, please organize for a laptop or projector to show the video if possible and check it works (may require internet connection).

SESSION 10:

MARRIAGE IN OUR COMMUNITY

Session Aims:

By the end of the session caregivers will:

1. Understand the root causes of early marriage.
2. Understand the consequences of early marriage.
3. Identify alternative coping mechanisms that don't resort to early marriage.

Materials:

- Art box
- comments box
- Flip chart paper
- markers
- A4 paper
- pens
- tape/string
- projector
- laptop and speakers if showing the [Girl Effect video](#).
- Resource 10.1: The Story of Zeina

 **Note:** If you don't have the projector/laptop/speakers, you can skip the video part of the session.

Preparation:

- Make sure the video is prepared in advance and ready to show to participants. There is an option to change language on the subtitles, so make sure this is practiced ahead of the session.
- Print Resource 10.1, for the story of Zeina, if possible, to help guide the story.

Facilitator Note:


- In countries where it is illegal to marry under the age of 18, some caregivers may hide marriages of girls. Conversely, caregivers may report marriages to the authorities if the girl herself makes the decision to marry; this may happen in contexts where girls are in a "love" marriage that the caregivers disapprove of. Both scenarios can be problematic if it means that girls are not receiving the support they need. It is important as a facilitator to focus on highlighting the risks to girls of marrying young and how caregivers can continue to support girls if they are married.

Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.

Timing: After the Female Caregivers' Session 10

Welcome & Review (10 minutes)

For caregivers of unmarried girls,

 **Ask:** Were you able to introduce shared decision making into the family with regard to household responsibilities using the steps discussed? How did it go?

For caregivers of married girls,


 **Ask:** Were you able to talk to married girls about the support they need?

Let's Explore (15 minutes)


 **Ask:** What does marriage look like in our community?


Probing questions to aid discussion:

- What is the best age for women to marry? What about men?
- At what age do women actually get married? What about men?

 **Note:** In some contexts this question may be sensitive due to legal frameworks, be sensitive how it is asked in contexts where this is the case.


- Who makes decisions about who to marry and when to marry? Is it different for women and men?
- Is the situation the same now as it was before displacement? How is it different or the same?
- What does marriage look like for women and girls with disabilities? How are women who are divorced treated in the community?

 **Say:** Marriage is something that many people choose to do. It is when two people decide they want to build a partnership together, and sometimes this includes having children. Marriage can take many forms. Sometimes two people can fall in love and decide to get married. Sometimes it may involve other family members or friends who help women or men to find a potential wife or husband. It could happen because of financial interests or to maintain certain family ties. The important thing to remember is who has power to choose to say yes and to choose who to marry. If the power is equal, marriage can be a very positive experience; however, if the power is unbalanced, marriage can be unhealthy/harmful, especially to a girl, in terms of her health, safety, and emotional wellbeing.

 **Ask:** Who can think of examples of when power may not be equal?

If not mentioned by the group, and if appropriate **ADD** these examples:

- When the parents force or influence a girl to get married to someone
- When the girl is a child (under 18) and the man is an adult
- When the age difference between the woman and the man is very large
- When the power of the community and society makes girls and parents believe that girls should be married at a younger age

 **Say:** Today we will discuss the wonderful things that come with marriage and also the harms that can come if the process of marriage is not equal for girls/women.

Activities (1 hour 25 minutes)

Activity 1: The Concept of Marriage (20 minutes)



Say: Marriage is something that is part of our culture and community. We have many ways of celebrating and valuing marriage.



Do: Split participants into 2 -3 groups and ask them to briefly discuss the positive aspects of marriage. Once finished, ask them to come and share back their discussion with the wider group.



Ask: What are some of the challenges that come with marriage?



Explain: There are positive aspects of marriage and there are also challenges. Sometimes, however, the challenges can be increased when the power in the marriage is not equal, as in the examples we discussed earlier. So, we are going to dig deeper into some of these examples and will discuss early marriage.

Activity 2: Why Early Marriage Happens (35 minutes)



Ask: Does anyone know what we mean by the terms “early marriage,” “child marriage” or “forced marriage”? Have you heard them before?



Say:

- “Early marriage” and “child marriage” are terms that are used to describe marriage that happens to girls and boys when they are under the age of 18.
- According to many international agreements marriage that occurs before the age of 18 can be harmful to girls, even if the legal framework or religious laws allow it.
- The term “forced marriage” can apply to girls who marry under 18, but it can also apply to a marriage at any age where one person is forced to marry another person.



Ask: What do you think about this information?



Say: Some of us were either married under the age of 18 or married someone who was under the age of 18; it is something that is very common. It is also possible that we married a young wife, and there were no complications, so we are not sure why this might be a problem. But over time, we have more information and scientific evidence that highlights to us that marriage at a young age can be harmful and difficult for girls.



Do: Use Resource 10.1 to tell the following story and stop at the specified points to ask questions to the group.



It is possible that not everyone is aware of the legal framework in countries they are citizens of or are hosted in. If marriage is illegal under 18 highlight to the group so they have this information. And if the age of marriage is different in the country they are hosted in compared to the country they may return to (e.g. Syria and Lebanon), it is important they have this information as well as information related to how to navigate that process.

► Part 1

Zeina is 15 years old, and her parents want her to get married. They are worried that she is getting older and spending a lot of time out of the house. Zeina's parents are also struggling financially and since moving to this current location they have not been able to work. They think Zeina is getting too old to share the space with her siblings, especially now that she is menstruating. Marriage will help them to manage the finances better, and they believe it will give Zeina a better life. It will also stop people from talking about Zeina not being married already.

 **Ask:** What are the reasons contributing to the decision to marry Zeina?

 **Explain** if not mentioned by the participants:

- As we discussed in previous sessions, there are different expectations placed on girls and women in society compared to boys and men. This includes keeping girls in the "Woman Box" and controlling how they behave, who they spend time with, and what they are allowed to do.
- This is because in many places, girls may not be valued the same as boys. Boys are expected to take care of their parents when they get older and go out to work to provide an income; the same expectations are not placed on girls. Girls are seen to be an economic burden instead. When situations like displacement happen, many families might decide to marry their daughters as a way to relieve the financial burden and to give girls what they think is a better chance at life. There are many examples of girls who earn an income for their family or take care of parents in their old age, but because of the "Woman Box"⁵³ there is a perception that girls cannot do those things.

► Part 2

Zeina's parents approach her about the idea of marriage. Zeina is confused, she is happy attending school. But she has seen some of her friends get married and she likes the idea of having her own room and not having to share with her siblings. And she is worried that if she doesn't marry soon, she might not get a good husband.

 **Ask:** What are Zeina's reasons for wanting to get married?

 **EXPLAIN** if not mentioned in participants' answers:

- Zeina is influenced by the community expectations and peer pressure. Her reason for wanting to get married is because society has told girls like Zeina that if they don't marry young, they might not marry at all.
- They have told Zeina that when a "good catch" comes along you should marry him immediately because you don't know if another will come along. Also because of the difficult situation at home, Zeina thinks married life will be an escape from hardship.
- While it may seem like Zeina is making a choice to marry, she is influenced by the environment she lives in.

► Part 3

Zeina does get married, and married life isn't exactly how she imagined. She left school, and there are new pressures she is experiencing that are placed on her from her new family, such as having children or taking on all the household chores. Zeina doesn't feel she has the power to ask for the things she wants or needs.

 **Ask:** What is the emotional or physical impact on Zeina?

53 We discussed in session 3 that the man and woman box was about society's expectations of who women and girls or boys and men should be, how they should act, how they should feel and what they should say. They are taught to us from the moment we are born, by many different people, the community and through experiences.



Explain: What Zeina experienced happens to many girls. And some of our wives and daughters might have experienced a similar situation. Girls in similar situations as Zeina can feel isolated, unhappy, and overwhelmed with marriage. They can also experience risks to their health that can be very severe.



Ask: What are some of the consequences of Zeina marrying young?



Do: Share ideas with the group and **ADD** anything that's missing.



Note: If you are able to, you can show participants the Girl Effect Video. Translation is available in a number of languages, including French and Arabic: <https://www.youtube.com/watch?v=1e8xgF0JtVg>



Explain:

- Girls who marry young are often pulled out of school and miss important years of their education. Because of this, they will have limited knowledge, skills, and experience to negotiate adult marital roles.
- Girls who marry at a young age are more likely to experience violence in their marriage. The larger the age difference, the more likely they are to experience violence. Girls who marry young are more likely to describe their first sexual experience as forced.
- Childbearing is frequently expected after marriage, with first births being the riskiest for young adolescent mothers. Pregnancy at this time is very dangerous, and doctors recommend that girls finish puberty and adolescence before attempting to have children.
- Pregnant young adolescents face a significantly higher risk of dying in or after childbirth.
- For instance, girls who become pregnant at an early age often have difficult deliveries because their pelvis is too small. This could lead to needing an operation to deliver the baby.
- Young girls are also at high risk of delivering babies too early—before the baby is ready to come out.



Ask:

- What do you think about the information presented?
- Do you think this information could help someone make an informed decision about early marriage? Why/why not?
- What can caregivers do if it is the girls themselves that are requesting to get married?

Activity 3: Strategies to Delay Marriage (for Caregivers of Unmarried Girls) (30 minutes)



Note: This version of Activity 3 is intended for caregivers of unmarried girls. There is a different Activity 3 for caregivers of married/divorced girls below.



Explain: We respect that marriage is an important part of the community and that it is something many people will do. But we also think that given the harms associated with marrying at a young age, there are things we can do to delay marriage of young girls until they are older (above 18). This will help girls to have a better chance of a healthy marriage and life. To be able to support girls to delay marriage until they are older, it takes the decision of caregivers, but it also takes influencing community members, when it comes to deciding when and who our daughters should marry.



Say: I am going to give each group a scenario, and in your group, you will come up with strategies on how the family can consider delaying the marriage of their daughter until she is older. When deciding on strategies, there are two key things you need to do:

1. Think about who you can include in your strategy (e.g., the girl, caregiver, community decision makers, and/or the potential husband and his family).
2. Think about what impact delaying marriage will have on the girl and her family, if there are some negative impacts, what can be done to resolve this?



Do: Split participants into 2 groups and give each group a scenario. If unable to read, you can read the scenarios to the group. Participants can share back their scenarios and strategies to the wider group through role play.

Scenarios (requires CONTEXTUALIZATION)

Scenario 1

Yusra and Kamal have three children and Kamal is currently out of work. Yusra earns some money, but it is not enough to support their children. They had to remove their eldest daughter from school because of the financial situation. Kamal thinks that maybe it is better that their daughter gets married to reduce the financial burden on them. Kamal loves his daughter very much but thinks this is what is best for her. Kamal wants your advice.



Note: the following possibilities if not mentioned. They could ask Kamal to think about the pros and cons of the decision to get his daughter married. They could encourage Kamal to think about alternative strategies before marrying his daughter, and ask him to think about where he might be able to get additional support to keep his daughter in school.

Scenario 2 (for contexts where adolescent pregnancy can lead to forced marriage):

Nancy is 15 and recently discovered she is pregnant. She is worried about telling her parents as she is afraid they will force her to marry the man who got her pregnant. Nancy does not want to marry him, she wants to finish her education and stay with her family until she is a bit older. How can Nancy's father respond in this situation?



Note: This scenario can be quite challenging. Fathers may say that the girl has no other choice but to marry. Encourage them to think about alternative ideas to marriage. How can Nancy continue to go to school when she has a baby, what will make it possible for Nancy to stay at home and not marry? What would happen if Nancy did marry? How would she feel?


Scenario 2 (for sensitive contexts):


Adam's family is growing and recently his cousin also moved into the house with his family. Adam's children are all sharing one small room, including his eldest daughter Nancy who is 16. Adam thinks the best solution is to get Nancy married as she will have her own space and the house will not be as overcrowded. Should Nancy's marriage be delayed? How can this be done?




Note: They should think about the pros and cons of the decision to get Nancy married (e.g. health risks to Nancy, school drop-out, isolated etc.) They should think about alternative strategies that can help to delay the marriage.

Activity 3: Supporting Married and Divorced Girls (for Caregivers of Married/Divorced Girls) (30 minutes)

 **Note:** This version of Activity 3 is intended for caregivers of married/divorced girls. Above, there is a different version of Activity 3 for caregivers of unmarried girls.


 **Say:** We have learned about some of the risks that married and divorced girls face. But there is something we can do. We are going to think of ways in which we can support married and divorced girls in our lives and also in the wider community.

 **Do:** Split participants into 2 groups, one focusing on married girls and the other on divorced girls. Ask them in their groups to discuss ways in which they can support these girls even if they are not in their care.


Once finished, if not already mentioned, **ADD** the points below:

- If possible, check on married and divorced girls' material needs (specifically, food, money, sanitary pads, clothes, and school materials). In-laws might not be able to provide adequate support, so always check with the girl or ask a female caregiver to if it is more appropriate.
- Check in and support girls' emotional needs; specifically if you're an in-law, give them time to see friends and family. And if you're a caregiver, make time to visit and spend time with girls.
- If possible, check on married and divorced girls' educational or vocational needs; perhaps she wants to go back to school, learn new skills, attend a course or generate some income to become independent.
- If possible, check on married and divorced girls' health needs. Girls may need access to medicine, health care, family planning services, antenatal care, etc. Encourage girls to wait until after 18 to have children, even if they had a child already; each birth is different, and they should delay pregnancy until their body is fully developed to prevent health risks such as death of mother or baby.

Key Message for Caregivers of Unmarried Girls

 **Say:** There are many harms associated with girls marrying at a young age, so marrying girls at a later age will help them to have a better chance of a healthy marriage. To be able to support girls to delay marriage until they are a little older, it takes the decision of caregivers but also influencing the community, particularly men and boys who have a lot of decision making power when it comes to deciding when and who to marry.

Key Message for Caregivers of Married Girls

 **Say:** While there are many challenges associated with girls marrying young, as caregivers there are many things we can do to help support girls in this situation. Some of the things include checking in on their material, emotional, educational and health needs. And talking to them about delaying pregnancy until after 18 is key to ensuring their health and the health of their baby. As caregivers, we may not have the resources to take care of all of these needs, but one thing we do have control over is supporting girls' emotional needs in particular.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)

- **For caregivers of unmarried girls:** Have a conversation with your daughter or wife/partner about the issue of early marriage and some of the information we discussed today. See what their ideas are—if they are different or the same as what we discussed.
- **For caregivers of married girls:** Have a conversation with your daughter or if more appropriate through your wife/partner to understand what the needs of married girls are and to see how you can support them. Even if you are unable to provide material help, there are other things you can do in terms of their emotional needs or supporting them to access health care.

NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Familiarize yourself with the resources in the preparation section in advance of the session.

SESSION II:

SAFETY AND VIOLENCE

Session Aims:

By the end of the session, caregivers will:

1. Discuss the different types of violence that women and girls face, particularly in the home.
2. Explore ideas related to their roles and responsibilities to contribute to the safety and wellbeing of their family.

Materials:

- flip chart paper
- markers (in at least four different colors)
- post-it notes
- pens
- comments box

Preparation:

- Familiarize yourself with Resource 11.1 and 11.2 ahead of the session to remind you of the root causes and consequences of GBV and the types of GBV.
- Familiarize yourself with Resource 8.1 Common Resistance Responses and **Appendix 2: Steps to Challenging harm from the Girl Shine Caregiver Curriculum.**
- Some participants may not agree with all of the definitions or examples of types of violence. **It is important to be prepared to deal with conflict and to know how to respond. All relevant content is included in the session, but you will need to read it and prepare in advance to feel comfortable with facilitation.**
- The session may create a lot of discussion. For a facilitator, it is important to know when to move participants on to the next part of the session. For example, take answers from one or two participants instead of the whole group. If the session really does require more time, it can be divided over two weeks or extended so that there is time to finish discussion. You can say, "We can definitely hear from the whole group, but it means we will run out of time. Would you like to stay longer so we can get through all your reflections?"


Facilitator Note:

- Understand the international and national landscape of VAWG laws. International laws that address violence against women and girls include Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Universal Declaration of Human Rights and Convention on the Rights of the Child. You should check if the country you are working in has signed up to it. A number of countries will also have national laws in place that criminalize domestic violence – it is important to know the status in your country.
- During this discussion, victim blaming may arise. If men express thoughts such as, “Sometimes women/girls ask for violence by misbehaving.” Make sure to ask what other caregivers think, to get a range of perspectives. Describing acts of violence that happen outside our own homes is typically much easier than commenting on or sharing about violence within the home. Talking about violence we have committed is even harder. If caregivers share violence they have committed, they will often seek to justify their actions or blame others. **It is important to pay special attention to behaviors like minimizing, justifying, or blaming the survivor.**
- Ask caregivers who describe physical punishment as a result of “misbehaving” what the reasons are why adolescent girls “misbehave.” Remind them that it is a difficult period of life where girls are going through many changes, have many questions and are exploring boundaries and limits; they need caregivers to support and listen to them.
- **Also be aware of any violence disclosed, especially against adolescent girls. This may need to be followed up with your supervisor, especially if you believe a girl is in immediate harm.**





Duration: This session could take up to 2.5 hours. If you are unable to complete the session within the allocated time, you can also split it into two sessions.

Timing: After the Female Caregivers’ Session 11: Violence Women and Girls Experience

Welcome & Review (10 minutes)

-  **Ask:** Did you have a conversation with your daughter or wife/partner about the issue of early marriage and some of the information we discussed? How did that go?

Let’s Explore (15 minutes)

-  **Ask:** What do you think the word “safety” means?
-  **Say:** When we talk about “safety,” we mean being free from harm, danger, threats, or risks, both inside and outside the home. Harm, danger, threats, and risks can be related to a number of things—for example, the environment can make people unsafe if there is an earthquake or storm.
-  **Ask:** Can anyone think of other types of harm, danger, threats, or risks that make people unsafe? (For example, war, conflict, lack of money, being homeless, violence, etc.)
-  **Say:** For the purpose of this session, we are going to focus on the issue of violence, and the types of violence that people inflict on women and girls to make women and girls unsafe. It is important to remember that violence is not something that “just happens” to someone because they are a woman or girl. It is a choice that other people make to be violent towards women and girls. Violence against women and girls is a violation of their human rights and is written in many international laws (add national laws too, if applicable).



Say: The definition of violence against women and girls is “any threat or act (physical, emotional, sexual, economic) directed at a girl or woman that causes harm and is meant to keep a girl or woman under the control of others.” There are different types of violence that are inflicted on women, and girls in particular, many of which you have already mentioned. This can be broken down into 4 main categories:

- **Physical** (hurts the body)
- **Emotional** (hurts the feelings and self-esteem)
- **Economic** (controls access to money, property, or resources)
- **Sexual** (controls sexuality)



Ask: Can anyone give examples of the types of violence that might fit into each of these categories?



Note: Check Resource 11.2 for suggestions.



Ask: Does anyone have any questions?

Activities (1 hour 25 minutes)

Activity 1: What Are the Risks? (35 minutes)



Do: Divide participants into two groups. Each group will focus on one of the following questions:

- **Group 1:** What are the specific safety risks and threats that men and boys face in the community or the home?
- **Group 2:** What are the specific safety risks and threats that women and girls face in the community or the home?



Do: Give participants about 10 minutes to discuss and write their answers on a flip chart. When they have finished, bring them together in the group to present their answers.



Ask:

- What were the similarities or differences you noticed in the safety risks that women and girls face compared to men and boys?
- What did you notice about the types of violence experienced by women, girls, boys, men?
- What did you notice about the perpetrator of the violence? Did they have anything in common? (For example, were the perpetrators mainly men?)



Note: If men are not forthcoming with types of violence perpetrated against women and girls, you can add some of the forms of violence that women and girls face (sexual, emotional, physical violence).



Explain:

- Women, girls, boys, and men can all experience harm, danger, threats, or risks, but there are some safety issues that are directed towards women and girls. These safety issues are types of violence that women and girls face because of their gender (remind them of the gender box).
- This type of violence is done to women and girls because they may be perceived as weaker than men, and therefore men use their power over women and girls.
- Sometimes, men, women, boys, and girls think this violence is normal because it is something acceptable in the community and has been happening for a long time.
- People may not realize that it is even considered violence.

- Sometimes, women may also be violent towards girls, or have certain expectations of girls based on their own experience or expectations placed on them. (For example, marrying girls early because this is what happens in the community.)
- Men do experience violence from other men, for example a male employer may be violent towards a male employee. But the violence is not related to the gender of the male employee; it could be related to other factors of discrimination that places the man in a marginalized, or less powerful, category.



Ask: Do you think that women and girls deserve to have less power and safety than men and boys? (Women and girls deserve to have the same power and safety that men and boys have).

Activity 2: Understanding Violence (50 minutes)



Say: We have discussed the different types of violence that happen, especially to women and girls. Now let's take some time to think about why this violence happens.



Do: Read the following scenario to caregivers:

(Requires **CONTEXTUALIZATION**: Please change details such as names to make it more relatable to your context.)

- Eric was on his way to a village 10km away for an appointment with the authorities to provide some documentation, when his motorcycle hit a sharp object and his tire popped.
- He pushed the motorcycle for 5km to finally arrive at the office at noon. Eric went directly to the authorities to submit his papers. When he arrived, the door was locked. A nearby policeman told Eric that the office was closed for the day.
- Eric then went to a repair shop to fix his tire. He had to wait for one hour while the man doing repairs took a break for his lunch. When the tire was finally fixed, the man asked for \$5 (or equivalent local currency). Eric had no money left to eat or drink before returning home to his village.
- As he drove his motorcycle home, he was caught in the rain. When Eric arrived home he told his wife Beatrice to bring him food.
- She said she had returned late from the market today because of the rain, so the food was not yet cooked. Eric yelled, calling his wife useless and stupid. He told her to prepare the food immediately!
- Their daughter came home and Eric asked her why she was late and not home to help her mother with the cooking. She explained that she needed to stay late at school to finish some work. Eric slapped her and told her to get out of the room. He threatened to remove her from school if she was late again!



Ask:

- How did Eric feel during the day?
- How did he deal with those feelings? (Re-read the story if needed and pause after each segment to get responses for this question.)
- Why did Eric choose to act violently toward his wife and daughter?
- Was it because he was angry? If so, then why didn't he become violent with the policeman or the tire repairman?



Explain:

- Eric's violence toward his wife and daughter was not about losing control or being angry. Rather, he made the choice to take out his emotions and demonstrate his power toward his family.
- Eric also knows that there will most likely be no consequences for this choice, whereas there would be for becoming violent with the authorities or the tire repairman.
- The anger and violence are **SELECTIVE** towards his wife and daughter. Violence against women and girls is a choice rather than the result of uncontrollable emotional urges.

- The gender box teaches men not to be emotional, as that is reserved for women. Men are taught that anger is one of the few emotions that they can express and still be respected. Therefore, men often do not know how to express their emotions in healthy ways, and their pain often gets taken out on women and girls.



Ask: How else could he have expressed his emotions to his wife and daughter?



Explain: All of us will experience feelings of anger, powerlessness, and frustration throughout our day. In order to help prevent violence against women and girls and have healthy and respectful relationships, we need to:

- Recognize when we are experiencing these feelings.
- Identify where they are coming from (gender box, power differences).
- Manage those emotions in a way that does not hurt or intimidate others.
- Find alternative ways of dealing with our emotions, including talking to others about our feelings, taking a walk, taking deep breaths, or helping someone else.



Do: Ask if there are any volunteers who can role-play being the man in the scenario, demonstrating how he could have handled the situation better. How could he have talked to his wife and dealt with his daughter in a better way? If there is time, you can have a few people demonstrate this to the group.

Key Message



Say: Women, girls, boys, and men can all experience harm, danger, threats, or risks, but there are some safety issues that mainly affect women and girls. These safety issues are types of violence that women and girls face because of their gender. Those who commit the violence are the ones responsible for their actions; it is never the fault of the survivor—violence is always a choice.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Talk with your wife/partner and daughters about safety in the home and in the community. Ask them for their thoughts and ideas on how they can be supported to feel safer. Be prepared to share with the group next week about this experience.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Familiarize yourself with the resources in the preparation section in advance of the session.

SESSION 12:

SUPPORTING GIRLS WHO EXPERIENCE VIOLENCE

Session Aims:

By the end of the session caregivers will:

1. Have a stronger understanding of types of violence adolescent girls face.
2. Explore the concept of blame in relation to the violence adolescent girls experience.

Materials:

- flip chart paper
- markers (in at least four different colors)
- post-it notes
- pens
- comments box

Preparation: Familiarize yourself with the following resources:

- Resource 11.1
- **Appendix 1:** Common Resistance Responses
- **Appendix 2:** Steps to Challenging Harm from the Girl Shine Caregiver Curriculum.

Facilitator Note:

- During this discussion, victim blaming may arise. If men express thoughts such as, “Sometimes women/girls ask for violence by misbehaving” - make sure to ask what other caregivers think, to get a range of perspectives. Describing acts of violence that happen outside our own homes is typically much easier than commenting on or sharing about violence within the home. Talking about violence we have committed is even harder. If caregivers share violence they have committed, they will often seek to justify their actions or blame others. It is important to pay special attention to behaviors like minimizing, justifying, or blaming the survivor.
- Also be aware of any violence disclosed, especially against adolescent girls. This may need to be followed up with your supervisor, especially if you believe a girl is in immediate harm.

Duration: 2 hours

Timing: After Female Caregivers' Session 12

Welcome & Review (10 minutes)



Ask: Did you talk with your wife/partner and daughters about safety in the home and in the community? What were their thoughts and ideas?



Say: Today we are going to talk about an important topic – supporting girls who experience violence.

Let's Explore (15 minutes)



Ask:

- Can you think of any forms of violence that girls may experience, more than men, boys, and women? (Select ones relevant to your context, e.g., early marriage, FGM, denial of education, etc.)
- Why do you think adolescent girls experience these types of violence more than other groups?



Say: Adolescent girls are more at risk of violence than other groups because of their age and gender. Girls may be at risk of violence both inside and outside the home. Sometimes, caregivers' reaction to that risk of violence can be to limit girls' movements, restrict their access to education or other activities, and blame girls for the violence they might be at risk of experiencing.



Ask: Do you think girls are ever to blame for the violence they experience? (Violence is a choice made by those who are committing it; girls are never to blame for the violence they experience.)



Ask: Who is usually committing violence against girls? (Is it other girls, women, boys, and/or men?)



Say: It is usually people who have power over girls that commit violence against them. As we have discussed before, many men have power over women and girls. Boys may also have power over girls, and because of their age, women may also have power over girls.

Activities (1 hour 20 minutes)

Activity 1: Supporting Girls' Safety (30 minutes)





Do: Remind caregivers of the different types of violence discussed in the previous session.



Say: To be able to stop violence from happening to girls, we need to understand the types of violence they experience and the impact it has on them.




Do: Divide caregivers into two groups and provide each with a case study. Read the case study to the group and ask each group to think about the questions under each case study. They will provide a summary to the larger group.

Caregivers of Unmarried Girls	Caregivers of Married/Divorced Girls
<p>Case Study 1: Peter is a teacher who treats his female and male students differently. At break time, he lets all the boys go outside to play, and he makes the girls stay inside to clean up. During the lessons, he only listens to what the boys say, and always asks the boys to answer the questions. One day, one of his female students tries to go outside to play with the boys. When Peter tells her she should stay inside, she refuses. Peter gets angry and hits her, telling her to respect her teacher!</p> <p> Ask:</p> <ul style="list-style-type: none"> • Is the way Peter behaved towards his female students a type of violence? <i>(Yes, because Peter is discriminating against the girl and being violent towards her because she is a girl.)</i> • Were the female students to blame for Peter’s behavior? <i>(No. Peter does not need to resort to violence towards students in any situation. Additionally, Peter is not treating girls and boys equally.)</i> • What are the potential physical and emotional effects of Peter’s behavior on his female students? 	<p>Case Study 1: Sophie is 16 and recently got married to Robert. She cooks and looks after the house, and Robert tells her that he is very happy being married to her. But when Sophie doesn’t do exactly what Robert wants, for example, she wants to do something for herself like meet her friends, Robert shouts at her, sometimes threatening to hit her.</p> <p> Ask:</p> <ul style="list-style-type: none"> • Is this a type of gender-based violence? Why yes/why no? <i>(Yes, Robert is using violence to threaten her, make her feel scared and to limit her movements).</i> • What are the potential physical and emotional effects of what is happening to Sophie? • Is what happened to Sophie her fault? <i>(Sophie is not to blame for the way she is being treated. There are many ways Robert can express himself that do not involve violence or controlling Sophie)</i>

Case Study 2 (See below for alternative case study for sensitive contexts):

Robert is a young man who is in a secret relationship with Sophie. Sophie is 16 years old. Robert says horrible things to Sophie, slaps her, and forces her to do things she doesn't want to do. When Sophie says she will leave Robert, he threatens to tell her family about their relationship. Sophie is scared about what her father would do if he found out she had a boyfriend, as this would bring "dishonor" to the family. So, Sophie feels she has no choice but to stay with Robert.

 **Note:** Caregivers may say that girls should not have boyfriends and that this is the solution. It is important for them to discuss the ways in which they can support girls who are experiencing violence without forcing girls to be secretive.

 **Ask:**

- Is what Sophie is experiencing a type of violence? (Yes.)
- What are the potential physical, emotional, and social effects of what is happening to Sophie?
- What can Sophie's father do to support her in this situation?
(Sophie's father can try to make sure that Sophie feels supported to come forward to someone in her family she trusts to share what she is experiencing. It is important to help Sophie safely get out of this situation so that she doesn't experience further harm).

Case Study 2:


Lina is married and the main earner in her household. As well as working, she is expected to take care of the household. Her husband is not working, but all of Lina's income goes to her husband, who controls the household finances. He doesn't tell Lina what he is spending the money on and sometimes there is no money left for food, so Lina has to work to bring in more money. She has no access to the money she is earning.

 **Ask:**

- Is this a type of gender-based violence? Why yes/why no?
(Yes, this is a type of economic violence which Lina's husband is using to unequally control access to money in the household.)
- What are the potential physical and emotional effects of what is happening to Lina?
- Is what happened to Lina her fault? *(Lina's husband is responsible for his own behavior.)*
- What can the people around Lina (caregivers, mother-in-law) do to support her?

Case Study 2 for Sensitive Contexts:

Robert is a young man who is engaged to Sophie. Sophie is 16 years old. Robert says horrible things to Sophie, slaps her, and forces her to do things she doesn't want to do. Sophie's family do not know Robert treats Sophie in this way. When Sophie says she will break the engagement, he tells her that her family would never accept and that this would bring "dishonor" to the family. Sophie feels she has no other choice but to stay with Robert.


 **Note:** It is important for them to think of the ways in which they can support girls who are experiencing violence without shutting down the conversation and forcing girls to be secretive.

 **Ask:**

- Is what Sophie is experiencing a type of violence? (Yes.)
- What are the potential physical, emotional, and social effects of what is happening to Sophie?
- What can Sophie's caregivers do to support her in this situation?
(Sophie's caregivers should try to make sure that Sophie feels supported to come forward to someone in her family she trusts to share what she is experiencing. It is important to help Sophie safely get out of this situation so that she doesn't experience further harm).

 **Explain:**

- In both scenarios the girls experience violence.
- They may also be experiencing stress, injury, feelings of hopelessness, isolation, trauma, blame, rejection.
- As we discussed in the session on adolescent girl development, research tells us that children who experience violence can suffer harmful developmental consequences, and children who are witnesses of violence can experience the same negative consequences.


 **Ask:** What can we do to create a safer environment for girls who may be facing the different types of violence we discussed?


ADD the following if participants don't mention them:

- Don't blame girls for the violence inflicted on them
- Create an open and non-judgmental space for girls to feel comfortable to discuss violence that may have happened to them. This is especially important for girls who may be experiencing violence from boyfriends, partners, or husbands.
- Respect girls' rights to a life free from violence, the right to be children, to get an education, to not be forced into marriage. This applies to all girls, unmarried, married, with a disability, divorced or widowed, etc.

- Praise girls for being bold and confident, and for standing up for themselves and saying “no” to people who might want to harm them.
- Encourage girls to exercise their right to say “no” firmly. For girls with disabilities that may not be able to express themselves verbally, find ways to support them to exercise this right.
- Use non-violent strategies to deal with disputes and disagreements in the family with women, girls, and boys.


Activity 2: The Story of Sophie and Robert Discussion (25 minutes)


 **Ask:** Let’s take the story of Sophie from the last activity. (For caregivers of unmarried girls use Case Study 2 — either the regular case study or the one for sensitive contexts; for caregivers of married girls use Case Study 1).

 **Note:** Men may not be willing to accept supporting a girl who is in a relationship, if this is something uncommon or hidden in the context. It is important to get participants to focus on the danger the girl may be in and why it is important to ensure her safety.

 **Do:** Remind participants of Robert and Sophie’s story.


 **Say:** I would like a volunteer to imagine you are Sophie’s dad. How can you talk to Sophie about what she is experiencing?


 **Do:** Ask them to demonstrate through a role play to the group. If there is time, you can ask one or two additional people to also demonstrate.

 **Say:**

- Sophie’s caregiver should not blame her for what happened. He should allow her to feel comfortable and safe to express what happened to her if she wants to.
- If Sophie’s caregiver doesn’t feel comfortable talking to Sophie directly about this, he could also ask Sophie’s mother or another trusted adult woman to check that Sophie is okay.
- Sophie’s caregiver should make it clear to Sophie that if she is experiencing any harm, it is okay for her to come forward and tell her family, and that they would support her, not harm or punish her.

 **Ask:** Why is it important that Sophie’s male caregiver respond in that way?

 **Say:** It is important to fully understand what the risks are and to support Sophie in being safe from these risks or threats. It is important to help Sophie safely get out of this situation so that she doesn’t experience further harm.

 **Ask:** Can anyone remember the session we had on our relationships with adolescent girls? We discussed empathy. Can anyone remember what empathy means?

 **Say:** Empathy, put simply, is the ability to understand and act with care towards our daughters.

 **Ask:** And why is empathy important, especially when talking to girls about violence?



Explain:

- Being empathic helps ensure girls feel safe.
- Being empathic allows girls (or anyone experiencing violence) to openly share and discuss the problems and risks they are facing, without the fear of being blamed.

Activity 3: Blame–Stand Up, Sit Down (25 minutes)



Explain: As we have already discussed, sometimes people might fully or partly blame girls for the violence that is inflicted on them. They may tell girls it is their fault violence happened to them, that they could have done something to stop it, or could have somehow avoided it.



Say: I am going to read a few scenarios, and we are going to decide who is to blame. Follow the instructions.



Note: If caregivers struggle with stand up/sit down, they can also replace standing up with putting their hands up.

Scenarios (requires CONTEXTUALIZATION)

Scenario 1

A man and a woman are having a friendly discussion in the market. When she bumps into him later, he tries to kiss her, but she doesn't want to; he keeps trying, so she pushes him away. Stand up/hands up if you think the man is to blame.

(The man is to blame, although he may have got woman the impression the liked him, he can't try to kiss her without her agreement.)

Scenario 2

A husband and wife are arguing because the wife refused to do as the husband requested. The husband pushes the wife and hurts her arm. Stand up/hands up if you think the husband is to blame.



Note: They may say that the wife is being disobedient and should do as the husband says. It is important to explain that under no circumstances is she to blame for being physically assaulted by her husband. There are different ways to solve problems, and there should be equal decision-making power.



Ask: Is the woman or girl experiencing violence ever to blame for what happens to them?



Say: In many international and national laws (check to see if this applies to your context), it says that violence against women and girls is a violation of their rights and no one should be exposed to violence. The blame lies with the person who is being violent—the person violating the rights of girls and women.



Ask: What can we do to be more supportive of girls (and women) who might want to disclose violence?

If not mentioned, **ADD:** We can believe them, listen to them, not be judgmental, and help them access services.

Key Message

The survivor is never to blame for the violence that happens to them. Even if some people think that the survivor could do something to prevent the violence from happening, it is important to understand that the perpetrator has a choice not to abuse, and the responsibility always lies with the perpetrator.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Talk to your daughters about how they can keep themselves safe. Explain how you plan to support their safety by using the ideas you came up with in Activity 1 (creating a safer environment for girls), and get their opinions/feedback on this.

SESSION 13:

OUR VISION FOR THE FAMILY⁵⁴

Session Aims:

By the end of the session caregivers will:

1. Think about how family reputation can influence their decisions.
2. Reflect on their vision for their family

Materials:

- Art box
- comments box
- paper
- pens
- colored pens
- Resource 13.1: Linda and Maya's Stories

Preparation:

- Know what the local terminology is for "reputation" or "honor." Understand how this works in the community and contextualize stories accordingly.
- Print out Resource 13.1: Linda and Maya's Stories

Facilitator Note:

- Talking about reputation might be sensitive and caregivers might not be willing to share their personal experiences. Be mindful of the atmosphere in the room and move the conversation from personal to general if needed.
- Some caregivers may be resistant to the ideas and conversations around reputation and honor. Be mindful of resistance and check guidance on common resistance strategies.
- A thorough **CONTEXTUALIZATION** will help to be better prepared for this session.

Duration: 2 hours

Timing: After Female Caregivers' Session 13

Welcome & Review (10 minutes)




Ask: Did you talk to your daughters about how they can keep themselves safe? How did the conversation go? What feedback did they provide on your plan to support their safety?

Let's Explore (20 minutes)




Ask: Has anyone heard the saying "What will people say?" or "What will people think?"?

- What does it mean?
- When is it used?

 **Say:** This phrase (or similar phrases) is something that many of us are familiar with; it is related to our “reputation.”

 **Ask:** What do we mean by “reputation”? (Take some answers.)


 **Explain:** Someone’s reputation is based on general beliefs or opinions about them and how other people look at them. There are many things that influence our “reputation.” It is usually based on a set of expectations or standards set by the wider community about how people should behave. Sometimes, how people think about us can shape how we behave or interact with others. As individuals, we try to keep a “good name” or reputation for ourselves and our family.

 **Ask:** Can you think of the characteristics of a family with a good reputation?


 **Ask:** Can you think of the characteristics of a family with a bad reputation?

WRITE DOWN Example Answers — *require* **CONTEXTUALIZATION:**

Good Reputation	Bad Reputation
<ul style="list-style-type: none">• Father brings home money• Boys bring home money• Father makes good decisions• Wife and children are obedient• Wife is loyal• Children are polite• Girls do not go out with boys• Children study hard and get good grades	<ul style="list-style-type: none">• Father is lazy• Father drinks/smokes too much• Wife is lazy• Wife and children go out and do whatever they want• Girls are seen with boys• Children misbehave and are a bad influence on their friends


 **Ask:**

- Why is reputation so important for our families and the communities we come from?
- What will happen if our family has a bad reputation?”
- How do you think family honor or reputation influences the marriage of daughters?

 **Explain:** We know that family reputation is very important in our community. Family reputation affects our social relations at all levels and can bring great pride or great shame. It may also lead us to make decisions that we think may not be the best for ourselves or our family, but we do it because that is what we think other people expect from us.

Activities (1 hour 20 minutes)

Activity 1: Reputation and the Community (50 minutes)

 **Say:** We will now have the opportunity to see how family reputation may affect decisions people take related to their daughters.

✓ **Do:** Divide participants into 2 groups and give each group a scenario. For low literacy groups, you can read the scenarios to them. Each group will discuss the scenario they have been assigned and answer the following questions:

1. What are the reputational risks in the story?
2. How did this impact the daughter in the story?
3. What could the caregivers in the story do differently (realistic suggestions)?

WRITE the answers to the last question on a flip chart when participants are sharing back.

* **Note:** Give participants 20 minutes in their groups to discuss the scenario. They should each get 5 minutes to present back their scenario and answers to the questions. They can present through discussion or role play.

Requires CONTEXTUALIZATION

Scenario 1: Linda's Story

Linda wants to move to the city to attend university when she finishes school. Her parents are supportive of this, but recently people have been telling Linda's parents that they should get her married before she moves. They say that girls who leave home get corrupted and don't marry. One day, Linda's father tells Linda that maybe she should consider it. He says that while Linda leaves for the city, it is the parents who will stay behind and have to listen to the opinions of people. Linda really doesn't want to get married, but is wondering if she should do it for her parents.

Scenario 2: Maya's Story

Maya got married when she was 15 to the boy who got her pregnant. She didn't want to get married but her parents told her she must, as it would bring shame on the family if she didn't. Now she is 17 and back at home with her parents because the marriage ended. Her father blames her for bringing shame on the family. Maya wants to go back to school to complete her education. Maya's father tells her that it is not an option for a divorced girl to do that and she should just get married to someone who will accept her and her child. Maya feels frustrated that she will not be able to determine her future.

Scenario 2: Maya's Story (for sensitive contexts)

Maya got married when she was 15. She didn't want to get married but her parents convinced her. Now she is 17 with a small child and back at home with her parents because the marriage ended. Her father blames her for bringing shame on the family. Maya wants to go back to school to complete her education. Maya's father tells her that it is not an option for a divorced girl to do that, and she should just get married to someone who will accept her and her child. Maya feels frustrated that she will not be able to determine her future.


✓ **Do:** Summarize all the points to the last question, "What could caregivers do differently?"

? **Ask:** What did we learn from these stories?


... **Explain:**

- These stories showed us how risks to reputation may influence the decisions people make. It also showed us how this can impact girls and the families in the stories. But more importantly, it showed us that there could have been an alternative ending to these stories.
- Sometimes people may prioritize family reputation over the well-being of their family members; when this happens, those family members might struggle to have a happy and healthy future.
- As men, we can be examples for other men in the community. We can show our peers that we value and love our daughters and all of our family enough that we will support them to stay safe, become empowered, and secure a healthy future no matter what. When we do this, we begin to break down stigmas and we can slowly make change in our homes and communities at large.


Activity 2: Our Vision for Our Family (30 minutes)

 **Say:** In our very first session together, we discussed our hopes and dreams for our daughters. We discussed what we wanted them to learn or achieve and what dreams and hopes we had for them.


 **Ask:** Does anyone recall what their hopes and dreams for their daughters were? (Take some answers.)


 **Explain:** In this activity, we will revisit those thoughts and build on them. We will start with some guided questions and will start by closing our eyes, so you might start to feel very relaxed and maybe even sleepy. But try to stay active with your imagination.

Once everyone is comfortable:


 **Say:**

- Please close your eyes or look downward for the next few minutes.
- If you need me to repeat anything, you can raise your hand at any point, and I will go over the instructions.

 **Note:** Leave a few seconds for participants to have time to reflect on the questions being asked before moving on to the next instruction.


 **Say:**

- I want you to think about your family. Take a moment to think about the things you appreciate about your family. Think first about your wife (if not married, think about a significant woman in your life), what do you like and appreciate about her?
- Now let's think about your daughters. Stop and think about each girl, even those who are married and no longer live with you. What do you like and appreciate about each of them?
- Now let's think about for the other women, girls, boys and men in your life. What do you like and appreciate about each of them?
- Now let's think about you as a husband, father, or caregiver. How are you a good husband and good father or caregiver?
- Looking down the road, two years from now, what do you want your relationship with each of your daughters (married or unmarried) to look like? Has anything changed from what it's like now?
- What will be different for you as a husband? What will be different for your wife as your partner and a mother? How will the lives of each of your children be different?
- Slowly and when you're comfortable, you can begin to open your eyes and stretch.

 **Ask:**

- Would like to share their thoughts and ideas so far?
- How can you turn those thoughts and ideas into a reality? What could be some of the challenges you face in the community along the way?
- How can we overcome these challenges? Think about 2-3 concrete steps you can take. By concrete steps, try to think about things you can actually achieve, even if it is very small steps.

 **Do:** Ask participants to share some of the steps they thought of and write these on the flip chart.

 **Ask:** How can you discuss your vision with your daughters, wives and other family members and include their ideas into your vision so you can have a collective vision for the family? Think about 2-3 concrete steps you can take.

✓ **Do:** Ask participants to share some of the steps they thought of and write these on the flip chart.

☰ **Say:** Now that your vision and your steps are clear in your mind, let's make a note of these steps on paper or in your mind. We will be asking you to share these with your family, so make sure to include the things you would like to share with them.

✓ **Do:** Distribute pens, colored pens, and paper to the group if they are writing this down. For those unable to write, they can discuss this for a few minutes with their partner.

❓ **Ask:**

- How are your dreams for girls different now compared to the first time we thought about this?"
- How are you going to share this with your family and how will you involve them in the visioning process?

☰ **Say:** Some ideas for this include:

- Asking girls (and other family members) for feedback on the vision.
- Asking girls (and other family members) what they would like to change about this vision—what they want to add or remove.
- Asking if the vision reflects the girls' own visions.

✳️ **Note:** Make sure to guide men to actions that involve collaboration and discussion with different family members, especially girls and that is done in a way that does not impose the vision on them.

Key Message

☰ **Say:** Family and personal reputation has a big influence on all of us. Sometimes this can be positive and other times it can make us make decisions that we might not make if we didn't have this pressure from others. But during this session, we came up with suggestions and alternatives that were practical, and we could consider when we ourselves experience pressure being placed on our family. Before we make any decision, we can always think twice, consider the risks and benefits of our decisions, and consult with our family to see what the alternatives could be.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Share your concrete steps for a joint family vision with members of your family, including your daughters. Ask them for their feedback or if they have other suggestions and update your vision according to what the family suggests.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Check preparation section and prepare resources in advance.

SESSION 14:

CHANGE BEGINS WITH US

Session Aims:

By the end of the session caregivers will:

1. Understand the control they have and how to create change for girls
2. Identify areas they have influence over and who their allies are who will make a change for girls

Materials:

- Art box
- comments box
- paper
- pens
- colored pens
- paper or personal booklets
- flip chart paper
- markers
- post-it notes

Preparation:

- Prepare Resources 14.1 and 14.2
- Prepare flip chart for Activity 1: When Faced with Violence Being Committed Against a Woman or Girl

Terminology: Ally, discrimination, influence

Duration: This session could take up to 2.5 hours, you can split this across two sessions if there is not enough time to complete it.

Timing: After Female Caregivers' Session 14

Welcome & Review (10 minutes)



Ask: Did you share your concrete steps for a joint family vision with members of your family? Who did you talk to? What feedback or suggestions did they have?

Let's Explore (20 minutes)



Explain: We are nearing the end of the program. Thank you all for your ongoing interest, enthusiasm, and participation.



Say:

- For the opening of the session today, we want to take some time to reflect on what we have achieved and learned so far.
- Make yourself comfortable, choose a part of the room where you have some space to sit or stand comfortably. You will be asked to close your eyes and I will say a series of statements. If you agree with the statements you will raise your hand. If you disagree with the statement your hand will remain down.
- Your eyes will be closed so nobody else will know what your opinion is, only myself (and any co-facilitators, volunteers present).



Note: If caregivers do not feel comfortable closing their eyes, ask them to look down towards the ground. Also remind them of the “Group agreements” from the first session and the importance of maintaining confidentiality.



Do:

- Check that the instructions are clear and let participants know that they can ask you to repeat or rephrase any statements that are unclear.
- Once everyone is ready, read the statements below. After each statement, remind participants to raise their hand if they agree and to keep it down if they disagree.

Statements:

1. Girls’ education should be valued as much as boys.
2. Girls and boys should equally contribute to house chores in the home.
3. Girls are never to blame if they experience violence.
4. Girls have the right to socialize with friends and build their support networks.
5. Girls have the right to make choices about their own sexual and reproductive health.
6. Girls have a right to make their own choice of whom to marry, and when.
7. Girls should be involved in decisions that affect them.
8. Marriage before a girl is fully grown (18 years or older) is harmful to the girl.
9. Girls with disabilities should be given opportunities like their peers.
10. Married and divorced girls should be given the same opportunities (e.g., education, building social networks, etc.) as their unmarried peers.



Do: Once finished, ask them what they learned from this process about their own thoughts and opinions.




Note: This activity will give facilitators a sense of where participants are in their journey. If participants hold some attitudes that are harmful to girls, it may be important to factor this into the action planning in future sessions. Talk to your supervisor if you have any concerns.

If you do find there are still many harmful attitudes in the group, you can:



Explain: We might not all agree on these statements. Maybe some statements are difficult for us to accept because they are very different from our own beliefs. As we move through the remaining sessions, and start planning activities in the community, we must support each other and support women and girls. As we move forward, think about your reactions to some of the activities and ideas being shared, and reflect on how comfortable you are feeling. In the next session, we will talk about our limits, and we can use it as an opportunity to reassess how we engage in the activities moving forward.

-  **Note:** If possible, use this opportunity to address harmful attitudes immediately, explaining which ones are harmful and why.

Activities (1 hour 30 minutes)

Activity 1: Ending Violence and Harm Against Women and Girls (40 Minutes)



Explain:

- In our everyday lives, we may witness things that we can easily identify as violence or harm and other times it may not be as easy to identify it.
- This could range from witnessing someone being violent towards another person to hearing discriminatory comments about someone. For example, it could be seeing somebody shout at a woman in the street, beating a woman or girl, or mocking someone for their disability.
- As a group made up of men, we are going to focus on what to do (and not do) if we witness violence and harm against women and girls.



Ask: Can anyone explain why we are specifically focusing on violence and harm men inflict on women and girls and not on violence against other groups? (Take a few answers.)



Explain: We are focusing on women and girls as there is a power difference between men and women in relation to violence. As men, we can use the power we have to work towards ending violence against women and girls. This does not mean we cannot work to end other forms of violence, but that we have a role as men to ensure women and girls do not experience violence at the hands of men.



Note: Check that the men understand this point. If you experience resistance, it may not be possible to move forward with activities in a meaningful way, so it is important to give time to the explanation and discussion.



Say: I will read a series of scenarios, and after each one, we will discuss how you would respond if you witnessed this scenario in real life. If a volunteer wants to demonstrate their response through role play, we welcome that.

Scenarios (require **CONTEXTUALIZATION**)

Scenario 1: Your friend tells you that he will marry his daughter off at the first offer he receives as “girls are nothing but a burden on the family.”



Ask: How would you respond in this situation?



Do: Take a couple of answers or ask someone to role play.

Scenario 2: You are gathered with your friends, drinking tea, and discussing finances. Victor says his wife handles the financial decisions. The group mocks Victor for letting his wife make these important decisions.




Ask: How would you respond in this situation?




Do: Take a couple of answers or ask someone to role play.


Scenario 3: You are in the shops paying for your items when a woman walks in. The shopkeeper starts making comments to you about the woman's appearance.


 **Ask:** How would you respond in this situation?

 **Do:** Take a couple of answers or ask someone to role play.

 **Note:** If group members suggest harmful steps, ask what the pros and cons could be (e.g., risks or benefits associated with any harmful steps suggested by group members).

Once all groups finish,

 **Say:** In some of the scenarios, it is possible to say or do something, while in others it may not be. Here are some things to consider.

 **Do:** Present the flip chart, it should contain the tips below (points in bold). After reading the tip, ask the group what they think it means. Take one or two answers for each and then give them the explanation (in italics).

 **Explain:**

When faced with violence being committed against a woman or girl:

1. Prioritize safety.

Do not put yourself at risk or do anything to put the woman or girl at further risk. If your action may unintentionally put the woman or child at greater risk of violence, then get help to find a way to respond that is safe for you and the woman/girl.

2. Use creative disruptions.

There are many ways to disrupt violence without going directly to the perpetrator. For example, you may accidentally kick a ball into their yard; you may cause noise outside. Sometimes doing actions like banging pots or pans is enough to disrupt the violence.

3. Maintain confidentiality.

Do not gossip or share others' stories.

4. Be non-judgmental/non-blaming.

Do not blame women and girls who have experienced violence.

5. Focus on the benefits of non-violence.

We don't recommend you confront perpetrators of violence, but if this situation is unavoidable and you find yourself talking to people perpetrating IPV or violence against girls, do not ONLY focus on the consequences of the negative behavior. This will make them feel defensive and shut down the conversation. Help them to think about the benefits of non-violence. You could say something like, "Did you know that children do better in school when they don't experience physical discipline at home?" or "Women can provide more loving care and guidance for the family when they live free of violence."

6. Know how to describe services available and how to access them.

Make sure you know what's available in your area to support women and girls who have experienced violence, so that if any woman or girl asks for your support, you have information about how to access services.

 **Say:** The best course of action is always supporting access to services. Leaving it to the professionals assures everyone is safe.



Explain: When responding to harmful attitudes and beliefs, micro-aggressions, or verbal expressions:

- Sometimes it may seem difficult to say something when we witness those around us demonstrating harmful attitudes. Sometimes it might seem easier to “let it go,” but this can also create a culture of acceptability. When faced with situations like those in the scenarios we can let people know that we do not agree with their comments.
- We can say things like “I do not agree with that belief,” or “I do not think it is appropriate to talk about women in that way.” Using “I Statements” is a way of expressing an opinion without making someone feel defensive. This may not automatically change someone’s mind, but it breaks the silence and acceptability of some of these behaviors.



Do:

- Show participants the Discrimination Pyramid (Resource 14.1) and explain each level (as described in the notes).
- After explaining the levels, ask them where they think their scenarios fit on the pyramid.



EXPLAIN (if not mentioned by participants):

Scenario 1 is Attitudes and Beliefs, **Scenario 2** is Micro-Aggression, and **Scenario 3** is Verbal Expression.



Say: The levels of the pyramid where you can make a real difference are the bottom three levels (indicated in Point 1 of the Pyramid). As an ally, this is where women and girls need your support the most.

Activity 2: Circle of Change⁵⁵ (50 minutes)



Explain:

- In the last session, we worked on our vision for our own families and in this session, we are going to focus on the change we can make in the community. In the last activity, we discussed how the power that we have can be used to stand up or speak out about harm or violence that may be common in our community; but, we also recognized that we might not always feel that we have the power to make a change.
- In the last session, we talked about reputation and risks. And while we discussed its pros and cons, we also know it is something we cannot change overnight. So, as we think about the kinds of action we can take in the community, it is also important to understand that there may be some limitations we have—either placed on us by the community or placed on us from ourselves or those closest to us. There may also be some risks or backlash associated with taking action, too.
- In this activity, we will explore what changes girls want to see in the community, what is in our control to change, and what is in our control to influence.



Do: Share with caregivers the areas girls want to see change based on your discussion with the facilitator of the adolescent girl sessions.



Ask: What do you think of what girls want to action in the community? Are you willing to support them?

55 <https://www.thensomehow.com/wp-content/uploads/2019/06/TS-Circle-of-Influence-Worksheet-2.0.pdf>

▶ Part 1

✓ **Do:** On a flip chart paper, show participants your pre-prepared Circle of Influence Diagram (see Resource 14.2).

☰ **Say:** Let's take the outermost circle in this diagram. We call this the Circle of Change. Here we can list down the things that girls want to see change in our community.

▶ Part 2

❓ **Ask:** Thinking about the themes girls mentioned, is there anything else you'd like to add?

✳️ **Note:** Participants can either shout these out and the facilitator can add them to the Circle of Change, or participants can take time to discuss for a few minutes in pairs before sharing ideas with the whole group.

▶ Part 3

☰ **Say:** Now we will move to the innermost circle. This is called the Circle of Control. By this we mean the things we personally or as a group have control over. Looking at the circle of change, we will think about what we personally or as a group can do to make change happen.

❓ **Ask:** Looking at the examples in the Circle of Change, can anyone think of things within our control personally or as a group that we can do to make change happen?

✓ **Do:** As a group, go through each theme or idea listed and ask participants to share their ideas on what's in their control. If things are outside of their control, that's okay. **WRITE** the things in their control on the inner circle and keep a note of the things outside of their control.

✳️ **Note:** If you are concerned about risky suggestions, ask participants what the pros and cons could be from using that technique and try to provide a safe alternative or explain that we will put this aside. If participants suggest things that don't address the issues girls are requesting, remind them of the change girls want to see and ask them if their suggestions will help achieve that change.

▶ Part 4


☰ **Explain:** Now we will focus on the middle circle. This circle is called our Circle of Influence. This is a very important circle as this circle focuses on the things that are outside of our direct control but that we can still influence.


✳️ **Note:** Please explain what "influence" means if people don't understand, e.g., to be able to change something in an indirect but usually important way.

☰ **Say:** Going back to our Circle of Change, these are the things you listed as outside of your control.


✓ **Do:** Read them the list outside of their control.


❓ **Ask:** What can we do to influence these things?


 **Note:** It could help to start with one idea listed in the circle of change to use as an example. (For example, if one of the things in our circle of change is to see girls have more decision making power in the community, but that is outside of our control, we can identify who has the power to make this change and how we can influence that person or those people to make this change. We might put, for example, “Talk to community leader on value of girls participating in decision making” in the circle of influence.)

 **Do:** Check that the suggestions are realistic and assess them for potential risk. If you are concerned about potential risk, ask participants what the pros and cons are for their idea and try to provide a safe alternative or explain that we will put this aside.

► Part 5


 **Do:** Summarize their areas of change, their circle of control and circle of influence.

 **Say:** You have identified (1) the change you want to see, (2) what is in your control to change, (3) how you can influence the things that are outside of your control, and (4) who you need to work with to do this (these are your allies).

 **Ask:**

- How do you feel about this plan?
- How do you think girls will feel about the support you can offer?
- What do you want male caregivers to know about how they can support you, especially on the issues outside of your control?

Key Message

 **Say:** Each of us has the power to make a change in our community. While we may not be able to change things overnight and there may be things that are outside of our control, we can start by making a change to the things we do have control over and by identifying who we can influence. These small concrete steps are the building blocks to help us achieve our overall vision for protecting and empowering girls in the home and in the community.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Now we have started to think about the areas we can influence. We would like you to share the ideas from the last activity with women and girls participating in Girl Shine and ask them if they would change or add anything.



Note: The women and girls should have already worked on a similar activity and will be tasked with sharing ideas with men as part of their takeaway.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Given that women and girls will be doing a similar activity, it is important to coordinate across groups so that activities are complimentary and support each other and do not duplicate. It is advisable to meet with the facilitator of the women and girl groups to discuss and streamline plans.
- As this is the second to last session, check in with participants what they want to do for the graduation, and start putting in place some plans.

SESSION 15:

SUPPORTING GIRLS IN THE COMMUNITY⁵⁶

Session Aims:

By the end of the session caregivers will:

1. Start planning for their community activities.
2. Recognize what their limits are and how to find safe ways to support girls and women in the community.

Materials:

- paper
- pens
- colored pens
- paper or personal booklets
- different colored post-it notes to those used in the last session
- Circle of Influence Activity from the last session
- comments box

Preparation: Come prepared with the Circle of Change Activity from the last session.

Facilitator Note:

- The group may come up with a range of ideas. It's good to check the ideas are practical and based in reality and also to assess them for risk. If you are unsure of any of their suggestions, you can ask what the risks or pros and cons would be to that specific suggestion. You can also ask them if they discussed the idea with women and girls.
- If you feel the activity or suggestion is not workable, you can ask them to suggest an alternative. If they struggle to think of one, you can either propose one or ask them to take it to women and girls as part of their homework. This will also give you time to discuss with your supervisor and come up with a proposal in the next session.

Duration: 2 hours

Timing: After Female Caregivers' Session 15

Welcome & Review (10 minutes)



Ask: Did you share your ideas from the Circle of Influence activity with women and girls? How did it go? Were women and girls comfortable sharing their feedback with you?



Note: Here we are only looking for feedback on how they found the activity; they don't have to list everything women and girls told them, as there will be time to share in the first activity.



Do: Share some of the ideas that you learned from the facilitator of the girl group.

Let's Explore (20 minutes)



Say: Now that you have participated in the Girl Shine program, community members will see you as someone who is knowledgeable.



Ask:

- Since you started participating in the program, has anyone come to ask you for advice about their family life or for anything else? Please don't share details such as names of the people who may have approached you.
- How did you respond?



Do: As participants respond to the questions above, write down on a flip chart the types of questions or advice that others in the community approach participants for.



Explain: You likely feel proud of your commitment to this group and what you have learned from each other. These are positive feelings to have, and yet it is also important for us to consider the risks of giving advice in these types of situations.



Ask: What do you think some of the risks are to giving advice to others? (Take some answers.)



Explain:

- Sometimes we might give advice when we don't have the full details of the situation and that may cause further harm to a girl. Or, someone who is involved in the situation might learn you gave advice and start a fight with you if they don't like what the outcome was. Situations that involve early marriage or violence against women and girls are sensitive; they are very difficult to get involved in and may even cause harm to you or your loved ones. So you need to think about how to and with whom you share this information, ensuring your own safety.
- But there are things we can do that do not require us to get directly involved in people's personal situations. And I am sure women and girls shared ideas with you. We will reflect on this in the activities today.

Activities (1 hour)

Activity 1: Women and Girls' Vision (30 minutes)



Explain: Each of you spoke to women and girls in your life about the Circle of Influence activity and got their feedback.



Ask:









- How did that go?
- What was the feedback from girls? Was there anything they wanted to do differently?





Do:

- Recap the Circle of Change Activity, which they did in the previous session.
- Add anything new to the poster based on girls' feedback.
- Add feedback provided by the facilitator of the girls' sessions.

Activity 2: Understanding our Limits and Risks (30 minutes)

-  **Say:** You highlighted some great ideas on what can be done and how.
-  **Ask:** From the ideas we just added, are there any new risks or limits that you can think they might create?
-  **Note:** Facilitators can offer the following example: If caregivers propose intervening in a case of early marriage, the risks could be someone getting angry at the person who intervened, or repercussions for the girl involved.
-  **Do:** Get them to go through each suggestion that was written down one by one, highlighting risks or limits for each. Remind participants that there may be some that come with no risks or limits and that's also okay; the idea is to assess the risk.
-  **Ask:** Can anyone think of the things that we can do to replace the risky activities?
-  **Do:** Ask them to recall some of the previous tips shared.
-  **Say:** There are things we can do in general and that are within our circle of control or influence. **ADD** any points below that are not already included:
- We can give people information about services that exist for women and girls—places where they can go to get specialized support.
 - We can encourage people to seek the opinions and needs of girls in these situations and to listen to girls.
 - We can also let people in our community know that girls are never to blame for the violence they experience. We may do this when we hear someone making blaming comments.
 - We can speak out against violence and early marriage and raise awareness on the harmful effects through working with women and girl groups as an ally.
 - We can also speak up and share information on the opportunities that girls deserve.
 - We can speak out against discrimination that girls who have disabilities or are divorced face.
 - Where we feel we have limits, we can start with ourselves and our circles of influence, which will have a ripple effect.
-  **Do:** Ask participants to select their final ideas that they want to put into action. You can do this by voting on all the ideas, by participants raising their hands, or by the facilitator giving participants stickers to put next to the idea they prefer, etc.

Activity 3: Creating a Supportive Environment for Girls (15 minutes)

-  **Say:** As these sessions come to a close, we want to discuss ideas you have about continuing to create a supportive environment for girls, so that they can continue practicing the skills and knowledge they gained from the sessions.
-  **Ask:** Does anyone have any ideas on how we can continue creating a supportive environment?

ADD (if not mentioned):

- Check in with girls regularly to ask how their plan is coming along and what ongoing support they need to put it in action.
- Make time to talk to girls and see how they are and ask if there is anything they'd like to share with you.
- Connect girls to people in the community who can help them act on their ideas, e.g., female community leaders or other influential people you have access to.
- Give girls opportunities to share their knowledge with other girls in the family or community.

Key Message



Say: We all have a role to play in improving the situation for girls in our community and in seeing an end to violence against women and girls. We have to consider whether the actions we take will cause more harm to women and girls and whether they will be risky to ourselves. We can ask women and girls for their feedback because they are in a good position to tell us about the potential risks that may exist that we may not have considered. They are also in a better position to express how we can support them.

Check-in (5 minutes)

ASK the caregivers how they found the session and whether there are any changes they would like to make for the next one. (It is important that you incorporate the changes suggested by caregivers or explain why it's not possible.)

REMIND caregivers that they can leave feedback in the comments box and that you will be available at the end of the session to talk to them if needed.

Takeaway (5 minutes)



Say: Let girls and women know where you landed on your plan and ask girls if there is anything further you can do to support them.



NOTE TO FACILITATORS, FOR THE NEXT SESSION

- Read the preparation section for this session in advance.
- If the graduation is taking place on the same day, you will need to put plans in place for that too.

SESSION 16:

LEADING THE WAY TO CHANGE

Session Aims:

By the end of the session caregivers will:

1. Finalize their action plans based on feedback from girls and women.
2. Decide on their next meeting date, place, and time.
3. Celebrate their achievement of completing the sessions.

Materials:

- art box
- comments box
- paper
- pens
- colored pens
- paper or personal booklets
- If the graduation is taking place on the same day, procure certificates of completion, and T-shirts with messaging (if budget allows).
- If the graduation is taking place on the same day, snacks and drinks for the celebration.

Preparation:

- Read the "Let's Explore" section in advance of the session so you are prepared with all the relevant information.
- Prepare a closing activity to celebrate the group completing the curriculum. Ask the group how they would like to celebrate this and plan accordingly. If men want to be involved in the planning, this is encouraged so they feel they have ownership of the group and how it comes to an end.
- If they would like a public ceremony, ensure they have invited individuals they wish to attend. As the ceremony is added to the end of the session, if it is public it may need to take place at a different time or day to the rest of the session.

Duration: 2.5 hours (leave time for a celebration and certificates at the end of the session)

Timing: After Female Caregivers' Session 16, or done jointly with the women, if women agree to this.

- ✳ **Note** If done jointly, the activities will need to be adjusted to make space for this. Use the female caregiver session if being implemented jointly.

Welcome & Review (10 minutes)



Say: Today the opening activity will be a bit different as it is the last session. I want to start by saying it's such a great achievement for us to be here together completing our final session.

Today, I am feeling _____ (share with the group how you're feeling about reaching this point).



Ask: Would anyone like to share how they are feeling?



Say: We should all feel very proud of ourselves for making space for this group, being open to discussions and willing to learn from one another.

Let's Explore (20 minutes)



Say: This is our last session together. For this part of the session, instead of exploring new ideas, we will review some important information.



Do:

- Check to see what plans they have for continuing work on their action plan.
- Finalize any details about the group meetings if they are to continue in the same space, e.g., time, date, who their focal point is, and how to request resources, etc.
- Introduce any specific protocols in place that they need to be aware of or inducted into.



Explain:

- Your action plan should complement the plans of women and girls.
- Your role is to act as allies to women and girls and support their action plan by being in women and girls' Circle of Influence.
- You should decide how to ensure you maintain communication with and receive continuous feedback from women and girls as they progress with their own plans.



Do: Answer any questions the group may have and check they feel they have all the information they need before moving into the activities.

Activities

Activity 1: Action Plan (60 minutes)



Explain: We have individual plans for the change in our family and we now have a joint plan for our community. We hope that for your individual plans, you will continue to discuss and work on this with your families, especially women and girls. Today we will focus on the next steps for our community plan.




Do: Show them the circle of influence poster. Confirm they are happy with the final plan.

When the list is finalized,





Say: Now we have our action items. We need to decide how to achieve these action items and who will be the focal point. As we discussed in the last session, we will need to identify men for specific roles and responsibilities to keep this plan moving. At this stage, you don't need to make a detailed plan for every single action, but you may do the following:

- Choose someone/a few people to organize the meetings and to remind the group of the meetings.
- Choose someone to review what the group's progress is on the action plan; this is someone who can remind the group of the goals and keep the group on track.
- Choose someone who can be a timekeeper for the meetings.
- Choose someone to check that the group members are communicating with women and girls and incorporating their ideas and suggestions.

 **Say:** We also need to decide how to make decisions. As we are many, we may not always agree. So how will we make decisions on how to move forward with actions in a way that is equal? What do we do when not all members are present at a group meeting, and we need to make a decision? How do we ensure our decisions are inclusive of women and girls' voices? We want to be inclusive but also want to be able to move forward with actions.


Activity 2: Supporter or Protector⁵⁷ (30 minutes)

 **Say:** As we continue to support girls having space and voice in the community, we can also think about whether our actions are those of a supporter to girls or a protector.

 **Do:** Explain to the group that you are going to read them statements, and that after each one, you will ask whether the action is being a supporter or a protector.

- **Statement 1:** "If I notice that people aren't listening to a girl in the community, I interrupt to make her point for her."
(This is acting as a protector as the man/woman is interrupting the girl to talk for her, rather than addressing the larger problem that people are ignoring her.)
- **Statement 2:** "I encourage my daughter to dress conservatively so that she doesn't experience violence."
(This is acting as a protector because it puts the focus on the actions of the girl rather than focusing on helping men and boys learn to respect women and girls regardless of what they are wearing.)
- **Statement 3:** "If I hear a boy say something rude about a girl, I let them know that I found the comment offensive."
(This is being a supporter. It is strengthening girls' power by letting men and boys know that it is not ok to talk about them in rude ways.)


 **Ask:** Why can acting as the "protector" for girls be a problem?

 **Say:**

- When acting as a protector, the focus becomes on the girl's behavior or action, rather than on the larger environment that is creating the problem. It also exerts power over them to behave as you think they should behave, act, or dress. It also implies that the responsibility for the problem (e.g., abuse, violence, child marriage) is the girl's and not the person who perpetrated it. Girls are not to blame for the violence, abuse, or injustice to them; this is the responsibility of the perpetrators.
- Acting as a protector, even when well-intended, can actually perpetuate harmful power imbalances.
- This reduces girls' power, voice, and agency, rather than increasing it.

 **Explain:** Some key questions for caregivers to keep in mind as they work to be supporters are:

- Is what I'm doing right now helping to strengthen the voice and power of girls? Or is it serving to strengthen my own voice or status?
- Is what I'm doing helping to increase or decrease safety for girls?
- Is my action addressing the larger context that creates the situation (i.e., men ignoring women, men touching women's bodies without their permission, women blaming girls for the violence they experience, etc.)
- How do I know this is what girls want or need? How could I know if this is helpful to girls and not harmful?

 **Say:** The best way to know if what you are doing is helpful or harmful is to ask girls directly and then take their responses seriously; don't try to convince them of your point of view.

57 Adapted from CARE: Tipping Point Facilitator's Manual for Boys and Parents Activists https://www.care.org/wp-content/uploads/2020/11/FM_Boys_Parents_Activists_with-citation.pdf



Explain:

- Girls have identified their issues and are making plans to tackle those issues themselves.
- Our support is an important source of encouraging their leadership.

Activity 3: Reflections (30 minutes)



Explain: As today is the last session, we want to reflect on the changes we have experienced since we started participating in these sessions.



Say: Let's do something fun and creative to help us summarize our experiences of the sessions!



Do: Split participants into three groups.



Say: You can summarize your experiences in any way you like. This can be through a song, drama, drawing a beautiful piece of art, a poem, etc.—whatever you agree on with the group. Some of the things we are really interested to know about are:

- Have your relationships in the family changed?
- Has your relationship with your daughter changed?
- Have your feelings around early marriage changed?
- How do you feel about the role of men in supporting women and girls?



Do: Give participants some time to think and prepare. Once they have finished, ask them to present this to the group.



Do: After they finish, probe further into the questions listed above to gather more information from participants about their experiences and anything else they would like to share.



Explain: When you share the positive benefits you have experienced with your friends, community members, or even community leaders, these positive examples can encourage change and are likely to inspire others to support women and girls, too.

Certificates Ceremony



Note: For this activity, you may have organized a public or closed ceremony, depending on the wishes of the caregivers. Men may have invited women and girls participating in sessions to the ceremony. Use this space as an opportunity to recognize men's participation.



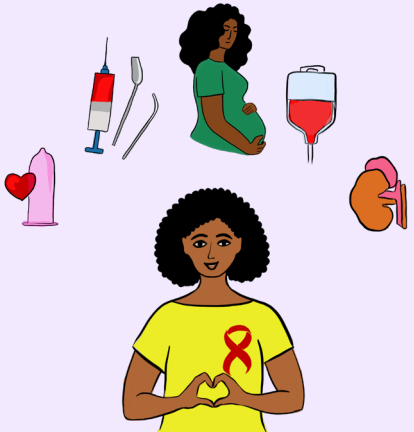
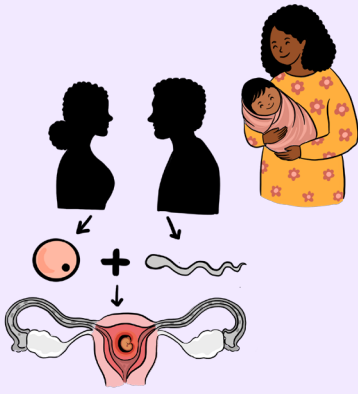




Do: Ensure there are snacks and drinks available. Certificates should be printed and presented to men. Leave open space for them to celebrate their achievements. They may want to prepare some messages if this will be a public ceremony or share the reflections from the activity at the ceremony.

RESOURCES



Resource I.I: Assets List

<h1>ASSETS LIST</h1>	
	
Know to ask for help if she is uncomfortable in the company of a man/boy	Know signs of danger during pregnancy and labor
	
Know how HIV is transmitted, how to prevent it and that there are treatment options	Understand the biological basics of sexuality and reproduction
	
Know where to go for help if experiencing signs of danger during pregnancy	Know that early marriage is associated with poor health, poverty, and divorce

Resource I.I: Assets List

ASSETS LIST



Know whom to ask/where to ask for help if she or someone she knows experiences violence



Be able to assertively and respectfully navigate safe and healthy choices with regard to marriage



Know her right to determine and communicate the number of children she wants and the timing of births



Know the names of trained people in the community who can be relied upon to support girls safety

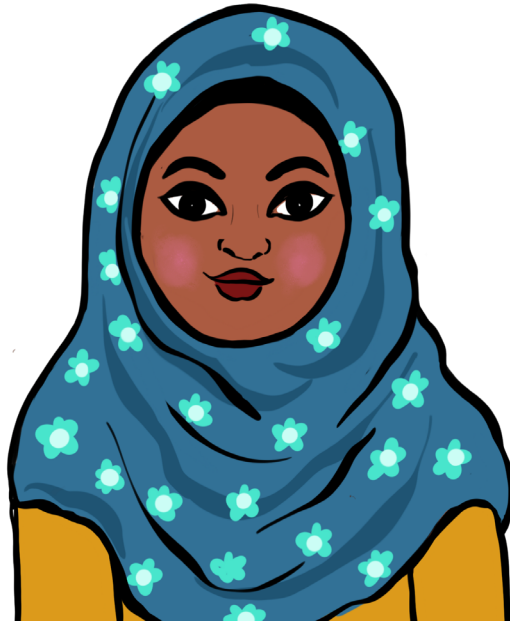


Know that she has the same rights as her brother



Know where to get tested for HIV

Resource I.2: Stages of Adolescence





Resource 2.1: The Rafiki's Story

THE RAFIKI'S STORY



Mariam and Sayed of the Rafiki family, have five children (Yasmine - 11 yrs., Asma - 14 yrs., Adam - 18 yrs., Selina - 19 yrs., and Osman - 22 yrs.). They also live with Amma (Mariam's mother) and their daughter-in-law.



Adam who is 18 years old, has a visual condition which means he requires some extra support, but both his work and training college have improved their spaces to be more accessible to him and Adam is performing very well.



Selina is 19 years old and is divorced. She married at 16 and this led to a difficult marriage and a strained relationship with her in-laws. She is back home now and trying to understand what to do next.



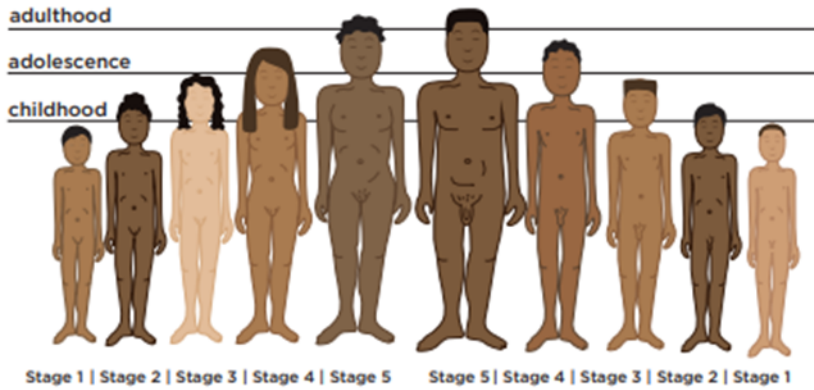
Osman is 22 and recently got married to Dina who is 21. Dina completed her education had a lot of information on the consequences of marrying at a young age and decided to wait for the right time. Her parents supported her decision to wait. When Dina joined the family, they felt they gained a daughter, not just a daughter-in-law.

Resource 4.I: The Tanner Scale

Puberty Tanner Stages Visual – Teacher Resource

The Tanner Scale was created by doctors to show the progressive stages of body development for boys and girls. Everyone progresses from childhood to adulthood at his or her own pace.

THE TANNER SCALE



CHANGES FOR GIRLS

STAGE 1 (USUALLY AGES 8-11)

Hormone production begins; ovaries enlarge.

STAGE 2 (AVERAGE AGES 11-12)

Breast buds grow.
Height and weight increases.
Fine pubic hair appears.

STAGE 3 (AVERAGE AGES 12-13)

Breasts grow.
Pubic hair darkens.
Vagina enlarges and begins to produce discharge.
First menstrual period may occur.

STAGE 4 (AVERAGE AGES 13-14)

Underarm hair appears.
First menstrual period is likely; ovulation begins in some girls, but is irregular.

STAGE 5 (AVERAGE AGE 15)

Growth is complete.
Menstruation and ovulation are well established.

CHANGES FOR BOYS

STAGE 1 (USUALLY AGES 9-12)

Male hormone production becomes active.

STAGE 2 (AVERAGE AGES 12-13)

Testicles and scrotum begin to enlarge.
Height increases.

STAGE 3 (AVERAGE AGES 13-14)

Penis begins to grow.
Pubic hair darkens.
Voice begins to deepen.
Facial hair and pimples may develop.

STAGE 4 (AVERAGE AGES 14-15)

Penis and testicles continue to grow.
Underarm hair appears and facial hair grows.
Most boys have first ejaculations.

STAGE 5 (AVERAGE AGE 16)

Near-full adult height and physique attained.
Shaving may begin.

HUMAN RELATIONS MEDIA

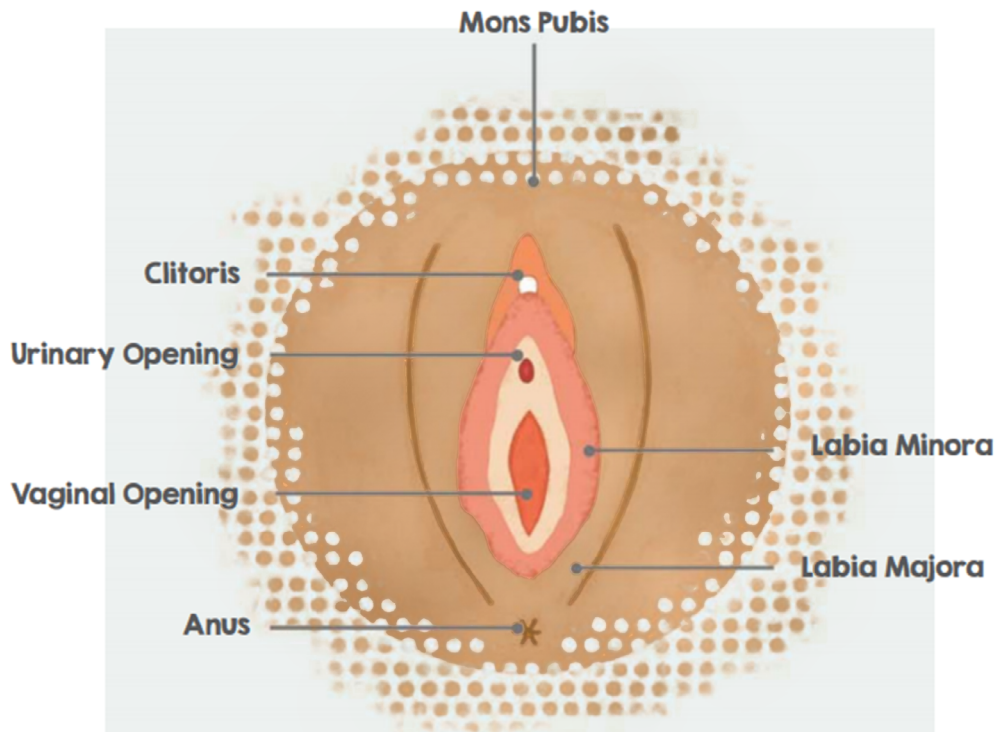
THE PUBERTY WORKSHOP AND CURRICULUM



Resource 4.2: The External Reproductive Body Parts of a Female.

RESOURCE

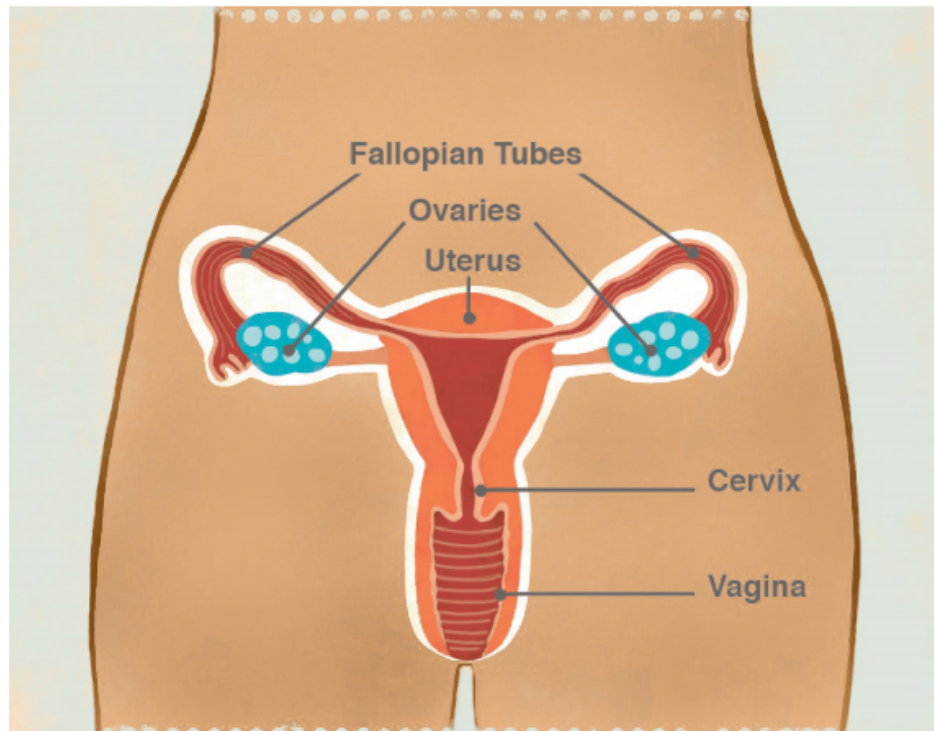
The External Reproductive Body Parts of a Female



Resource 4.3: The Internal Reproductive Body Parts of a Female

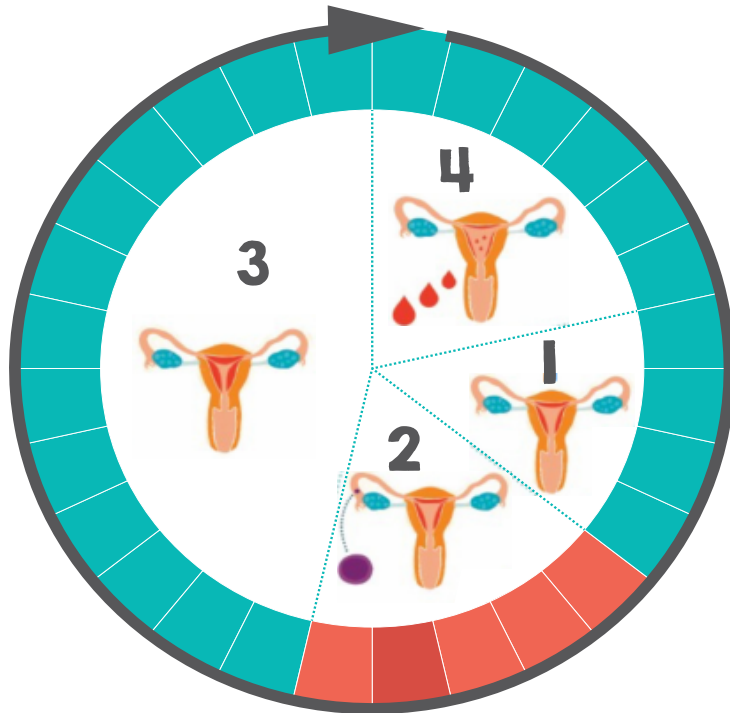
RESOURCE

The Internal Reproductive Body Parts of a Female



Resource 4.4: Ovulation Cycle

RESOURCE Ovulation Cycle



1. The uterus is connected to the ovaries by fallopian tubes. Typically, one egg matures every cycle.

2. Once mature, the egg is released from the ovary and passes through the fallopian tube. As the egg passes through the tube, the lining of the uterus thickens.

3. If the egg is fertilized, this lining of the uterus provides a home to a growing baby.

4. If there is no fertilization, the body sheds the uterus lining in the form of blood. Regular bleeding is part of a natural process for women and girls.

Resource 4.5: Menstruation Hygiene Management (MHM) Demonstration

MENSTRUATION HYGIENE MANAGEMENT (MHM) DEMONSTRATION



MENSTRUATION HYGIENE MANAGEMENT (MHM) DEMONSTRATION



Resource 5.I: Contraception

RESOURCE

Contraception

What is a contraceptive?

Contraceptives are used for preventing pregnancy. If a woman is having sex, she always runs the risk of getting pregnant. A contraceptive can be used to decrease the likelihood that a woman will get pregnant. However, the only 100% effective way to not get pregnant is to not have sex. This is called abstinence.

What is a condom?

A condom is the only contraceptive that prevents against pregnancy AND sexually transmitted infections. A male condom is a thin piece of latex, a type of rubber that is worn on the penis. The male condom is far more commonly used than a female condom. A female condom is a sheath with a flexible ring at either end. One end is closed and inserted into the vagina; the other end is open and the ring sits outside the opening of the vagina.

How does the condom work?

Condoms work by keeping semen (the fluid that contains sperm) from entering the vagina. The male condom is placed on a man's penis when it becomes erect, before any sexual contact. It is unrolled all the way to the base of the penis, while holding the tip of the condom to leave some extra room at the end. This creates a space for semen after ejaculation and makes it less likely that the condom will break.

After the man ejaculates, he should hold the condom at the base of the penis as he pulls out of the vagina. He must do this while the penis is still erect to prevent the condom from slipping off. If this happens, sperm could enter the vagina and a female could become pregnant.

Condom Do's and Don'ts

- DO use a condom each and every time you have sex.
- DO use water-based or silicone-based lubricants.
- DO NOT use a condom more than once.
- DO NOT use two condoms at the same time. The friction between the condoms may cause them to tear.
- DO check the expiration date.
- DO NOT use oil-based lubricants (like petroleum jelly or baby oil). They can cause the condom to break.
- DO NOT use a condom if the individual condom packet is ripped.

RESOURCE

Contraception (Continued)

What are other contraceptives?

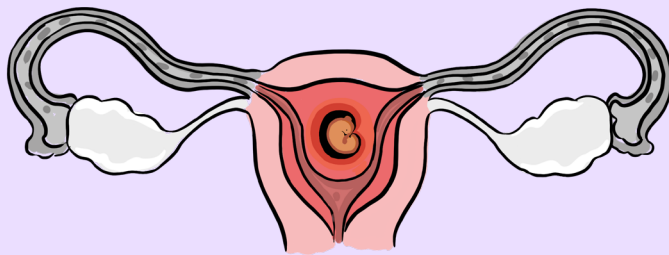
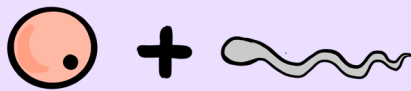
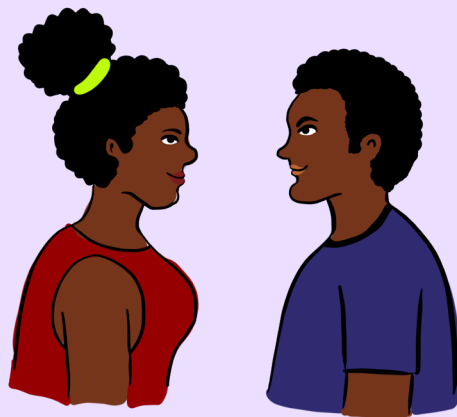
- Other contraceptives include birth control pills, injections, implants and IUDs.
- Birth control pills are pills that women take every day to avoid getting pregnant. For example, Microgynon and Microlut are brands of birth control pills.
- Women can also go to a doctor to get an injection once every few months to prevent pregnancy. One common brand is called Depo-Provera or "Depot."
- Another option is a tiny implant or small object inserted under a woman's skin that will prevent pregnancy. One brand of implant is called Jadelle.
- An IUD is a small, T-shaped device that is inserted into a woman's uterus to prevent pregnancy. It should be inserted and removed by a health professional. Depending on the type of IUD, it can be left inside the uterus from anywhere between five to 10 years.

How to choose the right form of contraception

For all of these options, a woman must first visit a doctor to find out which option is best for her. Not all of these options are readily available. The condom is one of the most widely available forms of contraception, which is why it is usually focused on.

Resource 5.2: Making Babies

MAKING BABIES



Resource 7.1: Communication Tips

COMMUNICATION TIPS



Encourage girls to express their opinions.



Don't judge girls harshly, as this can close down communication and opportunities to become closer to the girl.



Explore ways to help girls express themselves, especially girls who may have a disability and are unable to communicate their opinions verbally.



If you're concerned about girls going to certain places and doing certain things, instead of saying 'no', try to provide reasons why you think this or what it is you're worried about so that you can come to an understanding.



Give them your time and attention, even if your own life is very busy.



Encourage girls to form solutions on their own, by asking questions and encouraging them to think through the possible positive and negative consequences of any situation.



Encourage girls and allow them opportunities to be helpful. Use of praise makes everyone, both the giver and the receiver feel good!



Try to put yourselves in their shoes and try to understand what they are feeling and what is on their mind.

Resource 7.2: Blame vs Empathy Scenarios

CAREGIVERS OF UNMARRIED GIRLS



Jane is 11 years old and lately she has been yelling at her siblings

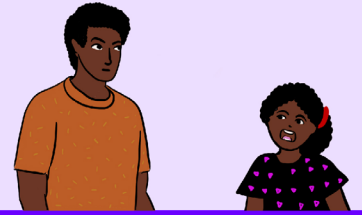
and refuses to talk to her mother, Leila and father, Hassan.



She comes home one day and throws her things on the floor. Her father asks her what's wrong.



Jane tells her father that she doesn't want to go to school anymore. She says that some of the girls in class are teasing her.



How do you think Jane is feeling?



Hassan said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. School is very important, so what can we do to try to solve this problem?"



Hassan said, "You must have done something to provoke these girls. I can't understand why anyone would do this to you."

Resource 7.2: Blame vs Empathy Scenarios

CAREGIVERS OF MARRIED/DIVORCED GIRLS



Jane recently got married and is visiting her mother, Leila, and her father, Hassan.



It is the first time she has been home since getting married.

When Hassan asks Jane how married life is going,



Jane responds to tell Hassan that it is very difficult and her husband shouted at her.

How do you think Jane is feeling?



Hassan said, "I can see/understand that you are upset. I am so sorry that this happened to you; this is not your fault. What can we do to try to solve this problem?"



Hassan said, "You must have done something to provoke your husband. I can't understand why he would shout at you."

Resource 7.3: Steps of Empathy

STEPS OF EMPATHETIC COMMUNICATION



Step 1- Identify the feeling:

Try to identify or label what someone is feeling. For example, "Mariam, you look like you are worried right now - are you?"



Step 2- Determine the reason:

Understand why they are feeling that way. "Would you like to tell me why you are worried?" Mariam can tell you, or she may choose not to right now. You can say to Mariam, "Feel free to come and talk to me when you are ready."



Step 3- Honor the feeling:

Mariam might have had a disagreement with a friend or been rejected by her peers at school. Don't dismiss that reason. If you make your daughter think that her feelings are not important, she might not talk to you anymore about the things bothering her. "I understand that this makes you feel sad/upset/tired."

Step 4- Take action:

Deal with those feelings with your daughter. You can brainstorm with her what, if anything, needs to be done. Sometimes the situation may require the caregiver and the girl to come up with possible actions that may help remedy the situation. Sometimes the situation doesn't need an action other than just comforting your daughter/in-law or sharing in her joy. "Let's sit down together and discuss how to address this problem."

Resource 8.I: Common Resistance Responses

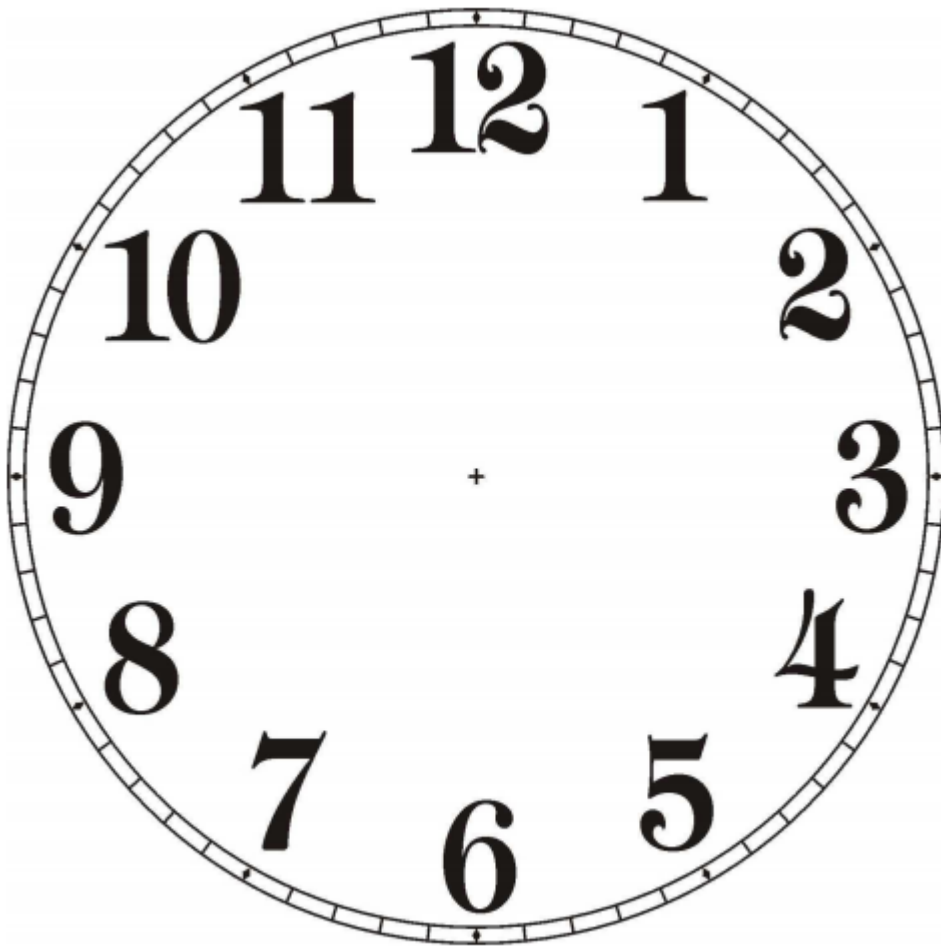
Common Resistance Responses Definitions and Examples

Below are examples of Common Resistance Responses that facilitators should be prepared to identify (within themselves and others) and respond to throughout the intervention.

All of these reactions:

- Are learned. They are taught by our society in order to reinforce traditional and harmful norms.
 - Prevent men from having to take responsibility for their or other men's actions.
 - Allow for women to distance themselves from victims of violence.
 - Involve minimizing, denial, and justification.
 - Are not right and perpetuate violence and harm against adolescent girls and women.
 - **ARE ESSENTIAL FOR GIRL SHINE FACILITATORS TO ADDRESS:**
1. **Denial:** Asserting that something is not true or not a problem: "That is not an issue." "Violence is a normal part of any relationship—stop making an issue of it." "I do not know where she got the bruises on her face, she must have fallen." "There is no problem here—nothing happened."
 2. **Minimizing:** Making something smaller or less serious than it is: "I don't know why girls (and women) make this such a big deal." "We were hit when we were growing up; it's a normal part of discipline." "It was only a slap." Joking about violence against adolescent girls and women is a minimizing response as well.
 3. **Justification:** Stating that something is right or reasonable: "The Bible requires girls and women to serve men; this is natural." "Women need to learn to stay in line and listen to their husbands." "She deserved it."
 4. **Woman/Girl Blaming:** Stating or implying that the female survivor is at fault for any violence that she experienced: "Well, if she had listened to her father, this wouldn't have happened." "She asked for it by (behavior)." "She provoked me; I had no choice."
 5. **Comparing Victimhood:** Changing the focus of the discussion/situation by stating that another group also experiences the same problem: "Men experience violence too." "Both boys and girls are victims of violence—why is it always about girls?" "Women can be abusive to men, too."
 6. **Remaining Silent:** Choosing to keep quiet or not speak up in the face of an injustice or problematic act, and thereby normalizing those acts. Not speaking up when violence/disrespect occurs, ignoring something, or pretending you didn't notice.
 7. **Reinforcing Norms:** Engaging in behaviors that support power inequality and harmful beliefs and attitudes. Taking control of women's work in the community around violence against adolescent girls and women. Perpetuating violence and/or discrimination.
 8. **Colluding:** Participants supporting harmful beliefs and attitudes of other participants. Agreeing with any of the above responses—by verbal expression or silence. Believing or supporting excuses and justifications for violence. Laughing at harmful attitudes and beliefs that other participants express.

Resource 9.1: Activity Clock



Resource 9.2⁵⁸: Children's Rights

RIGHTS FOR GIRLS



Girls and boys have the right to know about their rights, and caregivers should discuss these rights with them.



Women and girls have the same personal rights as husband and wife, including the right to choose a family name, a profession and an occupation.



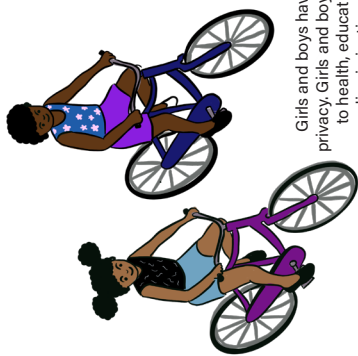
Girls and boys have the right to play and rest, including married girls.



Girls and boys who belong to an ethnic, religious or language minority should have access to the same rights as all other girls and boys. They should be allowed to enjoy their own culture, use their language and practice their religion.



Girls have the right to special protection and help if they are refugees (if they have been forced to leave their home and live in another country), as well as all the other rights we have and will talk about.



Girls and boys have the right to privacy. Girls and boys have the right to health, education, equality, non-discrimination, and to live free from violence and exploitation (including child marriage). Girls and boys have the right to be protected from being hurt and mistreated, in body or mind.



Girls and boys have the right to a high quality education. Caregivers should encourage them to go to school to the highest level they can; this also includes married girls.



Female and male caregivers are responsible for the upbringing and development of their children, and they must do what is best for the child at all times (both for girls and boys). For example, they must not cause harm to a child. This also includes children who are under 18 and in their care e.g. daughter-in-laws.



Women and girls have the same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights.



Girls and boys have the right to protection from work that harms them—including work that is bad for their health and/or education. If they do work, they have the right to be safe and paid fairly.



All necessary measures should be taken to make sure that girls and boys with disabilities can have the same access to rights as girls and boys without disabilities.

58 [1] Taken from Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) https://www.unicef.org/gender/files/CEDAW_In_Brief_For_Adolescent-Web_Version.pdf
 United Nations Convention on the Rights of the Child (UNCRC) https://www.unicef.org.uk/wp-content/uploads/2010/05/UNCRC_summary-1.pdf,
 Universal Declaration of Human Rights (UDHR) <https://www.un.org/en/universal-declaration-human-rights/>,
 Convention on the Rights of Persons with Disabilities (CRPD) https://www.ihrec.ie/download/pdf/report_easy_read_summary_final.pdf

Resource 10.1: The Story of Zeina




PART I

Zeina is 15 years old and her parents want her to get married. They are worried that she is getting older, and spending a lot of time out of the house. Zeina's parents are also struggling financially and since moving to this current location they have not been able to work.

They think Zeina is getting too old to share the space with her siblings, especially now she is menstruating. Marriage will help them to manage the finances better and also stop people from talking about Zeina not being married already.




STORY OF ZEINA



PART II


Zeina's parents approach her about the idea of marriage. Zeina is confused. She is happy attending school. But she has seen some of her friends get married and she likes the idea of having her own room and not having to share with her siblings. And she is worried that if she doesn't marry soon, she might not get a good husband.



PART III

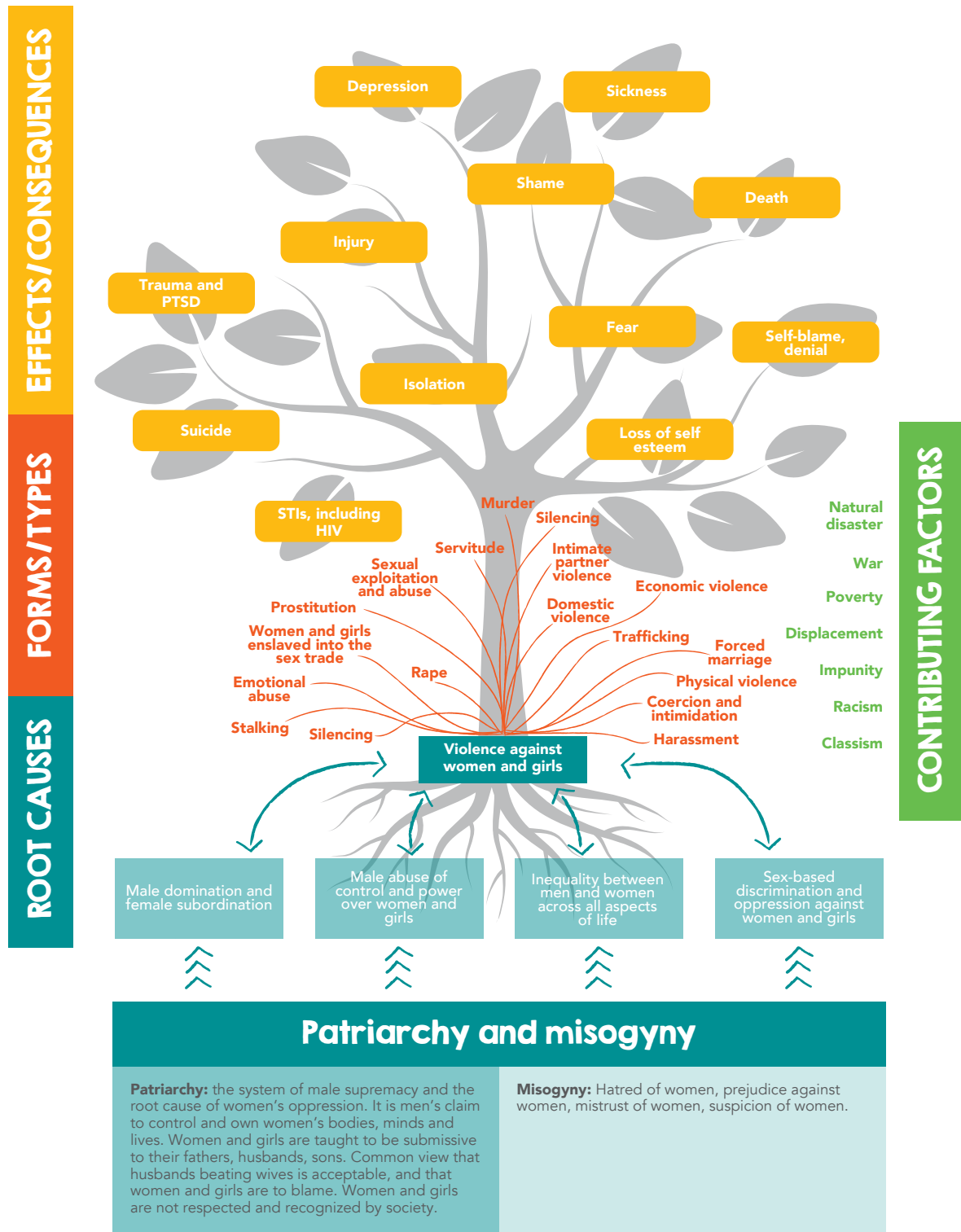
Zeina does get married and married life isn't exactly how she imagined. She left school and there are new pressures she is experiencing that are placed on her from her new family, such as having children or taking on all the household chores.

Zeina doesn't feel she has the power to ask for the things she wants or needs.



Resource II.I: GBV Tree

Violence against women and girls.



Resource II.2: Types of Violence

Some types of violence may cut across different categories. For example, neglecting somebody physically can also lead to emotional violence in terms of how it makes them feel. The list is indicative, and you can also open a discussion about how some types of violence cut across different categories.

Then four boxes of the types of violence.

Physical (hurts the body)

- hitting
- punching
- slapping
- throwing things at her
- pulling hair
- throwing her to the ground
- hurting her using objects
- locking her in the house
- neglecting her
- withholding medical care from her
- giving her medical interventions without her consent or understanding
- not allowing her to wash herself or her clothes
- punishing her for bringing "shame" on the family (honor crimes)

Emotional (hurts the feelings and self-esteem)

- telling her she is stupid, ugly, useless
- threatening her with abandonment
- threatening to get another wife
- making her beg for essentials
- making her beg for money
- making her eat with animals or off the floor
- stopping her from seeing her friends and family
- making her afraid all the time
- telling her the violence is her fault
- telling her no one cares about her
- telling her no one will believe her
- making her keep harmful secrets
- humiliating her
- telling her she is a bad mother
- threatening to kill or hurt her or others (children, family members, anyone who helps her)
- threatening to withhold food
- disregarding her privacy and dignity
- using abusive language

Economic (controls access to money, property, or resources)

- taking control of her money
- not supporting her or her children intentionally
- denial of opportunities for education or income generating activities
- not telling her how much money is in the household
- excluding her from decisions about how to use resources
- denial of inheritance rights
- denial of property rights
- withholding money and other resources
- denial of children born outside marriage
- making her responsible for others' debts
- misusing her resources
- taking the profit from her labor without her permission
- giving preference to other wives and children
- making her responsible for children without the means to be so (for example, telling her she must pay their school fees when she has little or no opportunity to generate income)

Sexual (controls sexuality)

- Sexual violence can include any form of undesired sexual contact such as:
- stalking
- making comments about her body and her sexuality
- sexual humiliation by saying things to others that would create a “bad” reputation
- sexualized name-calling
- forcing someone to watch pornography
- grooming
- incest
- forcing a widow to marry her brother-in-law
- knowingly transmitting an STI
- refusing to allow her to use contraception
- abusing women through sex work
- forced nakedness
- forced childbearing
- forced sex in front of others
- enabling others to sexually abuse her
- selling or buying women and girls to/from others for sexual exploitation
- early marriage
- child marriage
- forced marriage
- any sexual activity with children
- refusal to allow women to choose their own partners
- sexual exploitation and abuse
- It also includes rape and attempted rape. Rape is when a girl or woman is forced to have sex against her will, including penetration of any part of the body (mouth, vagina, anus) with a body part or object.

Resource I3.I: Linda and Maya's Stories

Scenario I: Linda's Story

SCENARIO 1
Linda's Story



Linda wants to move to the city to attend university when she finishes school.



Her parents are supportive of this, but recently people have been telling Linda's parents that they should get her married before she moves. They say that girls who leave home get corrupted and don't marry.



One day, Linda's father tells Linda that maybe she should consider it. He says that while Linda leaves for the city, it is the parents who will stay behind and have to listen to the opinions of people.



Linda really doesn't want to get married, but is wondering if she should do it for her parents.

Scenario 2: Maya's Story

SCENARIO 2

Maya's Story



Maya got married when she was 15 to the boy who got her pregnant. She didn't want to get married but her parents told her she must, as it would bring shame on the family if she didn't.



Now she is 17 and back at home with her parents because the marriage ended. Her father blames her for bringing shame on the family.



Maya wants to go back to school to complete her education. Maya's father tells her that it is not an option for a divorced girl to do that and she should just get married to someone who will accept her and her child.



Maya feels frustrated that she will not be able to determine her future.

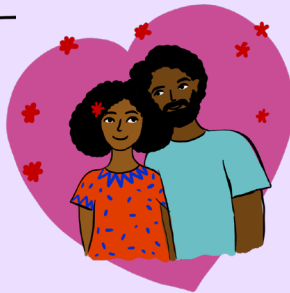
Scenario 3: Maya's Story (For Sensitive Contexts)

SCENARIO 2

Maya's story (for sensitive contexts)



Maya got married when she was 15. She didn't want to get married but her parents convinced her.



Now she is 17 with a small child and back at home with her parents as the marriage ended.

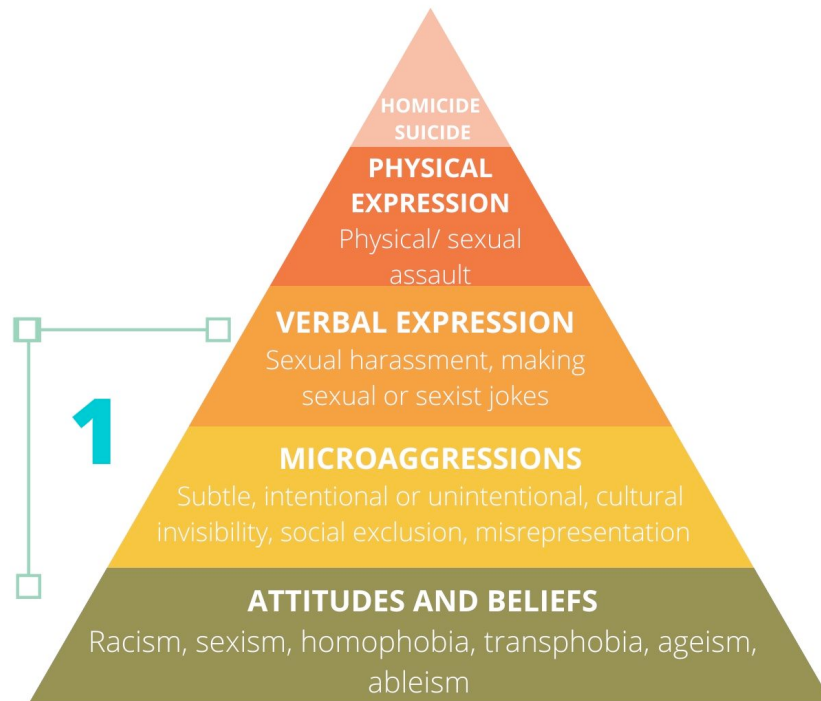


Her relationship with her father blames her for bringing shame on the family. Maya wants to go back to school to complete her education. Maya's father tells her that it is not an option for a divorced girl to do that and she should just get married to someone who will accept her and her child.



Maya feels frustrated that she will not be able to determine her future.

Resource 14.1: Discrimination Pyramid



Discrimination Pyramid Notes⁵⁹:

► Stage 1: Beliefs and Attitudes

Violence is not usually something that a perpetrator simply chooses to commit impulsively, out of the blue. Violence directed at someone because of their identity (e.g., being female) starts with established attitudes and beliefs about other people (e.g., girls belong in the home), whether or not those attitudes or beliefs make sense. These include prejudices such as racism, sexism, and ableism. These types of beliefs can be very strong in communities; for those who join in or do not stand up against them, it can become very strong and hard to break away from these attitudes and beliefs. This shifts us up the pyramid.

► Stage 2: Micro-aggressions

Micro-aggressions are all around us and normalized as part of our culture; these things represent the daily indignities experienced by people who have less power in society. They can seem harmless according to those who use micro-aggressions, and sometimes people may not even realize they are doing it. For example, expressing shock or surprise when seeing a man doing household chores or a girl playing sport. This shifts us up the pyramid.

► Stage 3: Verbal Expression

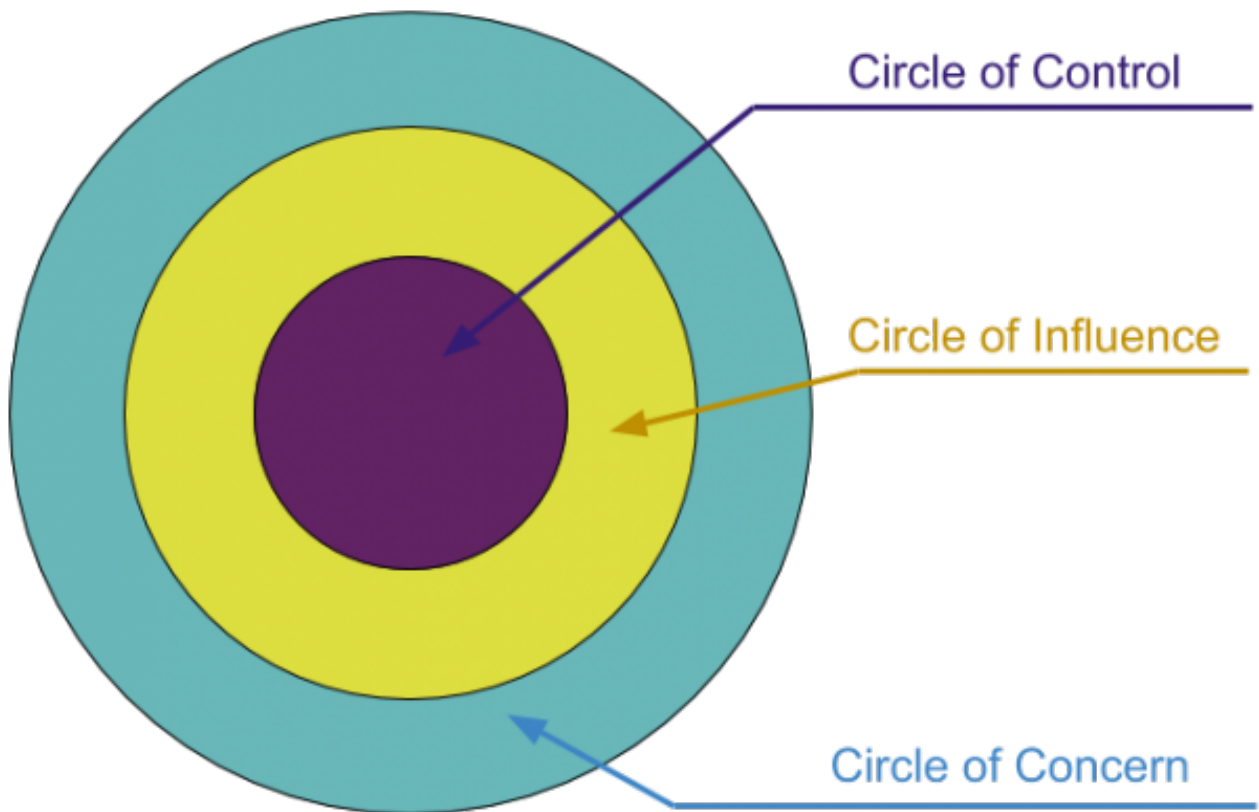
Soon, people with prejudiced attitudes begin verbally expressing these feelings of difference and superiority, testing the waters with jokes or stereotypical statements about others; even beginning to harass others or boast about times they verbally or physically marginalized others. Once this type of behavior begins, it may remain at this level, or perpetrators may begin to normalize the perceived lower value of others; they actually begin to treat others as less than themselves. This shifts us up the pyramid.

► Stage 4: Physical Expression

This is where physical and sexual violence happens. As perpetrators move up through the pyramid, they can start to believe they are entitled to commit violence. They often justify the pain they inflict on others because they believe the victim/survivor has done something to deserve the assault. They do not feel responsible for the crime they've committed and blame the victim or survivor for "making this happen."

⁵⁹ Adapted from: <https://socialsciences.exeter.ac.uk/media/universityofexeter/collegeofsocialsciencesandinternationalstudies/research/interventioninitiative/resources/PyramidDiscriminationViolence.pdf>

Resource 14.2: Circle of Influence Diagram⁶⁰



60 <https://www.thensomehow.com/circles-of-influence/>



PART 3A
The Girl Shine Early Marriage
Curriculum for Caregivers