



IOM International Organization for Migration
OIM Organisation Internationale pour les Migrations
OIM Organización Internacional para las Migraciones



**AN ACTION ORIENTED TRAINING MANUAL
ON GENDER, MIGRATION AND HIV**

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CONTENTS



ACKNOWLEDGEMENTS

01

Defining Terms Used in the Manual	04
Acronyms	04
Glossary of Terms	05
Conceptual Framework Behind the Manual	09

MANUAL OVERVIEW

10

Objectives of the Manual	10
What is Included in the Gender, Migration and HIV Training Tool Kit	10
Structure of the Manual	11
Getting Started	12

FACILITATING A WORKSHOP

13

Planning a Workshop	13
Becoming a Better Facilitator	14

BEYOND TRAINING - COMMUNITY ACTION

18

Mobilising Action	18
What is a CAT?	19
Who Joins a CAT?	19
What are CAT Goals?	19



MODULE A – CONNECTIONS AND MIGRATION

21

Key objectives	21
Fostering Action	21
Migration Trends in Southern Africa	22
HIV Vulnerability Amongst Migrants and Mobile Populations	23
Migrants' Rights	24
Additional Resources	25
Additional Activities	25
Icebreaker: The Social Spider Web	26
Activity A.1. Experiencing Migration	27
Activity A.2. Us and Them? - Values clarification around foreignness and migration	29
Activity A.3. The Cultures Game	32
Activity A.4. Connections...	35



MODULE B – GENDER SOCIALISATION 37

Key objectives	37
Fostering Action	37
The Meaning of Gender	38
Gender Inequality in the Context of Migration	39
Additional Resources	40
Additional Activities	40
Activity B.1. Gender Values Clarification	41
Activity B.2. Gender Fishbowl	44
Activity B.3.1 Gender Roles (The 24-Hour day) – Part 1	46
Activity B.3.2 Gender Roles (The 24-Hour day) – Part 2	48
Handout B.3. The 24-hour day	50
Activity B.4. Act Like a Man, Act Like a Woman	51
Activity B.5. Our Parents, Ourselves, Our Children	55
Activity B.6. Thinking about Fatherhood	57
Activity B.7. Fatherhood Case Studies	59



MODULE C – GENDER-BASED VIOLENCE 65

Key objectives	65
Fostering Action	65
Understanding the Range of Violence	66
Impact of Violence	66
Dealing with Gender-Based Violence	67
Moving Men into Action	67
Additional Resources	68
Additional Activities	68
Activity C.1. Violence Clothesline	69
Activity C.2. Violence Against Women in Daily Life	71
Activity C.3. Consent versus Coercion: Exploring attitudes towards rape	74
Handout C.3. Action Sheet on how men can support survivors of violence	76
Activity C.4. Other Forms of Gender-Based Violence	79
Activity C.4.1. Controlling Relationships	79
Handout C.4.1. Controlling Relationships	81
Activity C.4.2. Sexual Harassment	83
Activity C.5. New Kinds of Courage	86



MODULE D – GENDER, HIV AND AIDS

89

Key objectives	89
Fostering Action	89
Gender and HIV Infection	90
Gender and the Burden of Care and Support	91
Gender and HIV testing	91
Multiple Concurrent Sexual Partners	92
Migration, HIV and Gender	93
Additional Resources	94
Additional Activities	94
Activity D. 1. Sexual Vulnerabilities	95
Handout D. 1. Taking Risks: HIV and Gender	99
Activity D.2. Men and Accessing Health Services, including HIV and AIDS Services	100
Activity D.2.1. General Health	102
Activity D.2.2. Getting Tested & Staying HIV Negative	104
Activity D.3. HIV Case Studies	106
Activity D.4. Impact of HIV and AIDS	110



MODULE E - POWER AND PRIVILEGE

113

Key objectives	113
Fostering Action	113
Understanding power and privilege	114
Power, Privilege and HIV	115
Promoting Gender Equality by Challenging Male Power and Privilege	115
Promoting Gender Equality by Practicing Power Differently	116
Additional Resources	117
Activity E.1. Exploring power	118
Activity E 1.1. What is Power?	118
Handout E.1.1. Different Types of Power	120
Activity E.1.2. Who is More Powerful?	121
Activity E.2. Power, Status and Health	125



MODULE F – ALCOHOL 129

Key objectives	129
Fostering Action	129
Additional Resources	130
Activity F.1. Talking about Alcohol and Alcoholism	131
Activity F.2. To Drink Alcohol is to be a Man: Values around gender and alcohol use	133
Activity F.3. Alcohol Abuse: Risks, Violence, HIV and AIDS	135
Activity F.4. Alcohol and Decision-Making	138
Handout F.4. – Alcohol and Decision-making - Questionnaire	139
Handout F.4.a – Alcohol and Decision-making - Recognising the early signs of alcohol dependency	140
Activity F.5. Intervening with Friends in Taverns	141



ANNEX 1: WORKSHOP TOOLS 145

Activity: Taking Action: Making a difference	145
Taking Action: The Action Chart	146
Close of Day Review/Recap: Plus-Delta-Action	147
Pre/Post Workshop Questionnaire	148
Sample Agenda for a 4 day Gender, Migration and HIV workshop	149
Activity: Gender, Migration and HIV Workshop Evaluation	151
Workshop Evaluation Form	152

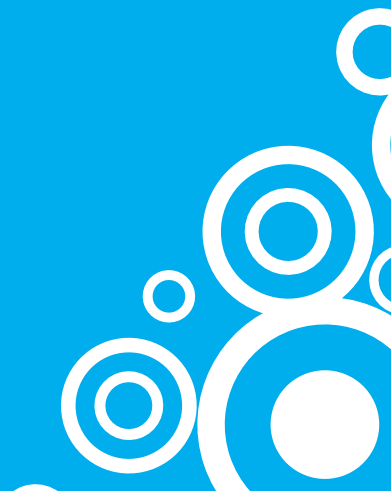


ANNEX 2: RELEVANT INTERNATIONAL AND REGIONAL COMMITMENTS AND INSTRUMENTS 155

Relevant International and Regional Commitments relating to Migration	155
International Instruments	155
Regional Instruments in Africa	155
National Instruments	155
Relevant International and Regional Commitments relating to Gender Equality	156
SADC Commitments to Gender Equality	156
Using Human Rights Commitments to Strengthen Accountability	156
International Commitments Involving Men and Boys in Achieving Gender Equality	157



OVERVIEW



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- *Alcohol in Developing Societies: A Public Health Approach*, Carlini-Marlatt, B., Gureje, O., Jernigan, D., Marshall, M., Room R, Jernigan Finnish Foundation for Alcohol Studies. Helsinki, Finland. (2002).
- *Alcohol: Some Sobering Statistics from the North West Public Health Observatory (NWPHO)*, Bellis, M.A., Hughes, K., Bellis MA. UK. (2000).
- Beijing Platform for Action (1995).
- *Bullyproof: A Teacher's Guide on Teasing and Bullying* (for use with 4th and 5th grad students), Sjostrom, L., Stein, N., Wellesley Centers for Women, Wellesley College (Wellesley, MA: 1996).
- Cairo Programme of Action, and paragraphs 47, 50, 52, and 62 of the Outcome of the Twenty-First Special Session of the General Assembly on Population and Development (1999).
- *Changing Men in Southern Africa*. Campbell, C. University of Natal Press, Durban. (2001).
- *Concurrent Sexual Partnerships Amongst Young Adults in South Africa: Challenges for HIV Prevention Communication*, Connolly, C. Parker W, Makhubele, B., Ntlabati, P., Parker, W. CADRE (2007).
- *Declaration of Commitment on HIV/AIDS: Global Crisis – Global Action* (2001).
- *Education Pack: All Different - All Equal*, Directorate of Youth and Sport, Council of Europe (2003).
- *Epidemic of Inequality: Women's Rights and HIV/AIDS in Botswana and Swaziland*. (2007) Physicians for Human Rights (2007).
- *From Violence to Peaceful Co-existence*, Instituto Promundo's Project H Manual developed for work with men in Brazil (2002).
- *Gender Dimensions of HIV Status Disclosure to Sexual Partners: Rates, Barriers and Outcomes: A Review Paper*, World Health Organization Geneva, Switzerland (2003).
- *Global Alcohol Consumption*, World Health Organisation. Geneva, Switzerland: (2007).
- *Global Communities: Learning about Refugee Issues*, Harow, M., Global Education Centre (2006).
- *Going Underground and Going After Women: Masculinity and HIV Transmission amongst Black Workers on the Gold Mines*, Campbell, C., in Morrell, R. (ed.).
- *Helping Teens Stop Violence: A Practical Guide for Counselors, Educators, and Parents*; Creighton A. and Kivel P. (Alameda, USA, Hunter House: 1992).
- *HIV/AIDS and Human Rights in a Nutshell: A Quick and Useful Guide for Action, and a Framework to Carry HIV/AIDS and Human Rights Action Forwards*, Francois-Xavier Bagnaut Center for Health and Human Rights (Toronto, Canada; 2004).
- *HIV & Sexual Behaviour Among Young South Africans: A National Survey of 15-24 Year-Olds*, Pettifor, A., Rees, H., Stevens, A. (University of Witwatersrand: 2004).
- *Home-Based Care of the Terminally Ill in Botswana: Knowledge and Perceptions* Ndaba-Mbata, R., Selolile, E. Int. Nurs. Rev. 47, 218—223 (2000).
- http://www.who.int/substance_abuse/publications/en/GlobalAlcoholafro.pdf. Accessed on November 2nd, 2007.
- *International Guidelines on HIV/AIDS and Human Rights*, OHCHR/UNAIDS (1997).



ACKNOWLEDGEMENTS

- *Keep the Best, Change the Rest*, International HIV/AIDS Alliance's participatory toolkit for working with communities on gender and sexuality (2007).
- *Keeping the Promise: An Agenda for Action on Women and AIDS*, Global Coalition on Women and AIDS. UNAIDS Geneva (2006).
- *Manual for Men Working with Men on Gender, Sexuality, Violence and Health*, a manual developed by Men's Action to Stop Violence Against Women (MASVAW) in Uttar Pradesh, India.
- *Manual on Human Rights Education with Young People*, COMPASS (2002).
- *Masibambisane SANDF HIV/AIDS and Gender Equity Training Project: A Training Manual for Peer Educators in the South African National Defence Force*; EngenderHealth, PPASA and Women's Health Project (2003).
- *Men Make a Difference: Involving Fathers in the Prevention of Mother-To Child HIV Transmission*, Baggaley, R., Rachel et al. Clinical Research Unit, London School of Hygiene and Tropical Medicine, London (2000).
- *Men Overcoming Violence (MOVE) Youth Program Curriculum* by Dean Peacock, Loreto Curti and Ras Mo Moses, San Francisco (1998).
- *Men's Work: How to Stop the Violence that Tears Our Lives Apart*, Kivel, P. (Hazelden: 1998).
- *Migration and the Spread of HIV in South Africa*, Lurie, M., Migration and the Spread of HIV in South Africa, (Baltimore, MD: Ph.D thesis, Johns Hopkins University School of Hygiene and Public Health, (Baltimore: 2001).
- *National Report on the Assessment of the Public Sector's Voluntary Counselling and Testing Programme* Magongo, B., Magwaza, S., Makhanya, N. and Mathambo, V., Health Systems Trust (2002).
- *Online Toolkit for Working with Men and Boys*, The Family Violence Prevention Fund and Men Can Stop Rape (2003).
- Outcome of the Twenty-Fourth Special Session of the General Assembly on Further Initiatives for Social Development (2001).
- *Partner Reduction is Crucial for Balanced "ABC" Approach to HIV Prevention*, Gayle, H., Shelton J, Halperin, D., Holmes, H., Nantulya, V., Potts, M., Shelton, J., Gayle H, Holmes, H. P BMJ; 328: 891–4 (2004).
- *Policy Paralysis: A Call for Action on HIV/AIDS-Related Human Rights Abuses Against Women and Girls in Africa*, Human Rights Watch (2003).
- Programme of Action of the World Summit for Social Development (1995).
- *Qué ocurre con los muchachos?*, Barker, G. (2000), Departamento de Salud y Desarrollo del niño y del adolescente, OMS, Ginebra, Suíza cited in Reasons and Emotions, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).
- *Reasons and Emotions and Fatherhood and Caregiving*, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).
- Report of the Expert Group Meeting on *The role of men and boys in achieving gender equality*, p. 21–24 <http://www.un.org/womenwatch/daw/egm/men-boys2003/reports/Finalreport.PDF> Brasilia, Brazil. (2003).
- *Rethinking Domestic Violence: A Training Process for Community Activists*, Raising Voices in partnership with the Centre for Domestic Violence Prevention.
- *Scaling up HIV Voluntary Counseling and Testing in Africa: What Can Evaluation Studies Tell Us About Potential Prevention Impacts?* SAGA Working Paper .Cornell University (2005).
- *Sisters for Life: Gender and HIV Training Manual*, The Rural AIDS and Development Action Research Program (RADAR), University of Witswatersrand School of Public Health, Small Enterprise Program.
- *South African National HIV Prevalence, Behavioural Risks, and Mass Media Household Survey 2002*, Shisana, O., Simbayi, L., Nelson Mandela/HSRC study of HIV/AIDS, Human Sciences Research Council. Cape Town, South Africa. (2002).
- *South African National HIV Prevalence, HIV Incidence, Behaviour and Communication Survey*, Bhana, A., Parker, W., Rehle, T., Shisana, O., Rehle T, Simbayi, L.C., Parker W, Zuma, HSRC Press, Cape Town. (2005).



ACKNOWLEDGEMENTS



- *Stepping Stones: A Training Package in HIV/AIDS, Communication and Relationship Skills*, Welbourn, A. and Williams, G. (2006).
- *The Hidden Battle: HIV/AIDS in the Household and Community*, Desmond, C., Gow, G. and Michael, K. 'South African Journal of International Affairs, Vol. 7 No. 2 (2000).
- *The Kit: A Manual by Youth to Combat Racism through Education*, Abboud, R., Chong, J., Gray, D., Kaderdina, R., Masongsong, M., Rahman, K., M., United Nations Association of Canada (2002).
- *Men As Partners: A Program for Supplementing the Training of Life Skills Educators*, 3rd Edition (unpublished), EngenderHealth.
- *The Oxfam Gender Training Manual*, Mwau, A., Seed, J. and Williams, S., Oxfam (Oxford: 1994).
- *The Voluntary HIV-1 Counseling and Testing Efficacy Study: A Randomized Controlled Trial in Three Developing Countries*, Thomas, J., Coates et al. University of California, AIDS Research Institute, Center for AIDS Prevention Studies, San Francisco, USA: (2000).
- *Tools Together Now!* International HIV/AIDS Alliance (2006).
- *Uncovering Who We Are: Political Education for Latina Women Leaders*, Chavarin L., Klein H., Nube M. and Pathikonda M., (San Jose, California: 2006).
- *Understanding the Challenges Facing Gay and Lesbian South Africans: Some Guidelines for Service Providers*, OUT LGBT.
- Unpublished training materials by Skinner, J. and Hoffman, L., Consulting Services for Community Health, Oakland, CA.
- WHO 2002a, citing Mane, P., Rao Gupta, R., et al. (1994), and; Weiss, E., Whelan, D., et al. (1996).
- WHO 2002a, citing Sittitrai (1991), and Orubuloye & Caldwell et al. (1993).
- *Why is HIV prevalence so Severe in Southern Africa: The Role of Multiple Concurrent Partnerships and Lack of Male Circumcision: Implications for AIDS Prevention*, Halperin, D., and Epstein, H., The Southern African Journal of HIV Medicine, March South Africa (2007).
- *World Health Report 2002*. World Health Organization Geneva, Switzerland (2002).





DEFINING TERMS USED IN THE MANUAL



ACRONYMS



AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral therapy or antiretroviral treatment
CBO	Community-Based Organization
GBV	Gender-Based Violence
HIV	Human Immune Deficiency Virus
IOM	International Organization for Migration
LGBTI	Lesbian, Gay, Bisexual, Transgender or Intersex
NGO	Non-Governmental Organisation
PHAMSA	Partnership on HIV and Mobility in Southern Africa
PMTCT	Prevention of Mother-to-Child Transmission
TB	Tuberculosis
SADC	Southern African Development Community
SIDA	Swedish International Development Cooperation Agency
STIs	Sexually Transmitted Infections
UNAIDS	Joint United Nations Programme on HIV and AIDS
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNHCHR	United Nations High Commissioner for Human Rights
UNICEF	United Nations Children Emergency Fund
VCT	Voluntary Counselling and Testing



DEFINING TERMS USED IN THE MANUAL



GLOSSARY OF TERMS



This manual includes words and terms that you may not use often. These words can be defined in various ways. The definitions we have used apply to this manual and may not be considered “official” definitions. However, it is important to have an understanding of what these words and terms mean when you are facilitating.

Abuse – Improper, harmful or unlawful use of something. Abuse can be physical, sexual and/or emotional.

Action Chart – A tool to assist participants develop a plan on how to act on the knowledge they have gained.

Activism – Taking direct action to achieve a social goal.

Attitudes – Views, opinions, and feelings about something.

Beliefs – Firm opinions normally based on religious and cultural principles.

Bisexual – Emotional, physical and sexual attraction to both men and women.

Breadwinner – The person who is responsible for earning money to support the family.

Change agent – Person engaged in a concerted programme of action in a given community to empower members of the community to effect beneficial individual and social change and development as defined within the community.

Class – A set of people grouped together by their level of wealth and/or the jobs they do in the economy.

Coercion – To force to act or think in a certain way by use of violence, pressure, threats, or intimidation.

Consensual – Involving the willing participation of both or all parties.

Culture (cultural) – The beliefs, customs and practices of society or group within society (such as, youth culture) and the learned behaviour of a society.

Disposable Income (also known as take-home pay) – The amount of after-tax income that may be spent on essentials (e.g., food and shelter), nonessentials (e.g., dining in a restaurant) or can be saved.

Division of labour – The way that different tasks and jobs are given to different persons and groups (in the household, in the community, in the workplace) according to the characteristics of the persons/groups. For example, in southern Africa there is a clear division of labour between men and women, with home care tasks given to women and technical tasks that may include fixing electrical appliances given to men.

Documented migrants (also regular migrants) – Migrants who have the required documentation which would allow them to enter and remain in a country legally.

Economic violence – In relation to gender-based violence, refers to restricting access to financial or other resources with the purpose of controlling or subjugating a person.

Emotionally intelligent (emotional intelligence) – Requires the effective awareness, control and management of one's own emotions and those of other people. The concept of emotional intelligence embraces two aspects of intelligence.

Ethnicity – Refers to large groups of people classed according to common racial, national, tribal, religious, linguistic, or cultural origin or background.

Exploitation – The act of taking advantage of something or someone, in particular the act of taking unjust advantage of another for one's own benefit (e.g. sexual exploitation, forced labour, slavery etc.).

Gay – A homosexual person, especially, a male.



DEFINING TERMS USED IN THE MANUAL

Gender – Refers to the socially constructed roles, behaviours, activities, and attributes that a given society considers appropriate for men and women (i.e. society's idea of what it means to be a man or woman). These attributions can change over time and from society to society.

Gender-Based Violence (GBV) – Gender-based violence both reflects and reinforces inequities between men and women and compromises the health, dignity, security and autonomy of its victims. It encompasses a wide range of human rights violations, including sexual abuse of children, rape, domestic violence, sexual assault and harassment, trafficking of women and girls and several harmful traditional practices. Any one of these abuses can leave deep psychological scars, damage the health of women and girls in general, including their reproductive and sexual health, and in some instances, results in death. Source: UNFPA.

Globalisation – In its literal sense globalisation is the process of making local or regional things or phenomena into global ones. It can also be described as a process by which the people of the world are unified into a single society and function together. This process is a combination of economic, technological, socio-cultural and political forces. Globalisation is often used to refer to economic globalisation, the integration of national economies into the international economy through trade, foreign direct investment, capital flows, migration, and the spread of technology.

Heterosexual – Emotional, physical and sexual attraction to people of the opposite sex.

HIV Prevalence – Usually given as a percentage, HIV prevalence quantifies the proportion of individuals in a population who have HIV at a specific point in time.

HIV Incidence Rate – The percentage of people who are uninfected at the beginning of the period who will become infected over the twelve months.

Homosexual – Emotional, physical and sexual attraction for people of the same sex.

Host Community – The community of destination. The community that has accepted or received migrants and mobile workers.

Human Rights – Are universal legal guarantees protecting individuals and groups against actions that interfere with fundamental freedoms and human dignity. Some of the most important characteristics of human rights are that they are: guaranteed by international standards; legally protected; focus on the dignity of the human being; oblige states and state actors; cannot be waived or taken away; are interdependent and interrelated; and are universal.¹

Interpersonal – Relating to the interactions between individuals.

Institutions – Are established organisations, especially dedicated to social issues such as education, public service, culture or the care of the destitute, poor, etc, and also includes customs and practices of a society or community i.e. marriage. For instance there are a number of social institutions that play a role in teaching gender roles. They include: the family, schools, the workplace, religion, the media, and internal policing and external security (police, prisons, military).

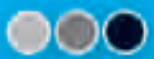
Intergenerational sex – Referring to sex between adolescent girls and boys and older partners.

Internal and Cross-border (migrants and mobility) – Internal: movement of people from one area of a country. This movement may be temporary or permanent. Internal migrants move but remain within their country of origin. Cross Border migrants move across an international border.

Intersex – A person that has biological/physical characteristics of both sexes.

Legal and Political Instruments – Include rights, laws, declarations, agreements and policies at national, regional and international level.

¹ HIV/AIDS and Human Rights in a Nutshell: A quick and useful guide for action, and a framework to carry HIV/AIDS and human rights action forwards, in "The United Nations System and Human Rights: Guidelines and Information for the Resident Coordinator System", http://www.who.int/health_topics/human_rights/en/, Francois-Xavier Bagnaut Center for Health and Human Rights (2004).



DEFINING TERMS USED IN THE MANUAL



Lesbian – A homosexual female.

Masculinities – Social and/or physical qualities and attributes associated in a given time and place with being a man or being “manly”.

Migrant Worker (labour migrant) – According to International Migration Law a Migrant Worker is a person who is to be engaged, is engaged or has been engaged in a remunerated activity in a State of which he or she is not a national. (Source Art. 2.1, International Convention on the Protection of the Rights of all Migrant Workers and Members of their Families - 1990). However within southern Africa, internal and cross-border migrants have similar vulnerabilities and within the scope of the PHAMSA programme no distinction is made between cross border and internal labour migrants.

Migrant – At the international level, no universally accepted definition of migrant exists. The term migrant is usually understood to cover all cases where a decision to migrate is taken freely by the individual concerned for reasons of “personal convenience” and without the intervention of an external compelling factor. The term therefore applies to persons, and family members, moving to another country or region to better material or social conditions and improve the prospect for themselves and their families. Source: IOM Glossary on Migration – International Migration Law (2004).

Migration – The process of moving, either across an international border, or within a State. It encompasses any kind of movement of people, whatever its length, composition and causes; it includes migration of refugees, displaced persons, uprooted people, and economic migrants. Source: IOM Glossary on Migration – International Migration Law (2004).

Mobile workers – Are workers who are forced by the nature of their jobs to move. Sectors that employ such persons include: transport (e.g. truck drivers), fisheries, informal cross-borders traders and state officials including military personnel and immigration officials.

Non-Citizens & Citizens (also non-nationals and nationals) – A citizen (national) is a person who by

birth or naturalisation is a member of a given state and as such is entitled to all its civil and political rights and protections. A non-citizen (non-national) is not a member of that state.

Norms – Accepted forms and patterns of behaviour that are seen as ‘normal’ in a society or in a group within society.

Oppression – Unjust or cruel exercise of authority or power.

Patriarchy – A social system in which men are seen as being superior to women and in which men have more social, economic and political power than women.

Power – Possession of control, authority, or influence over others.

Prejudice – Involves having a fixed, often negative opinion about something or someone without knowledge or examination of the facts.

Rape – Forcing a person to have any type of sex (vaginal, anal or oral) against their will.

Refugee – A refugee is a person who “owing to a well founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion is outside their country of nationality and is unable to or, owing to such fear, is unwilling to avail themselves of the protection of that country” – Source: UNHCR Convention and Protocol relating to the status of refugees (1951).

Regular migrants (also documented migrants) – People who migrate through recognised, legal channels.

Safe/Safer sex – Also known as ‘protected sex’, safer sex involves reducing risk, often by having sex using either a male or female condom or by exploring alternatives to penetrative intercourse.

Sexual Harassment – Unwanted sexual advances or sexual attention.

Sexual Relations (sex) – Any mutual genital stimulation, often, but not always, including sexual penetration. **Sex** also refers to the biological and



DEFINING TERMS USED IN THE MANUAL



physiological characteristics that define men and women.

Sexuality – Refers to all aspects of people's sexual lives, including thoughts and feelings, desire, behaviour and identity.

Sexual health – A state of physical, emotional, mental and social well-being in relation to one's sexuality.

Sexual Rights – "Equal relations between men and women in matters of sexual relationships and reproduction, including full respect for the integrity of the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences". Source: Fourth World Conference on Women, Beijing, 1995.

Sexual Network (sexual networking) – Is a social network that is defined by the sexual relationships within a set of individuals.

Socio-economic – Relating to, or involving a combination of social and economic factors.

Social Exclusion – Has no agreed definition it can be used to describe group or individual exclusion from society by other groups or individuals, but it can also describe a choice made by individuals or groups to exclude themselves from the greater society.

Social Justice – Refers to the concept of a society in which justice is achieved in every aspect of society, rather than merely the administration of law. It is generally thought of as a world which affords individuals and groups fair treatment and an impartial share of the benefits of society.

Social Movements – Are a type of group actions. They are large informal groupings of individuals and/or organizations focused on specific political or social issues.

Status – The position or standing of a person in a society or group in relation to others. For example, the social status of women in most societies is regarded as lower than that of men.

Stereotypes – Fixed impressions, exaggerated or preconceived ideas about particular social groups, usually based solely on physical appearance.

Transactional Sex – Is sex in exchange for something such as food, shelter, transportation or permission to go across borders.

Transgender – An umbrella term referring to a person whose gender identity or gender expression falls outside the stereotypical gender norms.

Undocumented migrants (also known as irregular migrants) – Someone who, owing to illegal or the expiry of his or her visa, lacks the legal status in a transit or host country. The term applies to migrants who infringe a country's admission rules and any other person not authorized to remain in the host country. Source: IOM Glossary on Migration – International Migration Law (2004).

Values – Accepted principles and standards of an individual or group.

Violence – The use of force or power to harm and/or control someone.

Vulnerable (vulnerability) – Conditions determined by physical, social, economic, and environmental factors or processes, which increase the susceptibility of a community to the impact of something harmful. For instance HIV vulnerability results from a range of factors that reduce the ability of individuals and communities to avoid HIV infection. These may include (i) personal factors such as the lack of knowledge and skills required to protect oneself; (ii) factors pertaining to the quality and coverage of services, such as inaccessibility of services due to distance, cost and other factors; (iii) societal factors such as social and cultural norms practices, beliefs and laws that stigmatize and disempowers certain populations.

Xenophobia – An intense fear or dislike of foreign people, their customs and culture, or foreign things.

CONCEPTUAL FRAMEWORK BEHIND THE MANUAL

Within southern Africa, livelihoods are increasingly based on mobility, with the search for income opportunities in different locations and sectors seen by many as a sound risk management strategy. Poverty and exploitation, separation from regular partners and social norms, and a lack of access to HIV prevention and care programmes make migrants and mobile workers vulnerable to HIV infection.

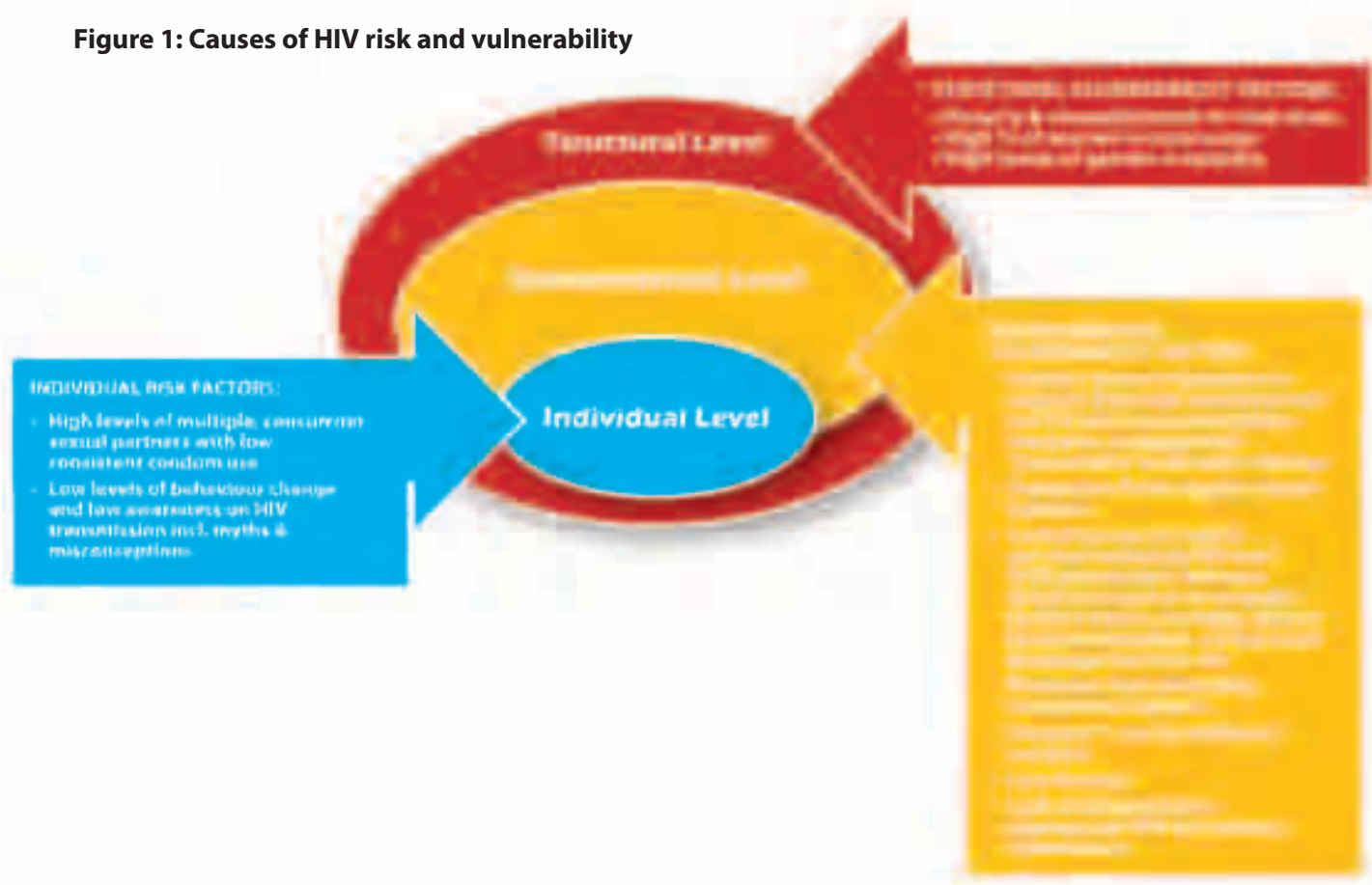
Mobility, and the loneliness and isolation this generates, especially contributes to the phenomenon of multiple concurrent sexual partners, which is arguably one of the leading drivers of HIV within southern Africa.

The modules in this manual are based on an understanding that HIV vulnerability and the impact of AIDS is caused by more than just individual choices and behaviours. It is also driven by structural and environmental forces which very often shape and constrain the choices available to individuals. This contextual understanding of the ways in which other forces affect the choices made at the individual and interpersonal level informs the activities in

the manual. Instead of focusing exclusively on behavioural change at the individual level, the activities included here also encourage participants to move from reflection to action to address the broader social forces compromising their access to human rights, health equity and social justice. As such, the manual applies a multi-level approach that looks at reducing individual risks by addressing individual and environmental factors and takes into account structural issues that increase HIV vulnerability (see Figure 1).

While the structural factors (such as poverty and unemployment) may motivate people to migrate in search of work, it is primarily the socio-economic environment within which migrants find themselves that is conducive to HIV vulnerability and transmission. A change at this socio-economic environmental level is often associated with changes in social norms and values, which in turn affect individual (sexual) behaviour. Thus, the three levels are all interrelated (see Figure 1).

Figure 1: Causes of HIV risk and vulnerability





MANUAL OVERVIEW



OBJECTIVES OF THE MANUAL



This manual was primarily developed to build the capacity of individuals and organisations to address specific gender and HIV vulnerabilities within migrant settings.

It has been designed so that it can be used both as a train the trainer (ToT) tool and as “on-the-ground” tool for facilitators to use in different settings. It is intended to be used in workshop settings and also as a resource and facilitation guide for those working on issues of migration, gender, HIV, sexuality, health, violence, human rights and citizenship.

The manual tries to equip all participants with skills to develop strategies and programmes that contribute

to broader social change. The success of this manual will be judged by the extent to which participants have been able to develop programmes within their own environments.

Although the manual was designed with migrants and mobile populations in mind, it can be used in a wide variety of settings, both rural and urban - in institutions and in informal community settings, in schools, workplaces and places of worship. Although it is designed for the southern African context it can be adapted to be used globally.

WHAT IS INCLUDED IN THE GENDER MIGRATION HIV TRAINING TOOL KIT

What is Included in the Gender, Migration and HIV Training Tool Kit

Included in the tool kit are:

- 1 Action Orientated Training Manual.
- 1 CD-Rom entitled – “An Action Oriented Training Toolkit on Gender, Migration and HIV” which includes:
 - An electronic version of An Action Oriented Training Manual on Gender, Migration and HIV.
 - Handouts-includes printable versions of handouts and case studies referred to in the manual.
 - Additional Activities and Resources – includes additional activities and resources that can add additional perspectives on the topic covered in specific modules.
- Workshop Tools - These are a printable version of tools that can assist you to prepare, conduct and evaluate a workshop.
- 1 DVD Digital Stories “Better Life than Me” with accompanying facilitators’ guide. This DVD, developed by IOM, includes autobiographical digital stories of eight men and women from southern African countries that highlight the issues and consequences of labour migration.
- 1 One Man Can DVD with accompanying facilitators’ guide. This DVD, developed by Sonke Gender Justice includes 20 autobiographical stories of men and women and their experiences in working towards a more gender equitable society.

MANUAL OVERVIEW

STRUCTURE OF THE MANUAL

The manual is divided into **6 modules** and **2 annexes**, each focusing on a specific content area relevant to addressing the gender and HIV vulnerabilities of mobile workers, their families and the communities in which they live and work. It is designed in such a way that the facilitator does not have to cover the entire manual, but can choose topics and activities depending on the backgrounds and needs of the participants.

The 6 modules are:



Each module includes an **introduction** and **workshop activities**.

Each module **introduction** includes:

- **Key Objectives** for that module.
- **Fostering Action** which gives examples of positive action relating to the topic covered in the module that can be taken.
- **Key Concepts** and relevant data relating to the module.
- **Additional Resources** includes where you can access further information on the topic covered

in the module and other resources that may be useful.

- **Additional Activities** list different activities that are not in the manual but that can be found on the accompanying CD-Rom entitled "An Action Oriented Tool Kit on Gender, Migration and HIV". These activities can add additional perspectives on the topic covered in the module.

A set of **workshop activities** aimed at encouraging men and women to explore their own values and practices, and then to take action to address gender inequalities, xenophobia and HIV in their personal lives and their communities. These activities are intended to encourage people to take action based on the new knowledge, skills and insights they gain in the workshop. In other words, the goal is not running the workshop. Instead, the workshop should be seen as a starting point leading to ongoing and sustained change. For each activity the manual provides the following:

Objectives: These describe what participants should learn as a result of doing the activity. It is a good idea to begin and end each activity by telling participants about its learning objectives. This helps participants to understand why they are doing the activity and what they can hope to get out of it.

Time: This is how long the activity should take, based on experience in using the activity. These timings are not fixed and may need to be changed because of the group you are working with or because of issues that come up.

Materials: These are the materials you will need for each activity. You will need to prepare some of these materials before the workshop begins.

The material required will include:

- *Koki pens* which are also called permanent markers.
- *Flip chart paper* which is also called newsprint.
- *Tape* refers to scotch tape, sticky tape and sellotape.



MANUAL OVERVIEW



Steps: These are the steps you should follow in order to use the activity well. These instructions are numbered and should be followed in the order in which they are written.

Facilitator's notes: Make sure you have read these notes before you begin. These notes will help you to facilitate the activity. They also include, where relevant, any advance preparation required, case studies and scenarios.

Key points: These are the key points that participants should learn as a result of doing the activity. These key points will be useful while you are facilitating the discussion during the activity as well as in summing up the discussion at the end of the activity.

Action Chart: As the manual is focused on promoting action after each activity and/or module, participants are encouraged to develop a plan on how to act on the knowledge they have gained. A blank Action Chart form can be found in the **Annex 1 Workshop Tools**, as well as a printable version on the accompanying CD-Rom, and copies should be provided for all participants.

At the end of the manual there are two **Annexes**. These annexes are:

Annex 1: Workshop Tools which includes tools that can assist you to prepare, conduct and evaluate a workshop such as a sample workshop agenda, a pre and post workshop questionnaire, an activity to help participants evaluate the process and content of the workshop.

Annex 2: Legislative and Policy instruments relating to Migration and Gender Equality which includes a list of the different regional and international Declarations, Policies and Plans.

Getting Started

Read through the manual before you start using the activities. Before you begin an activity, prepare by reading through the specific activity and relevant introduction section and where necessary refer to the additional resources.





FACILITATING A WORKSHOP



The main objective of this manual is to build the capacity of individuals and organisations to address specific gender and HIV vulnerabilities within migrant settings. This is achieved through building the skills and capacity of trainees who will be responsible for facilitating skills

development to others and/or to develop programmes that will contribute to social change within their environments. This section highlights some of the issues that (a) can help you to prepare for a workshop and (b) improve your skills as a facilitator.

PLANNING A WORKSHOP



The following tips will help you to organise a workshop.

Know your training space

It is a good idea to look at the venue where you will be conducting the training a few days before the workshop, so that you can create the most positive environment for the training. You may need to move chairs and tables or improve the lighting. If the venue is totally unsuitable, you will have time to find an alternative venue.

Know your audience

If you find out who is participating in the workshop, you will get a sense of how open they are likely to be to the ideas you present. You also need to know if participants are coming voluntarily or if they are being sent to the training. It is also helpful to find out if they have had any other training on HIV, human rights, gender equality or related issues, so that you know at what level to pitch the activities.

Know your co-facilitator

If you are running the workshop with another facilitator, meet before the workshop to plan how you will work together. You may divide up the activities between you, and agree on how to support each other during the workshop. For example, you may agree that when one person is facilitating the activity, the other helps by writing up what the group is discussing.

Prepare materials

The description of each activity includes a list of the materials you will need. Make sure you have everything you need, such as enough copies of handouts for all

the participants. Write out any information you may need for the activity on flip chart paper.

Make sure that participants know the date, time and place of the workshop

Even if you are not responsible for calling participants to the workshop, checking that information on the workshop date, time and place has gone out to all participants in time is a good idea.

Find out about support

Participating in a workshop or event where sensitive subjects are discussed such as gender-based violence may bring back painful memories of harmful past experiences, like abuse. Identify available support services and be able to refer participants to them if they need help.

Help participants relax

In the workshops that you will be facilitating you will deal with some serious issues, and you need to try to create a relaxed atmosphere right from the beginning. For example, you could take out the tables in the room and arrange the chairs in a circle, put posters on the walls and provide snacks during the breaks.

Prepare for evaluation

Both short-term evaluation of the workshop and a longer-term evaluation of its impact on the participants are very important. A short-term evaluation will help you to:

- Know how to improve future workshops.
- Address participants' expectations effectively.
- Build your morale by highlighting what went well.



FACILITATING A WORKSHOP



- Document the programme for future fund-raising and advocacy.

A sample evaluation form is included in Annex 1: Workshop Tools.

A longer-term evaluation will look at how the training has been taken forward by participants. It should assess the impact of the training on the ground.

BECOMING A BETTER FACILITATOR



As a facilitator, you can help enhance the effectiveness of your group by following some guidelines:

- Create an emotionally safe setting.
- Bring a positive attitude.
- Encourage group members to share their ideas and feelings.
- Build on group members' knowledge and experience.
- Avoid lecturing or giving "sermons" and being judgemental.
- Focus on the objectives of the activities.
- Vary the training methodologies to keep it interesting.

A major part of your job as a facilitator is to introduce the activities and guide the discussions. At appropriate times, you will summarise or encourage group members to summarise what is going on in the group.

Some of the activities in this manual deal with sensitive subjects and will challenge your own views and stereotypes. This training prepares you to be a change agent. Before changing others, you need to be aware of the change you need to make within yourself and go through the process of change, i.e., you have to be the change you want to see in others.

This training is going to be a journey of self-discovery and personal growth, and it is important to keep note of areas where you need to grow as a person, and develop action plans for your own personal

growth. The training programme already provides a framework for that through various activities and tools. You're also encouraged to keep a personal journal, so as to keep track of your growth process and regularly reflect on it.

Key skills for a facilitator

You don't have to be an expert in facilitation to create a good learning environment. Training to be a "Gender, Migration and HIV" facilitator, you definitely need to think about your attitudes. You are being asked not only to help people discuss issues of gender, violence and sexual health, but also to develop and promote attitudes and behaviours that people need to protect their own and others' health, safety and well being. By talking to others going through this training, you will become more aware of how your attitudes affect your work and your ability to promote new ways of behaving.

Facilitators also need to develop skills in active listening, effective questioning and facilitating group discussions. Over and above that, facilitators need to be emotionally intelligent, so that they are able to manage their own feelings and those of the group they are taking through the learning process. The following information can be used to improve facilitation skills.

Active listening

Active listening means helping people feel that they are being heard and understood. This is a vital skill for facilitating group discussions. It helps people to



FACILITATING A WORKSHOP



feel that their ideas are valuable. Active listening also helps people to share their experiences, thoughts and feelings more openly.

Active listening involves:

- Listening to content (what the person is saying word for word), listening to meaning (what the person actually means by what they are saying) and listening to feeling (how the person feels as they are expressing themselves).
- Showing interest and understanding through your body language, for example by nodding your head and turning your body to face the person who is speaking.
- Using your facial expressions to show interest and understanding and reflect what is being said. Just be aware that while usually looking directly at the person who is speaking is often a good way to show interest, in some communities, direct eye contact may not be appropriate until the people speaking and listening trust each other.
- Paying attention to the speaker's 'body language', so that you are not only listening to what is said but also to how it is said.
- Asking questions to the person who is speaking, to show that you want to understand.
- Summing up the discussions to check you understand what has been said fully, and asking for feedback.
- Effective questioning.

Asking effective questions helps a facilitator to identify and address issues, and ask for differing views on an issue. Skills in effective questioning are also useful for challenging assumptions, showing that you are really listening, and demonstrating that the opinions and knowledge of the group are valuable. Effective questioning also increases people's participation in group discussions and encourages their problem-solving skills in relation to difficult issues.

Effective questioning involves:

- Using the six key questions -Why? What? When? Where? Who? How? And to ask open-ended questions.
- Following people's answers with more questions that look deeper into the issue or problem.

- Paraphrasing the questions and answers to make sure you are clear about the answers.
- Asking how people feel and not just about what they know, to find out their personal points of view.

Facilitating group discussions

Facilitating group discussions involves:

- Creating "ground rules" with the group, which the group agrees to use.
- Helping the group to stay focused on the issues being discussed.
- Helping all group members to take part in the discussion by paying attention to who is dominating discussions and who is not contributing (remember that people have different reasons for being quiet – they may be thinking deeply!).
- Summing up the main points of the discussion and any action points that have been agreed.
- Thanking the group for contributing to the workshop.

Managing difficult situations and conflict

Activities in this manual look at sensitive issues and difficult problems such as gender-based violence, men and women's roles. Because people have strong views on gender and sexuality, there may well be disagreement between you and a participant or between participants themselves. These disagreements can easily turn into conflict. Disagreement is healthy - it is often through disagreement with others that we come to better understand our own thoughts and feelings. But conflict can be unhealthy, and can lead to participants putting their energy into defending fixed positions instead of exploring new issues. As a facilitator, you need to manage conflict. If a participant challenges you, bouncing the challenge back to the whole group or to the participant himself as a question is a good way to deal with the challenge.

Some of the roles that people take on when they are in groups can interfere with the learning of the workshop. When you facilitate a group discussion, you may have to deal with negative or disruptive people. You can deal with difficult people by reminding the



FACILITATING A WORKSHOP



group of the ground rules and asking them to be responsible for sticking to them.

You can ask a person who is always complaining for details of what is bothering them, and address them. You can also ask the group to discuss the issue. You can involve the group in asking a disruptive person to help rather than hinder the group, or deal with him separately.

While the group will not always achieve agreement, as facilitator you need to highlight areas of agreement, as well as points of disagreement that need further discussion. You should also sum up the main points of the discussion and any action points that have been agreed, as well as thank the group for what they have contributed to the workshop.

CASE STUDY



A participant might say: "If a woman gets raped, it is because she asked for it. The man who raped her is not to blame." As facilitator, you need to challenge such opinions and offer a viewpoint that reflects the philosophy of the programme. While this can be hard, it is a vital part of in helping participants work toward positive change.

One way you could deal with such a situation is by following the steps below.

Step 1: Ask for clarification.

"Thank you for sharing your opinion with us. Can you tell us why you feel that way?"

Step 2: Seek an alternative opinion.

"Thank you. So at least one person feels that way. What do the rest of you think?"

Step 3: If nobody offers an alternative opinion, provide one.

"I know that a lot of people would never agree with that statement. Most of the men and women I know feel that the rapist is the only person to blame for a rape. We are all responsible for respecting other people's right to say 'no.'"

Step 4: Offer facts that support a different point of view.

"The law says that every person has a right to say 'no' to sex, and the rapist is the only person to be blamed. It doesn't matter what a woman wears or does, she has the right not to be raped."

Please note that it is very unlikely that the participant will openly change his or her opinion even after you use these four steps to address the statement. But by challenging the statement, you have provided an alternative point of view that the participant may consider and hopefully adopt later.

Making good presentations

As a facilitator, you will need to make presentations on a range of topics and issues. Here are some general tips on presenting to groups:

Practice before you make your presentation.

- Move out into the audience from behind the podium or table.
- Look at and listen to anyone who asks a question.
- Be aware of the sensitivities of your audience.
- Use humour, but do not wait for laughs.
- There are many different ways to cover the same material. Try to customize your presentation to suit the group.

Emotional Intelligence

The effectiveness of activities in this manual depends, to a large extent, on the facilitators. The facilitator brings her/his emotions, experiences, prejudices etc. to the learning environment and this can have a negative or positive impact on the process. Throughout all of the activities, participants are encouraged to reflect on their own experiences,



FACILITATING A WORKSHOP



feelings and emotions, and what personal lessons they can take away. This will help in enhancing their emotional intelligence.

To be emotionally intelligent requires the effective awareness, control and management of one's own emotions and those of other people. The concept of emotional intelligence embraces two aspects of intelligence.

1. *Personal aspects- Understanding yourself, your goals, intentions, responses, behaviours.*

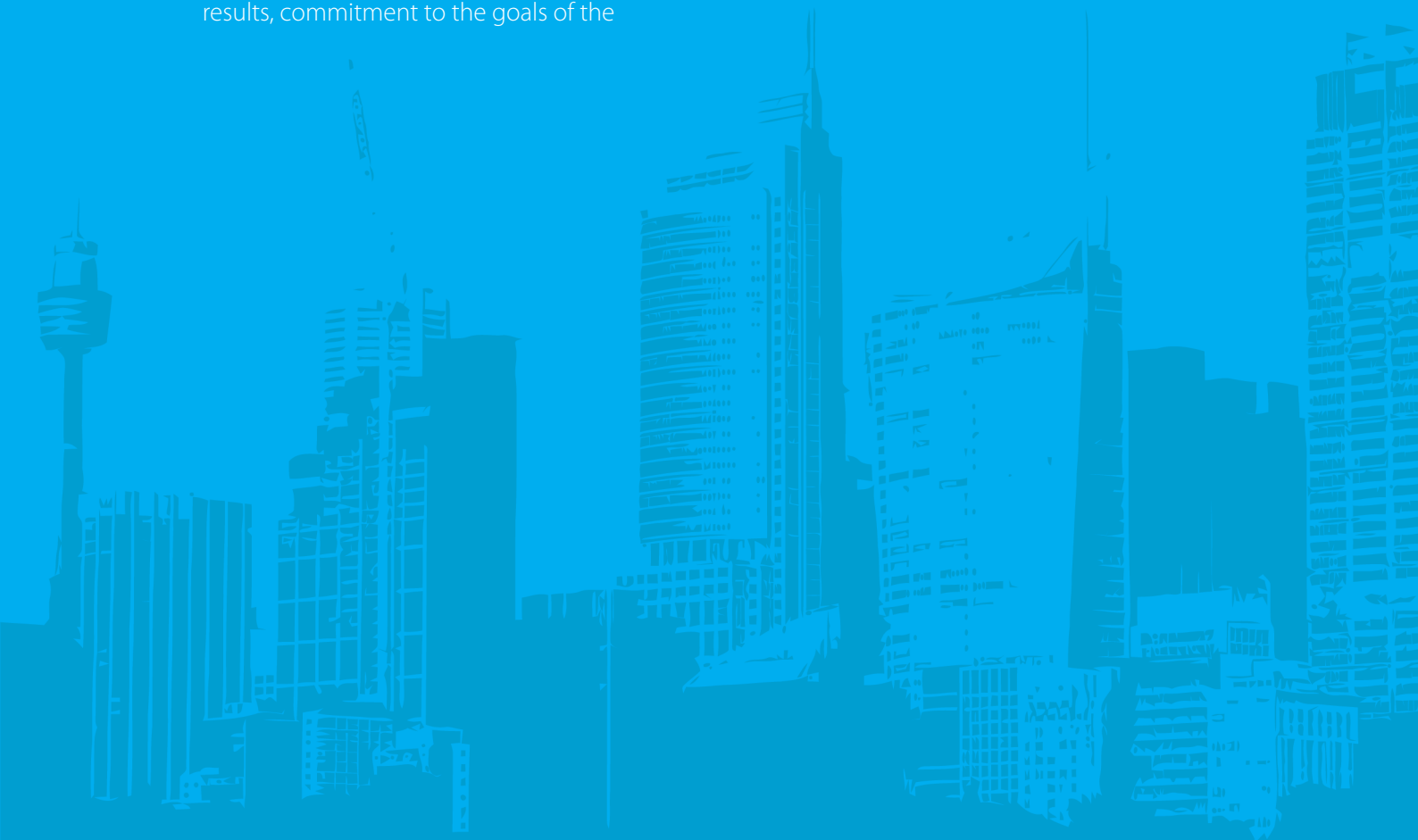
- Self-awareness - being able to recognise one's emotions and their effects; knowing one's strengths and limits; having sureness about one's self-worth and capabilities.
- Self-regulation - managing disruptive emotions and impulses; maintaining standards of honesty and integrity; taking responsibility for personal performance.
- Self-motivation – being driven to achieve results, commitment to the goals of the

group and/or organisation; demonstrating initiative and optimism.

2. *Social aspects - Understanding others, and their feelings.*

- Social awareness – being empathic, service oriented; developing others; promoting diversity; showing political awareness.
- Social skills – using good communication skills; being able to inspire others; catalyzing change; managing conflict; nurturing instrumental relationships and creating group synergy in pursuing collective goals.

These are integrated throughout the activities, so that as knowledge and understanding are built on various issues, both the facilitator and participant are given the opportunity to reflect on their emotions, and also acquire the necessary skills to positively manage their emotional environment and that of the group.





BEYOND TRAINING - COMMUNITY ACTION



This training manual suggests that we can build a world of gender justice, free of violence, with access to healthcare for all, and shared power among men and women, migrants and non-migrants, and people of all backgrounds. This is not a small undertaking. Rather, it is a vision that can be realized only through determined social action involving many communities, sectors of society, and institutions.

Social change usually requires the work of several kinds of social movements working together to create a bigger impact than any one individual or organization can have in isolation. Individuals, small groups, and social organisations taking action at a grassroots level

play an important part to effect change.

As activists working for gender justice, we need to interact at many different levels – starting with ourselves! Yet we also need to think about the social structures that influence the behaviour of individuals, and the powers that perpetuate gender inequality, gender-based violence, poor access to health, increased risk of HIV infection, and poverty itself in place. In selecting a focus for our activism, we can expect resistance, opposition and difficulty. Yet we can also expect that given that there is enough demand for change, even the most entrenched institutions will yield.

MOBILISING ACTION



To date, most work with men has involved running workshops and conducting community education events. This is important work. However, to be effective and to bring about change at the society level, it is necessary to go beyond running workshops. Even if organisations working with men are well resourced and have large staff they are never likely to reach more than a few thousand men a year but there are millions of men and boys across the SADC region.

Community workshops should be seen as the starting point, not the end goal. Workshops raise consciousness about gender inequalities, but workshops alone will not promote sustained individual or social change. Instead, workshops should be seen as a step towards taking action.

In general, gender and HIV initiatives have focused on women. However, gender-based violence and HIV affects all of us and men need to become more visible and outspoken about their opposition to gender-based violence and demonstrate their willingness to take a public stand against it as well as becoming fully involved in HIV responses.

The Community Action Team (CAT) is one way to mobilise communities to take action to promote social change. The CAT model can be used to address any issue that the community wants to take action on such as gender-based violence, HIV, access to health services, etc. The CAT model was first popularised by the Transforming Communities initiative conducted by Marin Abused Women Services in the San Francisco area.

BEYOND TRAINING - COMMUNITY ACTION

WHAT IS A CAT?

A CAT is a group of volunteers who decide to do something about an issue that bothers them in their community. CAT members choose different actions depending on their interest, resources, and community needs.

Usually a staff member or peer educator from an organisation gets the group started. Sometimes the group continues on its own even without an external facilitator. A CAT may come together for a single campaign or it may stay together for a long time and carry out a series of activities. Of course, there are many models of small group organising, and each community needs to work out how best to fit its needs, culture, and geographical context. A CAT generally:

- Has a defined focus and goals.
- Is formed by community members who want to raise awareness and take action on issues that affect them.
- Brings people together regularly to learn about, discuss, and solve community problems.
- Carries out a series of actions and strategies to achieve certain goals.
- Creates change in individuals' knowledge, attitudes and behaviours.
- Creates change in policies and practices.

Who Joins a CAT?

A CAT often starts with just five to ten community volunteers. The CAT may grow in size over time, or include some members who only attend sometimes. As many as 50 people may take part in a CAT activity or event. The core members of the CAT meet weekly or monthly to plan activities under the guidance of project coordinators or peer educators (social change agents).

What are CAT Goals?

A CAT needs to establish its primary goals before it can plan an active campaign; Goals should be action-oriented and give a focus to the direction the CAT takes in its work.

Some possible strategic goals for a CAT are:

- Educating men and women to understand how the gender roles they have been socialized into limit their full potential as human beings.
- Providing education about HIV and AIDS and encouragement to use condoms, especially to people who aren't getting this information anywhere else.
- Encouraging community institutions such as clinics, schools and churches to speak out regularly about HIV and AIDS and gender-based violence.

What Does a CAT Do?

CATs can do a wide range of activities to promote gender equality, such as:

- Run gender, migration and HIV workshops with key groups and use the materials from this manual and toolkit to encourage action from teachers, faith-based leaders, coaches and others who shape ideas about manhood and masculinity.
- Establish boys clubs at schools and youth centres to educate young men about responsible manhood and about healthy relationships.
- Use theatre and drama to educate men about gender-based violence, migration and HIV.



BEYOND TRAINING - COMMUNITY ACTION

- Paint murals at key community centres depicting images of men involved in preventing gender-based violence and supporting survivors of violence.
- Record or develop a CD with music that addresses issues related to gender equality, migration and HIV.
- Find out about local structures. For instance in South Africa there are Community Policing Forums, whilst in Mozambique there are various community committees. Encourage CAT members to join these local structures.
- Promote advocacy and community mobilisation to demand effective responses to domestic and sexual violence.





MODULE A
Connections and Migration



MODULE A - Connections and Migration

This module provides information on migration and migrant workers. Specifically it describes:

- The relationship between **migration**, gender and HIV.
- Some of the different sectors that employ **migrants**.
- Relevant international declarations and policies that address the rights of migrant workers. (See Annex 2)

KEY OBJECTIVES

Through the activities in this module we aim to:

- Build skills of participants to enable them to:
 - Challenge negative **attitudes**, perceptions and **beliefs** about migrants.
 - Increase appreciation and tolerance of cultural diversity.
- Build knowledge and understanding on migration issues by providing information on issues relating to migration, gender and HIV.
- Provide an opportunity for personal reflection on issues relating to migration.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become **change agents** in their own lives and community.

This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level, taking action to:

- Create supportive environments for migrants.
- Facilitate community action against xenophobia.
- Challenge cultural and

ATTITUDES

views, opinions, and feelings about something.

BELIEFS

Firm opinions normally based on religious and cultural principles

traditional stereotypes that make migrants vulnerable.

At the broader structural (societal) level, taking action to:

- Ensure that existing legal and human rights frameworks that address migrants issues are enforced.
- Advocate for protection of migrants' rights.

CHANGE AGENT

Person engaged in a concerted programme of action in a given community to empower members of the community to effect beneficial individual and social change and development as defined within the community.

After the training

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Speaking out against xenophobia.
- Undertaking a community project looking at the history and culture of their community, where people have come from and where they have gone, their songs, food, dances, jewellery and traditions.
- Collecting stories from community members on their experiences of being a migrant, show case them in the community. You can use drama or photos or paintings to tell the different stories and affirm the role migrants have played in your community.

Migration Trends in Southern Africa

People are constantly moving across southern Africa. Many people, for example informal traders, need to be constantly on the move because of the work they do. Truck drivers, almost all of them men, transport goods over long distances, often across international borders. In the agricultural sector, seasonal work is common, and many people move seasonally between their homes and agricultural estates and farms. Such migration can be both within a country (internal) and across borders. It often reflects patterns that have been established over many generations. This is the case amongst mine workers, who have travelled for decades from Lesotho and Mozambique to work on the mines in South Africa.

Within southern Africa, patterns of **internal and cross-border mobility** and migration have changed considerably over the last three decades, and are likely to continue to change in the future. Although we are used to thinking about **migrant workers** in relation to the gold mines, most migrant workers are now employed in other sectors. Migrants may work in manufacturing, informal trade, agriculture, construction and services including domestic service.

One of the main reasons for increased border traffic is the growth in cross-border formal and informal trade across southern Africa. Formal trade within the sub-continent has grown enormously since 1994, with goods mainly being carried by long-distance truckers. Informal cross-border trading has also expanded dramatically with women playing a

major role in the buying and selling of goods across the region.

The high levels of mobility in all **socio-economic** classes create “stretched” households and families across different geographical areas, urban, rural and international.

In 2008 IOM estimates that there are nearly 200 million international migrants worldwide.⁴

SOCIO-ECONOMIC
Relating to, or involving
a combination of social and
economic factors.

⁴ Fact sheet 31: Right to Health, OHCHR & WHO (2008).

INTERNAL : movement of
people from one area of a country.
This movement may be temporary or
permanent. Internal migrants move but
remain within their country of origin.
CROSS BORDER migrants move across
an international border.

**MIGRANT WORKER
(LABOUR MIGRANT)** : According to
International Migration Law a Migrant Worker
is a person who is to be engaged, is engaged or
has been engaged in a remunerated activity in a
State of which he or she is not a national. (Source
Art. 2.1, International Convention on the Protection
of the Rights of all Migrant Workers and Members
of their Families - 1990). However within southern
Africa, internal and cross-border migrants have
similar vulnerabilities and within the scope of the
PHAMSA programme no distinction is made
between cross border and internal
labour migrants.



HIV Vulnerability Amongst Migrants and Mobile Populations

Within sub-Saharan Africa, the countries of southern Africa are the worst affected by the HIV epidemic. There are a number of different factors that explain why HIV is affecting this region so severely. They include gender inequalities, poverty and economic marginalization; more virulent strains of HIV than found elsewhere; high rates of sexually transmitted infections (STIs) and other opportunistic infections (such as TB); and **sexual networking** and patterns of sexual contact, including high levels of concurrent sexual partners.⁵ In addition migration and mobility are often cited as having an impact on the HIV epidemic.

The relationship between migration and HIV and AIDS is complex. Although some people think that migrants mainly bring HIV when they enter countries or move between areas, evidence usually suggests the opposite, implying that migrants are more vulnerable than local populations. The links between mobility and HIV are related to the conditions and the structure of the migration process. Stigmatising migrants fuels this vulnerability even more.

Population mobility and migration contribute to the phenomenon of multiple concurrent sexual partnerships, which is arguably one of the main drivers of the HIV epidemic in southern Africa. Because migrants and mobile

workers are regularly separated from their permanent partners, it is possible that they may engage in short or long term sexual relations with other partners.

Migrants and migrant households are particularly vulnerable to HIV

SEXUAL NETWORKING

Is a social network that is defined by the sexual relationships within a set of individuals.

and AIDS. This stems from the fact that migrants and mobile workers:

- experience language and cultural differences within the **host community** that often lead to discrimination and **social exclusion**.
- are often stigmatized and marginalized, seen as carrying or bringing the HI Virus, and marginalized from services.
- are less restricted by home and community **norms**, which can create a sudden feeling of anonymity and freedom which may lead to high risk sexual behaviour.
- are exposed to difficult and dangerous working conditions which may lead to a focus on immediate health and safety concerns rather than what may seem like far-off concerns about AIDS illnesses.
- are living in an environment where social and peer pressure may make men feel constrained to live out exaggerated models of manhood measured by sexual



HOST COMMUNITY

The community of destination. The community that has accepted or received migrants and mobile workers.

SOCIAL EXCLUSION

Has no agreed definition it can be used to describe group or individual exclusion from society by other groups or individuals, but it can also describe a choice made by individuals or groups to exclude themselves from the greater society.

NORMS

Accepted forms and patterns of behaviour that are seen as "normal" in a society or in a group within society.

conquest and high numbers of sexual partners.

- are excluded from HIV policies and programmes.
- are often isolated from their families and support networks.
- are often on the lowest wages, and outside the protection of the labour laws and standards because of their employment status, or if they are foreign, they are more

⁵ SADC Expert Think Tank Meeting on HIV Prevention in high prevalence countries in Southern Africa Report (2006).

vulnerable due to their legal status, whether **documented or undocumented**.

- have limited investment opportunities and therefore have **disposable income** at hand which is often spent in ways which may increase HIV-related risk.

The relationship between the HIV epidemic and migration was recognized by the United Nations during the General Assembly Special Session on HIV/AIDS in June 2001. Paragraph 50 of the Declaration of Commitment stipulates that Member States should:

DOCUMENTED MIGRANTS (ALSO REGULAR MIGRANTS)
Migrants who have the required documentation which would allow them to enter and remain in a country legally.

DISPOSABLE INCOME (also known as take-home pay):
The amount of after-tax income that may be spent on essentials (e.g., food and shelter), nonessentials (e.g., dining in a restaurant) or can be saved.

“ (b) by 2005, develop and begin to implement national, regional and international strategies that facilitates access to HIV/AIDS prevention programmes for migrants and mobile workers, including the provision of information on health and social services”

6 Declaration of Commitment on HIV/AIDS, United Nations General Assembly, (2001).

Migrants' Rights

All human beings are born free and equal in dignity and rights, and **human rights** are the basic standards that uphold this. Human rights are basic entitlements accorded to every human being, and include such rights as the right to life, liberty, security, dignity, health, education, shelter, employment, property, food, freedom of expression and movement.

To violate someone's human rights is to treat that person as though she or he were not a human being. To advocate for human rights is to demand that the human dignity of all people be respected.

Everyone is entitled to human rights, regardless of their race, colour, sex, language, religion, class, political or other opinion, nation or origin, property, birth or other status. In other words, everyone is entitled to human rights no matter where they come from, where they live, and what type of work they do. Therefore, all migrant workers, including foreign migrant workers, are entitled to all human rights.

HUMAN RIGHTS
Are universal legal guarantees protecting individuals and groups against actions that interfere with fundamental freedoms and human dignity. Some of the most important characteristics of human rights are that they are: guaranteed by international standards; legally protected; focus on the dignity of the human being; oblige states and state actors; cannot be waived or taken away; are interdependent and interrelated; and are universal.

There are many **legal and political instruments** (human rights laws, declarations, agreements and policies) at the international, regional and national level that ensure the rights of migrants.

Migrants' Right to Health

Frequently migrants ability to enjoy the right to health is limited merely because they are migrants, as well as owing to other factors such as discrimination, language and cultural barriers, or their legal status.

Many countries have defined their health obligations towards **non-citizens** in terms of “essential care”

7 Fact sheet 31: Right to Health, OHCHR & WHO (2008).

LEGAL AND POLITICAL INSTRUMENTS
themselves includes rights, laws, declarations, agreements and policies at national, regional and international level

NON CITIZENS & CITIZENS
(also non-nationals and nationals)
A citizen (national) is a person who by birth or naturalisation is a member of a given state and as such is entitled to all its civil and political rights and protections. A non-citizen (non-national) is not a member of that state.

or “emergency health care”. These concepts can mean different things in different countries and their interpretation is often left to individual health-care staff.

The **International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (1990) (art 28)** stipulates that all migrant workers and their families have the right to emergency medical care for the preservation of their life or the avoidance of irreparable harm to their health, and that such care should be provided regardless of any irregularity in their stay or employment. The Convention further protects migrant workers in the workplace and stipulates

that they shall enjoy treatment not less favourable than that which applies to nationals of the State of employment in respect of conditions of work, including safety and health (art 25). Unfortunately, as of July 2008, no SADC states had ratified this convention.

The **Committee on the Elimination of Racial Discrimination**, in its general recommendation (No. 30 2004) on non-citizens, and the **Committee on Economic and Social and Cultural Rights**, in its

general comment (No. 14 – 2000) on the right to highest attainable standard of health, both stress that state parties should respect the right of non-citizens to an adequate standard of physical and mental health by, amongst other things, refraining from denying or limiting their access to preventative curative, and palliative health services.

See **Annex 2** for relevant international and regional commitments and instruments.

ADDITIONAL RESOURCES

International Organization for Migration (IOM): www.iom.int

Fact Sheet IOM Population Mobility, HIV and AIDS (2006).

See accompanying CD-Rom

IOM Position Paper on HIV and Migration (2002). See accompanying CD-Rom

OHCHR and WHO Fact Sheet 31 – Right to Health (June 2008)

- Southern African Migration Project (SAMP): <http://www.queensu.ca/samp>
- Forced Migration Studies Programme (FMSP): <http://migration.org.za>
- Office of the High Commissioner for Human Rights: <http://www.ohchr.org>

ADDITIONAL ACTIVITIES

The following activities can be found on the accompanying CD-Rom. These activities can add additional perspectives around migration or can be used to address specific issues raised during the training:



- *“James and Joanna”*: This activity helps to explore the images we have about men and women from other cultures, social groups, etc, and to be aware of how these images condition our expectations of people who belong to other groups.
- *“Stereotyping”*: This activity aims to work with and explore our stereotypes and prejudices about other people; to understand how stereotypes function; and to generate creativity and spontaneous ideas in the group.

- *“Speaking my Own Truth”*: This activity intends to strengthen group members’ confidence and ability to speak up for what they believe in and care about.
- *“Acting out Human Rights”*: This activity aims for participants to explore human rights in relation to gender, HIV, AIDS and migration.
- *“Understanding Human Rights”*: This activity seeks to help participants to understand the concept of a human right and to understand how rights can be protected and abused.
- *“Five Tricks”*: This activity aims to get participants to understand the ways in which differences in cultural norms can create confusion and tension.

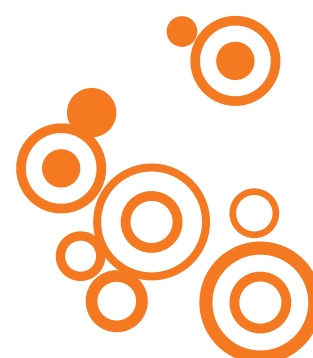


ICEBREAKER: THE SOCIAL SPIDER WEB⁸







Objectives 	<p>To get people moving and create a sense of cohesion at the beginning of the workshop.</p> <p>To get an idea of the places where people in the room have lived.</p>
Time 	<p>10 minutes</p>
Materials 	<p>A big ball of wool</p>
Steps 	<ol style="list-style-type: none"> 1 Ask participants to stand in a circle. Give a random participant the ball of wool. Ask the participants to introduce him/herself, by stating his/her name and naming one or two places s/he has lived before living here and either their favourite colour, food or singer. 2 Ask the group for those who have either lived in the same place or have the same favourite colour, food or singer to raise their hand. 3 Ask the participant with the ball of wool to hold on to the end of the wool but throw the ball to one of those participants with which they have something in common. 4 Complete the circle this way. 5 Once the spider web has been completed, point out the interconnectedness that exists amongst the group. Explain that in the past, countries were able to operate as single entities, but now they are tied together in a complicated web (globalisation). This same web is the reason we are all here together in the same room.

⁸ Adapted from Uncovering Who We Are: Political Education for Latina Women Leaders, Chavarin, L., Klein, H., Nube, M., and Pathikonda, M., (San Jose, USA: 2006).



ACTIVITY A.1: EXPERIENCING MIGRATION⁹



Objectives 	<p>To explore reasons why men and women migrate.</p> <p>To reflect on gendered experiences of migration.</p> <p>To explore factors that would improve migrants' experiences in other countries.</p>
Time 	<p>45 minutes</p>
Materials 	<p>Flip Chart paper</p> <p>Colouring pens or crayons</p> <p>DVD player and television or a computer with a data projector and speakers</p> <p>IOM's "Better Life than Me" DVD – "Anonymous" digital story.</p>
Steps 	<ol style="list-style-type: none"> 1 Start the activity by showing participants "Anonymous" digital story (contained on "Better Life than Me" DVD). After the clip, ask participants the following questions: <ul style="list-style-type: none"> - How did you feel watching this story? - Can you relate to any of his experiences? 2 Distribute coloured pens/crayons and a piece of flip chart paper to each participant. 3 Ask participants to write their answers to the questions below on their paper and/or draw a picture to illustrate their migration experience. Some participants may want to do more than one drawing. <ul style="list-style-type: none"> - When did you/you and your partner/you and your family come to this country/area? - Where did you/you and your partner/you and your family come from? - Why did you/you and your partner/you and your family come to this country/area? - What have been some of your experiences as a migrant in this country/area? - How have you found interactions and building relations with other people in the area?

⁹ Adapted from Uncovering Who We Are: Political Education for Latina Women Leaders, Chavarin, L., Klein, H., Nube, M., and Pathikonda, M., (San Jose, USA: 2006).





ACTIVITY A.1



Steps

1-2-3

4 Ask participants to find a partner, preferably someone they don't know or don't know well. Give each pair 10 minutes to share their personal migration histories.

5 Ask 3 or 4 participants to share their pictures and stories with the rest of the group. Lead a discussion with the group, looking at some of the following questions and asking other participants to share some of their experiences.

- What similarities/differences did you see in the reasons that lead people to migrate?
- What were some of the differences between men and women's reasons for migrating? What were the similarities?
- Have men and women had different experiences? How What difficulties have men and women faced?
- Have men and women been able to access services and information when they needed to?
- Have people built relationships/friendships with people who are from this country? Why/why not?
- How have immigration regulations and legislation affected the lives of migrants?

6 After the discussion, ask participants what particular factors would make their lives easier in this country. Note these on a piece of flip chart paper. Then ask them what they could do and what others need to do to realise these objectives. Note these down on the Action Chart. Amongst others, these factors may cover areas such as employment, health, discrimination, and cultural identity.

Facilitator's notes



It is important to lead the discussion well in this activity – some of the themes might be emotive for participants. It may be advisable to have a counsellor on site.

Some participants may have found it quite easy to form relationships with other people and communities. Others may have experienced prejudice, exclusion, discrimination and rejection. Some may have suffered violence.

A number of participants may have had difficulty accessing crucial health services and information on account of their foreign status. This has the potential for serious repercussions in terms of migrants' sexual and reproductive health.

Refer to the facilitators guide on how to facilitate the discussions related to the digital stories. Make sure that your DVD player or computer is working properly and the story you have selected is relevant to the session.

KEY POINTS







When looking at reasons for people to migrate, participants may come up with a variety of factors, including: search for work, the need to escape conflict or political instability in their country or to be with other family members.

Both male and female migrants may be familiar with experiences of xenophobia, exploitation, difficult working conditions, cultural alienation, and limited access to services. A number of female participants may however highlight quite specific experiences of exploitation, including sexual exploitation and abuse.

ACTIVITY A.2: US AND THEM

VALUES CLARIFICATION AROUND FOREIGNNESS AND MIGRATION

Objectives 	To explore attitudes and values around foreigners and migrants.
Time 	30 minutes
Materials 	<ul style="list-style-type: none"> • Four signs on A4 paper ("Strongly Agree," "Strongly Disagree," "Agree," and "Disagree") • Koki pens • Tape
Steps 	<ol style="list-style-type: none"> Before the activity begins, put up the four signs around the room, leaving enough space between them to allow a group of participants to stand near each one. Look at the statements provided in the Facilitator's notes and choose 5 or 6 that you think will lead to the most discussion. Alternatively, come up with some of your own statements. Explain to the participants that this activity is designed to give them a general understanding of their own and each other's values and attitudes about foreignness and migration. Remind the participants that everyone has the right to his or her own opinion. Read aloud the first statement you have chosen. Ask participants to stand near the sign that says what they think about the statement. After the participants have moved to their sign, ask for one or two participants beside each sign to explain why they are standing there and why they feel this way about the statement. After a few participants have talked about their attitudes toward the statement, ask if anyone wants to change their mind and move to another sign. Then bring everyone back together and read the next statement and repeat steps 3 and 4. Continue for each of the statements that you chose.





ACTIVITY A.2

Steps

1-2-3

- 5** After discussing all of the statements, lead a discussion about values and attitudes about foreignness and migration by asking these questions:
- Which statements, if any, did you have strong opinions about?
 - Which statements did you not very have strong opinions about? Why do you think this is so?
 - How did it feel to talk about an opinion that was different from that of some of the other participants?
 - How do you think people's attitudes about the statements help or do not help to improve race relations and attitudes to foreigners and migrants in southern Africa?
 - What might be the possible impact of people's different values in relation to gender, HIV and AIDS? For example, how might a health service provider's attitude towards foreigners impact on a migrant's access to STI and HIV services? Or, what about a female foreign migrant who wants to report an incident of abuse to a xenophobic police officer?

6 Use the Action Chart to ask participants what actions they think are needed in order to change harmful attitudes, noting their answers on the chart.

7 Ask participants how they might act differently as a result of this exercise.

Facilitator's notes



Choose statements from the following list according to which are most likely to promote lively discussion, or create your own.

I find it difficult to work with people from other countries.

Foreigners take our jobs.

Jokes about foreigners are funny.

South Africans are unfriendly to foreigners (Adapt the statement according to the country you are facilitating in).

People from different cultures should not have romantic relationships with each other.

Foreigners make my country a more interesting place to be.

Foreigners should learn to speak this country's language(s).

Foreigners are unsafe in this country.

Immigrants to this country are often well-educated.

The police in this country discriminate against foreigners.

Refugees and migrants place a burden on my country.

I see foreigners as a threat to my business.

Foreigners commit lots of crime.

Foreigners are responsible for AIDS.

Migrants and refugees work the hardest.



ACTIVITY A.2

Facilitator's notes



This exercise may work well in groups with a mix of nationalities, cultures, races and genders.

Some participants may say they that they don't know whether they agree or disagree and don't want to stand beside any of the four signs. If this happens, ask these participants to say more about their reactions to the statement and then encourage them to choose a sign to stand beside. If they still don't want to, let these participants stand in the middle of the room as a "don't know" group. However, it is preferable to avoid using this option if at all possible; if you do use it, make sure to guard against participants using it too much.

It is important to facilitate this exercise well due to the sensitive nature of the topic being discussed. Encourage participants to be as honest and open as they can and support participants to really explain how they are actually feeling about a particular statement or about something another participant has expressed. Do they feel anger, fear, sadness, confusion, etc? Why?

If you feel that some of the participants' statements are challenging, find ways of probing them further. For example, if a participant is worried about the loss of his/her identity or culture as a result of an influx of foreigners into his/her country, ask him/her to think of ways of maintaining this culture whilst co-existing in a diverse environment. What is it that makes them think that their culture will get lost? How can they hold on to their culture and sense of identity, whilst respecting the cultures of others?

Depending on time and group of participants you can use only "Agree" or "Disagree."

KEY POINTS



It is challenging talking about foreignness and other cultures. Exploring difference and diversity together can promote greater understanding and tolerance.

We should embrace the diversity that different nationalities bring to a country. This does not mean losing one's own culture and identity, but finding ways to understand, respect, welcome and learn from the cultures and traditions of others.





ACTIVITY A.3. THE CULTURES GAME⁴



Objectives 	To support participants to recognise the value of difference.
Time 	45 minutes
Materials 	<p>6 differently coloured sheets of card or paper (or coloured name tags) and tape or pins to identify the different culture each person belongs to</p> <p>At least one copy of the relevant instructions for each cultural group</p>
Steps 	<p>1 Divide the group into 6 smaller groups and hand out the coloured cardboard/name-tags and the copies with instructions for each culture (see Facilitator's notes). <i>If you have a small number of participants, you may want to cut down the number of cultures and therefore the number of small groups. If you have a really large group of participants, consider splitting the group into two smaller groups who will carry out the activity in separate rooms/spaces.</i></p> <p>2 Give each group a few minutes to go over their cultural instructions. Warn participants that the groups are not allowed to tell others about their cultural characteristics!</p> <p>3 Once everyone is ready, ask all participants to walk around the room and communicate with the members of the other cultures according to the instructions they have been given.</p> <p>4 After 5 minutes, or whatever time feels appropriate, ask everyone to stop.</p> <p>5 Initiate a discussion with the whole group with some of the following questions:</p> <ul style="list-style-type: none"> - <i>What did you think about the game?</i> - <i>How did you feel towards the members of the other cultures?</i> - <i>Were you frustrated at any time? Why?</i> - <i>Was there one culture in particular which was easy to communicate with?</i> - <i>Was there one that was difficult to communicate with?</i> - <i>What methods could you have used to allow you to better understand the members of the other cultures? Remember to note those methods down.</i> <p>If the interaction/mixing exercise goes on too long, participants may get bored. If you see that the group gets the idea and are showing signs of slowing down, ask them to stop and start the discussion.</p>

⁴ Adapted from The Kit – A Manual by Youth to Combat Racism Through Education, Abboud, R., Chong, J., Gray, D., Kaderdina, R., Masongsong, M., Rahman, K., M., United Nations Association of Canada (2002).

ACTIVITY A.3.

Facilitator's
notes



Cultures: Feel free to make up your own appropriate cultural characteristics, depending on the group, but the following gives you some ideas. A printable version of the different cultures is on the accompanying CD-Rom.

Blue culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: Never use your left arm or left hand.

Greeting: Cross the arms.

Attitude towards the Yellow culture: You feel sorry for them and try to defend them.

Yellow culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: Never communicate without touching.

Greeting: Rub noses.

Attitude towards the Green culture: You feel inferior to the Greens.

Green culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: Never use your left hand or arm.

Greeting: Gently touch the other person on the shoulder.

Attitude towards the Red culture: You feel superior to them.

Red culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: Never touch others.

Greeting: Double wink.

Attitude towards the Orange culture: You think you are cleverer than them.

Orange culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: You can't look someone in the eyes.

Greeting: Shake hands with the right hand only.

Attitude towards the Purple culture: You think they are interesting and admire them.



ACTIVITY A.3.



Facilitator's notes



Purple culture:

This card tells you which culture you belong to. During the game, you must act according to your culture.

Taboo: No negativity! You are very appreciative and everything is beautiful to you!

Greeting: Shake hands with the left hand only.

Attitude towards the Blue culture: You try to avoid them.

KEY POINTS





When faced with something we don't know, we may feel afraid, threatened or frustrated because we may feel misunderstood within that specific situation. This often happens when we interact with people from different backgrounds than our own. The challenge is to find ways of communicating with each other instead of reacting negatively to each other and nourishing stereotypes and divisions.

Open-mindedness, understanding, communication and compromise all help in breaking down barriers between different cultures.



ACTIVITY A.4. CONNECTIONS...



Objectives 	<p>To explore connections participants have with each other, which cross nationality, race, cultural and gender differences.</p> <p>To get an idea of stereotypes that exist among participants.</p> <p>To identify ways to address stereotypes in order to create a sense of cohesion.</p>
Time 	<p>60 minutes</p>
Materials 	<ul style="list-style-type: none"> • Prepared statements – see Facilitator's notes • A4 Paper • Pens
Steps 	<ol style="list-style-type: none"> <li data-bbox="331 898 1495 1025"> <p>1 Ask the participants to stand up. Read out each statement (see Facilitator's notes), asking participants to move to one of the corners of the room to be with other people in the same category.</p> <li data-bbox="331 1077 1495 1249"> <p>2 After each statement, participants should spend a few minutes talking to those in the same group about their choice. Ask them to notice who is in their group each time, or give each person a sheet of paper to note the group's names each time.</p> <li data-bbox="331 1279 1495 1406"> <p>3 Once participants have talked with each other ask them to briefly talk or share about their commonality to the big group.</p> <li data-bbox="331 1435 1495 1563"> <p>4 After you have read a few statements, stop the activity and ask people to stay in their 'group' and come up with five other things that they share with the other people in this group.</p> <li data-bbox="331 1592 1495 1720"> <p>5 Discuss the groupings that emerge during the activity, and the similarities that cross cultural, racial, gender and other visible 'differences'.</p> <li data-bbox="331 1749 1495 1899"> <p>6 Ask participants to discuss types of statements and utterances often made against people of different culture, race and nationality.</p> <li data-bbox="331 1906 1495 2033"> <p>7 Ask participants to mention those statements that are true and those that are false about people of different culture, race and nationality.</p>



ACTIVITY A.4.

Steps

1-2-3

8 Ask participants to talk about personal experiences that perpetuated stereotypes against them.

9 Ask participants to talk about stereotypes they perpetuated against other people.

10 Close the activity by asking participants to complete the action chart about steps they will take to address stereotypes in their lives and in their communities.

Facilitator's notes



Adapt the following statements, or create new ones, according to the group of people you are working with.

Ask people to go and stand in the same group as people who:

1. *Were born in (the local area/overseas/elsewhere in this country).*
2. *Lived in the same place or country.*
3. *Like Kwaito music (or reggae/classica/ etc).*
4. *Support a football team.*
5. *Share the same birthday month.*
6. *Practise a religion.*
7. *Speak one language (or two languages/several languages).*
8. *Enjoy doing sport.*
9. *Belong to a local community organisation.*

If the participants need/want to explore issues around stereotyping in more detail the activity "Stereotyping" on the accompanying CD-Rom may be useful.

KEY POINTS



We all have connections with other people, regardless of country of origin, race, gender or culture. Shared interests and values can help in building relationships and solidarity between individuals or communities.

Exploring connections can help people to break down boundaries, address stereotype and recognise the value of diversity and develop empathy for others.

We all need to realise the interconnectedness that exists amongst people. In the past, countries were able to operate as single entities, but now they are tied together in a complicated web (globalisation). This same web is the reason we are all here together in the same room.





MODULE B
Gender Socialisation



MODULE B - Gender Socialisation

This module explores gender **socialisation** and the ways in which gender roles, relations and identities shape our lives, especially our health and ability to claim human rights, by:

- Defining **gender**.
- Exploring the relationship between gender and **power**.
- Describing the way gender is both fixed and fluid.
- Examining the opportunities available to promote change.
- Exploring ways to engage men.
- Identifies the need to understand both **interpersonal** and **structural** change.

KEY OBJECTIVES

Through the activities in this module we aim to:

- Build knowledge and understanding of gender issues.
- Challenge myths and perceptions related to gender.
- Reflect on gender issues and how it impacts on the relationship between men and women.
- Encourage participants to reflect upon, discuss and challenge damaging gender norms and practices.
- Reflect on how gender impacts on the **division of labour**.

DIVISION OF LABOUR

The way that different tasks and jobs are given to different persons and groups (in the household, in the community, in the workplace) according to the characteristics of the persons/groups. For example, in southern Africa there is a clear division of labour between men and women, with home care tasks given to women and technical tasks that may include fixing electrical appliances given to men.

- Encourage participants to discuss and define their own healthy gender norms and practices.
- Encourage men to speak out about the costs to women and men of rigid gender norms.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become change agents in their own lives and community. This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level, taking action to:

- Facilitate community dialogue on gender values and norms.
- Encourage men and women to examine gender norms and values that increase vulnerability.
- Build capacity of both men and women to take positive action in challenging gender stereotypes.
- Work with key community institutions such as schools, faith-based organisations, universities, workplaces, and sports clubs to support them to promote healthy, equitable gender norms.
 - Challenge damaging depictions of men and women in the media.
 - Advocate for gender equitable hiring and promotion practices in the public and private sector.

At the broader structural (societal) level, taking action to:

- Understand the legal framework and support implementation of relevant policies towards gender equality.
- Encourage governments to implement policies that promote shifts in gender norms such as paternity laws that encourage men to play a greater role in the lives of their children.
- Challenge work arrangements that separate men and women from their families.
- Launch media campaigns that promote shifts in social norms about men's and women's roles and responsibilities in society.

After the training

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Speaking about the different gender roles in the community and/or workplace.
- Committing to become a positive role model for healthy, gender equitable relationships.
- Organising a football or other sports event that promotes gender equity.
- Painting murals in community areas depicting men doing roles traditionally undertaken by women such as cooking, childcare and cleaning.
- Collecting stories from community members on their experiences of being a father, son, mother or daughter show case them in the community. You can use drama or photos or paintings to tell the different stories.



The Meaning of Gender



The different roles that men and women play in the family, community and workplace, as well as in sexual relationships, are mainly based on society's beliefs about what women and men can and should do. **Beliefs** about how men or women are may appear to be natural as we grow up. But they are, in fact, cultural. They are expressed daily in stories, attitudes, assumptions and ideas that we learn and act on.

These socially defined differences between men and women are called gender differences. The different roles that women and men play because of these gender differences are called gender roles. Girls and boys are taught that they have different roles to play in the family and in the home. For example, children are usually taught that it is girls and not boys who must help with housework like cleaning and cooking. Many children are also taught that it is the woman's role to serve the man and that it is the man's role to be head of the household.

The social roles of women and men are not only different; they are valued differently. Boys learn that men, in general, have more privilege and **status** than women. This is why it is an insult to a boy to be told that he is "acting like a girl" and why boys will not want to carry out tasks that are seen as "girl's duties". This inequality between women and men is called gender inequality.

Women AND men are negatively affected by existing gender norms. Most often we talk about gender norms in ways that suggest they are harmful to women and

BELIEFS
Firm opinions normally based on religious and cultural principles.

benefit men. This is true but it doesn't capture the whole picture. Existing gender norms also encourage men to act in ways that put their health and well-being at risk. In trying to prove that they are "real men", many men damage their health, whether by driving too fast or when drunk, refusing to seek physical and/or mental health services due to fears that they will be seen as weak, pursuing multiple sexual partners and contracting sexually transmitted infections, or refusing to back down in conflicts with other men and getting injured in the process.

Gender does not just mean women. When we talk about gender roles and gender inequalities, we are not just talking about women, we are talking about the relations between women and men. In order to make these relations more equal, it is important that we work with men as well as women.

STATUS
The position or standing of a person in a society or group in relation to others. For example, the social status of women in most societies is regarded as lower than that of men.

Gender is not fixed, but changing and changeable. Society's definitions of what women and men can and should do changes over time. Being a 'woman' or 'man' was

different for our great grandparents, our grandparents, and our parents and will be different for our children. These changes can be seen in many areas of life, in the workplace, in schools, in the home and in the law.

Changes in the job market mean that more women are now in paid work and more men are unemployed, compared to even ten years ago. Women are now the main **breadwinners** in some families. This change in economic roles also affects relationships between women and men, in the community, the family and the bedroom.

BREADWINNER
The person who is responsible for earning money to support the family.

Gender is rooted in culture, tradition, and religion. Gender norms and gender roles do not come from nature or biology, but from a society's beliefs about and definitions of the differences between the female and the male. Culture, tradition, and religion play a critical role in creating and maintaining these beliefs about and definitions of gender. Working to make gender relations more equal means working to change those aspects of culture, tradition, and religion that support gender inequalities.

Culture, tradition and religion are all important elements of the social 'glue' that binds a society together,



Gender Inequality in the Context of Migration

giving a sense of shared identity and a source of resilience. We need to recognise and build on those aspects that are a source of strength for the community, but it is also important to challenge those aspects of culture, tradition, and religion that need to change to bring about fairer gender relations. For example, religion has been a source of strength for many in dealing with problems of HIV and violence. Its message of love and compassion has been critical in struggles to change attitudes toward people living with HIV and AIDS, just as its message of equality and shared humanity has been important in the struggle for women's rights. At the same time, religious teachings have been used to maintain gender inequalities and women's disempowerment, as well as to argue against **sexual rights** and diversity, sexual education for young people, and condom use, while stigmatizing people living with HIV and AIDS. It is clear then that some aspects of culture, tradition, and religion are used to weaken the community and therefore need to be changed, though such change can be difficult, especially for those who benefit from the way things are.

Gender is an important aspect of the links between migration and HIV in southern Africa. Most migrants are men who move to urban areas and leave their wives in rural areas. But increasingly, for a variety of reasons, women are becoming migrants as well. Many of the women who migrate move from rural to urban areas to achieve economic and social independence. Lack of education, however, restricts them to the informal trading sector or domestic work, and also puts them in danger of resorting to more risky ways of making money such as sex work.

Migration does not affect only the person who moves, but also the partner, who is very often a woman, and the family left behind. Vulnerability to HIV is greatest when

there are conditions of poverty, inadequate financial resources, social instability and unequal gender relations. This may result in the woman having to resort to risky sexual practices in order to survive.

See **Annex 2** for relevant international and regional commitments and instruments relating to commitments to involve men and boys in achieving gender equality.

SEXUAL RIGHTS

"Equal relations between men and women in matters of sexual relationships and reproduction, including full respect for the integrity of the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences".
Source: Fourth World Conference on Women, Beijing, 1995.





ADDITIONAL RESOURCES

- **One Man Can toolkit:**
www.genderjustice.org.za/onemancan
- **Working with Men & Boys to Prevent Gender-Based Violence Tool Kit** was created in response to the overwhelming call for practical and training tools reported in needs assessments by the Family Violence Prevention Fund and the Centers for Disease Control and Prevention: <http://toolkit.endabuse.org/Home.html>
- **Instituto Promundo** is a NGO working in Brazil and other developing countries and works to promote equal relations between men and women and to prevent interpersonal violence. Their **Programme H Alliance** stimulates young men to question traditional "norms" associated with masculinity and promotes both discussion and reflection about the "costs" of traditional masculinity as well as the advantages of gender equitable behaviours, such as better care for their own health (materials in Portuguese and Spanish): <http://www.promundo.org.br/330>
- UNFPA's **Partnering with Men and Boys**: <http://www.unfpa.org/swp/2005/english/ch6/index.htm>
- **"One Man Can: Action Sheet - What Can Men Do To Develop Healthy Relationships With Women"**.
See accompanying CD-Rom.

ADDITIONAL ACTIVITIES

The following activities can be found on the accompanying CD-Rom. These activities can add additional perspectives around gender socialisation or can be used to address specific issues raised during the training:

"Promoting Women's Economic Rights": This activity seeks to help participants understand some of the challenges faced by rural women, recognize the gender imbalances in the composition of the village councils and other rural community structures and have an opportunity to focus on the rules that govern land allocation and cattle registration and how they increase women's vulnerability to violence, HIV and AIDS.





*"Child Care in the Daily Life of Men"*¹²: This activity discusses how men perceive child care.

"Family Concepts": This activity seeks to reflect on the current concepts of family and highlight the importance of the different caring figures in our lives. It also reflects how HIV, AIDS and migration impact on family set ups.

"Keep, Change, Stop": This activity aims to identify aspects of culture and customs relating to gender and sexuality that are important for a community to keep, change or stop in order to support healthier and happier sexual lives.

¹² Adapted from Fatherhood and Caregiving, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).

ACTIVITY B.1: GENDER VALUES CLARIFICATION¹³

Objectives 	To explore values and attitudes about gender.
Time 	45 minutes
Materials 	<ul style="list-style-type: none"> • Four signs on A4 paper ("Strongly Agree", "Strongly Disagree", "Agree," and "Disagree") • Koki pens • Tape
Steps 	<ol style="list-style-type: none"> Put up the four signs around the room before the activity begins. Leave space between them, so that a group of participants can stand near each one. Now choose five or six statements from the Facilitator's notes that you think will lead to the most discussion. Explain that this activity will give participants a general understanding of their own and each other's values and attitudes about gender. Remind the participants that we all have a right to our own opinions, and no response is right or wrong. Explain the words "values" and "gender". Read the first statement aloud. Ask participants to stand near the sign that says what they think about the statement. After they do this, ask one or two people beside each sign to explain why they are standing there, and why they feel this way about the statement. After a few participants have talked about their attitudes toward the statement, ask if anyone wants to change their mind and move to another sign. Then bring everyone back together. Read the next statement and repeat steps 4 and 5. Continue for each of the statements that you chose.

¹³ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).



ACTIVITY B.1: GENDER VALUES CLARIFICATION



Steps

1-2-3

6 After you have discussed all the statements, ask these questions about values and attitudes:
Which statements did you have strong opinions about? Which statements did you not have very strong opinions about? Why do you think this is so?

If you had a different opinion to the other participants, how did it feel to talk about it?

How do you think people's attitudes to the statements might affect the way that they deal with their male and female colleagues?

How do you think people's attitudes to these statements help or do not help to improve gender equality, reduce violence against women or reduce the spread of HIV and AIDS?

7 Use the **Action Chart** to ask participants about the actions they think are needed to change harmful attitudes. Write down their answers on the chart.

8 Ask participants how this exercise has changed the way they will behave in future.

Facilitator's notes



Choose the statements from the following list that are most likely to get participants talking. The statements marked with * (asterisk) have been good for starting discussion in the past.

- *It is easier to be a man than a woman. **
- *Women make better parents than men. **
- *A woman is more of a woman once she has had children.*
- *Sex is more important to men than to women. **
- *Women who wear short skirts are partly to blame if they are sexually harassed.*
- *A man is entitled to sex with his partner if they are in a long-term relationship. **
- *Men are naturally more violent than women.*
- *If you know that your friend is being violent to his partner or children, you should talk to him about his behaviour.*
- *If a difficult decision has to be made in a family, the man should make the final decision.*
- *Domestic violence is a private matter between the couple.*
- *If women really didn't like the violence, they would leave an abusive relationship.*
- *Men who live and work away from home should have other girlfriends.*
- *Women who live and work away from home should have other boyfriends.*
- *It is better to have a son than a daughter.*
- *Men are more productive than women.*
- *Men should be breadwinners.*
- *Women want to be beaten, so they deliberately provoke their partners.*

¹⁶ Adapted from The Oxfam Gender Training Manual, Mwau, A., Seed, J. and Williams, S., Oxfam (Oxford: 1994).

ACTIVITY B.1: GENDER VALUES CLARIFICATION

Facilitator's notes



If all the participants agree about any of the statements, express an opinion that is different from theirs to get the discussion going.

If some participants don't know whether they agree or disagree and don't want to stand beside any of the four signs, ask them to say more about their reactions to the statement. Then encourage them to choose a sign to stand next to. If they still don't want to, let these participants stand in the middle of the room as a "don't know" group. Depending on time and group of participants, you can use only "Agree or Disagree".

KEY POINTS



People may be unaware of their values around gender, but their unconscious values will always influence the way they act in certain situations.


Exploring our attitudes towards gender may help us make different choices about our behaviour towards women, in our relationships with women and towards gender equality.





ACTIVITY B.2: GENDER FISHBOWL¹⁴



Objectives 	<p>To enable participants to speak out about their experience of gender issues and be listened to.</p> <p>To develop a better understanding of and empathy for the experience of other genders.</p>
Time 	<p>60 minutes</p>
Materials 	<p>None</p>
Steps 	<ol style="list-style-type: none"> 1 . Divide the participants into a male and a female group. 2 . Ask the women to sit in a circle in the middle of the room and the men to sit around the outside of the circle facing in. 3 . Start a discussion with the women by asking the questions listed in the Facilitator's notes. The men must observe and listen to what is being said. They are not allowed to speak out. 4 . Stop the discussion when the women have talked for 30 minutes. 5 . Ask the men to switch places with the women and lead a discussion with the men while the women listen. Refer to the Facilitator's notes for the questions for the men. 6 . Discuss the activity.

¹⁴ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).

ACTIVITY B.2: GENDER FISHBOWL

Facilitator's
notes



Questions for Women

What do you think is the most difficult thing about being a woman in your home country and/or the county where you live now?

What do you think men need to understand better about women?

What do you find hard to understand about men?

How can men support women?

How can women support men?

Name something that you never want to hear again about women.

What rights are hardest for women to achieve in your home country and where you live now?

What do you remember about growing up as a girl in your home country?

What did you like about being a girl? What did you not like?

What was difficult about being a teenage girl?

Who are some of the positive male influences in your life? Why are they positive?

Who are some of the positive female influences in your life? Why are they positive?

Questions for Men

What do you think is the most difficult thing about being a man in your home country and where you live now?

What do you think women need to understand better about men?

What do you find difficult to understand about women?

How can men support women?

How can women support men to lead healthier lives?

What do you remember about growing up as a boy in your home country?

What did you like about being a boy? What did you not like?

What was difficult about being a teenage boy?

Who are some of the positive male influences in your life? Why are they positive?

Who are some of the positive female influences in your life? Why are they positive?

This activity works best with a mixed-gender group of participants, but you can run it with an all-male group by dividing the participants into two smaller groups. Ask the first group to answer the first three questions from the list of questions for men. You might also ask a fourth question: "What do you think is the most difficult part about being a woman in your country?" Then ask the second group to answer the final four questions from the list of questions for men.

Depending on the group consider intergenerational groups, younger group alone with older group listening and vice versa.

If the group is from different countries, ask them to think about circumstances in their country of origin as well as where they are currently living. Discuss the differences.

KEY
POINTS



Men and women seldom have the opportunity to hear each other talk about how gender affects them. This activity is powerful precisely because it creates a space for men and women to really hear each other. Encourage the participants to identify other ways in which they can explore these issues with men and women in their lives.



ACTIVITY B.3.1: GENDER ROLES

(THE 24 HOUR DAY)¹⁵ – PART 1

Objectives 	<p>To name the different roles of men and women in society.</p> <p>To understand the different values associated with these roles.¹⁶</p>
Time 	<p>30 minutes</p>
Materials 	<p>Handout B.3. The 24-hour day – one per participant</p>
Steps 	<ol style="list-style-type: none"> 1. Give all participants Handout B.3. The 24-hour day. Make groups of four to six people, based on their ethnicity, first language or where their families live. Ask each group to choose a community that they know well. Make sure that each group chooses a different community. 2. Ask each group to imagine a typical day in the lives of a wife and husband from the community they have chosen. Use the framework provided in the handout to ask the group to list the tasks performed by women and men in a household over 24 hours on a piece of flip chart paper. Tell the participants to fill in whatever the person is doing at the time indicated. In the column next to it, they must say if this is paid or unpaid work. 3. After about 10 minutes, ask each group to stick their pieces of paper on the wall. Ask participants to study the other groups' work, looking for what is the same and what is different from theirs. Ask participants to say what they are learning about how men and women spend their days. 4. Use the following questions to lead a discussion about women's and men's roles and their status in society: <i>What seem to be women's roles and men's roles?</i> <i>How are these roles different?</i> <i>Why do women's roles often become unpaid work? How does this affect women and their status in society?</i> <i>Why do men's roles mostly become paid work? How does this affect men and their status in society?</i>

¹⁵ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).

¹⁶ Adapted from The Oxfam Gender Training Manual, Mwau, A., Seed, J. and Williams, S., Oxfam (Oxford: 1994).



ACTIVITY B.3.1: GENDER ROLES

(THE 24 HOUR DAY) – PART 1

<p>Steps</p> <p>1-2-3</p>	<p>5. Discuss what actions we need to take to make women's and men's roles more equal. Write these actions on the Action Chart.</p> <p>6. Summarize this discussion. Be sure to include all the points in the key points section.</p>
<p>Facilitator's notes</p> 	<p>The "24-hour day" activity is a good way to help people to understand that women and men are expected to play different roles in the family, community and workplace because of society's ideas about the differences between men and women. Remember that these gender roles may also be affected by class, ethnic and other differences.</p>
<p>KEY POINTS</p> 	<ul style="list-style-type: none"> • Women and men have different roles. • Women and men do different things during the day. • Women usually work longer hours. • Men usually have more leisure time. • Women have more varied tasks, sometimes doing more than one thing at a time. • A woman's role is usually that of caregiver, and mother. A man's role is usually that of provider (breadwinner), protector and authority/head of the household. • Women's roles carry a lower status and are often unpaid. • Women's work in the house is not seen as work. • When women work outside the house, this is generally an extension of the work they do in the house, and this work is usually paid less than men's work. Even when women work outside the home, they also do household work. • Men's work is usually outside the home, is usually paid and is seen to be work. • More of women's work is unpaid compared to men's work. • Gender roles are not only different, they are also unequal. • Men's roles (breadwinner, authority figure, protector) carry more status and give men more power and privilege in society.



ACTIVITY B.3.2: GENDER ROLES

(THE 24 HOUR DAY)¹⁷ – PART 2

Objectives 	To look further at how gender roles, class and difference intersect with regard to men's and women's roles in migrant labour contexts.
Time 	60 minutes
Materials 	<ul style="list-style-type: none"> • Flip Chart paper • Koki pens
Steps 	<p>1 . Ask participants to repeat the previous 24 hour day exercise, this time comparing 24 hours in the day of a male farm supervisor and a foreign female farm worker (what time they wake up, what activities they do, how much time for self vs. others). Feel free to change the role-players so that they are relevant to your setting.</p> <p><i>For example: A local fisherman and a young migrant woman working in a fish-processing factory. Or a female migrant garment worker and male factory owner.</i></p> <p>2 . Reconvene the group, and lead a discussion based on the comparison of the male farm supervisor and female farm worker's day.</p> <p><i>How does their workload differ? Why?</i></p> <p><i>What particular challenges do each face during the day? How do they differ?</i></p> <p><i>Does the farm supervisor assist with the cooking and cleaning?</i></p> <p><i>How much time does he spend with his children? Who looks after them whilst he is working?</i></p> <p><i>Does their time differ in terms of paid and unpaid work?</i></p> <p><i>How much spare time does the farm worker have?</i></p> <p><i>Who looks after her children?</i></p> <p><i>Do their salaries differ?</i></p> <p><i>What are the differences between how much manual labour the farm owner and farm worker carry out? Why?</i></p> <p><i>What are the different health consequences of the farm worker's job and the farm supervisor's job? Is this fair or natural?</i></p> <p><i>What activities does the farm worker do on account of her gender? What about the farm supervisor?</i></p> <p><i>Which role carries a higher status? Who is more powerful?</i></p> <p><i>Can you imagine a female farm supervisor? Why/why not?</i></p>

¹⁷ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).

ACTIVITY B.3.2: GENDER ROLES

(THE 24 HOUR DAY) – PART 2

Facilitator's
notes



A printable version of **Handout B.3**. The 24-hour day is on the accompanying CD-Rom.

**KEY
POINTS**



Like the first 24-hour day activity, this particular activity will help to explore the idea of gender roles. It should also get participants to think in more detail about how these gender roles are affected by migrant status.









HANDOUT B.3: THE 24 HOUR DAY

MAN'S ACTIVITY		PAID	WOMAN'S ACTIVITY		PAID
		yes/no			yes/no
1 am			1 am		
2 am			2 am		
3 am			3 am		
4 am			4 am		
5 am			5 am		
6 am			6 am		
7 am			7 am		
8 am			8 am		
9 am			9 am		
10 am			10 am		
11 am			11 am		
12 noon			12 noon		
1 pm			1 pm		
2 pm			2 pm		
3 pm			3 pm		
4 pm			4 pm		
5 pm			5 pm		
6 pm			6 pm		
7 pm			7 pm		
8 pm			8 pm		
9 pm			9 pm		
10 pm			10 pm		
11 pm			11 pm		
12 midnight			12 midnight		
Man - Total hrs worked		Total day's earnings	Woman - Total hrs worked		Total day's earnings

ACTIVITY B.4: ACT LIKE A MAN, ACT LIKE A WOMAN¹⁸



Objectives 	<p>To recognize that it can be difficult for both men and women to fulfil the gender roles that are present in society.</p> <p>To examine how messages about gender can affect human behaviour, and influence relationships between men and women.</p>
Time 	<p>2 hours</p>
Materials 	<ul style="list-style-type: none"> • Flip Chart paper • Koki pens • Tape
Steps 	<ol style="list-style-type: none"> 1. Ask the participants if they have ever been told to “act like a man” or “act like a woman” based on their gender. Ask them to share some experiences in which someone has said this or something similar to them. Why did the individual say this? How did it make the participant feel? 2. Tell the participants that we are going to look more closely at these two phrases. By looking at them, we can begin to see how society can make it very difficult to be either male or female. 3. In large letters, print on a piece of flip chart paper the phrase “Act Like a Man”. 4. Ask the participants to share their ideas about what this means. These are society’s expectations of who men should be, how men should act, and what men should feel and say. Draw a box on the paper, and write the meanings of “act like a man” inside this box. Some responses might include: <i>Be tough, Do not cry, Yell at people, Show no emotions, Take care of other people, Do not back down, Be the boss, Earn money, Have more than one girlfriend/spouse, or Travel to find work.</i>

¹⁸ Adapted from Helping Teens Stop Violence: A Practical Guide for Counsellors, Educators, and Parents, Creighton A. and Kivel P. (Alameda, USA, Hunter House: 1992)



ACTIVITY B.4: ACT LIKE A MAN, ACT LIKE A WOMAN



Steps

1-2-3

5. Once you have brainstormed your list, initiate a discussion by asking the following questions:

How does it make the participants feel to look at this list of social expectations?

Can it be limiting for a man to be expected to behave in this manner? Why?

Which emotions are men not allowed to express?

How can "acting like a man" affect a man's relationship with his partner and children?

How can social norms and expectations to "act like a man" have a negative impact on a man's sexual and reproductive health?

Can men actually live outside the box?

Is it possible for men to challenge and change existing gender roles?

6. Now in large letters, print on a piece of flip chart paper the phrase "Act Like a Woman". Ask the participants to share their ideas about what this means. These are society's expectations of who women should be, how women should act, and what women should feel and say. Draw a box on the piece of paper, and write the meanings of "act like a woman" inside this box.

Some responses may include: *Be passive, Be the caretaker, Act sexy, but not too sexy, Be smart, but not too smart, Be quiet, Listen to others, Be the homemaker, Be faithful, or Be submissive.*

7. Once you have brainstormed your list, initiate a discussion by asking the following questions:

Can it be limiting for a woman to be expected to behave in this manner? Why? What emotions are women not allowed to express?

How can "acting like a woman" affect a woman's relationship with her partner and children?

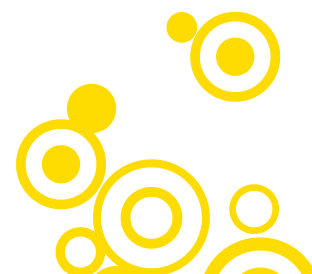
How can social norms and expectations to "act like a woman" have a negative impact on a woman's sexual and reproductive health?

How can social norms and expectations to "act like woman" have a negative impact on a woman's economic independence? (given that it is not expected of a woman to leave home and seek employment or other economic opportunities)

Can women actually live outside the box?

Is it possible for women to challenge and change existing gender roles? Could you see this community having a female leader?

8. Ask participants if they know men and women who defy these social stereotypes. What do they do differently?





ACTIVITY B.4: ACT LIKE A MAN, ACT LIKE A WOMAN

Steps

1-2-3

9 How have they been able to challenge and redefine gender roles?

10 Ask if any of the participants would like to share a story of a time they defied social pressure and rigid stereotypes and acted outside of the “box”. What allowed them to do this? How do they feel about it?

11 Close the activity by summarizing some of the discussion and sharing any final thoughts. A final comment and questions could be as follows:

The roles of men and women are changing in southern African societies. It has slowly become less difficult to step outside of the box. Still, it can be hard for men and women to live outside of these boxes.

- *What would make it easier for men and women to live outside of the boxes?*
- *How can you support this change?*
- *How can government support this change?*
- *How can community leaders support this change?*
- *How can workplaces support this change?*

Facilitator's notes



This activity is a good way to understand the idea of gender norms. But remember that these gender norms may also be affected by class, culture, ethnic and other differences.

KEY POINTS



The messages that men get about “acting like a man” include:

- **Be tough and do not cry.**
- **Be the breadwinner.**
- **Stay in control and do not back down.**
- **Have sex when you want it.**
- **Get sexual pleasure from women.**

These messages and gender rules about “acting like a man” have the following effects in men’s lives:

- **Men are valued more than women.**
- **Men are afraid to be vulnerable and to show their feelings.**
- **Men need constantly to prove that they are real men.**
- **Men use sex to prove that they are real men.**
- **Men use violence to prove that they are real men.**



ACTIVITY B.4: ACT LIKE A MAN, ACT LIKE A WOMAN



KEY POINTS



The messages that women get about “acting like a woman” include:

- Be passive and quiet.
- Be the caretaker and homemaker.
- Act sexy, but not too sexy.
- Be smart, but not too smart.
- Follow men’s lead.
- Keep your man, provide him with sexual pleasure.
- Don’t complain.

These messages and gender rules about “acting like a woman” have the following **effects in women’s lives**:

- Women often lack self-confidence.
- Women are valued first as mothers and not as people.
- Women depend on their partners.
- Women have less control than men over their sexual lives.
- Women are highly vulnerable to HIV and AIDS and to violence.

Acting outside of the box

There can be serious consequences for both women and men if they try to act outside of their box. Ridicule, threats and violence are used to keep women and men in their boxes.



ACTIVITY B.5: OUR PARENTS, OURSELVES, OUR CHILDREN



Objectives 	<p>To reflect on the fluidity of gender norms as seen in changes, expectations and opportunities for men and women from one generation to the next.</p> <p>To identify how changes in gender norms occur.</p> <p>To identify what has already changed and what we still want to change.</p> <p>To recognise that we are part of making these changes happen.</p>
Time 	<p>45 minutes</p>
Materials 	<ul style="list-style-type: none"> • Prepared Flip chart paper (see Facilitator's notes) • Lots of coloured koki pens
Steps 	<ol style="list-style-type: none"> <li data-bbox="343 996 1503 1153">1 Tell participants that they are going to be doing a drawing exercise. <li data-bbox="343 1153 1503 1310">2 Divide participants into 3 groups. Give each group pens, flipchart paper and make sure they have space to draw comfortably. Ask one person in each group to serve as the report-back spokesperson at the end of the exercise. <li data-bbox="343 1310 1503 1467">3 Tell participants that you want them to capture changes in gender roles over time by drawing the world as it (i) was lived by our parent, (ii) is lived by us, and (iii) will be lived by our children. <li data-bbox="343 1467 1503 1624">4 Explain that we will start by exploring the world lived by women over time and will then look at men's experiences. <li data-bbox="343 1624 1503 1780">5 Emphasise that we want to capture the differences, and the drawing of our children's world should be full of our best hopes and dreams of a gender just world. <li data-bbox="343 1780 1503 1982">6 Give participants 30 minutes to create drawings. You can either ask each group to take one of the generations (i.e. Group 1 – mothers/fathers; Group 2 – us; Group 3 – daughters/sons) or you can ask each group to capture all 3 generations, by creating 3 contrasting drawings. While the latter option may take more time, it is more likely to highlight the differences you are seeking to capture. <li data-bbox="343 1982 1503 2105">7 Review the drawings with the whole group. Ask each group's spokesperson to give a three minute explanation of the drawing.



ACTIVITY B.5: OUR PARENTS, OURSELVES, OUR CHILDREN



Steps

1-2-3

8

Lead a discussion and try to explore some of the following questions with the group:

How have gender roles changed over the generations?

What brought these changes about?

How did you or members of your family contribute to these changes?

Which changes have been positive and which, if any, negative?

What traditions were important to our parents and will remain important to our children?

What do men and women need to do now to ensure that our children's world is a gender-equal world?

What types of support might they need?

What changes need to be made at the institutional level to ensure that our children have a better chance of living in a gender-just world?

Facilitator's notes



Advance Preparation: Prepare a piece of flip chart paper by dividing it into 3 categories with these headings:

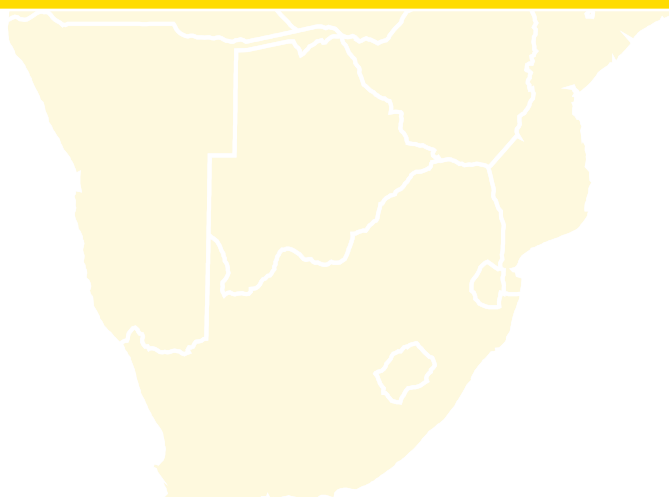
- "What was the world of our mothers like?" Or "What was the world of our fathers like?"
- "What is our world as women like?" Or "What is our world as men like?"
- "What is our dream/vision of what our daughters' world could be like?" Or "What is our dream/vision of what our sons' world could be like?"

For this activity, it is better to ask participants to think about changes in men's and women's lives separately rather than just asking, "How have gender roles changed for our parents, ourselves and our children?" Asking participants to think about the specific changes experienced by men or women encourages more detailed and more nuanced discussion. If you are working with a mixed gender group, it might be interesting to split groups by gender to see how men and women's views of the changes over the generations differ/are similar. Alternatively, if your participants are all men, consider adapting the activity to 'Our Fathers, Our Sons, Ourselves'. Ask the participants to look at the way male gender roles may have changed over the generations and identify what still needs to be changed for a gender-equal world.

KEY POINTS







Point out how much has changed in terms of gender roles in 3 generations and suggest that this means that gender roles can continue to change. This activity is important because it forces participants to reflect on how quickly gender roles and expectations do actually change over time.



ACTIVITY B.6: THINKING ABOUT FATHERHOOD¹⁹



Objectives 	<p>To allow participants to understand feelings about the role of a father.</p> <p>To help participants to identify the influence their father had on their lives.</p>
Time 	<p>60 minutes</p>
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens • Prepared Flip chart paper with questions for “Ourselves and Our Fathers” (see Facilitator’s notes) • Sheets of A4 paper (at least one sheet for each participant)
Steps 	<ol style="list-style-type: none"> 1. On a wall, stick up the prepared flip chart paper. 2. Ask participants to take a few minutes to answer these questions by themselves. Explain that they can make some notes on these answers if they wish. 3. Ask participants to find two other partners to form groups of three. 4. Explain that each person has six minutes to tell their two partners about the answers to the questions. Ask the partners to just listen and not interrupt. Tell the participants that you will keep time strictly so that everyone has the same time to speak. Explain that you will clap your hands when it is time for the next person to share their answers. 5. When the threesomes have completed, bring everyone back together. 6. Lead a general discussion using the following questions: <i>If you are a father, what is it like? What is good about being a father? What is difficult? What support do you get? What support do you want? If you are not a father yet, what do you think it would be like? What would be good about being a father? What might be difficult? What support do you think you would get? What support do you think you would want? What do men need to become better fathers? What can fathers do to promote gender equality?</i>

¹⁹ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.



ACTIVITY B.6: THINKING ABOUT FATHERHOOD



Facilitator's notes



Advance Preparation: Before the activity, prepare a sheet of flip chart paper with the following questions:

What is your age?

What are the names and ages of your children?

Who raised you?

How many children were in the family?

How would you describe yourself as a boy?

What kind of parent was your father?

What did you learn from your father about being a parent?

How would you like to be a different kind of parent from your father?

This activity works best with men who are fathers. However, you can do the activity with men who do not have children. You simply need to change the questions during the discussion. You can ask about the type of father that they would want to be. The questions that help participants think about their relationship with their own father are useful, whether they are parents or not.

If you are working with a mixed-gender group, it will be better to work in same-gender small groups. This will help to create more safety for participants to be open about their experience and feelings. It will also help you to look more closely at the experience of women and their relationships with their fathers.

This can be a difficult activity because it involves sharing a lot of personal information. As a facilitator explain that everyone has the right to say as little or as much as they want to share. No one is required to share his story and everyone has the right to pass.

This activity asks participants to think about their relationships with other men, particularly their own fathers. This helps the group to talk about the meaning of fatherhood. Many men you will be working with have not had close relationships with their own fathers. This may make it difficult for them to be loving fathers to their children, even though they want to be.

At the same time, do not assume that all participants have had poor relationships with their fathers. If any men begin to express a lot of negative feelings about their fathers or other adults during this activity, remind them that they are survivors. The fact that they have made it this far is a testimony to their strength and resilience.

KEY POINTS







The ideas that we have about being a father come partly from our experience. This includes: (a) how we were raised, (b) our relationships with other men, and (c) the things that have happened to us in our lives. Ideas about fatherhood are also promoted through policies, the media and traditional beliefs. In general, ideas about fatherhood and men's own experiences do not help men to be better fathers. Men are not encouraged or challenged to learn parenting skills, form close relationships with their children or share parenting responsibilities equally with their wives.

Ideas about fatherhood support and are supported by patriarchy. Men's political, economic and social power makes southern African societies male dominated. Male domination is called "patriarchy" – a society in which power comes from the father. Ideas about male supremacy and fatherhood are closely linked. Men can promote gender equality by being a different kind of father in their own families.



ACTIVITY B.7: FATHERHOOD CASE STUDIES

Objectives 	<p>To allow participants to reflect on their own experiences of fatherhood and relate their experiences to those of other men and women.</p> <p>To enable participants to be able to make decisions about the types of influence they want to have on their children's lives.</p> <p>To see how traditions can be manipulated to control and abuse others in relationships.</p>
Time 	<p>60 minutes</p>
Materials 	<ul style="list-style-type: none"> • Flip Chart paper • Koki pens • DVD player and television or a computer with a data projector and speakers • "One Man Can" DVD- Andre's, Tapiwa's or James' digital stories (if equipment is not available you can read out the case studies – see Facilitator's notes)
Steps 	<p>1 Allow time for participants to view Andre's, Tapiwa's or James' stories about their relationship with their fathers.</p> <p>2 Once participants have had time to reflect on the stories, lead a discussion.</p> <p>Discussion Questions for Andre's Story</p> <p><i>What were the key messages in Andre's story?</i></p> <p><i>How did this story make you feel? Did anyone feel sad? Did anyone feel angry?</i></p> <p><i>Why do we act like our parents?</i></p> <p><i>What are the good qualities of a parent?</i></p> <p><i>If you are a parent, what can you do to be a better parent?</i></p> <p><i>If you are not a parent, what suggestions do you have for parents?</i></p>

PATRIARCHY

A social system in which men are seen as being superior to women and in which men have more social, economic and political power than women.



ACTIVITY B.7: FATHERHOOD CASE STUDIES



Steps

1-2-3

Discussion Questions for Tapiwa's story

Exploring the meaning of culture. As a child, Tapiwa saw his father use culture as a rationale for perpetuating gender inequality and violence. Ask questions that examine the relationship between culture and gender.

How do you think Tapiwa felt about the violence in his family?

What did Tapiwa's father say to excuse his abusive behaviour towards Tapiwa's mother?

What do you think Tapiwa and his dad meant when they used the term "culture"? How is culture defined in your family or community?

Do people in your family or community use culture as a way of defending gender discrimination and violence?

Why was Tapiwa afraid to challenge this use of culture by his father?

How do you think he can help change men's thinking about their roles in life as husbands, fathers, and community members?

The story ends with Tapiwa sharing the news that his father apologized to him and his mother for his past violence. Talk about what gives men the courage to change.

In what ways can traditional culture be used to support healthy concepts of masculinity?

Discussion Questions for James' story

Looking at men's abuse of women and children, James talks in the first part of his story about his father's "bullying" behaviour. Explore this topic, keeping in mind the role that gender plays.

What do you think James' father meant, when he told James, "you are just like your mother"?

Why would it be considered an insult, for a boy to be compared to his mother?

What does this say about James' father's attitudes about women?

Why do you think it took James twelve years to realize that the way his father was treating him was wrong?

Consider the impact on young men of witnessing domestic violence. Explore the way that James experienced abuse between his parents.

What event led James to stand up against his father's abuse of his mother?

How did things change, if at all, after James told his father to stop his cruelty?

Why did James come home, after living for a while with relatives?

What impact do you think witnessing domestic violence had on James, as a child and as an adult?

How can men be encouraged to adopt healthy forms of masculinity and healthy parenting styles?

What should healthy masculinity and healthy parenting look like, for men?



ACTIVITY B.7: FATHERHOOD CASE STUDIES

Steps

1-2-3

3 Where equipment is not available, use the narratives (see **Facilitator's notes**) and distribute these to participants so that you can read them together.

4 Allow time for participants to read the stories and lead a discussion using the questions above.

5 Note important points that participants bring up. These are likely to include the pain caused by growing up with absent, abusive or alcoholic fathers, the longing for closer relationships with fathers, the desire to be better fathers themselves, and the confusion caused by acting in some of the same ways that their fathers did even though workshop participants might have promised themselves they would be different.

6 Help participants complete an action chart about steps they need to take to become better fathers.

Facilitator's notes



A printable version of the case studies is available on the accompanying CD-Rom.

Andre's Story – "The Choice"

"I've been married for about 3 years now. My wife is expecting our first child. I never thought that I would ever get married. I didn't want to be like my dad. There are those moments when I see my dad in the way I sit when I am driving, or sometimes act out with my wife.

My mom always used to say – you are just like your dad. She didn't mean it in a good way. I remember when I was about 6 years-old, being with my dad at a shebeen; watching and waiting for the bottle to empty so we could go home, and then having to lie to my mom about where we were. And later, there was a time as a teenager, sitting in the back of the car, watching my mom and dad fighting over his drunken driving. After 32 years of having to witness and break up fights, I moved out.

I finally felt like I had had enough. I couldn't be responsible for the choices my parents made. A year later my mom called me over and broke the news that they were getting a divorce. It was hard for me to accept it at first, but I realised that I had made my choice, and it was time for her to make hers. A month before I got married, my parents' divorce was finalized.

Don't get me wrong, my dad wasn't all bad. And now that I am married and going to be a father myself, I am learning to discard the crap my parent's marriage and use the good for my own. I guess that is something we all need to do.

It's not how you start the race, but how you choose to end it."



ACTIVITY B.7: FATHERHOOD CASE STUDIES



Facilitator's notes



Tapiwa's Story – "Changing Times"

Tapiwa grew up in Zimbabwe, watching his father manipulate and control his mother. Wondering why women and men are not equals, he joined a gender club while in secondary school and eventually became an activist. He is happy that over the years his father has changed and like him, now speaks out against gender violence and discrimination.

Story:

"My father used to beat my mother and call her names. He used culture as an excuse to deny her, to deny us our rights to peace. He would say, 'Women and children should respect the head of this family, and no one can rule besides me in this house. It's my culture.' I had to ask myself what kind of culture that could be. I was young, I couldn't do anything, but I wanted to fight him back.

When I was bigger, I went to a boarding school. I used to worry about my mom when I was away. I wondered what my dad was doing to her and what would happen if I went home for the holidays. I couldn't concentrate, with all the wondering. I joined a gender and HIV/AIDS club that had more girl members than boys. I learned the many misconceptions my schoolmates had about gender. For the boys, gender was about women's issues; it had nothing to do with being a man. This disturbed me, because I knew from my own experience how gender-based violence affects both women and men.

In my work today with Padare Men's Forum on Gender, we challenge young men's ideas about what a man should be like. When they say, 'Men should take risks, because that's what being a man is about,' we point out that certain kinds of risks are not about being brave, they are about getting HIV. As a man, I want to change the thinking of other men and young boys about the roles they play in life as husbands, fathers, and members of communities. I have vowed myself not to use violence in my life.

A few years ago, I was sitting with my dad in the garden, and we started talking about a domestic violence murder that had happened recently. Right away, he brought up the times he had been violent. He apologized for what he had done to us and to my mom. I could see that he is a different person than he was. He respects my mother and us as his children. My father's story tells me that our strength as men doesn't have to be for hurting. Instead, it can be for finding the courage to change."

James' Story — (Untitled)

"I was about 12 years old when I found out that my father was bullying me. Before that, I just thought it was normal. He used to wake me up early in the morning when I had committed no offence. He would say, 'You are just like your mother.'

When we moved from an informal settlement to a formal settlement, my mother decided to run a small business of selling sheep heads and brewing umqombhoti, African beer, to sell. I was always beside her, giving assistance. When I passed Standard Three, my father said, 'Now you don't have to go back to school again.' Fortunately, my mother kept me in school. She knew it was important.



ACTIVITY B.7: FATHERHOOD CASE STUDIES

Facilitator's notes



One afternoon, my father threatened my mother physically with a spear. An oncoming car saved her, because he could not cross the road. That was the day I stood up against him. I said, 'If you touch my mother again, I will fight you.' He stopped abusing us, but just for a little while. Things were still rough. Eventually I left home and stayed with relatives close to my school. But I came back because I couldn't stop thinking about my father abusing my mother. I must tell you, cruelty was with him and is still with him, to this day...

Just two years ago, I went to visit him in his village in the Eastern Cape. The sun was already hot at nine a.m. on the day I was to return to Cape Town. I sent for my niece's child, because she had promised to help carry my luggage to the hiking spot. My father reacted angrily. 'You don't have a right to send my children. I'll beat you.' I started asking him, 'Why are you always aggressive? The villagers isolate you because of your aggression.' He kept quiet and went outside. I then left for Cape Town.

My father was a bully when I was 12, and he is a bully now. It makes me sad to think he'll die that way. When will our fathers see that times change and they should also change?"

KEY POINTS



Masculinity is undergoing a profound transformation in southern Africa. James' story about his abusive father reveals the necessity for new approaches to what it means "to be a man" and shows the tragic consequences of those who are unable to adapt to changing times. The story, which highlights the subtleties of men's control tactics, can be used to foster discussion about how challenging behaviour change can be.

We have a choice in life; we do not need to be responsible nor repeat our parents' mistakes. Parents also have choices to live their own lives; they can be trapped in unhealthy marriages and at times, divorce is the best solution.

Most parents have good qualities; we need to build on them.

Shifts in attitudes about women can be seen throughout Sub-Saharan Africa. Tapiwa's story is a testament to men's ability to acknowledge the impact of their prior violence and adopt new ways of being.

As you discuss the story, be aware that viewers may hold strong opinions, especially about the meaning and importance of "traditional culture." Talk about the need to both preserve culture and challenge those who use it as a justification for violent, controlling behaviour.

Be sure to encourage your group to draw on their own experiences when talking about how culture influences gender norms and expectations.

MASCULINITY

Social and/or physical qualities and attributes associated in a given time and place with being a man or being "manly".



MODULE C
Gender-based Violence



MODULE C - Gender-based Violence

Violence is a tool of **oppression** used to claim and reinforce power and control. **Gender-based violence** (GBV) reflects and reinforces inequities between men and women and compromises the health, dignity, security and autonomy of its victims. It encompasses a wide range of human rights violations, including sexual abuse of children, **rape**, domestic violence, sexual assault and harassment, trafficking of women and girls and several harmful traditional practices. Any one of these abuses can leave deep psychological scars, damage the health of women and girls in general, including their reproductive and **sexual health**, and in some instances, results in death. (Source: UNFPA). Most people who use violence are men, and most victims of violence are women although there are women that are perpetrators and men that are victims. But men's interpersonal violence takes place in a larger system of male violence. The purpose of this system is to maintain the current gender order, in which men have power over women.

This module provides an understanding of different forms of gender-based violence with particular focus on:

- The impact of gender-based violence on men, women and children.
- The gendered nature and purpose of men's violence against women.
- The role of violence in maintaining inequality.
- Skills and tools for stopping one's own violence.
- Strategies for engaging men to respond to violence.

KEY OBJECTIVES

Through the activities in this module we aim to:

- Educate participants about the difference between sexual consent and **coercion**.
- Challenge the notion that "no" ever means "yes".
- Remind participants that rape is a criminal offence.
- Encourage participants, particularly men, to take a stand against gender-based violence and for gender equality in their personal lives and in their communities.
- Support participants, particularly men, to challenge the notion that domestic and sexual violence are personal matters and support them to act against abuse whenever they see it or know of it.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become change agents in their own lives and community. This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level, taking action to:

- Encourage participants to support and hold accountable their government officials and service providers, especially the police and health service providers, to enforce laws relating to violence against women.
- Encourage participants to educate and involve key stakeholders such as local political leaders, religious and traditional leaders, teachers, etc.

COERCION

To force to act or think in a certain way by use of violence, pressure, threats, or intimidation.

- Mobilise community action against gender-based violence.
- Facilitate access to support services and programmes for survivors of gender-based violence and other kinds of violence.

At the broader structural (societal) level, taking action to:

- Demand that laws related to violence against women are fully enforced.
- Pressure for implementation of SADC wide commitments to prevent gender based violence. (See **Annex 2** for relevant international and regional commitments and instruments.)

After the training

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Lobbying for safe transport options for girls and women.
- Lobbying for street lights or security measures that can be taken in areas where people may be at risk.
- Speaking out about gender based violence in the community.
- Holding a community meeting to discuss the issue and to agree on action that can be taken.
- Promoting good role models by publicly acknowledging those that actively address gender based violence.



Understanding the Range of Violence



People usually think of violence in terms of physical violence, but there are other forms of violence that are used to harm people and maintain power over them. Violence can also be psychological, sexual, emotional, or material (in terms of **economic violence** such as restricting access to financial or other resources with the purpose of controlling or subjugating a person). It involves not only direct force, but also threats, intimidation and coercion. Violence does not have to be direct to be effective. The threat of violence can have a devastating impact on lives and the choices and decisions people make.

ECONOMIC VIOLENCE
In relation to gender-based violence, refers to restricting access to financial or other resources with the purpose of controlling or subjugating a person.

Violence is an everyday experience for many people, especially women. Much violence is not even defined as a problem, but rather is accepted as a normal part of life. Street-level sexual harassment of women, such as whistling in a suggestive manner, is one form of everyday violence that is not only widespread but also widely ignored. Everyday violence also includes the violence in relationships, especially those

between young women and much older men. The power inequalities of both gender and age, and frequently economic status, within such relationships make violence almost an inherent part of them.

The reality and extent of violence is often minimized or denied. Some people may blame “bad” men for the violence, but say that it has nothing to do with them; others may blame women or argue that violence is justified. These attitudes are dangerous to women because they diminish the seriousness and pervasiveness of violence and allow it to continue. But there is no excuse for violence.

Impact of Violence



Impact of Violence

Although women are the main victims of male violence, and their lives are damaged and destroyed in many ways, men can also be targets of male violence, especially those who do not stick to the “gender rules”. For instance men who have sex with men are often targets of male violence. In reality, gender-based violence victimizes all men as it can limit a man’s ability to express all of himself and thus limits his potential for healthy relationships with women, children and other men. Children, too, are impacted by the physical, emotional and sexual violence of men in their home.



Dealing with Gender-Based Violence



It is important to stress the value of a human rights-based approach when dealing with gender-based violence and to be specific about the rights of men, women, and children in relation to gender-based violence. These rights include:

- The right to sex free from coercion or violence.
- The right to life.
- The right to dignity.
- The right to move and associate freely.

- The right to decide where, when and under what conditions to have sex.
- The right to decide on the number and spacing of children.

A key principle of a human rights-based approach is the indivisibility of rights which means that be fully human we need to have all of our rights recognized at all times. GBV is against the law, and anyone who witnesses violence has an obligation to do something about it.



Moving Men Into Action



Men are often socialised into violence and commit the vast majority of violent acts. Men learn violence as a result of experiencing it in childhood or as adults. But violence is a learned behaviour that can be unlearned. Men can choose not to behave violently toward women, children, and other men.

Acknowledging that men choose to use violence, rather than dismissing violence as a loss of control, is the first step in holding men accountable for their decisions and actions. This

principle of accountability is central to any programme focussed on stopping gender-based violence. Choosing not to use violence and to live in equal relationships with women will involve men in breaking the gender rules. They need support as well as the pressure of accountability to do this. Support from women and other men can help men break the gender rules and end gender-based violence.

Men have many roles to play in stopping the violence. In their

workplace men can advocate and set the policies and budgets that can provide more help to prevent and intervene in cases of violence. As family and community members, men can intervene with perpetrators to stop the violence and can provide support to those children with whom they are in contact. Men can also serve as role models of gender equality for other men and can work with women as allies for gender equality.





ADDITIONAL RESOURCES

One Man Can toolkit:

www.genderjustice.org.za/onemancan

One Man Can Fact Sheet on domestic and sexual violence. See accompanying CD-Rom.

“Working with Men & Boys to Prevent Gender-Based Violence Tool Kit”, created in response to the overwhelming call for practical and training tools reported in needs assessments by the Family Violence Prevention Fund and the Centers for Disease Control and Prevention: <http://toolkit.endabuse.org/Home.html>

UNFPA's **Partnering with Men and Boys**: <http://www.unfpa.org/swp/2005/english/ch6/index.htm>

Raising Voices, a Uganda-based NGO working to end gender based violence: <http://www.raisingvoices.org>

ADDITIONAL ACTIVITIES

The following activities can be found on the accompanying CD-Rom. These activities can add additional perspectives around gender-based violence or can be used to address specific issues raised during the training:

*“A Live Fool or a Dead Hero: Getting ‘Respect’”*²⁰ This activity helps participants to discuss how for men the idea of getting “respect”: and feeling “disrespected” is often associated with conflict, confrontation and violence and identifies alternatives to violence.

*“Men’s Stand Up (Stepping Out)”*²¹: This activity seeks to help participants understand the different ways in which men can mistreat women.

²⁰ Adapted from From Violence to Peaceful Co-existence, Instituto Promundo’s Project H Mmanual “From Violence to Peaceful Co-existence” developed for work with men in Brazil (2002).

²¹ Adapted from Men’s Work, Kivel, P. (1992).

²² Adapted from Men Overcoming Violence (MOVE) Youth Program Curriculum by Dean Peacock, Loreto Curti and Ras Mo Moses, San Francisco (1998).

*“Warning Signs”*²² : This activity seeks to help participants understand internal and external warning signs that they may be at risk of being violent.





*“Supporting a Survivor of Violence”*²³: This activity aims at helping participants understand the importance of breaking the silence and speaking out to prevent gender-based violence and to identify different ways participants could support survivors of violence both emotionally and practically.

*“Consequence List”*²⁴ : This activity seeks to discourage men from being violent by getting them to reflect on the negative consequences caused by being violent and to think about the negative impact their violence has had on them and on other people.

²³ Adapted from Raising Voices: Rethinking Domestic Violence and Sonke Gender Justice: One Man Can toolkit.

²⁴ Adapted from Men Overcoming Violence (MOVE) Youth Program Curriculum by Dean Peacock, Loreto Curti and Ras Mo Moses, San Francisco (1998).

ACTIVITY C.1: VIOLENCE CLOTHESLINE²⁵

Objectives 	To identify experiences with violence, both violence they have used and violence that has been used against them.
Time 	60-90 minutes
Materials 	<ul style="list-style-type: none"> • String or fishing line for clothesline • Strong tape to attach string to the wall • Sufficient cards or half sheets of A4 paper for all participants to write on • Clothes pegs or tape to attach paper/cards to clothesline
Steps 	<p>1 Put four clotheslines up. Label them:</p> <p><i>Violence I have used</i></p> <p><i>Violence practised against me</i></p> <p><i>How I felt when I used violence</i></p> <p><i>How I felt when violence was used against me</i></p> <hr/> <p>2 Explain to participants that we're going to be exploring our understanding of and experiences with gender-based violence. Remind them that full participation is encouraged but that talking about violence can be difficult and that no-one should feel pressured to disclose anything they are not ready to talk about.</p> <hr/> <p>3 Ask participants to identify different types of gender-based violence. Begin to write the different forms of violence identified on the flip chart. Help the group to identify the following forms of violence: physical, verbal, psychological/emotional, financial and sexual.</p> <hr/> <p>4 Give participants four sheets of paper/cards and explain that they should write on these the following:</p> <ul style="list-style-type: none"> • Types of violence that have been practised against them. • Types of violence they have used against others. • How they felt when violence was practised against them. • How they felt when they used violence against others. <hr/> <p>5 Ask them to put these on the clothesline that corresponds to each of these.</p>

²⁵ From Violence to Peaceful Co-existence, Instituto Promundo's Project H Mmanual "From Violence to Peaceful Co-existence" developed for work with men in Brazil (2002).



ACTIVITY C.1: VIOLENCE CLOTHESLINE



Steps

1-2-3

6 Ask people to walk around and read the cards/pieces of paper put up and reflect on their reactions to them.

7 Bring the group together and facilitate a discussion about their reactions. Be aware that some people will have strong reactions based on their own experiences with violence. Focus on some of the following issues:

How did it feel/what came up for people as they reviewed the statements?

How did it feel to have your experiences available for other people to read?

What did you learn from the activity?

How can we use our own experiences with violence to promote change and to increase men and women's health and safety?

Facilitator's notes



Create a safe space for participants to feel comfortable. Give participants the opportunity to excuse themselves as this activity might evoke strong emotions. It would be advisable to allow for breaks and reflection periods, and to think about providing lay counselling services during the session.

KEY POINTS



We have all been affected by violence; some as victims, some as bystanders, some as perpetrators and some as all of these. However, we have few opportunities to discuss the impact. Remind participants that violence has long lasting effects despite the ways in which society ignores its impact. Encourage participants to find other opportunities to talk about their experiences with violence and to take action to prevent and address violence wherever it occurs.



ACTIVITY C.2: VIOLENCE AGAINST WOMEN IN DAILY LIFE²⁶

Objectives 	<p>To better understand the many ways in which women's (and men's) lives are limited by male violence and/or the threat of men's violence, especially sexual violence.</p> <p>To understand how migrant women are particularly vulnerable to sexual abuse and violence.</p> <p>To identify some actions they can take to prevent violence against women.</p>
Time 	90 minutes
Materials 	<ul style="list-style-type: none"> • Flip Chart paper • Koki pens
Steps 	<ol style="list-style-type: none"> 1 Ask the participants what they think sexual violence is. Discuss the suggestions, come up with an agreed definition and write this up on a piece of flip chart paper. 2 Draw a line down the middle of a flip chart paper from top to bottom. On the one side draw a picture of a man and, on the other, a picture of a woman. Let the participants know that you want them to reflect on a question in silence for a moment. Tell them that you will give them plenty of time to share their answers to the question once they have thought it over in silence. Ask the question: <i>You have to go to a place you have not been to before. What do you do to protect yourself from sexual violence? What do you lack in order to be able to protect yourself?</i> 3 Ask the men in the group to share their answers to the questions. Most likely none of the men will identify doing anything to protect themselves. If a man does identify something, make sure it is a serious answer before writing it down. Leave the column blank unless there is a convincing answer from a man. Point out that the column is empty or nearly empty because men don't usually even think about taking steps to protect themselves from sexual violence. 4 If there are women in the group, ask the same questions. If there are no women, ask the men to think of their wives, girlfriends, sisters, nieces, mothers and imagine what these women do on a daily basis to protect themselves from sexual violence. 5 If you are working with migrant populations, you could make your question more specific: i.e. <i>In the context of your lives as migrant workers, what do you as men and you as women do to protect yourselves from sexual violence?</i>

²⁶ Adapted from a presentation given by Jackson Katz at UC Berkeley, 2003.





ACTIVITY C.2: VIOLENCE AGAINST WOMEN IN DAILY LIFE



Steps

1-2-3

6 Once you have captured all the ways in which women limit their lives to protect themselves from sexual violence, break the group into pairs and tell each pair to ask each other the following question – explain that each person will get five minutes to answer the question:

What does it feel like to see all the ways that women limit their lives because of their fear and experience of men's violence?

7 Bring the pairs back together after 10 minutes and ask people to share their answers and their feelings. Allow plenty of time for this discussion as it can often be emotional. Then ask each pair to find two other pairs (to form groups of 6 people) and discuss the following questions (write these out on flip chart paper) for 15 minutes:

How much did you already know about the impact of men's violence on women's lives?

What does it feel like to have not known much about it before?

How do you think you were able to not notice this given how significant its impact on women is?

What happens, or how are you perceived as a woman if you don't take precautions to limit yourself from violence?

How does men's violence damage men's lives as well?

What do you think you can do to change this situation and to create a world in which women don't live in fear of men's violence?

8 Bring the small groups back together after 15 minutes and ask each group to report back on its discussion. Write down the groups' answers to the last question on the **Action Chart**. Sum up the discussion, making sure that all the **Key points** are covered.

Facilitator's notes



This activity is critical for setting and establishing a clear understanding of the extent and impact of men's violence against women. Be sure to allow plenty of time!

If men are defensive, make sure to look more closely at their reactions. Make it clear that you're not accusing anyone in the room of having created such a climate of fear. Remind the group that you are trying to show how common and how devastating violence against women is.

Some people have strong emotional reactions to this activity. As workshop participants show their feelings, let them know that their reaction is normal and appropriate. Many people are shocked and become angry when they learn about the extent and impact of violence against women. Remind them that anger can be a powerful motivating force for change. Encourage them to identify ways to use their anger and outrage usefully to prevent violence and to promote gender equity.

Be aware that some men may think that they need to protect women from violence. If some men in the group say this, remind the group that it is important for each of us to be working to create a world of less violence. Men and women need to work together as allies in this effort. The danger of saying that it is up to men to protect women is that we take away women's power to protect themselves.

If necessary, provide lay counselling services during session.

If you have time, you might want to explore further with participants the portrayal of women who did not take the precautions expected of them.

This could be an opportunity to look at how the media portrays victims of sexual violence.

ACTIVITY C.2: VIOLENCE AGAINST WOMEN IN DAILY LIFE

KEY POINTS



Sexual violence and the threat of violence is an everyday fact for women.

Sexual violence against women is a huge problem in southern Africa, and in all sectors of society. This violence against women damages women's lives in many ways.

Migrant women are at particular risk of sexual abuse and violence.

During transit, migrant women often face sexual harassment and abuse. Many are forced into providing sexual favours (sometimes referred to as *transactional sex*) in exchange for food, shelter, transportation or permission to go across borders. The risk of sexual violence against female migrants is especially increased in sex-segregated and unregulated sectors – for example for female traders, domestic workers and sex workers.

Because men do not live with the daily threat of sexual violence, they do not realise the extent of the problem that women face.

Men usually do not understand how actual and threatened sexual violence is such a regular feature of women's daily lives.

Men's lives are damaged too by sexual violence against women.

It is men's sisters, mothers, daughters, cousins and colleagues who are targeted by this violence – women that men care about are being harmed by sexual violence everyday. Because this type of violence is socially accepted, some men feel weak if they don't agree with it.




TRANSACTIONAL SEX

Is sex in exchange for something such as food, shelter, transportation or permission to go across borders.



ACTIVITY C.3: CONSENT VERSUS COERCION: EXPLORING ATTITUDES TOWARDS RAPE ²⁷



Objectives 	<p>To understand myths and facts about rape.</p> <p>To promote attitudes that encourage consensual decision-making about sex.</p> <p>To explore the role of the criminal justice system in addressing rape and punishing perpetrators.</p> <div data-bbox="1109 562 1453 723"> <p>CONSENSUAL Involving the willing participation of both or all parties.</p> </div>
Time 	<p>60 minutes</p>
Materials 	<ul style="list-style-type: none"> • Four signs on A4 paper (Strongly Agree, Agree, Disagree and Strongly Disagree). • Flip Chart paper • Koki pens • Tape • DVD player and television or a computer with a data projector and speakers • “One Man Can” DVD - Thoko’s Digital Story • Handout C.3 – Action Sheet on How Men Can Support Survivors of Violence – one per participant
Steps 	<ol style="list-style-type: none"> <li data-bbox="268 1126 1444 1261">1 Display the signs around the room. Leave enough space between them to allow a group of participants to stand near each one. <li data-bbox="268 1261 1444 1417">2 From the statements (see Facilitator’s notes) below select the ones you think will create the most discussion. <li data-bbox="268 1417 1444 1574">3 Read the first statement you selected aloud. Ask the participants to stand near the sign that is closest to their opinion. <li data-bbox="268 1574 1444 1731">4 After the participants have made their decisions, ask for one or two volunteers from each group to explain their choice. Continue for each of the statements. <li data-bbox="268 1731 1444 1910">5 After you have facilitated a discussion and cleared up any confusion or questions from participants, end the activity by showing Thoko’s digital story. Use the DVD discussion guide to look at the importance of improved criminal justice systems to address the high levels of rape in southern African countries. <li data-bbox="268 1910 1444 2045">6 Give participants Handout C.3

²⁷ Substantially adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women’s Health Project (2003).

ACTIVITY C.3

Facilitator's
notes



Statements:

If a man is aroused it is very difficult for him to not have sex.
It is okay when a woman I am in a relationship with does not want to have sex.
If a woman has been drinking with me, I should expect to be able to have sex with her.
If I do a favour to a woman, then I am entitled to have sex with her.
Women often make up allegations of rape.
Mostly it is strangers who rape women.
Women cannot be raped by their partner or husband.
Women who wear short skirts are partly to blame if they get raped.
Sex is more enjoyable when my partner also wants to have sex.
It is okay for a man to pressure his partner when she doesn't want to have sex.
Only women can be raped.
If I see a friend pressuring a woman to have sex, I should tell him to stop.

Explain that rape is not only a violation of an individual's human rights but a criminal offence as well. People often unfairly blame the survivor for rape and excuse the perpetrator's behaviour. Often people blame the survivor because of something she did, said or wore. It is important to be clear that there is never an excuse for rape and that no-one ever wants to be raped. It is a deeply traumatic experience that scars people for life.

Many people believe that rape occurs because of strong sexual urges that men cannot control. But we know that men can control sexual urges and delay sexual gratification. Research has shown that rape is more associated with power than with sexual gratification. Most rapists commit their crimes so that they can feel powerful and in control. In fact, many rapists fail to get an erection or ejaculate. Combine this with the fact that most women who are raped show absolutely no sign of sexual response and a person can understand that rape would not be a very sexually gratifying act. Instead it is an act of violence.

Lay counselling services should be available during this session.

KEY POINTS



Rape is never acceptable - A woman has the right to be free from all types of violence and sexual violence.

Men can be supportive of women who have been raped - Men can give both emotional and practical support to women, from just being there to listen to her, to helping her to use her right to make a charge against the perpetrator. (See Handout C.3. – Action Sheet on How Men Can Support Survivors of Violence).

Men can help other men who are abusing women - Men can approach other men who are being abusive to women; they can suggest ways in which an abusive man can get help for himself by providing him with contact details of organisations that can support him.



HANDOUT C.3: Action Sheet on how men can support survivors of violence²⁸

SOMEONE YOU KNOW HAS SURVIVED DOMESTIC OR SEXUAL VIOLENCE. WHAT CAN YOU DO, AS A MAN, TO SUPPORT HER?

As a male partner, spouse, relative, friend or colleague of a woman who has survived sexual or domestic violence, you may feel it's easier to stay silent. You might be worried that you're going to say the wrong

thing or upset her further. DON'T keep quiet! There are many different ways that you can support her both emotionally and practically, as well as taking action in your community. Here are a few ideas...

²⁸ Thanks to the following people for their generous comments: Sally-Jean Shackleton (WomensNet); Sisonke Msimang and Thoko Budaza (Open Society Initiative for Southern Africa). Parts of this chapter were adapted from the following sources: Men Can Stop Rape; Rape Crisis, South Africa; People Opposing Women Abuse; Family Violence Prevention Fund.

How to support her emotionally...



Listen and try to understand - You may not know what it feels like to be a woman but you know how helpful it is when someone listens and supports you through difficult times. Learn about abuse and how it affects victims/survivors – there are many resources to read that will give you information on how she might be feeling, and what you can do to help.

Believe what she is telling you - It will have taken a lot of courage for her to have told you what she has experienced or is continuing to experience. And respect her privacy: don't tell anyone else unless she has agreed to it.

Don't judge or blame her - No matter the circumstances, everyone has the right not to be raped or abused, and no one deserves to be raped. Don't ask her questions about why she thinks it happened. You don't want her to feel that you are implying that the violence is her fault.

Allow her to express her emotions - If she wants to cry, give her the space to do so. If she doesn't cry, don't take this as a sign that she wasn't raped; different people respond to rape in different ways. She could be dealing with delayed shock, or feelings of denial. If she experiences depression for a long time or seems suicidal, encourage her to see someone.

Give her time - Try not to say things like 'try to forget what happened'. Particularly if she has been raped, she is

not going to feel better immediately and may have good and bad days. If she's feeling scared at night, encourage her to have a friend stay with her until she falls asleep. You can also offer to accompany her to places if she isn't feeling safe.

Be available to talk - Make sure she knows you are open to talking about the issue and want to listen to how she is feeling. At the time, she may feel that all men are potential perpetrators of violence. This is perfectly normal given what she has been through. Help her see that she can rely on you and other men in her life for support.

Let her take control of her own healing - It's important that victims of violence recover a sense of control over their lives. You can't tell her what to do, but you can support her in what she does and offer her information, an ear and a shoulder!

Get support - You might feel anger, frustration, sadness and pain because someone you care about has been hurt – get help so that you can deal with these feelings with someone equipped to help you, like a counsellor or a social worker. Speak to her about how you have been affected by what has happened to her. This is important so that she understands that you care. But don't burden her with too much, as she may then feel guilty and reluctant to share more.

HANDOUT C.3: Action Sheet on how men can support survivors of violence

Reach an understanding about sex - If you are a lover, husband or boyfriend of someone who was raped, is it okay to be sexually intimate again? The answer to this question varies from person to person – but it is very important to be patient, and find ways to show you love her that aren't sexual. If you aren't sure how she feels, talk about it. Sometimes a particular touch or smell can initiate flashbacks to the rape. Flashbacks are very scary and extremely upsetting. Try not to take it personally; it's not about you. She might 'freeze up' during sex, so

be aware of how she is responding, and stop if you are unsure. If your sexual attraction to your partner and overall relationship has been affected because of the rape, talk to someone about your feelings. This could be someone you trust- a friend, religious leader and /or you could also talk to a professional counsellor. Find out about services available in your area. It is also important to note that rape does not change the person and make her less valuable and loveable.

How to support her practically...



Decide on a course of action together and help her to seek different kinds of professional help - She might want to see a counsellor, get tested for HIV, or she might want to go to a women's shelter or advice centre, especially if she was abused by someone that she knows.

Help her to take action against the violence she has experienced - In SADC, there are laws in place that can be used to promote action and accountability. These make it clear that women have a right to live their lives healthily and free of violence. Read up on the issue, and take advantage of these laws.

Demand justice for survivors - Demand that the government meet its obligations to safety and security. The country laws should make it very clear that the government has an obligation to ensure safety for all—and to arrest, prosecute and convict perpetrators of domestic and sexual violence. To date, in the region (SADC) police and the criminal justice system often fail victims of violence. Accompany survivors to court and help them to access their human rights. Put pressure on the police and the courts so that they take decisive action.

Help her to access available services - She doesn't have to suffer alone, or in silence. There are services – women's centres and places of safety she can contact in case of emergency, organisations that can give her legal advice

and telephone counselling lines (find out about those services in your area or country). She may want you to go with her to visit these sources of support.

Support her to lay charges if she chooses to - Remember, domestic violence is a crime. Find out about the legal options she has. For example she may want to lay a charge of assault against her partner. Ask her if she would like you to accompany her to the police station to lay the charge.

Help her to secure safety - If she continues to be at risk from the perpetrator, help her to create a safe environment for herself. Find out about the relevant legal procedures dealing with domestic violence. For instance in South Africa she has the right to apply for a Protection Order under the Domestic Violence Act. She can request this from a Magistrate's court near to where she or her abuser lives. This order stipulates what the abuser may NOT do. If the abuser commits an act of abuse, the protection order means the abuser can be arrested. The protection order is free and can also help the woman to access medical treatment and find shelter.

Hold the perpetrator accountable - Talk with your friend to see whether she wants you or one of her other friends or family to talk to the perpetrator. Respect her decision if she says no. But also tell her that she can always change her mind.



HANDOUT C.3: Action Sheet on how men can support survivors of violence

Be careful and safe - It is not uncommon for perpetrators to lash out against people who get involved. Be prepared for him to become violent and accuse you of getting involved in issues that are not your business. Be ready to resolve the conflict peacefully even if it means walking away. If he does admit to violent behaviour and is willing to talk about it, tell him about organisations that can support him. Warning signs NOT to intervene are: he has a gun, he has a criminal record for violence, or he has threatened her with death before. If he suffers from irrational jealousy, intervening must not be taken lightly.

In the case of rape

PEP: Following a rape, it is critical that women access both the emergency contraceptive and a 28-day course of post-exposure prophylaxis (PEP) to prevent HIV infection, within 72 hours (**where possible**). Learn about these treatments and their possible side effects. This will help you understand what she is going through and how you might best support her to take PEP.

Insist the police take immediate action - She has the right to report the rape to the police at any time and lay a charge. Discuss reporting the rape to the police, and if she agrees, accompany her to the police station. She could still be in a state of shock, so may welcome your company when making her statement. If she wants another friend there instead of you, respect her wishes and help her get in touch with that person. At the police station, she should also be taken for a medico-legal examination by the District Surgeon. She has the right to give her statement in a private place, and to have someone there when she makes it.





Familiarise yourself with the court processes - If she does report the rape, she will have to go through a number of different procedures, particularly if the case goes to court. Take some **time to learn** about and understand these processes and support her through them. **Please note that court procedures may change from time to time and from country to country.**

²⁸ Thanks to the following people for their generous comments: Sally-Jean Shackleton (WomensNet); Sisonke Msimang and Thoko Budaza (Open Society Initiative for Southern Africa). Parts of this chapter were adapted from the following sources: Men Can Stop Rape; Rape Crisis, South Africa; People Opposing Women Abuse; Family Violence Prevention Fund.



ACTIVITY C.4: OTHER FORMS OF GENDER-BASED VIOLENCE

ACTIVITY C.4.1. CONTROLLING RELATIONSHIPS ²⁹

Objectives 	To identify behaviours in a relationship that are controlling or abusive.
Time 	45 minutes
Materials 	<ul style="list-style-type: none"> • A4 Paper • Pencils or pens • Handout C4.1 – Signs of a Controlling Relationship – one per participant
Steps 	<ol style="list-style-type: none"> 1 Tell the participants that any relationship can become abusive when one person regularly tries to control the other person or have power over them. So it is important to take some time to look at what is meant by a “controlling relationship”. 2 Ask for possible relationships that can become controlling or simply give the following examples: parent and child; teacher and child; supervisor and person supervised; girlfriends and boyfriends; partners or lovers; spouses. Tell the participants you will focus on romantic relationships: relationships between girlfriends and boyfriends, partners, spouses. Also tell the participants that some of these same things apply to other relationships as well. 3 Tell the participants that abuse in relationships can come in many different forms. The most common forms of abuse are physical abuse, emotional abuse, and financial abuse. 4 Ask the participants to divide into small groups, and give each participant a piece of paper and a pencil or pen. Ask each group to address one of these three types of abuse and to identify as many examples of this specific form of abuse as it can. For example, one group will be asked to give examples of physical abuse in relationships, which includes hitting, slapping, shaking, forced sex, and refusing a partner medical attention when it is needed. 5 Once the lists are completed, the groups should share their answers with all of the other participants. 6 Pass out or simply discuss the handout “Signs of a Controlling Relationship”, which lists many examples of how a partner might behave in a controlling manner. Discuss each type of control with the participants, and see if they can come up with a few examples themselves related to these types of control.

²⁹ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.



ACTIVITY C.4.1: CONTROLLING RELATIONSHIPS



Steps

1-2-3

7 Discussion Questions

Did you recognize yourself in some of these situations, either as someone who controls or someone who is controlled?

What things surprised you in the handout? Why?

What could you change easily so that you are less controlling in some of your relationships?

What would be much more difficult for you to change? Why?

Why do people feel a need to control things in a relationship? Are there times when people are not even aware they are trying to control things?

8 Summarize the discussion as follows:

Violence between partners is really about power and control. Physical violence is only one piece of a larger effort to control the other person in the relationship. There is usually a fundamentally unhealthy relationship before violence starts. Healthy relationships involve understanding and accepting and respecting oneself and the other person in the relationship.

Facilitator's notes



Many people think that violence and abuse in a relationship happens because the person using violence or abuse loses control or can not manage their anger. This is not the case. Instead, abusive behaviours within relationships are part of an attempt to control the other person. Very concrete examples of these controlling behaviours help both women and men understand this important aspect of abusive relationships. After an exercise like this, participants find it easier to recognize these behaviours, which in turn helps them to begin to challenge them.



HANDOUT C.4.1: Controlling Relationships³⁰

SIGNS OF A CONTROLLING RELATIONSHIP³¹

Control through criticism

- Does your spouse, partner, husband, wife, or parent make you feel as if you never do anything right? Is nothing you do ever good enough for this person?
- Does this person make you feel as if you are not loving and supportive enough?
- Does this person dislike the way you carry yourself in public, cook, sew, dress, or have sex?
- When you confide in this person, does he or she tell you to stop acting like a baby and grow up?
- Does this person call you names?
- Does this person feel that only he or she can do things right?
- When and if you socialize with your family, are you nervous that this person will embarrass and humiliate you?

Control through mood, anger, and threats

- If you are five minutes late, are you afraid this person will be furious?
- Does this person expect you to read his or her mind? Are you angry when you cannot figure out what this person is thinking?
- Do you walk around nervously because you never know what will make this person angry?
- When you do something that this person thinks is “wrong,” does he or she get angry and then refuse to speak with you?
- Does this person sulk in silence so that you must figure out what you have done “wrong” and apologize for it?
- Are you responsible for keeping this person happy all the time? If this individual is not happy, does he or she assume that this is your fault?
- Does this person make threats against you unless you do what he or she says?
- Does this person tell you that you will never be able to leave, that he or she will not allow you to leave, and that no one will ever believe you?

Control through “caring too much”

- Does this person tell you he or she wants you home all the time because he or she worries about you?
- Is this person jealous when you speak with family, with friends, or with new people you meet?
- Does this person show up at your place of work to “check up” on you?
- Does this person do the shopping and banking, get insurance, and keep all records, claiming that you should not have to be bothered or that you are too stupid to do them?
- Does this person tell you what you should and should not wear, or insult you, saying it is “for your own good”?

Control through “mind games”

- Does this person act cruelly, and then say that you are too sensitive and cannot take a joke?
- Does this person talk to you in a serious way and later laugh at how “gullible” you are? Are you often left wondering whether something is true or “just a joke”?
- Does this person promise to do things but not do them, and then claim that he or she never promised to do them?
- Does this person cause scenes in public or at a family event, and then accuse you of making the whole thing up?
- Does this person tell you that you are crazy and need psychiatric care?
- Does this person ever hit you, and then ask you how you got hurt?
- Does this person make you cry, and then call you hysterical or overdramatic?
- Does this person often tell you what is wrong with you, and then claim that he or she will take responsibility for “fixing” it?

³⁰ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.

³¹ Questions adapted from Domestic Violence Training Manual, Nefesh Conference (Baltimore: 1996).



HANDOUT C.4.1: CONTROLLING RELATIONSHIPS



Control by ignoring your needs

- Does this person expect you to drop everything when he or she wants your attention but never attends to your needs?
- Does this person interrupt you when you try to speak and twist around anything you say?
- Does this person come and go as he or she pleases but never allows you to go out and threatens you if you try?
- When you try to speak with this person, does he or she ignore you or make fun of you?

Control through decision-making

- Does this person have to have the final word on everything?
- Do you decide on something, and then this person does the opposite just to spite you?
- Does this person tell you to know your place and that you are too stupid to make decisions?

Control through money

- Does this person control all the finances?
- Do you have to account for every dollar you spend?
- Does this person deny you money and still expect you to make ends meet?
- Does this person make you ask for everything you need, and then insults you if you do not “behave”?
- Does this person give you presents and treats, and then reminds you how you could never make it on your own?
- Does this person make you work, and then takes or steals the money from you?

Control by laying blame and accusing you of being responsible for his or her problems

- If you complain to this person, does he or she accuse you of nagging and pick apart your personality?
- Does this person say he or she hits, drinks, and yells because you are impossible to live with?
- Does this person tell you that if you ever leave, he or she will hurt himself or herself, and that this will be your fault?
- Does this person not have a job and blame you?
- Does this person say he or she would not lose his or her temper if you would just keep quiet or keep the children quiet?

- Does this person say how much everyone else likes him or her, so it must be your fault when he or she loses control?

Control through isolation

- When you want to go out, does this person start a fight?
- Does this person say you care more about your parents, friends, or children than about him or her?
- Does this person question your whereabouts whenever you return home?
- Does this person accuse you of thinking about or being with other men or women?
- Has this person caused you to lose your job?

Control through intimidation





- Does this person block the door so that you cannot get out during an argument?
- Does this person stand close to you with clenched fists during a fight to scare you?
- Do you stop an argument and apologize because you are afraid of what this person might do?
- Does this person drive recklessly just to scare you?
- Does this person destroy your clothes, favourite possessions, or sentimental items?
- Does this person refuse to leave if you ask him or her to?
- Does this person continually wake you up and not let you sleep?

Control through physical violence

Does this person:

- throw things?
- throw things at you?
- kick you?
- choke you?
- shove or push you?
- hit or punch you?
- threaten you with a weapon?
- force you to engage in sexual acts?
- hurt you, and then refuse to get you medical attention?

ACTIVITY C.4.2: SEXUAL HARASSMENT³²

Objectives 	<p>To identify different kinds of sexual harassment.</p> <p>To define the elements necessary for behaviour to be sexually harassing.</p> <p>To distinguish flirting behaviour, uncomfortable behaviour, and assaulting behaviour from harassment.</p> <p>To learn about personal responsibility for ending behaviours that might constitute sexual harassment.</p>
Time 	<p>90 minutes</p>
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens • Sexual harassment scenarios and questions prepared on cards or paper (see Facilitator's notes)
Steps 	<p>Part 1: Brainstorming "flirting" and "sexual harassment" <i>(Try to keep the first brainstorming activity short, by completing it in about 15 minutes.)</i></p> <hr/> <p>1 Offer the following definition of sexual harassment and ask for comment: Any unwelcome advances, requests for sexual favours or other verbal or physical conduct of a sexual nature. (Note that the word "unwelcome" defines all behaviours listed.)</p> <hr/> <p>2 Explain that sometimes it may be hard to distinguish between flirting and sexual harassment. Then conduct a brainstorm of examples of flirting and write the responses on the left side of a piece of flip chart paper.</p> <hr/> <p>3 Draw a line to the right of this list and ask when do these behaviours cross the line and become sexual harassment. Write those answers to the right of the line.</p> <hr/> <p>4 Lead a brief discussion of what was learned from this exercise.</p> <hr/> <p>5 Return to the question of who defines harassment, similar to who defines abuse.</p>

SEXUAL HARASSMENT
Unwanted sexual advances or sexual attention.

³² This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.



ACTIVITY C.4.2: SEXUAL HARASSMENT



Steps

1-2-3

Part 2: *Is it sexual harassment?*

1 Divide participants into groups of 4 or 5 and give each one of the sexual harassment scenarios (see Facilitator's notes):

2 In their groups they should:

- decide whether the behaviour is sexual harassment.
- provide the reasons for their conclusion.
- if it is not considered sexual harassment, identify what would make the behaviour cross over the line.
- recommend what they as a bystander could do to challenge harassment when they see it.

Facilitator's notes



Advance Preparation: Prepare sexual harassment scenarios on pieces of paper; these can be adapted for your target group. A printable version is available on the accompanying CD-Rom.

- Norman grabs Neo's bottom each time she passes by.
- Charlise tells Stefaan that if he does not have sex with her, she will make sure he never gets a raise.
- A border official often comments on what Maria, a cross border trader, is wearing and tells her she looks sexy.
- Teboho asks Tumi to come over for a drink every day, and she says "no" every time.
- Marlon and Xoliswa are always kissing and hugging each other during work hours.
- Donald tells a new farm worker that he can get her a room for a "small favour".
- A tourist at a game lodge touches Brenda's breasts when she's cleaning his room.
- The head master of a school asks a female student out for lunch.



ACTIVITY C.4.2: SEXUAL HARASSMENT

Facilitator's notes



Part 1: Brainstorming "flirting" and "sexual harassment"

In some instances, the items to the right of the line may just require adding a qualifier such as excessive, repeated, after being told to stop or seeing that the person is upset, etc.

The objective here is to help men understand the division between acceptable and unacceptable sexual attention.

Part 2: Is it sexual harassment?

Sometimes to understand exactly what behaviour is acceptable, you need a practical way to know whether behaviour can be seen as harassing. In order to figure this out, you can ask yourself four questions:

1. Is there freedom to act?

Explain that the freedom to act is one of the most important aspects of understanding harassment. It means having the freedom to object to the behaviour of the other person without feeling defensive or afraid to speak out.

2. Is the relationship mutual and equal, or is there a difference in power?

Ask the participants, "What gives people power?" (Money, size, gender, job security, popularity?) Discuss how power affects a relationship.

3. Am I acting in a way that feels right to me?

If you are acting in a way that goes against what you feel is right, against your values, you usually have a specific feeling inside at that time. How does that feeling differ from the way you feel when you are following your values and doing what you feel is right? Ask the participants to describe these two feelings.

4. What kind of touching is involved in this interaction?

Is the touching welcome or unwelcome? There are certain people with whom you are more comfortable being physically close and others with whom you are more comfortable being distant. For example, when you greet someone, do you give him or her a hug? Is this touch welcome?

Ask the participants to describe other situations where touching is involved. After each description, ask if the kind of touch described is welcome or unwelcome. Ask the participants to describe a situation in which the touching involved is not welcome.

Tell the participants that in healthy situations, a person can answer all four of these questions positively. A person has the freedom to act, the relationship is mutual and equal, the interaction feels right, and the kind of touch is welcome. Participants should keep these questions in mind when thinking about sexual harassment.

KEY POINTS



Like the first 24-hour day activity, this particular activity will help to explore the idea of gender roles. It should also get participants to think in more detail about how these gender roles are affected by migrant status.



ACTIVITY C.5: NEW KINDS OF COURAGE ³³



Objectives 	<p>To be able to identify and encourage strategies for both men and women which promote equal and healthy relationships between them.</p> <p>To understand ways to develop fairer and more responsible sexual practices.</p> <p>To understand ways to challenge and take responsibility for men's violence against women.</p>
Time 	<p>75 minutes</p>
Materials 	<ul style="list-style-type: none"> • A set of action cards (see Facilitator's notes) • Signs on A4 paper with "No Courage", "Some Courage" and "More Courage" written on them • Prepared Flip chart paper with key points written out (see Facilitator's notes) • Tape • Koki pens • Flip chart paper
Steps 	<ol style="list-style-type: none"> 1 Create a "Spectrum of Courage" on the wall by sticking the "No Courage" sign on the left side of the wall, the "Some courage" sign in the middle, and the "More Courage" sign on the right. 2 Ask participants why they think men especially should be concerned about violence against women, promoting fairer and more responsible sexual practices, and promoting more equal relations between women and men. Summarize the discussion that follows by sticking the prepared flip chart paper on the wall and going through each of the 4 points. 3 Explain that there are different actions that men can take to end violence against women, prevent HIV and AIDS and promote more equal and healthier relationships between women and men. Some of these actions will take more courage than others. 4 Deal out the action cards to all of the participants. Ask each participant to look at their card(s) and think about where the action described on the card would be on the Spectrum of Courage (from no courage to more courage) posted on the wall. 5 Discuss the placement of each card with the whole group. Ask whether they agree with where it is on the spectrum or would want to move it. If there's agreement that it's in the wrong place then move it where the group thinks it belongs. 6 Divide the participants into groups of five. Ask each group to choose one of the cards that has been placed toward the "More Courage" end of the spectrum. Ask each group to come up with a role-play that shows men taking the action described on their card. Allow 5-10 minutes for the role-play preparation.

³³ Adapted from Bullyproof: A Teacher's Guide on Teasing and Bullying (for use with 4th and 5th grad students), Sjostrom, L., Stein, N., Wellesley Centers for Women, Wellesley College (Wellesley, MA: 1996).

ACTIVITY C.5: NEW KINDS OF COURAGE

Steps

1-2-3

7 Ask the first group to present their role-play, allowing no more than 5 minutes for the role-play and questions from the audience afterwards. Do the same for all the groups. Once all the role-plays are finished, make sure to remind the participants that the role-plays are over and that they are no longer in role. Lead a general discussion about the courage needed to take action by asking:

What was it like to be in the role-play? What was it like to watch the role-play?

Which situations felt harder/easier to imagine in real life?

What kinds of courage do men need in order to take these actions in the real world?

What kinds of support do men need to take these actions?

8 End the activity by reminding the group that they have identified ways for men to end violence against women, prevent HIV and AIDS and promote more equal and healthier relationships between women and men. Make a note of any new suggested actions that are not already listed on the Action Chart.

Facilitator's notes



Advance Preparation:

1. Prepare a flip chart paper for presentation in step 2 with the 4 following points:

- i. ***Men can play a critical role in setting a positive example for other men*** – by treating women and girls with respect and by challenging other men's harmful attitudes and behaviours.
- ii. ***Most men care deeply about the women and girls in their lives*** – whether they are their wives, girlfriends, daughters, other family members or colleagues, fellow parishioners or neighbours.
- iii. ***When men commit acts of violence, it becomes more difficult for the affected women to trust any man.***
- iv. ***Men commit the vast majority of domestic and sexual violence and therefore have a special responsibility to end the violence.***





ACTIVITY C.5: NEW KINDS OF COURAGE



Facilitator's notes



2. Prepare the set of action cards by writing each of the following action statements on a separate card/paper (a printable version is on the accompanying CD-Rom).

- Ignore a domestic dispute that is taking place in the street in front of your house.
- Tell a friend that you are concerned that she is going to get hurt by her partner.
- Call a boyfriend out on a date.
- Tell a man that you don't know very well that you don't appreciate him making jokes about women's bodies.
- Walk up to a couple that is arguing to see if someone needs help.
- Call the police if you hear fighting from a neighbour's house.
- As a man, tell your female friend that her husband is cheating on her.
- Keep quiet when you hear jokes that excuse or promote violence against women.
- Tell your partner about your HIV-positive status.
- Tell a co-worker that you think he's sexually harassing female co-workers.
- Let your wife/girlfriend have the last word in an argument.
- Encourage your son to pursue a career in nursing.
- Put your arm around a male friend who's upset.
- Tell your son that it's ok if he cries.
- Defend gay rights while you are with your friends at the bar.
- Tell a woman that you are not ready to have sex with her.
- Gather wood or water to assist women in your village.
- Wear a "men against violence" t-shirt.
- Speak to your priest and ask him to include messages about HIV and gender-based violence in his sermons.
- Disclose an HIV-positive diagnosis to your close friends.
- Encourage the traditional leader in your area to speak out about HIV and violence against women.
- Accompany a rape survivor to the police station to demand that the police take action.
- Join a men's march to protest police inaction on violence against women.

KEY POINTS



Men have a critical role in working towards, amongst other things:

- **An end to male violence.**
- **An end to lack of caring for the consequences of their sexual practises.**
- **An end to unequal relations between women and men.**



MODULE D
Gender, HIV and AIDS



MODULE D - Gender, HIV and AIDS

This module examines the relationship between gender, migration, HIV and AIDS. It pays particular attention to:

- Gender and the burden of care and support.
- Men's low utilisation of health services including HIV-related services.
- The HIV vulnerability of migrants related to their work and living conditions.

This module shows that men's attitudes and practices often increase women's vulnerability to HIV. It calls for men to be more proactive regarding their health and the health of their partners. It seeks to promote health seeking behaviour of men.

KEY OBJECTIVES

Through the activities in this module we aim to:

- Encourage participants, particularly men, to use health care services, especially HIV services such as HIV testing and treatment and to join support groups for psychosocial support.
- Provide participants with the skills and support necessary to play a meaningful role in caring for the sick, including advocating for full access to health services.
- Encourage participants to use condoms correctly and consistently every time they have sex, including in long-term relationships.
- Encourage participants to decrease the numbers of concurrent sexual partners

they have and advocate HIV testing before each new sexual relationship.

- Educate participants about the potential benefits of men being circumcised, but stress that male circumcision provides only partial protection against HIV. Remind them that it is still essential for men to practice **safe sex** regardless of whether they are circumcised or not.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become change agents in their own lives and community. This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level taking action to:

- Hold local stakeholders such as police, health service professionals and local leaders to their promises.
- Encourage community leaders to speak about gender-based violence and HIV.
- Ensure that health services and condoms are accessible and friendly to men as well as to women, including non-nationals such as migrants and **refugees**.

At the broader structural (societal) level taking action to:

- Advocate for full access to health services for all who need it including full enrolment in prevention of mother to child transmission (PMTCT) programmes.

SAFE/SAFER SEX

Also known as 'protected sex', safer sex involves reducing risk, often by having sex using either a male or female condom or by exploring alternatives to penetrative intercourse.

- Advocate for improvements in health care services and increases in the number of health care personnel.
- Encourage national governments to create a task force on men and health services including HIV, to dramatically increase the number of men using these services.

After the training

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Working with local health service providers to help make their services accessible to all.
- Organising an event that celebrates mutual faithfulness and acknowledges the risks associated with multiple concurrent sexual partnerships.

REFUGEE

A refugee is a person who "owing to a well founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion is outside their country of nationality and is unable to or, owing to such fear, is unwilling to avail themselves of the protection of that country"

- Source: UNHCR Convention and Protocol relating to the status of refugees (1951).



MODULE D - Gender, HIV and AIDS



- Developing a community drama to explore the benefits of ending multiple concurrent sexual partnerships or the realities of using a condom within them.
- Painting murals that show men involved in health care.
- Arranging for condoms to be made regularly, available at a suitable place/s.
- Organising a door to door campaign on a particular issue such as healthy living, HIV testing.



Gender and HIV Infection



Gender roles and unequal relations between men and women are increasingly recognized as two of the fundamental forces driving the rapid spread of HIV and worsening the impact of AIDS in southern Africa. Across the region, existing gender-related norms all too often condone men's violence against women, grant men the power to initiate and dictate the terms of sex, make it extremely difficult for women to protect themselves from either HIV or violence, and discourage men from accessing vital health care services.

Large gender differences in rates of HIV infection show the impact of unequal power between men and women. Globally, women constitute half of all adults living with HIV, but in sub-Saharan Africa there are 14 infected women for every 10 infected men.³⁴ In many countries in

the SADC region, **HIV prevalence** among girls under eighteen is four to seven times higher than among boys.³⁵ A study from South Africa revealed that young women are much more likely to be infected than men, with women making up 77% of the 10% of South African youth between the ages of 15-24 who are infected with HIV.³⁶

A 2006 SADC Expert Think Tank Meeting on HIV Prevention in High-Prevalence Countries in Southern Africa recognised the gender dimensions of the epidemic and called for HIV prevention efforts to "address gender issues especially from the perspective of male involvement and responsibility for sexual and reproductive health and HIV prevention and support, to reduce

HIV PREVALENCE
Usually given as a percentage, HIV prevalence quantifies the proportion of individuals in a population who have HIV at a specific point in time.

multiple, concurrent partnerships, **intergenerational/age-disparate sex** and sexual violence.³⁷

INTERGENERATIONAL SEX
Referring to sex between adolescent girls and boys and older partners.



³⁴ Keeping the Promise: An Agenda for Action on Women and AIDS, Global Coalition on Women and AIDS, (UNAIDS, Geneva: 2006).

³⁵ Policy Paralysis: A Call for Action on HIV/AIDS-Related Human Rights Abuses Against Women and Girls in Africa, Human Rights Watch (2003).

³⁶ HIV & Sexual Behaviour Among Young South Africans: A National Survey of 15-24 Year-Olds, Pettifor, A., Rees, H., Stevens, A. (University of Witwatersrand: 2004).

³⁷ SADC Expert Think Tank Meeting on HIV Prevention in High-Prevalence Countries in Southern Africa (Maseru, Lesotho: 2006).

Gender and the Burden of Care and Support



Across southern Africa, women and girls are the ones who care for people living with HIV and AIDS. As the epidemic progresses, and more people become seriously ill, the impact on women and girls becomes more devastating. Schoolgirls are increasingly pulled out of school to take care of the sick and to assume household responsibilities previously carried out by their mothers. In Swaziland, for instance,

school enrolment has fallen by 36%, with girls more affected than boys. At the other end of the lifespan, elderly women are often required to take care of children orphaned by AIDS, finding themselves emotionally and physically taxed by tasks usually performed by much younger women.³⁸ Carers report that looking after people living with HIV has drained them both economically and emotionally.³⁹

³⁸ "The Hidden Battle: HIV/AIDS in the Household and Community", Desmond, C., Gow, G. and Michael, K., South African Journal of International Affairs, Vol. 7 No. 2 (2000).

³⁹ "Home-Based Care of the Terminally Ill in Botswana: Knowledge and Perceptions" Ndaba-Mbata, R., Seloilwe, E., Int. Nurs. Rev. 47, 218—223 (2000).

Gender and HIV testing



Voluntary counselling and testing (VCT) services provide an entry point to HIV prevention programmes, ART, as well as an opportunity to access prevention of mother to child transmission programmes. However, both men and women experience gender-related barriers to these services. Women are often reluctant to participate in these programmes for fear of disclosure and abuse from their male partners should they test HIV positive. Women's fears of violence upon disclosure are not unfounded: research has illustrated that women have experienced violence or marital/relationship break-up following disclosure.⁴⁰ A ten country study on VCT and disclosure published by the WHO in 2004 reported that "the proportion of women reporting violence as a reaction to disclosure ranged from 3.5% to 14.6%". While the majority of women do not experience

violence, the violence that does occur leaves women afraid that they might also be abused if they disclose their test results.⁴¹ As a consequence, it is estimated that between 16–86 per cent of women in developing countries do not disclose their status to their partners.⁴² Other common barriers to women's disclosure are: fear of abandonment, closely tied to fear of loss of economic support from partners; fear of rejection/discrimination; fear of upsetting family members; and fear of accusations of infidelity, many of which relate to their male partners or male family members.

Other research reveals that men are significantly less likely than women to utilize VCT⁴³ services. A recent national study in South Africa found that men accounted for only 21% of all clients receiving VCT. Studies

of VCT uptake in Swaziland and Botswana reveal similar findings. In Botswana, 52 percent of women and 44 percent of men had tested for HIV. In Swaziland, 25% of women had tested compared to 18% of men.⁴⁴ Low levels of HIV testing compromise HIV prevention, because people who test positive are likely to adopt risk reduction behaviours, thereby decreasing new infections.⁴⁵

⁴³ National Report on the Assessment of the Public Sector's Voluntary Counselling and Testing Programme Magongo, B., Magwaza, S., Makhanya, N. and Mathambo, V., Health Systems Trust (Durban, South Africa: 2002).

⁴⁴ Epidemic of Inequality: Women's Rights and HIV/AIDS in Botswana and Swaziland, Physicians for Human Rights (2007).

⁴⁵ See for instance: Scaling up HIV Voluntary Counseling and Testing in Africa: What Can Evaluation Studies Tell Us About Potential Prevention Impacts? Glick, P., SAGA Working Paper (Cornell University: 2005); and The Voluntary HIV-1 Counseling and Testing Efficacy Study: A Randomized Controlled Trial in Three Developing Countries, Thomas, J., Coates et al., University of California, AIDS Research Institute, Center for AIDS Prevention Studies (San Francisco, USA: 2000).

⁴⁰ Men Make a Difference: Involving Fathers in the Prevention of Mother-To Child HIV Transmission, Baggaley, R., et al., Clinical Research Unit, London School of Hygiene and Tropical Medicine (London: 2000).

⁴¹ Gender Dimensions of HIV Status Disclosure to Sexual Partners: Rates, Barriers and Outcomes: A Review Paper, World Health Organization (WHO, Geneva, Switzerland: 2003).

⁴² Ibid.



Multiple Concurrent Sexual Partners



Gender roles in southern Africa also one of the key drivers of the HIV epidemic. In most parts of the world, men are encouraged to have more than one sexual partner. Research shows that having more than one sexual partner at a time contributes to the rapid spread of HIV and may explain why southern Africa has such high rates of HIV infection.

Research suggests that men in Africa typically do not have more sexual partners than men in many other parts of the world. However, unlike in other parts of the world, many men in southern Africa have ongoing sexual relationships with more than one woman at a time.⁴⁶ This increases the risk of HIV transmission substantially for a number of reasons. Firstly, even though increasing numbers of men are using condoms with casual partners, they are less likely to use condoms consistently with long-term partners, even if both people are also having sex with other people.⁴⁷

Secondly, when significant numbers of people are in relationships with more than one person, they contribute to the formation of sexual networks that connect people through overlapping sexual partners and act as efficient pathways for the transmission of HIV.⁴⁸ When people within these networks are newly infected with HIV they have a very high HIV viral load and are most infectious and able to transmit the virus to other people.⁴⁹

Relative to women, men are more likely to have multiple partners simultaneously, are more likely to buy sex and are more likely to be unfaithful to their regular sexual partner. In many cultures, variety in sexual partners is seen as essential to men's nature as men and that men will inevitably seek multiple partners for sexual release.⁵⁰ Sexual behaviour studies globally indicate that **heterosexual** men, both married and single, as well as **homosexual** and **bisexual**

men, have higher reported rates of partner change than women.⁵¹

A study conducted in seven villages in Malawi found that 65% of sexually active adults were engaged in one network of multiple and concurrent sexual partnerships.⁵²

HETEROSEXUAL
Emotional, physical and sexual attraction to people of the opposite sex.

HOMOSEXUAL
Emotional, physical and sexual attraction for people of the same sex.

BISEXUAL
Emotional, physical and sexual attraction to both men and women.

⁴⁶ Why is HIV prevalence so Severe in Southern Africa: The Role of Multiple Concurrent Partnerships and Lack of Male Circumcision: Implications for AIDS Prevention, Halperin, D., and Epstein, H., The Southern African Journal of HIV Medicine (South Africa: 2007).

⁴⁷ South African National HIV Prevalence, HIV Incidence, Behaviour and Communication Survey, Bhana, A., Parker, W., Rehle, T., Shisana, O., Simbayi, L.C., Zuma, K. et al.. HSRC Press (Cape Town: 2005).

⁴⁸ Concurrent Sexual Partnerships Amongst Young Adults in South Africa: Challenges for HIV Prevention Communication, Connolly, C., Makhubele, B., Ntlatladi, P., Parker, W., CADRE (Johannesburg: 2007).

⁴⁹ Partner Reduction is Crucial for Balanced "ABC" Approach to HIV Prevention, Gayle, H., Halperin, D., Holmes, H., Nantulya, V., Potts, M., Shelton, J., BMJ; 328: 891-4 (2004).

⁵⁰ WHO 2002a, citing Mane, P., Gupta, R., et al. (1994), and Weiss, E., Whelan, D., et al. (1996).

⁵¹ WHO 2002a, citing Sittitrai (1991), and Orubuloye & Caldwell et al. (1993).

⁵² Ibid.



Migration, HIV and Gender



The evidence confirms that migrants and migrant households are particularly at risk of HIV infection.⁵³ There is a higher rate of HIV infection in “communities of the mobile”, which often include socially, economically and politically marginalised people. There are at least three key ways in which mobility is tied to the spread of HIV:

Mobility per se can encourage or make people vulnerable to high-risk sexual behaviour.

Mobility makes people more difficult to reach, whether for prevention education, condom provision, HIV testing, or post-infection treatment and care.

Migrants’ multi-local social networks create opportunities for sexual networking.

Population mobility and migration especially contribute to the phenomenon of concurrent sexual partnerships. Because migrants

and mobile workers are regularly separated from their permanent partners, it is likely that they will engage in short or long-term sexual relations with other partners.

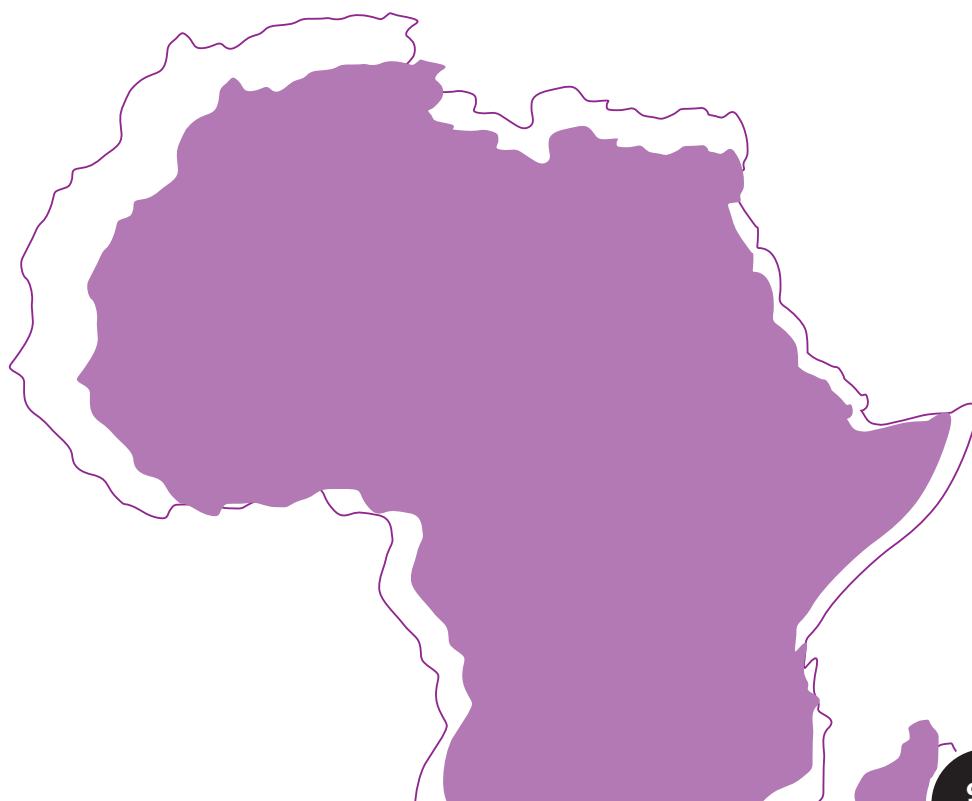
Most migrants are men who move to urban areas and leave their wives in rural areas. Adverse and dangerous working environments contribute significantly to male gender construction and sexuality. Next to the boredom and loneliness of these jobs, the men frequently experience dangerous and unpleasant working conditions, poor accommodation and “anti-community” environments, to which they may respond with exaggerated “masculinity” and sexual bravado. Gender norms supporting many sexual partners, and endorsement of multiple sexual partnerships, are often found among migrant men, exacerbating HIV vulnerability. Stress and danger has been linked to the HIV vulnerability of mineworkers. Research with mineworkers in South

Africa has linked chronic stress and danger with risk taking amongst mineworkers.⁵⁴

Increasingly, for a variety of reasons, women are becoming migrants as well, most often working as informal traders or domestic workers. These jobs subject women to poor working conditions, including abuse or harassment. Female farm workers, who often outnumber men as seasonal labourers on some border farms, have been known to exchange sex for food, jobs and accommodation.

⁵³ Migration and the Spread of HIV in South Africa, Lurie, M., MD: Ph.D thesis, Johns Hopkins University School of Hygiene and Public Health (Baltimore: 2001).

⁵⁴ “Going Underground and Going After Women: Masculinity and HIV Transmission amongst Black Workers on the Gold Mines”, Campbell, C., in Morrell, R. (ed.), *Changing Men in Southern Africa*, University of Natal Press (Durban: 2001).





ADDITIONAL RESOURCES

WHO Fact Sheet No 242
"Women and HIV/AIDS",
June 2000.

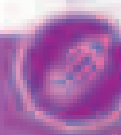
"The Journey", IOM, 2006.

One Man Can toolkit: [www.
genderjustice.org.za/onemancan](http://www.genderjustice.org.za/onemancan)

WHO and UNAIDS
recommendations from
expert consultation on
male circumcision for HIV
prevention (2007)



ADDITIONAL ACTIVITIES



The following activities can be found on the accompanying CD-Rom. These activities can add additional perspectives around gender, HIV and AIDS or can be used to address specific issues raised during the training:

"Gender Roles in Relation to HIV and AIDS": This activity seeks to enable participants to identify the different roles of women and men and to explore how these different roles affect the lives of men and women especially in relation to HIV and AIDS.





"Levels of Risk": This activity seeks to help participants to get to know the level of HIV risk that various sexual behaviours carry with them and to find which sexually pleasurable behaviours carry lower risk or no risk for HIV infection.

"HIV, AIDS and Gender: Facts and Trends in southern Africa": This activity seeks to help clarify knowledge & understanding about gender, HIV and AIDS and the gender dynamics of the HIV epidemic in southern Africa.



ACTIVITY D.1: SEXUAL VULNERABILITIES⁵⁵



Objectives 	<p>To understand the different aspects of sexual vulnerability.</p> <p>To be able to identify ways to reduce people's sexual vulnerability.</p>
Time 	<p>90 minutes</p>
Materials 	<ul style="list-style-type: none"> • Two “decks” of “person cards” (either written or drawn) – see Facilitators Notes • Flip chart paper • Koki pens • Handout D.1. – Taking Risks: HIV and Gender – one per participant
Steps 	<ol style="list-style-type: none"> <p>1 Start by asking participants to define the term ‘vulnerable’. Come up with an agreed definition and write it up on the flip chart.</p> <p><i>An agreed definition might be a variation of the following: able to be easily physically, emotionally, or mentally hurt, influenced or attacked.</i></p> <p>2 Ask the group to describe the difference between “taking a risk” and “facing a risk”. Ask the group to give some examples of situations in which people take a risk with HIV. Then ask the group to give some examples of situations in which people face a risk of HIV.</p> <p>3 Talk about the difference between “taking a risk” and “facing a risk”. After the discussion give each participant Handout D.1.</p> <p>4 Divide the group down the middle of the room. Give the first “deck” of “person cards” face down to the participants on your left. Give the second “deck” face down to the participants on your right. Explain that this activity is going to be looking at what makes some people more vulnerable to STIs, HIV and AIDS than other people.</p> <p>5 Instruct both groups that when you say “first card” they are to turn over the top card on their “deck” and show it to the other group. Call out “first card”. Wait for both groups to turn over their top card.</p> <p>6 Now ask: “Imagine a situation in which these two people have had sex together or have a sexual relationship. In this situation ...”</p> <p><i>Who is taking a risk and who is facing a risk?</i></p> <p><i>Who is more vulnerable to STI/HIV infection?</i></p> <p><i>What makes this person more vulnerable?</i></p>

⁵⁵ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.



ACTIVITY D.1: SEXUAL VULNERABILITIES



Steps

1-2-3

7 Allow time for the participants to discuss the vulnerability of the two people. Write up on flip chart paper the group's conclusion on who is more vulnerable. Write up the reasons that the group gives for this.

When thinking about what makes a person vulnerable, encourage participants to think about factors (see **Key points** for more guidance) such as:

- biological and environmental/contextual exposure.
- issues of choice.
- emotional capacity.
- external pressures, etc.

8 Call out "next card" and wait for both groups to turn over the next card on their "deck". Then repeat steps 5 and 6.

9 Repeat step 5 until all of the cards have been turned over.

10 Ask participants whether there are any other factors affecting sexual vulnerability. Write up any other factors that the group suggests.

11 Ask the group which of these aspects of sexual vulnerability it will be easier to work on in order to reduce vulnerability. Use the **Action Chart** to record the group's suggestions for actions at the different levels of the spectrum.

12 Explore with the group who they think is forced to face risk and who ends up taking risks. Ask some of the following:

What is the difference between taking risks and facing risks?

Do men take more risks with HIV than women? If so, why?

Do women face more risks of HIV than men? If so, why?

What different risks do male and female migrants face and take? Why?

What are the impacts of taking and facing these risks for men and for women? Are there positive and negative impacts?

What other factors affect the risks of HIV that people take and that people face?

How can these risks be reduced?



ACTIVITY D.1: SEXUAL VULNERABILITIES

Facilitator's
notes**Advance Preparation:**

Before you begin the activity prepare two decks of "Person Cards" as follows (A printable version of the card is available on the accompanying CD-Rom):

First "deck" of cards:

Wealthy local politician
NGO worker
Factory worker
Unemployed youth
Doctor
Teacher
Farm worker
Undocumented female migrant

Second "deck" of cards:

Shop assistant
Miner
Nurse
Widow
Traditional birth attendant
Student
Seafarer
Human trafficker

The people on the cards can be changed according to the context you are working in. For example, if you are working with a particular migrant sector, consider the different people you might include on your decks of cards.

Remind participants to be specific about each person in terms of their gender, age and economic status when describing the situation in which the two persons are having sex. Highlight any assumptions the participants make about these persons, especially in terms of gender. For example, the group may assume that the doctor is a man and the nurse is a woman.

The group may decide that both persons on their cards are male (or both female). In this case, discuss possible situations in which these two persons could have had sex. Participants may say that they cannot think of such a situation. This may be because such a sexual encounter could not happen (which is unlikely). More likely, participants' own attitudes toward sexual diversity may make it hard for them to imagine these two men (or two women) having sex. In this case, you may need to talk more about sexual orientation and homophobia.



ACTIVITY D.1: SEXUAL VULNERABILITIES



KEY POINTS



Greater exposure:

Some people are more vulnerable to STIs (such as HIV and AIDS) because of biological and environmental exposure.

Biological: young women are more exposed because of their thinner vaginal lining; people with STIs are more exposed because of breaks in the skin in genital areas; people with other diseases of poverty are more exposed because of the impact of other infections on their immune system.

Environmental/Contextual: some people are more exposed to HIV because of where they live (high prevalence areas) or where they work (in occupational “cultures” that create more opportunities for unsafe sex).

Fewer choices:

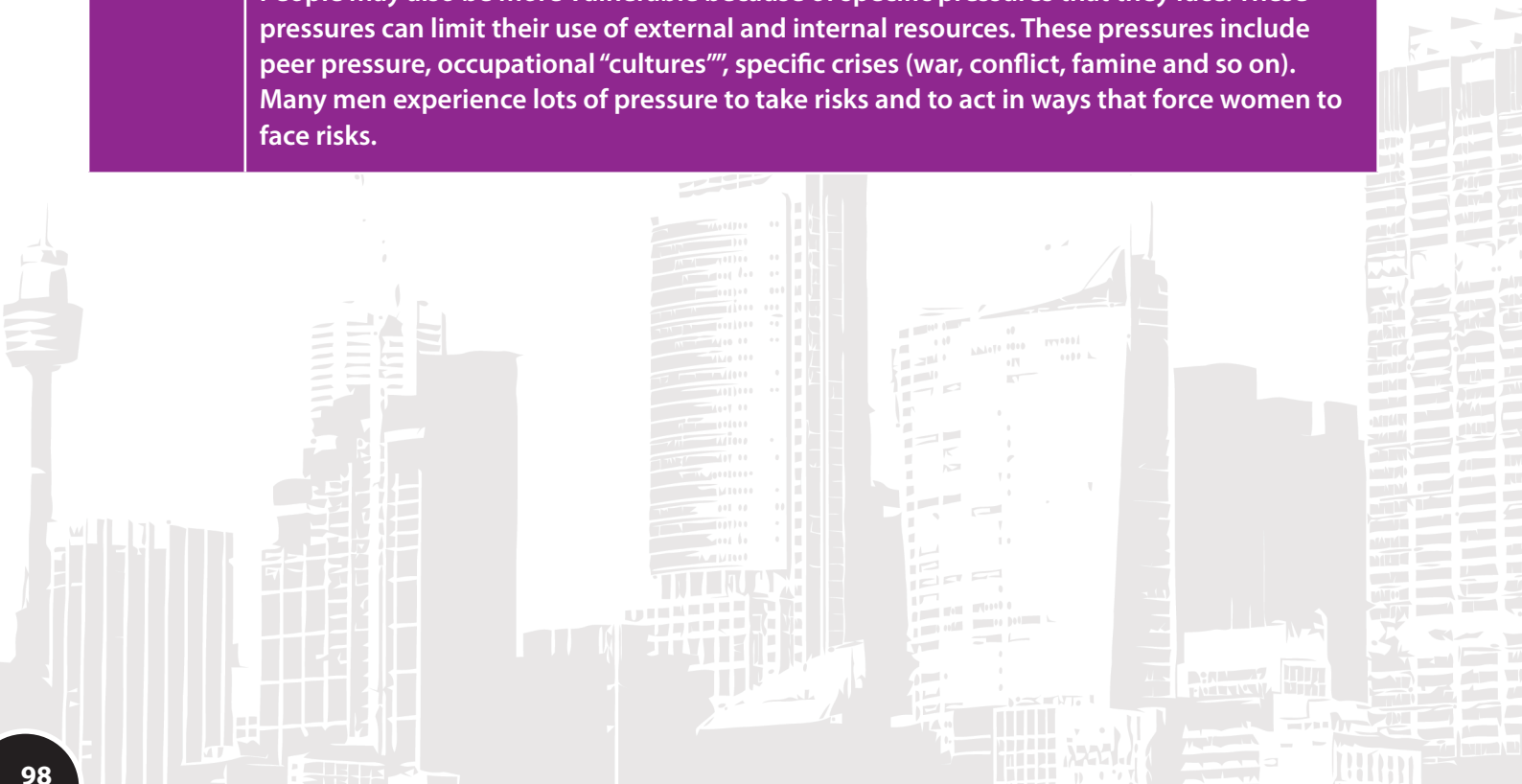
Some people are more vulnerable because of their lack of access to and control over external resources, such as economic, political and social power and status. Less resources equates to fewer choices. With fewer choices, people are vulnerable and end up often facing HIV related risks caused by their limited access to power.

Lesser abilities:

Some people are more vulnerable because of their lesser ability to deal with the risk of STI/HIV infection. People’s ability to deal with this risk is related to their level of internal resources. These include specific skills, psychological resilience, educational attainment, emotional intelligence, quality of relationships as well as self-esteem. It is important to remember that people’s internal resources are affected by their access to and control over external resources (see environmental/contextual).

Greater pressures:

People may also be more vulnerable because of specific pressures that they face. These pressures can limit their use of external and internal resources. These pressures include peer pressure, occupational “cultures”, specific crises (war, conflict, famine and so on). Many men experience lots of pressure to take risks and to act in ways that force women to face risks.



HANDOUT D.1: TAKING RISKS: HIV AND GENDER



Women face more risks of HIV than men because of their bodies.

Women are more likely than men to get HIV from any single act of sex because semen remains in the vagina for a long time after sex, thus increasing the chance of infection. There is also more virus in sperm than in vaginal fluid. The inside of the vagina is also thin and is more vulnerable than skin to cuts or tears that can easily transmit HIV/STIs. The penis is less vulnerable since it is protected by skin.

Very young women are even more vulnerable in this respect because the lining of their vagina has not fully developed. Forced sex also increases the chance that the vagina will tear or cut. As with STIs, women are at least four times more vulnerable to infection. Women often do not know they have STIs as they show no signs of disease. The presence of untreated STIs is a risk factor for HIV.

Women face more risks of HIV than men because they lack power and control in their sexual lives.

Women are not expected to discuss or make decisions about sexuality. The imbalance of power between men and women mean that women cannot ask for, let alone insist on using a condom or any form of protection. Poor women may rely on a male partner for their livelihood and, therefore, be unable to ask their partners or husbands to use condoms or refuse sex even when they know they risk becoming pregnant or infected with an STI/HIV.

Many women have to exchange sex for material favours (transactional sex).

This could be as blatant as sex workers, but also includes women and girls who exchange sexual favours for payment of school fees, rent, food or other forms of status and protection. **Female migrants**, such as informal traders or farm workers, may be forced to trade sex for food, shelter, transportation, or to go safely across borders.

The many forms of violence against women (as a result of unequal power relations) mean that sex is often forced which is itself a risk factor for HIV infection. Women who must tell their partners about STIs/HIV may experience physical, mental, or emotional abuse or even divorce. Women may give in to their partner's wishes to avoid being yelled at, divorced, beaten, or killed.

Men take more risks with HIV because of the way they have been raised to think of themselves as men.

Men are encouraged to begin having sex as early as possible, without being taught about caring for themselves, thereby increasing the possible time for them to be infected. A sign of manhood and success is to have as many female partners as possible. For married and unmarried men, multiple partners are culturally accepted. Men can be ridiculed and teased if they do not show that they will take advantage of all and any sexual opportunities.

Competition is another feature of living as a man, including in the area of sexuality – competing with other men to demonstrate who will be seen to be the bigger and better man. Another sign of manhood is to be sexually daring, which means you do not protect yourself with a condom, as this would be a sign of vulnerability and weakness. Many men believe that condoms lead to a lack of pleasure or are a sign of infidelity and promiscuity. Using condoms also goes against one of the most important signs of manhood such as having as many children as possible.

Male migrants

Male migrants often work in difficult and dangerous conditions which contribute to male perceptions of 'masculinity' and their attitudes towards sex. For example, a study conducted in Carltonville, South Africa, found that in order to deal with the psychological trauma of life in the mines, with little or no social and emotional support, men develop a culture of masculinity which involves drinking and engaging in frequent commercial sex.

Men are seeking younger partners in order to avoid infection and in the belief that sex with a virgin cures AIDS and other diseases. On the other hand, women are expected to have sexual relations with or marry older men, who are more likely to be infected.





ACTIVITY D.2: EXCHANGING SEX FOR GOODS ⁵⁶



Objectives 	To explore different kinds of exchanges that are made for sex, and identify ways to make them as safe as possible.
Time 	60 minutes
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens
Steps 	<ol style="list-style-type: none"> 1 Explain the objective of the activity to participants and ask them to identify the types of relationship in which sex might be exchanged for something. For example: husband/wife, boyfriend/girlfriend, teacher/student, boss/employee, older man/younger girl. 2 If you are working with migrant populations, ask participants to identify more specific types of relationships in which sex might be exchanged for something. For example: trucker/informal trader, farm supervisor/commercial farm worker, fisherman/sex worker. 3 Support the participants to identify a list of goods (things) that might be exchanged for sex. For example, food, transport, accommodation, money, jobs, school fees, border crossing, desirable objects and clothes. 4 Divide participants into pairs or small groups and give one type of relationship to each. Ask each pair to prepare a role-play to show a situation where sex is being exchanged for the goods. Try to ensure that in some cases males are exchanging sex for goods from a female. Ask each pair or group to perform their role-play to the whole group. 5 After each role-play, discuss what they have learned and ask them to identify how exchanging goods for sex affects HIV and AIDS. Ask participants questions such as: <ul style="list-style-type: none"> <i>Why is this person exchanging goods for sex?</i> <i>How does this type of exchange in this type of relationship affect both people's risk of HIV?</i> <i>How does the situation of migrant populations put them particularly at risk?</i> <i>What could individuals, men and women and the community do to reduce that risk?</i> <i>Is this exchange always risky and should it stop? Why?</i> <i>How could it be made safer?</i> 6 Summarise the actions that individuals and the community could take to support people to reduce their vulnerability to HIV in different types of relationships and different types of exchanges. Note these down on the Action Chart.

⁵⁶ Adapted from Keep the Best, Change the Rest, International HIV/AIDS Alliance's participatory toolkit for working with communities on gender and sexuality (2007).

ACTIVITY D.2: EXCHANGING SEX FOR GOODS

Facilitator's notes



Encourage the participants to discuss the many reasons behind exchanges for sex. For example, men may buy sex because they enjoy it, while women may sell sex to earn a living. On the other hand, girls may expect boys to give them a gift when they have sex to show that they value them, but do not see this as an exchange. Girls may also give presents to their boyfriends, which they buy with money obtained from older men.

KEY POINTS



If you are working with migrant populations, remind participants that many migrant women have little choice but to sell sex for survival, or to establish relationships with men in order to protect themselves whilst travelling.

Remember that many of us may have used our sexuality to make progress with our lives or our money to attract partners. Challenge people in the group who say stigmatising things about exchanging sex for goods.









ACTIVITY D.2: MEN AND ACCESSING HEALTH SERVICES, INCLUDING HIV AND AIDS SERVICES



ACTIVITY D.2.1: GENERAL HEALTH

Objectives 	<p>To be able to identify why men underutilise health services.</p> <p>To identify what can be done to get more men to use health services.</p>
Time 	<p>60 minutes</p>
Materials 	<p>None</p>
Steps 	<ol style="list-style-type: none"> 1 Ask participants to break into small groups of 3-5 people and talk about a time they were sick or in pain. Ask them to discuss what they did. If they did not go to a clinic, hospital or a traditional healer ask them to discuss why. Give 15 minutes for discussion. 2 After about 15 minutes, instruct the groups that they will be developing role-plays about men and health care services. 3 Ask each group to come up with a short role-play of no more than 3-5 minutes that illustrates how many men respond to injuries or health concerns, including HIV and AIDS. Ask them also to show what men's experiences of health care services are when they do use them. 4 Once all the groups have done their role-play, ask participants whether they could relate the role-plays back to their own personal experiences – whether about a health concern they themselves had or an experience they had with a service provider. 5 Ask why they think men tend to be reluctant to seek health services. 6 Ask the group how they think men's attitudes towards their health affect their vulnerability to HIV and AIDS.

ACTIVITY D.2.1: GENERAL HEALTH



Steps

1-2-3

- 7** Close the discussion by asking the group to brainstorm action they could take to increase men's use of health services. Write their responses on a flip chart. Responses should include:
- Recruit and train peer-educators to conduct outreach to men in the community about the value of health services.
 - Develop male-friendly materials to use in health facilities such as pamphlets, posters and videos.
 - Train health facility staff including janitors, guards, nurses, orderlies and doctors to proactively greet and welcome men into the facility.
 - Encourage service providers to seek out specialised training that increases their knowledge of men's health issues and their ability to respond to men's health needs.

Facilitator's notes



Encourage the participants to discuss the many reasons behind exchanges for sex. For example, men may buy sex because they enjoy it, while women may sell sex to earn a living. On the other hand, girls may expect boys to give them a gift when they have sex to show that they value them, but do not see this as an exchange. Girls may also give presents to their boyfriends, which they buy with money obtained from older men.

KEY POINTS







Men underutilise health services in part because of male socialisation and in part because the health system often does not cater well to men. To increase men's use of health services, it will be important to challenge the notion that seeking health is a sign of weakness while also calling on health officials to provide quality services to men and women.





ACTIVITY D.2.2: GETTING TESTED & STAYING HIV-NEGATIVE ⁵⁷



Objectives 	<p>To be able to identify ways to get more men to use VCT services.</p> <p>To be able to identify ways to support men in getting tested and staying negative.</p>
Time 	<p>75 minutes</p>
Materials 	<p>None</p>
Steps 	<ol style="list-style-type: none"> 1 . Ask the group to come up with all the reasons they can think of to go for an HIV test. Can they think of any reasons for not going for a test? Use the Key points to assist this discussion. 2 . Ask participants to say what “VCT” means. Use the information in the Key points to explain VCT. Ask participants if they know about VCT services in their area. If they don’t, provide information on local VCT services. 3 . Break the group into pairs. Tell them they have five minutes for a discussion. Ask the pairs on the left side of the room to discuss the question: What makes it hard for men to go for VCT services? Ask the pairs on the right side of the room to discuss the question: What would help more men go for VCT services? 4 . After five minutes, tell each of the pairs on the left side of the room to link up with one of the pairs on the right side. Ask them to share what they talked about with each other in these new groups of four. Give all the groups 15 minutes to make a list of actions that could increase men’s use of VCT. 5 . Bring the small groups back together. Ask participants to report back on their discussions. Use the Action Chart to keep a record of the suggested actions for increasing men’s use of VCT. 6 . Ask the participants to prepare a five minute role-play in their groups of four. It should begin with a man getting an HIV-negative test result, and end with him getting infected with HIV. 7 . Give the groups five to ten minutes to prepare their role-plays. Then call on each group to show their role-play to the rest of the participants.

⁵⁷ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.

ACTIVITY D.2.2: GETTING TESTED & STAYING HIV-NEGATIVE

<p>Steps</p> <p>1-2-3</p>	<p>8. After each role-play, allow a few minutes for a brief discussion, which could include questions from the audience about the behaviour of the characters. When all the role-plays are completed, discuss using these questions:</p> <p><i>Why do some people get HIV after they have tested negative?</i></p> <p><i>What can VCT services do to help men get tested and stay negative?</i></p> <p><i>What can other services do to help men get tested and stay negative?</i></p> <p><i>What can men in the community do to help men get tested and stay negative?</i></p>
<p>Facilitator's notes</p>	<p>Before the activity, find out where local VCT services are, when they are open, if they charge for the service and so on.</p>
<p>KEY POINTS</p>	<p>Voluntary Counselling and Testing (VCT) services offer people the chance to take an HIV test that will tell them if they are infected with HIV. This test is voluntary, meaning that it is an individual's decision to get tested or not. The test is also confidential. VCT services provide counselling. Before the test, counselling is used to help people decide whether to get tested. After the test, counselling is used to help people deal with the result of the test. It is important to be clear about the reasons both for and against the HIV test. Although the HIV test is confidential, it can be difficult for people to keep their HIV-positive result private, especially in small communities. Therefore, they run the risk of facing stigma and discrimination, which is still very common against people who are HIV-positive. Another reason against going for an HIV test is that it is still difficult for most people in southern Africa to get treatment for HIV and AIDS. Without the prospect of treatment, some would argue that there is little point in finding out if you are HIV-positive.</p> <p>On the other hand, there is evidence that people who find out their HIV positive status earlier (before they get sick) are able to live longer. This is because they can change the way they live so that they protect their health. Another good reason to get tested is to make sure that you protect the health of the people you love. Getting tested also helps to make good decisions about family planning.</p>





ACTIVITY D.3: HIV CASE STUDIES



Objectives 	To gain a better understanding of social issues that have an impact on HIV transmission.
Time 	45 minutes
Materials 	Case studies, prepared on cards or paper (see Facilitator's notes)
Steps 	<ol style="list-style-type: none"> 1 Divide the participants into three smaller groups. 2 Assign a case study to each group, and ask the members to read the story and answer a set of questions afterward. 3 Ask the groups to present their case studies and answers to the entire group of participants. 4 Discuss the answers.
Facilitator's notes 	<p>A printable version of the case studies is available on the accompanying CD-Rom.</p> <p>CASE STUDY ONE: MORAPEDI</p> <p>The case study is from Morapedi, who tells the story of his sister-in-law being abused by her husband who is his older brother and ultimately becoming infected with HIV and dying of AIDS due to her husband's infidelity. Morapedi writes:</p> <p><i>"She was young and full of life...The worse day was when she agreed to marry my selfish, arrogant brother. He was 17 years older than her. After they married, the three of us lived outside of Johannesburg, in Rustenburg where my brother was working. At first, things were great...But after a few months, he changed. He was coming home late, expecting to find everything in place...He would beat her and force himself onto her. Worst of all, he started seeing other young girls. She hung on because our culture taught her never to disobey or challenge him. Our culture says, 'Obey your man at all times. Never talk back or question how he comes and goes...' In 2004 she was diagnosed HIV-positive. Still he continued to beat her over and over, with no remorse. He expected her to have dinner on the table each night, even when she grew weaker and weaker. She passed away in December of that year. So young and with so much potential. She had a whole bright future ahead. I want to share this story with everyone. People don't like to talk about it, but I believe that sexual and domestic violence and HIV/AIDS are everyone's business. Who doesn't know someone who has faced these things?"</i></p>

ACTIVITY D.3

Facilitator's notes



Questions for discussion:

What factors made Morapedi's sister-in-law vulnerable to HIV?

What traditions increase women's vulnerability to HIV and AIDS in southern Africa?

What factors might have made it difficult, if not impossible, for Morapedi's sister-in-law to leave his brother?

What aspects of culture prohibited Morapedi's sister from leaving her husband or seeking help from family and friends?

What cultural aspects prohibited Morapedi from challenging his brother about the situation?

If it had been safe for Morapedi to talk to his brother about the situation, what do you think he could have said?

If you were in his shoes, what would you say?

How are women living with HIV treated in your community, and what might be done to improve their lives?

What environmental factors, if any, affected Morapedi's sister in dealing with her status?

What role/contribution did moving to Rustenburg have on Morapedi and his sister-in-law, in terms of support from family and friends?

How do you imagine Morapedi felt about the situation while living in Cape Town far from his brother and sister-in-law?

CASE STUDY TWO: ANONYMOUS

The case study is taken from a year in the life of a labour migrant from Zimbabwe living in South Africa.

It is November 2005. I am at home in Zimbabwe for only three weeks, after being deported from Lindela, the repatriation centre. I am recovering from a strange flu that I contracted there. Money is out of my pocket, and my wife is suffering from the drought and food shortage. I don't have an option other than going down to South Africa again....I am with four other guys now, travelling on foot to cross the border...A few weeks have gone by. I have found a job as a farm security guard. My work mate Jonas is the only other Zimbabwean. We are desperately looking for girlfriends to provide shelter, love, and belonging. We are having unprotected sex and contract STIs for the first time in our lives. Going for treatment is a challenge, because we do not know the local language, and we are afraid of being deported once again...Ten months later, and it is November 2006. So much, in only a year. I feel lucky now. I have brought my wife from Zimbabwe, and my working conditions have improved greatly. My friend has not been so lucky, he tested HIV-positive. Questions for discussion:



ACTIVITY D.3



Facilitator's notes



Questions for discussion:

- Why did he feel that he has no other choice than to leave Zimbabwe for South Africa?*
- What reasons do you think people have, for migrating between countries?*
- Why do you think he initially travelled to South Africa without his wife?*
- What traditions and practices has the migrant labour produced that contribute to HIV and AIDS?*
- What circumstances might force women to migrate on their own?*
- Anonymous says he and his friend looked for girlfriends "to provide shelter, love, and belonging." What do you make of this statement?*
- What might be different about this story, if he were a woman?*
- Why is xenophobia against migrants so prevalent?*
- How are labour migrants viewed/treated in your community?*
- How can individuals, community groups, and government agencies protect the health and safety of labour migrants and advocate for their rights?*
- If you were in his shoes, how differently would you have handled the situation?*

CASE STUDY THREE: ELIZABETH

The case study is from Elizabeth who lives in Zimbabwe, which like many parts of the world faces big challenges with HIV stigma and violence towards women and girls. She tells the story of her young niece, who was orphaned and subsequently abused by family members. Ultimately the niece's case was taken to court, and she regained her property and rights. Elizabeth says:

"I grew up with a mother; my children grew up with a mother; but my niece did not. Her parents loved her and her four young sisters. They were a happy, lovely little African family. Then her mother found out she was positive. Her father screamed, 'You looked for it, so you got it. I don't have AIDS, and you won't give it to me.' My niece saw violence in her happy home, and when she was only 13 years of age, the hungry demons of death snatched the souls of her parents away. Like vultures, her father's relatives descended on their property, and they took everything - furniture, clothes, pots, and pans. They left my niece and her sisters crowded in a corner. The neighbours simply shook their heads, and the children were given a new name: 'AIDS orphans ... your parents died of AIDS!'"

Discussion Questions:

- Why do you think some people stigmatise people living with AIDS?*
- What can you do to address stigma at the individual, environmental and structural levels?*
- Who cares for orphans and vulnerable children in your community?*
- What day-to-day struggles do orphans and vulnerable children face?*
- What traditions and cultural practices can be drawn on to address the needs of orphans and vulnerable children?*
- In situation where there are orphans in the community, what does culture say they should be treated?*
- How are orphans treated in your community?*
- What role can men play in meeting the needs of orphans and vulnerable children?*
- In situations where children live in a foreign country as orphans, what challenges do you think they may face?*
- How might those children be assisted by the community they live in?*
- What action can authorities take to protect the rights of those children?*

ACTIVITY D.3

Facilitator's notes



Use these case studies to promote discussion about gender and migration. Gender roles leave women vulnerable to HIV infection, violence and to stigma and encourage men to take risks that put themselves and their partners at risk. The stories illustrate the general ways in which gender roles increase men's risk-taking thereby putting women at risk and they show clearly how migration compounds the vulnerabilities faced by men and women. The case studies should also prompt discussion about culture and tradition and the ways in which these social forces affect vulnerability to HIV and AIDS.

KEY POINTS



Many men oppose violence against women and wish they could do more to stop it. Morapedi's story makes this clear.

Cultural practices that encourage women to be submissive to men increase women's risk of HIV infection. Both Morapedi's and Elizabeth's stories convey this point clearly.

HIV-related stigma leads to ongoing violations of the human rights of people infected and affected by HIV and AIDS. We have to challenge stigma whenever we notice it.




Men have a critical role to play in meeting the needs of orphans and vulnerable children in their roles as fathers, teachers, family members, political leaders, etc.





ACTIVITY D.4: IMPACT OF HIV AND AIDS ⁵⁸



Objectives 	<p>To understand the personal impacts of HIV and AIDS better.</p> <p>To be able to identify roles that men can play in reducing the impact of HIV and AIDS.</p>
Time 	<p>75 minutes</p>
Materials 	<p>None</p>
Steps 	<ol style="list-style-type: none"> 1 Divide the participants into pairs. Ask each person in the pair to speak for two minutes to answer the following question <i>If you had HIV, how would it change your life?</i> 2 After two minutes, ask the second person in the pair to speak: 3 Then give each person four minutes to answer the following questions: <i>What would be the most difficult part about being infected with HIV? Why?</i> <i>If you had HIV, what changes would you want to make in your romantic and intimate relationships?</i> 4 Bring the group back together and lead a general discussion using the following questions: <i>How did you feel answering the questions?</i> <i>How do HIV-positive people that you know or hear about deal with living with the virus?</i> <i>How do people who do not know their HIV status think about what life would be like if they were HIV-infected?</i> 5 Explain that you want to look more closely at the differences between the impacts of HIV and AIDS on women and on men. Divide the participants into two groups. Ask the first group to discuss what it is like as a woman to live with HIV or AIDS and how women are affected by HIV and AIDS. Ask the second group to discuss what it is like as a man to live with HIV or AIDS and how men are affected. 6 After 30 minutes, bring the groups back together. Ask each group to present the most important points of their discussion. Then use the following questions to lead a discussion: <i>What are the main differences between women and men in terms of living with HIV and AIDS?</i> <i>What are the main differences between women and men in terms of being affected by HIV and AIDS?</i> <i>How can men get more involved in caring for people who are living with HIV and AIDS and reduce the burden of care that women carry?</i> <i>In what other ways can men help to reduce the impact of HIV and AIDS on women and on other men?</i>

⁵⁸ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.

ACTIVITY D.4

<p>Steps</p> <p>1-2-3</p>	<p>7 Make a note of any action suggestions on the Action Chart and sum up the discussion making sure that the Key points are covered.</p>
<p>Facilitator's notes</p>	<p>This activity can be very personal and emotional. There may be participants in the group who are HIV-positive or who have close friends or family members living with HIV or who have died from AIDS-related illnesses. Remind the group that it is okay to pass on a question, and encourage the participants to share only the information that they feel comfortable sharing.</p> <p>If the participants don't feel comfortable talking about this in pairs, another option is to ask individuals to think about the first set of questions on their own and then go on to step 3.</p> <p>Remember that men's and women's experience of HIV and AIDS will also be affected by age, class, cultural, ethnic and other differences.</p>
<p>KEY POINTS</p>	<p>WOMEN ARE MORE HEAVILY AFFECTED BY HIV AND AIDS THAN MEN.</p> <p>They are responsible for the health care of all family members. Care is only one of the many activities that women must do in working to support and take care of the family. This care is provided free but it has a cost! During illness or caring for ill people, women cannot do their other work and this has a serious impact on the long term wellbeing of the household. Women bear a burden of guilt of possibly infecting their children. Living with the discrimination and stigma increases stress. Care does not end with the death of the husband/child/sister. Women are often blamed for not having cared for the husband enough, some even being accused of being witches. Care of orphans lies with grandmothers and aunts. Oftentimes carers are HIV-positive themselves.</p> <p>GENDER ROLES AFFECT THE WAY THAT MEN DEAL WITH HIV AND AIDS.</p> <p>Gender roles can harm the health and wellbeing of men living with HIV. For instance, research has shown that even when men might want to participate in care and support activities, they may choose not to because of fears that, if they did, other men might ridicule them for doing women's work. Similarly, gender roles encourage men to think of seeking help as a sign of weakness. This discourages men from getting tested, using ART or from using support groups. This belief can also limit the amount of support men provide to others dealing with HIV and AIDS. These same gender roles also increase the likelihood that, instead of seeking support, men might rely on alcohol, drugs or perhaps even sex to deal with feelings of despair and fear.</p> <p>MEN CAN PLAY A GREATER ROLE IN REDUCING THE IMPACT OF HIV AND AIDS.</p> <p>We need to work with men to help them and challenge them to get more involved in care and support activities. Men can also talk with the women in their lives about sharing the tasks in the family or household more equally so that the burden is not all on women. Men have a critical role to play in supporting other men to deal with HIV and AIDS, both emotionally and practically.</p>



MODULE E
Power and Privilege



MODULE E - Power and Privilege



This module gives an overview of key concepts related to **power**, health and human rights. Specifically, it explores:

- The relationship between power, **privilege** and access to rights.
- The interconnectedness between different forms of power and powerlessness.
- Different forms of power.
- The nature and importance of human rights.

KEY OBJECTIVES

Through the activities in this module we aim to:

- Assist participants to understand the role they can play in addressing the power inequalities contributing to gender-based violence and HIV and AIDS.
- Help participants understand their own relative power or powerlessness and examine the way they make decisions that can prevent HIV and gender-based violence.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become change agents in their own lives and community. This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level, taking action to:

- Help participants to understand and develop strategies for

challenging power inequalities in their communities.

- Hold local stakeholders in positions of power, such as police, health service professionals and local leaders, to their promises.
- Encourage community leaders to speak about gender-based violence and HIV.

At the broader structural (societal) level, taking action to:

- Draw attention to the structural drivers of the HIV epidemic and encourage participants to think about ways they can collaborate with other organisations working for social justice.
- Join or form advocacy networks focusing on holding governments to their commitments.
- Participate in official government delegations to United Nations meetings such as the Commission on the Status of Women (CSW) or the UN General Assembly Special Session on AIDS (UNGASS) held every 5 years.
- Communicate with United Nations appointed investigators known as special rapporteurs who are tasked with investigating whether governments have complied with their commitments.

After the training

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Organising a gender, migration and HIV training session for community leaders, such as police, traditional leaders, teachers, health service providers.
- Undertaking a community project looking at role models in your community, showcase these at a community event.





Understanding power and privilege



It is important to talk about the difference between feeling powerful as an individual and belonging to more powerful groups in society. Membership in more powerful groups in society means having more economic, political and social power relative to others in the same society. Powerful groups can derive their power from a multitude of sources: belonging to a group that is privileged by race, class, **ethnicity** or religion, or combinations of these, is the most common source of such power. Power can also come from a person's sex and/or sexual identity. While we know that sex isn't the only piece of a person's identity that confers or removes power, gender ideologies that uphold men are a universal source of men's power. We might see that some individual women may feel powerful in their own lives; but as a group, women lack economic, political and social power in southern Africa and everywhere in the world. Having economic power means having access to and control over economic resources, such as money, credit and land. Political power is the ability to make decisions, or influence the decisions made, about public policy. Having social power means having an influence over community

and cultural life, including, most importantly, decisions over your own bodily integrity. When we look at the facts, it is clear that men have more of these types of power than women, especially the power to dominate women through sexual violence.

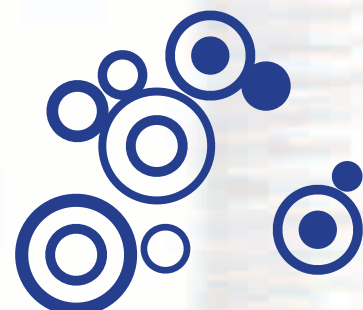
ETHNICITY
Refers to large groups of people classed according to common racial, national, tribal, religious, linguistic, or cultural origin or background.

Because the situation is complicated by other factors such as by how old people are, by how rich or poor, by their racial or ethnic group, by their sexual orientation, by the ways in which they understand and use violence, it is important always to understand how our gender identity fits into all our other sources of identity, which has important impacts on how people choose to organise themselves. It's becoming increasingly common to think of people working together in groups bound by shared gender oppression

– such as “women's groups” – but in reality, that group may also be bound by other shared oppression: when we look closely, the “women's group” may actually be composed of women who are also poor and also of an ethnic minority, and these women may consider themselves to have more in common with poor, ethnic minority men than with rich women.

Gender is one universal form of oppression; but on a broader scale, other inequalities may also become significant. The vast majority of people in southern Africa remain disempowered by poverty. Women and men from poor communities share this oppression in common, and need to work together to build their access to power. We must understand gender power inequalities in the context of broader inequalities. Gender justice is a part of **social justice**, which can only be tackled by understanding the multiple sites of power and powerlessness and recognising how these work together to keep people oppressed.

SOCIAL JUSTICE
Refers to the concept of a society in which justice is achieved in every aspect of society, rather than merely the administration of law. It is generally thought of as a world which affords individuals and groups fair treatment and an impartial share of the benefits of society.



Power, Privilege and HIV



The imbalance of power between women and men affects all aspects of men and women's social roles and sexual lives. Because men's power is often established and maintained through violence, we can directly track how women's powerlessness increases their vulnerability to HIV. Many of the conditions that allow HIV to spread result from a systematic misuse of male power and range all the way from interpersonal to institutional abuse: there is a continuum between women's lower status, men's sexual entitlement,

men's violence against women and women's inability to make health choices because of a lack of access to economic power and proper healthcare. To prevent HIV from spreading further, we need to create a more equal balance of power between men and women, we need to make sure that individuals understand and work towards this change, and we need to change the **institutions** that should help us stop HIV and protect those who are already infected.

INSTITUTIONS

Are established organisations, especially dedicated to social issues such as education, public service, culture or the care of the destitute, poor, etc, and also includes customs and practices of a society or community i.e. marriage. For instance there are a number of social institutions that play a role in teaching gender roles. They include: the family, schools, the workplace, religion, the media, and internal policing and external security (police, prisons, military).

Promoting Gender Equality by Challenging Male Power and Privilege



In order to challenge male power and privilege, it is important to understand how such privilege is established and maintained.

More powerful groups control more resources than less powerful groups. People who control resources have greater power in society than those who do not. These resources include: economic resources (work, credit, money, social security, health insurance, housing); political influence (positions of leadership, influence over decision-making); education (formal/informal education/non-

formal); time (hours available to use for a person's own advancement, networking, flexible paid hours, time to rest); and internal resources (self esteem, self confidence, bodily autonomy). Gender norms and roles give men more control over all these things than women are allowed.

More powerful groups stay in control because they feel their superiority to other groups. In South Africa, apartheid taught black people to think that they were inferior to white people. In the same way, men maintain their power over women

PATRIARCHY

A social system in which men are seen as being superior to women and in which men have more social, economic and political power than women.

because of **patriarchy** – a social system based on the idea that men are superior to women.

More powerful groups use violence to maintain control. Violence against women, actual or threatened, is not about men losing control, but it is a tactic men use to maintain their power over women.



Promoting Gender Equality by Practicing Power Differently



It is also important to look at the different meanings and practices of power. It is helpful to think about different ways that power can work.

Power over

To have control over somebody or a situation in a negative way. This is usually associated with repression, force, corruption, discrimination and abuse. This kind of power is taken from somebody else and then used to dominate and prevent others from gaining it. This kind of power comes about because it is seen as a finite resource: people are forced to believe that there is only a limited amount of power in the world and that they have to fight to take and keep their share of it.

Power to

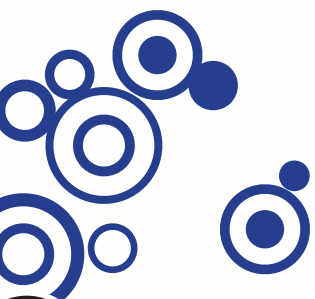
This kind of power refers to the ability to be able to shape and influence one's life and the lives of others who share your vision. It refers to having the ideas, knowledge, skills, money and ability to convince yourself and others to do something. Together with lots of other people with this kind of power we can create "power with" (see below). This kind of power can be used both selfishly, to block outsiders from power, or generously, to make more power for all.

Power with

Is to have power on the basis of collective strength and/or numbers. It is to have power with people or groups, to find a common ground among different interests and to build a common goal to benefit all those in the collective. This power is based on support, solidarity and collaboration. This kind of power is seen as an infinite resource: the more you share power equally among all, the more power there is to share.

Power within

This kind of power is related to a person's feeling of self-worth and self-knowledge. It is related to a person's ability to imagine a better life for her/himself and being able to see how to share this power with others and in the process, empower everyone. It is about having hope and a sense of being able to change the world. It is about the feeling of having rights as a human being and respecting the rights of others. It involves having a sense of self-confidence and a feeling that "I have value because I exist and I make a contribution".





ADDITIONAL RESOURCES

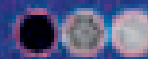
- **Transforming Communities** and their work with Community Action Teams. Transforming Communities is an American community-based organization that works to prevent violence against women and girls: www.transformcommunities.org
- **Women on Farms** is a South African NGO working with women in commercial agriculture, mainly in the Western Cape Province. Their Sikhula Sonke project is an independent women-led trade union for farm women who have organised against evictions and for wage increases using community mobilisation and international networking to assert their demands: www.wfp.org.za
- **Treatment Action Campaign** (TAC) is a South African NGO

which campaigns for treatment for people with HIV and to reduce new HIV infections. It provides training programmes on treatment literacy and the science of HIV treatment and prevention. TAC has successfully used advocacy and activist strategies to win their demands for access to treatment from the International Pharmaceutical Manufacturers Association and the South African government: www.tac.org.za

- **The François-Xavier Bagnoud Center for Health and Human Rights** is the first academic center to focus exclusively on health and human rights. The Center combines the academic strengths of research and teaching with a strong commitment to service and

policy development: www.hsph.harvard.edu/fxbcenter





- **AIDS Rights Alliance for Southern Africa** (ARASA) is a regional partnership of non-governmental organisations working together to promote a human rights approach to HIV and AIDS in Southern Africa through capacity building and advocacy. www.arasa.info
- **Men's Action to Stop Violence Against Women** (MASVAW) mobilises men across the Indian state of Uttar Pradesh to educate men and women about the new Indian Domestic Violence Act and to demand its speedy implementation. www.sahayogindia.org



ACTIVITY E.1: EXPLORING POWER



ACTIVITY E 1.1. - What is Power? ⁵⁹

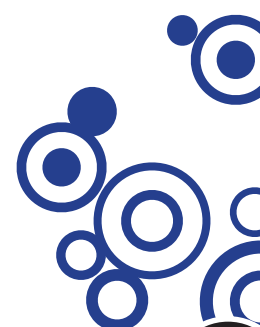
Objectives 	<p>To understand what power is.</p> <p>To be able to describe what they have learned from their own experiences of power and powerlessness.</p> <p>To identify the different groups that have power and the groups that are targeted for unfair treatment, and explore the reasons for the differences.</p>
Time 	<p>30 minutes</p>
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens • Tape • Handout E.1.1. – Different Types of Power – one per participant
Steps 	<ol style="list-style-type: none"> 1 Give each participant a sheet of paper. Ask them to draw a line down the middle. Ask them to draw a situation in which they felt powerful on one side. On the other side, they must draw a situation that has made them feel powerless. 2 After about 10 minutes, ask two people to explain their drawings of when they felt powerless, and another two people to explain their drawings of when they felt powerful. 3 Draw a line down the middle of a piece of flip chart paper. On the left-hand side write, "Feeling powerful", and on the other side write "Feeling powerless". 4 Ask participants to say what their feelings were in situations when they were feeling powerful. Write these down in the left-hand column. Ask participants to say what they felt in situations when they were feeling powerless. Write these down in the right-hand column. Use the points in the Key points section to help participants discuss what it feels like to feel powerful and powerless. 5 Using the information on the flip chart paper as a starting point, lead a discussion about what power is and what it means to participants. The following questions may help the discussion: <ul style="list-style-type: none"> <i>What kinds of situations make us feel powerful/powerless?</i> <i>Is power something that you can have on your own or something you only have in relation to somebody else?</i> <i>Are we always in situations where someone has power?</i> <i>How do gender roles and gender norms affect the power that people have?</i> <i>How does having or not having power make us feel?</i> <i>What aspects of being a migrant make us feel powerful?</i> <i>What aspects of being a migrant makes us feel powerless?</i> <i>What are the different types of power that we can have?</i>

⁵⁹ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).

ACTIVITY E.1: EXPLORING POWER



Steps 	6 Give out the Handout E.1.1. – Different Types of Power. Use it to help sum up the discussion and the main points that came out of the participants' stories.
Facilitator's notes 	<p>It is important to talk about the difference between feeling powerful as individuals and the economic, political and social power that comes with belonging to more powerful groups in society. For example, some individual women may feel powerful in their own lives; but as a group, women lack economic, political and social power. If any participants talk about knowing many powerful women, be sure to make this point about the difference between individual feelings of powerfulness and belonging to a powerful group in society.</p>
KEY POINTS 	<p>Feeling powerful feels like being:</p> <ul style="list-style-type: none"> • In control • Knowledgeable • Brave • Big • Potent • Happy <p>Feeling powerless feels like being:</p> <ul style="list-style-type: none"> • Small • Unwanted • Fearful • Unconfident • Incompetent • Downtrodden <p>POWER ONLY EXISTS IN RELATIONSHIP TO OTHER PEOPLE. We only have or do not have power in relation to somebody else or another group. It only exists in a relationship.</p> <p>POWER IS NOT FIXED. It is not something we always have all the time. We are constantly moving in and out of situations and relationships where we have more or less power.</p> <p>POSITIVE AND NEGATIVE FEELINGS. We often feel positive and in control when we are feeling powerful and have negative feelings when we are feeling less powerful. This affects our ability to influence and take action in a situation.</p>





HANDOUT E.1: DIFFERENT TYPES OF POWER



Power only exists in relationship to other people:

We only have or do not have power in relation to somebody else or another group. It only exists in a relationship.

Power is not fixed:

It is not something we always have all the time. We are constantly moving in and out of situations and relationships where we have more or less power.

Positive and negative feelings:

We often feel positive and in control when we are feeling powerful and have negative feelings when we are feeling less powerful. This affects our ability to influence and take action in a situation.

There are different types of power which can be used in different ways. These are:

Power over:

To have control over somebody or a situation in a negative way, usually associated with repression, force, corruption, discrimination and abuse. This kind of power is taking it from somebody else and then using it to dominate and prevent others from taking it – a win-lose situation.

Power with:

Is to have power on the basis of collective strength and/or numbers – to have power with people or groups, to find a common ground among different interests and to build a common goal to benefit all those in the collective. This power multiplies individual talents and knowledge and is based on support, solidarity and collaboration.

Power to:

This kind of power refers to the ability to be able to shape and influence one's life. It refers to having the ideas, knowledge, skills, money and ability to convince yourself and others to do something. With lots of people with this kind of power we create "power with" (see above).





Power within:

This kind of power is related to a person's feeling of self-worth and self-knowledge. It is related to the ability a person has to imagine a better life for her/himself and to have hope and the sense that he/she can change the world, the feeling that they have rights as a human being. It involves having a sense of self-confidence and a feeling that they have value because they exist.



ACTIVITY E.1.2. : WHO IS MORE POWERFUL ⁶⁰



Objectives 	<p>To understand what power is.</p> <p>To be able to describe what they have learned from their own experiences of power and powerlessness.</p> <p>To identify the different groups that have power and the groups that are targeted for unfair treatment, and explore the reasons for the differences.</p>																										
Time 	60-90 minutes																										
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens • Case studies, prepared on cards or paper (see Facilitator's notes) • Power Chart framework on a piece of flip chart 																										
Steps 	<p>1 Remind the group that the previous activity looked at what power is and the different kinds of power. Explain that now it is time to look at which groups have more power than others and the effects of these inequalities in power.</p> <p>2 Ask participants to brainstorm the different groups in southern Africa (or groups of people from their own communities) that fit these in to the power chart categories. Help them come up with examples of these two groups by suggesting categories that may have power and a target group. Consider sex, race, age, religion, financial status and sexual orientation.</p> <p>3 A 'power chart' might look something like this:</p> <table border="1"> <thead> <tr> <th>MORE POWERFUL GROUPS</th><th>TARGETED GROUPS</th></tr> </thead> <tbody> <tr><td>Men</td><td>Women</td></tr> <tr><td>White people</td><td>Black people</td></tr> <tr><td>Adults</td><td>Young people</td></tr> <tr><td>Employers</td><td>Employees</td></tr> <tr><td>Employers</td><td>Seasonal employees</td></tr> <tr><td>Adults</td><td>Children</td></tr> <tr><td>Wealthy</td><td>Poor</td></tr> <tr><td>Citizens</td><td>Documented and undocumented migrants</td></tr> <tr><td>Christians</td><td>Non-Christians</td></tr> <tr><td>Foreign fishermen</td><td>Local sex workers</td></tr> <tr><td>Immigrant officer</td><td>Informal cross-border trader</td></tr> <tr><td>Heterosexuals</td><td>Homosexuals</td></tr> </tbody> </table>	MORE POWERFUL GROUPS	TARGETED GROUPS	Men	Women	White people	Black people	Adults	Young people	Employers	Employees	Employers	Seasonal employees	Adults	Children	Wealthy	Poor	Citizens	Documented and undocumented migrants	Christians	Non-Christians	Foreign fishermen	Local sex workers	Immigrant officer	Informal cross-border trader	Heterosexuals	Homosexuals
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⁶⁰ Steps 1 and 2 adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).



ACTIVITY E.1.2. : WHO IS MORE POWERFUL



Steps

1-2-3

4 Explain to participants that the group will be exploring this concept of power further by examining a few case studies and responding to questions on these. Divide participants into 5 small groups. Hand out a case study and corresponding questions to each group.

5 Give participants 15 minutes to prepare responses and then reconvene everyone to talk about each case study in turn. Lead a discussion on different aspects of power, how themes overlap between the different case studies and where the differences lie, and why.

Facilitator's notes



Advance Preparation: Before the activity prepare the following:

- i. A "power chart". Draw a line down the middle of a piece of flip chart paper. At the top of the left-hand column write "More powerful groups" and at the top of the right-hand column write "Targeted groups".
- ii. Case studies on A4 paper. Printable versions of the case studies are on the accompanying CD-Rom.

Case study 1: David

David is from Malawi and has been working at a construction site in Zambia for the last eight weeks. Since being in Zambia he has had two incidents where he has been unable to access appropriate healthcare because of his migrant status. His supervisor has not supported him in this matter. He is now unsure of where to go for VCT, and decides to wait until he gets back to Malawi next month.

Questions:

How does David lack power in this situation?

What type of resources is he denied on account of his migrant status?

What else might affect his 'power' whilst in Zambia?

Which people/institutions hold the power in this situation? How is it maintained?

Case study 2: Philani

Philani has been working on the same farm for nearly five years. Over the last year, he has applied three times for different managerial positions appropriate to his skills and experience. On all three occasions he has seen these positions given to white people, much younger than him and with far less experience. Another year passes and a new farm owner takes over the farm; Philani is finally promoted to a supervisor. After a few months however he discovers he is being paid a lot less than his white counterparts.

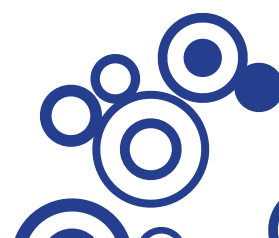
Questions:

Who holds power in this situation? How are they maintaining their power?

In what ways is Philani being unfairly treated?

What rights is Philani entitled to?

How can Philani act on these rights, and claim power?



ACTIVITY E.1.2. : WHO IS MORE POWERFUL

Facilitator's
notes



Case study 3: Nomsa

Nomsa and her husband have four children together. She would personally prefer not to have any more children, and has also recently started thinking that she might like to start up her own business. Her husband disagrees, saying that they must have another child and that there is no way he will allow Nomsa to work. Nomsa doesn't feel able to confront her husband on these issues, particularly because he has been violent towards her in the past.

Questions:

How is Nomsa being denied power?

What types of resources does she lack in this situation?

What types of power are being maintained by Nomsa's husband?

What can men do to support women to claim power?

Case study 4: Luiza

Luiza is an informal cross border trader and comes to South Africa to buy goods that she sells back home. While she travels she has no money for accommodation or transport. She often gets lifts from truck drivers some of whom expect her to have sex with them.

Questions:

How does Luiza lack power in this situation?

What factors make it difficult for Luiza to gain power in this situation?

What risks does Luiza face in having to have sex to ensure accommodation or transport?

What changes could be made to ensure that Luiza's job as a cross border trader is made safer and easier for her?

Case study 5: Lindani

Lindani is 13 years old and after his parents were killed in a fire three years ago, has been living alone on the streets. In order to survive on the street, Lindani engages in sex with other men for money, a meal or a place to sleep. He has no idea what HIV or AIDS is.

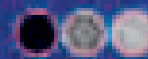
Questions:

How is Lindani denied power in this situation?

What different types of resources does he lack access to? How does this reduce his power overall in society?

Who is maintaining the power? Why and how are they able to?

In what ways can youth and adults work together towards the health, development and power of young people?



ACTIVITY E.1.2. : WHO IS MORE POWERFUL

KEY POINTS⁶¹



People often blame the less powerful for their lack of power.

In other words, they blame the victims of oppression rather than the oppressor. For example, one common reaction from men to this activity is to say that it is women who are mainly responsible for oppressing other women.

As facilitator, it is important that you let people have their reactions but also that you challenge this 'blame the victim' mentality.

Point out that it is common for some individuals within the oppressed groups to deal with their frustrations of being oppressed by reinforcing the views of the oppressor group. Women often do not themselves have resources and power. They get their power through their relationship with men.

More powerful groups control more resources than targeted groups.

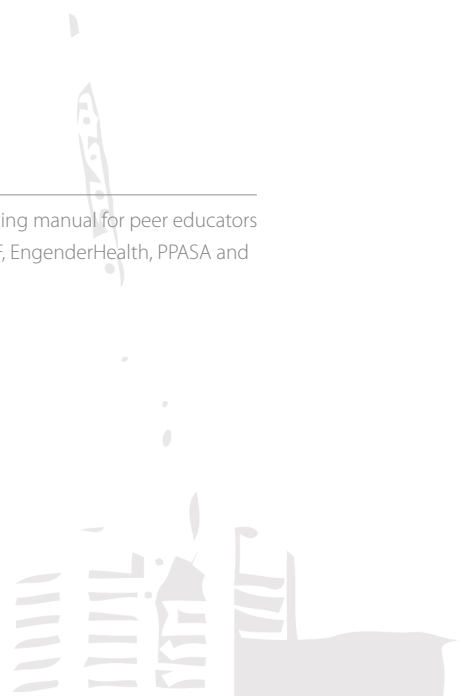
People who control resources have greater power in society than those who do not. These resources include:

- Economic resources (work, credit, money, social security, health insurance, housing).
- Political influence (positions of leadership, influence over decision-making).
- Education (formal/informal education/non-formal); time (hours available to use for a person's own advancement, networking, flexible paid hours).
- Internal resources (self-esteem, self-confidence).

More powerful groups stay in control because of ideas about their superiority. For instance in South Africa, apartheid taught black people the idea that they were inferior to white people. National citizens feel powerful over foreigners. In the same way, men maintain their power over women because of patriarchy (a social system based on the idea of male superiority). Women as well as men maintain this system.





More powerful groups use violence to maintain control. Violence against women, actual or threatened, is not about loss of control by men but is a tactic used to maintain men's power over women.

⁶¹ Adapted from HIV/AIDS and Gender Equity Training Project: a training manual for peer educators in the South African National Defence Force, Masibamisane SANDF, EngenderHealth, PPASA and Women's Health Project (2003).

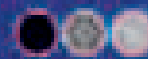


ACTIVITY E.2: POWER, STATUS AND HEALTH ⁶²



Objectives 	<p>To understand the power held by different individuals and groups in society.</p> <p>To understand how this power can determine their ability to access rights.</p> <p>To understand how power structures operate in society, and are kept in place by class and gender.</p> <p>To identify strategies for challenging inequalities in power.</p>
Time 	90 minutes
Materials 	<ul style="list-style-type: none"> • Flip chart • Koki pens • Character cards (see Facilitator's notes)
Steps 	<p>1 Explain to the participants that this exercise will help them to understand how gender and people's access to resources can contribute to positive or negative reproductive health outcomes.</p> <p>2 Ask them to stand in one straight line. Give each of the participants a character card which describes different people in society.</p> <p>3 Ask the participants to read out the "role" that has been given to them.</p> <p>4 Explain that you want participants to assume the role that has been written on the piece of paper you gave them. You will read a series of statements. For each statement, you would like them to consider whether that statement applies to the role they have been given. If it does, they should move forward one step. If it doesn't, they should stay where they are. For example, one of the participants is assuming the role of a member of parliament (MP). You then read the following statement – "I can protect myself from HIV." Since it appears likely that the MP can protect himself or herself from HIV, the person playing this role would move forward one step.</p>

⁶² Adapted from Manual for Men Working with Men on Gender, Sexuality, Violence and Health, a manual developed by Men's Action to Stop Violence Against Women (MASVAW) in Uttar Pradesh, India, and Men As Partners Manual, 3rd edition (unpublished).



ACTIVITY E.2: POWER, STATUS AND HEALTH



Steps

1-2-3

5 Read out some of the following statements to the participants.

- I can negotiate safer sex with my partner.*
- I can find the time to read the newspaper each day.*
- I can get a loan when I need extra money.*
- I can read and write.*
- I can refuse a proposal of sex for money, housing or other resources.*
- I don't have to worry about where my next meal will come from.*
- I can leave my partner if s/he threatens my safety.*
- If I have a health problem, I can get the help I need right away.*
- I have had or will have opportunities to complete my education.*
- If my sister were pregnant, I would have access to information to know where to take her.*
- I can determine when and how many children I will have.*
- I can protect myself against HIV.*
- If I become HIV-positive, I can access anti-retroviral treatment when I need it.*
- If a crime is committed against me, the police will listen to my case.*
- I can walk down a street at night and not worry about being raped.*
- I can travel around the city easily.*
- I could find a new job easily.*
- I am respected by most members of my community.*

6 Now ask the participants the following questions:

- Do you agree with the steps that different people took? Why or why not?*
- Did your own stereotypes, assumptions or lack of knowledge about your "role" affect your decisions to step forward? What kind of assumptions did you make?*
- Why did people end up in the positions they are now in, even though they all started at the same place in the game?*
- How do you feel about where you have ended up?*
- Would your character be at high risk of catching HIV? Why/why not?*
- Would your character be at high risk of violence? Why/why not?*
- What was the impact of being a member of a community organisation or activist group?*

7 Explain to participants that they will now explore strategies for challenging the power inequalities they have witnessed in the game. Split the group into six smaller groups, and give one role to each group. To decide on the roles, discuss with the participants which roles would be most relevant to the environment they are living and working in.

8 Ask participants to brainstorm the following questions in their groups:

- What particular health needs might a female sex worker* have?*
- (*An example of one of six potential roles to be distributed to each group)*
- What resources and information does a female sex worker have access to in this area?*
- What kind of group or organisation might she join to become better able to access these resources? How might this group or organisation encourage her to join?*
- What other activities might this group or organisation do towards securing sex workers' rights in this area? Which other groups or organisations might they work closely with?*

ACTIVITY E.2: POWER, STATUS AND HEALTH



Steps

1-2-3

9 Reconvene the group after 20 minutes. Write down the different strategies that each of the groups have come up with. Point out that those who are involved in community structures and know their rights are more likely to have greater control of their lives, and gain access to rights and services.

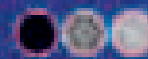
10 Close the discussion by asking what community groups or organisations participants are members of or would like to join. Encourage them to make a commitment to joining these in the coming months and make a note of these on the **Action Chart**.

Facilitator's notes



On individual pieces of paper, write the following "Character Cards" which describe different types of people in society (these can be modified to suit different settings). A printable version is available on the accompanying CD-Rom.

- Female advertising executive
- 35 years old female refugee from DRC
- Young, male migrant construction worker, living in a tent next to the road his team is working on
- Male mineworker from Lesotho working in South Africa
- Male corporate executive
- 25 year-old unemployed female
- Female migrant farm worker
- Male taxi driver
- 60 years old male pastor
- Grandmother taking care of seven orphaned grandchildren with her pension
- Female sex worker
- Male sex worker
- Male Border official aged 32
- 12 year-old female living in informal settlement,
- 14 year-old male, living in security complex in the suburbs
- Female nurse
- Married mother of three employed in town as domestic worker
- Male doctor
- Female domestic worker, living and working in the city with two children at home in the rural area, cared for by their grandmother
- 10 year-old male street kid
- Female Member of Parliament
- Unemployed male AIDS activist living openly and positively with HIV
- 30 years old male teacher
- Widow with two children, living with late stage of AIDS
- Male farm supervisor
- An active female member of a savings club with friends
- 60 year-old female active in community policing forum



ACTIVITY E.2: POWER, STATUS AND HEALTH



Facilitator's notes



In the first part of the activity, it is important that when people have finished taking their steps, they stay where they are when answering the follow-up questions. If you feel that the group will be too big to have this discussion, divide it into two and do the exercise twice. Alternatively, ask the participants to take smaller steps for each statement so that they don't become spread out over such a large space.

Feel free to develop different roles for people, according to the country, region or setting you are working in.

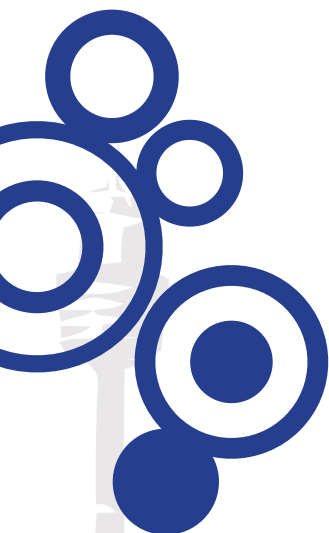
KEY POINTS



Different power structures and social forces ensure that discrimination in society continues to exist. Individuals are discriminated against on the basis of their class, age, sex, educational levels, physical abilities and so on.

There is a direct link between our position in society and how vulnerable we are to poverty, violence and disease. Power structures keep discrimination in place and very often use violence to achieve this.

Being active in a community group is a positive step towards being able to understand and access rights and services.





MODULE F
Alcohol



MODULE F - Alcohol



This module examines the relationship between alcohol use, gender-based violence and HIV and AIDS. It makes the case that social drinking can serve as a healthy way for men and women to enjoy time together. However, it also asks participants to reflect on the ways in which gender socialisation, ideas about masculinity and other social factors such as boredom, loneliness often put men at risk of unhealthy drinking and drug use. Although the module looks primarily at alcohol many of the issues raised also apply to other types of **substance abuse**.

This module explores:

- What constitutes problem drinking?
- The relationship between gender socialisation, alcohol abuse and vulnerabilities to violence, HIV and AIDS, and other health problems.
- Knowledge and tools to challenge problem drinking.

KEY OBJECTIVES

Through the activities in this module we aim to:

- Encourage participants to understand the link between alcohol consumption and increased risk behaviours such as violence and unprotected sex.
- Encourage participants to develop harm reduction strategies that minimize their own and their friends alcohol related risk-taking behaviours.
- Encourage participants to drink responsibly.

FOSTERING ACTION

This gender, migration and HIV training aims to foster positive action and change and empower participants to become change agents in their own lives and community. This module aims to encourage action at different levels.

At the environmental (community and interpersonal) level, taking action to:

- Educate bar owners, servers and patrons about safe drinking strategies.
- Establish support groups for people with alcohol and drug problems within communities.
- Increase access to other healthier forms of entertainment and leisure.

At the broader structural (societal) level, taking action to:

- Lobby for local and national policies that might be effective in reducing alcohol consumption.
- Raise awareness on laws pertaining to alcohol use.
- Ensure that these laws are enforced.

*After the training*

As a facilitator think about how you can support and encourage participants to take action. Consider and discuss with the group what activities a Community Action Team could take such as:

- Working with shebeen/bar owners so that they have a regular supply of condoms on their premises.
- Organising a gender, migration and HIV training session with shebeen owners.
- Engaging shebeen owners on how they can help address issues of violence.
- Organising a community meeting to consider ways to initiate healthier entertainment options in the community e.g. traditional games or choirs.
- Develop a community drama to explore the challenges people in the community face around managing alcohol intake, and choices, positive or negative, they can make.





Men, Alcohol and Risk



Globally, men are likely to drink more heavily than women and more likely to be habitual heavy drinkers.⁶³ Men are more violent after drinking, and have more acute and chronic problems related to alcohol. Men's drinking often impacts on others. Women are more likely than men

to suffer not only from their own drinking behaviour but also from the harmful consequences of their partners' drinking behaviour.⁶⁴

The draft WHO information package on men, gender equality and health reports that:

⁶³ World Health Report 2002. World Health Organization (Geneva, Switzerland: 2002).

⁶⁴ Alcohol in Developing Societies: A Public Health Approach, Carlini-Marlatt, B., Gureje, O., Jernigan, D., Marshall, M., Mäkelä, K., Medina-Mora, M.E., Monteiro, M., Parry, C., Partanen, J., Riley, L., Room, R., Saxena, S., Finnish Foundation for Alcohol Studies (Helsinki, Finland: 2002).

*“Harmful alcohol use creates many harmful impacts at the social and not just the individual level. Such impacts include traffic accidents, workplace-related problems, family and domestic problems, and deepening poverty. Heavy drinking at the workplace may potentially lower productivity, through sickness absence and impaired work performance. With regard to safety, up to 25% of workplace accidents and around 60% of fatal accidents at work may be associated with the use of alcohol.”*⁶⁵

Alcohol use both reflects and reinforces contemporary gender socialisation. Typically men are socialised to suppress emotions and are often taught to drink alcohol as a way to manage difficult feelings.⁶⁶ Used in this way, alcohol consumption is a risk factor for gender-based violence and for the loss of sexual inhibition that contributes to the spread of HIV.⁶⁷ In South Africa, the Medical

Research Council's National Trauma Research Programme reported that 67% of domestic violence in the Cape Town Metropolitan area was alcohol-related. In another study of women abused by their spouses, 69% identified alcohol/drug abuse as the main cause of conflict leading to the abuse.⁶⁸ Studies in South Africa have shown a connection between alcohol consumption and the likelihood of men and women

engaging in unprotected casual sex, particularly in spaces associated with alcohol consumption such as shebeens or taverns.⁶⁹ Migrants often do not have access to recreational facilities and activities and may tend to resort to alcohol as a means of entertaining themselves. This may lead to increased alcohol consumption leading to an increase in high-risk sexual behaviour.

ADDITIONAL RESOURCES

- World Health Organization's web-based resources on alcohol: http://www.who.int/topics/alcohol_drinking/en/
- African Journal of Drug and Alcohol Studies, volume 5, number 2, 2006: <http://www.sahealthinfo.org/admodule/journal52006.htm>



⁶⁵ Alcohol: Some Sobering Statistics from the NWPHO, Bellis, M.A., Hughes, K., North West Public Health Observatory (NWPHO) (UK: 2000).





⁶⁶ “Qué ocurre con los muchachos?”, Barker, G. (2000), cited in Reasons and Emotions, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).

⁶⁷ South African National HIV Prevalence, Behavioral Risks, and Mass Media Household Survey 2002, Shisana, O., Simbayi, L., Nelson Mandela/HSRC study of HIV/AIDS, Human Sciences Research Council (Cape Town, South Africa: 2002).

⁶⁸ Global Alcohol Consumption, World Health Organisation, (WHO, Geneva, Switzerland, 2007). http://www.who.int/substance_abuse/publications/en/GlobalAlcoholafro.pdf. Accessed on November 2nd, 2007.

⁶⁹ Concurrent Sexual Partnerships Amongst Young Adults in South Africa: Challenges for HIV Prevention Communication, CADRE, (Johannesburg, South Africa: 2007).

ACTIVITY F.1: TALKING ABOUT ALCOHOL AND ALCOHOLISM⁷⁰

Objectives 	To question various myths related to alcohol use and alcoholism.
Time 	60 minutes
Materials 	<ul style="list-style-type: none"> • Ball • Flip chart • Koki pens • Prepared pieces of card/paper (see Facilitator's notes) with phrases written on them
Steps 	<ol style="list-style-type: none"> 1 Ask the group to sit in a circle. In the centre, place the pieces of card/paper in the form of a circle, so that each person can take one when it is his turn. 2 Explain that each participant will read out a phrase and answer if they agree or not with the statement and explain why. The other participants will be able to give their opinions in the course of discussing the statements. 3 Throw the ball to one person in the group and ask them to start the activity by choosing one of the pieces of card/paper. Note their opinions on the flip chart, ask if the other participants agree or not and why. 4 Refer to Key points for further details you can provide to participants. Ask if there are any other comments. 5 After the discussion, the person that read the first statement throws the ball to another person in the group and so on, until all the statements have been discussed.

⁷⁰ Reasons and Emotions, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).





ACTIVITY F.1: TALKING ABOUT ALCOHOL AND ALCOHOLISM

Facilitator's notes



Advance Preparation:

Prepare card/paper with the following phrases. A printable version is available on the accompanying CD-Rom.

Alcohol is not a drug...

Having high alcohol tolerance means that the person will not become an alcoholic...

Mixing drinks makes you drunk...

Beer does not make you drunk...

Alcohol is sexually stimulating...

Alcoholism is an illness that affects older adults...

Alcoholics are people who drink daily...

Having a coffee or washing your face with cold water reduces the effects of alcohol...

Alcohol is good for making friends...

Parties are not parties without alcohol...

It is important to reflect on these ideas and myths about alcohol use, which nearly all of us have believed at some point.

KEY POINTS



RESPONDING TO COMMON MYTHS ABOUT ALCOHOL USE

ALCOHOL IS NOT A DRUG: Alcohol is a drug in the sense that it alters the functioning of the organism, particularly the central nervous system on which thoughts, emotions and behaviour depend. It can also cause dependence.

Having high alcohol tolerance means that the person will not become an alcoholic: The truth is exactly the opposite; high tolerance means that the brain is becoming accustomed to the drug.

MIXING DRINKS MAKES YOU DRUNK: What really gets one drunk is the quantity of alcohol and the speed at which one drinks.

BEER DOES NOT MAKE YOU DRUNK: In the case of beer, the absorption of alcohol through the stomach is a little slower, but depending on the quantity consumed, it does cause drunkenness.

ALCOHOL IS SEXUALLY STIMULATING: Initially alcohol can reduce inhibitions and help people to become more outgoing, but since alcohol has a depressant effect on the nervous system it ends up reducing these sensations and can hamper sexual relations. Alcohol use is one of the most frequent causes of erectile dysfunction (impotence).

ALCOHOLISM IS AN ILLNESS THAT AFFECTS OLDER ADULTS: The majority of alcohol-dependent persons are young men of working age.

ALCOHOLICS ARE THOSE WHO DRINK DAILY: The majority of alcohol-dependent persons, in the initial and intermediate stage of the process, drink mainly on the weekend, and continue with their normal school and work activities, but with increasing difficulty.




HAVING A COFFEE OR WASHING YOUR FACE WITH COLD WATER REDUCES THE EFFECTS OF ALCOHOL: The only thing that really reduces drunkenness is the gradual elimination of the alcohol from the body, which means forcing the liver to work, which takes time.

ALCOHOL IS SEEN AS A SOCIAL EVENT: Drinking is often undertaken among friends. However, true friendships include much more than just drinking.

PARTIES ARE NOT PARTIES WITHOUT ALCOHOL: The media often tries to convince us that parties need alcohol, and that alcohol must be at the centre of every social gathering. But is this really true? What makes a social gathering or a party – the alcohol or the people?

ACTIVITY F.2: TO DRINK ALCOHOL IS TO BE A MAN: VALUES AROUND GENDER AND ALCOHOL USE



Objectives 	To explore attitudes around gender and alcohol use.
Time 	30 minutes
Materials 	<ul style="list-style-type: none"> • Four signs on A4 paper (“Strongly Agree”, “Strongly Disagree”, “Agree”, and “Disagree”) • Koki pens • Tape
Steps 	<p>1 Before the activity begins, put up the four signs around the room, leaving enough space between them to allow a group of participants to stand near each one. Look at the statements provided in the Facilitator’s notes and choose 5 or 6 that you think will lead to the most discussion. Alternatively, come up with some of your own ideas for statements that you think will generate discussion.</p> <p>2 Explain to the participants that this activity is designed to give them a general understanding of their own and each other’s values and attitudes about gender and alcohol. Remind the participants that everyone has the right to his or her own opinion.</p> <p>3 Read aloud the first statement you have chosen. Ask participants to stand near the sign that says what they think about the statement. After the participants have moved to their sign, ask for one or two participants beside each sign to explain why they are standing there and why they feel this way about the statement.</p> <p>4 After a few participants have talked about their attitudes toward the statement, ask if anyone wants to change their mind and move to another sign. Then bring everyone back together and read the next statement and repeat steps 3 and 4. Continue for each of the statements that you chose.</p> <p>5 After discussing all of the statements, lead a discussion about values and attitudes about gender and alcohol by asking these questions:</p> <p><i>Which statements, if any, did you have strong opinions about?</i></p> <p><i>Which statements did you not very have strong opinions about? Why do you think this is so?</i></p> <p><i>How did it feel to talk about an opinion that was different from that of some of the other participants?</i></p> <p><i>How did men and women respond differently to the statements?</i></p>





ACTIVITY F.2: TO DRINK ALCOHOL IS TO BE A MAN: VALUES AROUND GENDER AND ALCOHOL USE



Facilitator's notes



Choose statements from the following list according to which are most likely to promote lively discussion.

Women who drink too much are irresponsible.
Alcohol increases men's sexual drive and ability.
Women who drink too much are asking to be raped.
Men who drink too much are irresponsible.
Women who drink too much do not behave as women should.
Men and women respond to alcohol in the same way.
Women who drink sleep around.
Men who drink are manlier than men who don't.
Alcoholics are usually poor or unemployed.
It is ok for a man to hit a woman if he's drunk.
Men who drink sleep around.
Women are more likely than men to have unsafe sex when drunk.
Alcohol increases women's sexual drive and ability.

Some participants may say they that they don't know whether they agree or disagree and don't want to stand beside any of the four signs. If this happens, ask these participants to say more about their reactions to the statement and then encourage them to choose a sign to stand beside. If they still don't want to, let these participants stand in the middle of the room as a "don't know" group. However, it is preferable to avoid using this option if at all possible; if you do use it, make sure to guard against participants using it too much.

KEY POINTS



ALCOHOL AFFECTS MEN AND WOMEN DIFFERENTLY

Women become more intoxicated than men after drinking the same quantity of alcohol. Women have less water in their bodies than men, meaning that alcohol is less diluted and therefore has a stronger effect.

ALCOHOL DOES NOT INCREASE MEN AND WOMEN'S SEXUAL DRIVE OR PERFORMANCE

A small amount of alcohol may decrease sexual inhibition, but alcohol actually decreases sexual functioning.

THE MISUSE OF ALCOHOL AND ALCOHOLISM CAN AFFECT ANYONE REGARDLESS OF GENDER, AGE, CLASS, RACE, OR SOCIO-ECONOMIC STATUS

It is important to challenge existing gender and cultural stereotypes related to alcohol use. Harmful stereotypes put both men and women at risk in relation to HIV and gender-based violence.



ACTIVITY F.3: ALCOHOL ABUSE: RISKS, VIOLENCE, HIV AND AIDS

Objectives



To recognise the links between alcohol, risk behaviour, HIV and AIDS.
To explore ways to support family, friends and communities affected by alcohol abuse.

Time



60 minutes

Materials



- Flip chart paper
- Koki pens
- Case studies and question prepared on cards/paper (see **Facilitator's notes**)
- Koki pens
- Prepare 3 pieces of Flip chart (see **Facilitator's notes**)

Steps

1-2-3

1 Gather participants into one group so that they can see the flip chart paper. Write the word "alcohol" in the middle of the piece of paper. Ask participants to shout out whatever comes in to their head when they think of the word "alcohol". Write these words/phrases around the word "alcohol" on the flipchart paper. Words/phrases that might come up: *good time, friends, fighting, beer, socialising, abuse, hangover, weekends, fun, depression, relaxation*

2 Lead a discussion with the group about the words/phrases that have come up, by exploring the different ways the group feel about alcohol, including the positive aspects and negative aspects.
What are the positive/negative effects of alcohol consumption on individuals, groups of friends and communities?

3 Now split participants into groups of 4-5 people, giving each group a case study (see Facilitator's notes). Ask them to discuss the situation and answer the questions.

4 Reconvene the group after 20 minutes and ask each group to briefly summarise their case study situation and the responses to their questions.

5 After each group has presented, stick 3 pieces of prepared flip chart paper on the wall. Ask participants to think about the responses the groups have given and summarise.



ACTIVITY F.3: ALCOHOL ABUSE: RISKS, VIOLENCE, HIV AND AIDS

Facilitator's notes



Advance Preparation: Before the activity prepare the following

- 3 pieces of flip chart paper prepared with the following headings:
The health risks associated with alcohol use
How to support a friend who is in a harmful alcohol-related situation
Community-level strategies which I can get involved in
- Prepare on card or paper the following case studies (these case studies can be adapted if necessary). A printable version is available on the accompanying CD-Rom.

Case study 1

A group of friends are in a beer-hall one evening. It is late and all of them have been drinking heavily since early evening. David is very drunk and starts flirting with a woman sitting at the next door table. She doesn't seem very interested but David keeps buying her drinks and boasts to his friends that he's going to take her home and have sex with her that night. Later, after more drinks, David convinces the woman, who is also drunk, to leave with him while his friends stay in the beer-hall. The tavern owner is worried by the number of times he has seen David take different girls home with him after drinking too much.

Questions

- How might David's and the woman's alcohol intake affect the risks they take and face?*
- Why might there be an increased HIV risk in this situation?*
- What might be an effective way for David's friends to show concern about his wellbeing and approach him when drunk?*
- In what ways might it be difficult to intervene?*
- What action could the beer-hall owner take to encourage responsible drinking?*

Case study 2

A group of construction workers have had a long hard week and are in a local shebeen near to where they have been working. Two of the men have had too much to drink and get into an aggressive argument about one of the men's girlfriend. Just as they begin to become violent with each other, the shebeen owner throws them out, something he finds himself doing at least once every weekend.

Questions

- How might the excessive consumption of alcohol affect the argument that the two men are having?*
- The shebeen owner reacts by throwing the men out of his tavern. What do you think of this strategy?*
- What other strategies could the shebeen owner use to control drinking in his tavern?*
- What policies would help protect the broader community from alcohol-related violence and crime?*

Case study 3

Maria is talking to a close male friend at work. She confides in him that since her partner became unemployed last year he has started to drink much more heavily than usual and that their relationship is starting to suffer. She says it's impossible to speak to him when he's drunk. The following week the friend notices that Maria has got bruises on her arm and neck and she admits to him that her partner has been hitting her.

Questions

- Why might Maria's partner have started to drink more alcohol when he became unemployed?*
- What role has alcohol played in affecting Maria, her partner and their relationship?*
- How might Maria's work colleague assist her or would it be easier to stay quiet?*
- What might be some of the challenges that Maria's work colleague faces in trying to support Maria?*

ACTIVITY F.3: ALCOHOL ABUSE: RISKS, VIOLENCE, HIV AND AIDS

Facilitator's notes



Case study 4

Penny is pregnant with her third child. Having struggled to find work in their home town, her partner left last year to work in another part of the country. Penny misses her partner, and although he manages to send some money home and she herself is getting some work, there is still not enough money to support the family. Unaware that drinking while pregnant is dangerous, she has recently started to drink increasing amounts of alcohol at home to help her cope with her problems.

Questions

What are the risks of Penny drinking heavily when she is pregnant? To her and to her unborn baby?
Penny is unaware of the risks of drinking whilst pregnant: what action could be taken in her community to ensure that she has access to the right information?
What could you do to make sure that action is taken?

KEY POINTS



Excess drinking creates the risk of long term health problems, both physical and psychological. The body can be affected in many ways including liver cirrhosis, high blood pressure, fertility problems, impotence, and mental health disorders.

There are other associated risks with excessive drinking. These include unsafe sex which may exacerbate the spread of STIs and HIV, aggressive or violent behaviour and the breakdown of relationships.

Heavy alcohol consumption whilst pregnant is very dangerous. Children born to women who have drunk heavily during their pregnancy are at great risk of developing Foetal Alcohol Syndrome (FAS). This means children are born with a number of physical and mental deficiencies.

There are ways of supporting friends affected by alcohol abuse:

- Reach an agreement before you start drinking about how you will support one another if one friend drinks too much.
- Help a friend seek alcohol-related support services.
- Act as a role model to your friends by drinking responsibly.

Take action at the community level to combat alcohol abuse:

- Encourage shebeen/tavern/bar owners to be more engaged in creating a safe drinking environment.
- Start a shebeen-to-shebeen campaign and engage with patrons about the risks associated with alcohol consumption.
- Start tavern associations.
- Campaign for accessible information to be provided to pregnant women.
- Campaign for changes in alcohol licensing laws.



ACTIVITY F.4: ALCOHOL AND DECISION-MAKING ⁷¹

Objectives 	To reflect on decision-making related to alcohol use.
Time 	90 minutes
Materials 	<ul style="list-style-type: none"> • Handout F.4. – Alcohol and Decision-making Questionnaire - one per participant • Handout F.4.a – Alcohol and Decision-making - Recognising the early signs of alcohol dependency – one per participant • Flip chart • Koki pens
Part 1 Steps 	<p>1 Hand out the questionnaire to be completed individually with two possible answers: “Yes (why?)” or “No (why?)” (See Handout F.4. – Alcohol and Decision-making Questionnaire).</p> <p>2 Having answered the questions, the participants should share their replies with each other. If the group is large, it can be divided into groups of 8 to 10 participants.</p> <p>3 Ask each participant to read their answers and keep a note of the findings on the flip chart.</p> <p>4 Continue the activity by asking the group other questions. <i>What happens to someone who, to feel good in a social situation, needs to drink?</i> <i>Why would others (friends/family) be so concerned that you drink?</i> <i>How do we know if someone is already alcohol-dependent?</i></p>
Facilitator’s notes 	<p>It is important to maintain an atmosphere of frankness with the group and respect towards different opinions and attitudes around alcohol.</p> <p>Stress that to drink or not to drink is a decision that we make based on various factors: for example, personal beliefs, religious beliefs, health concerns, out of respect for certain family or social standards.</p> <p>Work with the participants to consider alternatives where friendship and belonging to the group can be achieved without alcohol.</p>
KEY POINTS 	<p>To provide some guidance to the group on recognising the early signs of alcohol dependency, use the table in Handout F.4.a – Alcohol and Decision-making - Recognising the early signs of alcohol dependency.</p>

⁷¹ Adapted from Reasons and Emotions, Instituto Promundo’s Project H Alliance’s manuals developed for work with men in Brazil (2002).

HANDOUT F.4: Alcohol and Decision-making - Questionnaire⁷²

ANSWER THE FOLLOWING QUESTIONS	YES	NO
1 Would you feel out of place at a party, gathering or shebeen with your friends if you were drinking a non-alcoholic drink and they were all drinking alcohol?		
Why ...		
2 Imagine that you are at a party, social gathering or shebeen where you were drinking alcohol, but one of your friends doesn't want to drink. Would you view your friend as boring? Not a real man? Why?		
Why ...		
3 Would you defend your friend's decision not to drink to the other friends? Supposing that you decided to defend him/her, how do you think the other friends would judge you? Why?		
Why ...		
4 Do you believe that to be accepted in a group you have to do what the other persons in the group want? Why?		
Why ...		
5 Do you think that it is possible for a person to lead an enjoyable life without drinking alcohol? Why?		
Why ...		
6 Can a person feel good about himself even without drinking? Why?		
Why ...		
Can a young person feel accepted without drinking? Why?		
Why ...		

⁷² Adapted from Reasons and Emotions, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).



HANDOUT F.4.a: ALCOHOL AND DECISION-MAKING

Recognising the early signs of alcohol dependency⁷³

CRITERIA FOR THE EARLY RECOGNITION OF ALCOHOL ABUSE OR DEPENDENCE






- 1 To think about, talk about or plan when the next occasion to drink will be.
- 2 Tolerate a greater amount than the average.
- 3 Drink rapidly.
- 4 Drink to obtain some effect, as a tranquilizer or to have courage to do something.
- 5 Forget some detail or event of what happened while drinking.
- 6 To protect, store or ensure the supply of alcohol.
- 7 To drink more than planned or without having planned.
- 8 To express concern or regret to someone close about what you did (or did not do) while under the effects of alcohol. This is an additional, highly sensitive criteria.

Note: The presence of more than two criteria indicates a need to consider or assess the person's alcohol abuse risk.



⁷³ Adapted from Reasons and Emotions, Instituto Promundo's Project H Alliance's manuals developed for work with men in Brazil (2002).

ACTIVITY F.5: INTERVIEWING WITH FRIENDS IN TAVERNS ⁷⁴

Objectives 	<p>To identify HIV risk behaviours associated with tavern* patrons.</p> <p>To identify strategies to reduce these risk behaviours through peer interventions.</p> <p><i>*For the purposes of this activity, the word “tavern” is used. Use the most appropriate terminology according to the context you are working in, e.g. shebeen, bar, beer-hall, etc.</i></p>
Time 	<p>1 hour and 30 minutes</p>
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens
Steps 	<p>1 Start by asking participants to define the term ‘vulnerable’. Come up with an agreed definition and write it up on the flip chart.</p> <p><i>An agreed definition might be a variation of the following: able to be easily physically, emotionally, or mentally hurt, influenced or attacked.</i></p> <p>2 Ask the group to describe the difference between “taking a risk” and “facing a risk”. Ask the group to give some examples of situations in which people take a risk with HIV. Then ask the group to give some examples of situations in which people face a risk of HIV.</p> <p>3 Talk about the difference between “taking a risk” and “facing a risk”. After the discussion give each participant Handout D.1.</p>
Facilitator’s notes 	<p>1 Explain to participants that this activity will look at ways of influencing behaviour change amongst our friends in relation to alcohol, risk and HIV. The first thing participants need to do is be aware of the situations that they and their friends find themselves in that put them at risk of HIV.</p> <p>2 Divide participants into two groups. Each group is tasked to list on a piece of flip chart paper the risk behaviours associated with men. Group 1 will focus on general risky behaviours and the Group 2 will focus on risky behaviours in tavern settings.</p>

⁷⁴ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.



ACTIVITY F.5: INTERVIEWING WITH FRIENDS IN TAVERNS

Facilitator's notes



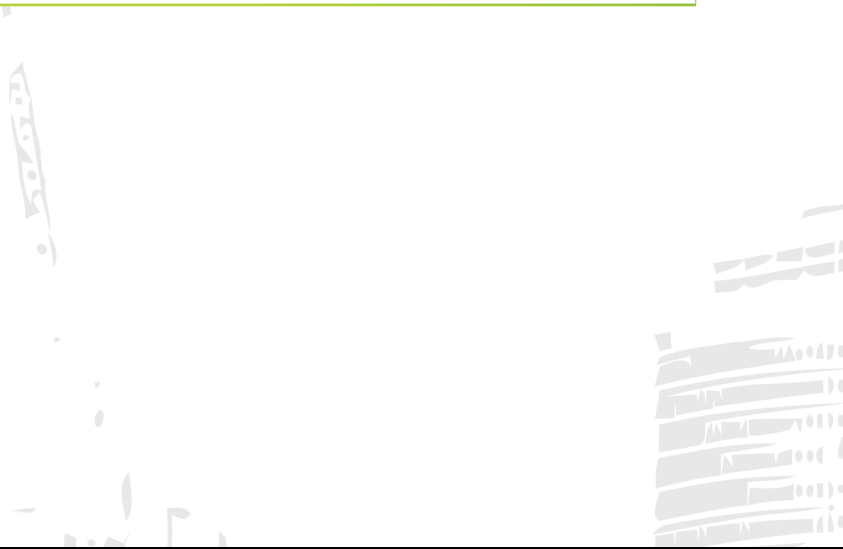
3. Ask a member from each group to present their findings. Possible behaviours may include:

- Not listening to good advice from others*
- Giving each other wrong advice or misinformation about HIV*
- Traditional practices, e.g. inheritance of a deceased brother's wife*
- Not seeking timely STI treatment*
- Discouraging each other from being tested for HIV*
- Sex while drunk*
- Use of drugs*
- Picking up a girlfriend while drunk*
- Flashing money to impress your friends*
- Friends connecting each other with girlfriends*

4. Next, ask participants to perform role-plays demonstrating ways of intervening with friends in risk activities. Split participants into groups of 3-5 people and ask each group to pick one of the tavern-related risk behaviours from those already discussed. Give groups 15 minutes to rehearse their role-play.

5. Ask the groups to perform their role-plays and then discuss some of the strategies that each group has come up with. Possible strategies might include:

- Giving facts about HIV and AIDS to a friend*
- Initiate change of environment such as changing the tavern*
- Discourage taking more beer or engaging themselves in other games so as to change the focus and intention*
- Encourage the friend to know the HIV status of the girlfriend before engaging in sexual activities*
- Remind and provide the friend with a condom*
- Remind each other to avoid asking women out whilst drunk*
- Advising friends to remain loyal to their wives or partners*
- Advising friends to enjoy sex without taking drugs (and to always use a condom)*
- Assisting a friend at the tavern to go and get condoms*
- Advising a friend at the tavern to limit their alcohol use*
- Advising a friend at the tavern to go home early from the tavern*
- Escorting someone home from the tavern*
- Giving someone at the tavern informational material about HIV or other STIs*
- Advising someone at the tavern to seek STI treatment and tell him where to go*
- Encouraging someone at the tavern to go for an HIV test*



ACTIVITY F.5: INTERVIEWING WITH FRIENDS IN TAVERNS

KEY
POINTS

To be effective at influencing behaviour change amongst friends, men and women first need to identify the situations that they find themselves in that put them at risk of HIV in their daily lives and in taverns.

It is challenging for friends to intervene with each other about risk behaviours but good communication skills will be of great use.

Some of these skills might include:

Using your friend's current discussions to start talking about HIV and AIDS.

Knowing when to and when not to engage your peers into discussions.

Being part of the group. Use "I" or "We" statements rather than "You".

Being honest. When you don't know the answer to a question, say "I don't know". Then try to find out the information.

Using appropriate language and vocabulary depending on the situation, group and topic being discussed.

Using good body language (e.g. do not point a finger to your audience).

These examples may help you overcome challenges that friends face in facilitating HIV behaviour change:

Give your peers information about HIV and AIDS in small quantities; don't overload them with too much information at once.

Know what your friends want to know about HIV and AIDS. Answer their specific questions.

Use examples that your friends understand to make sure that the information is easy to retain.

Be creative in starting discussion, e.g. using current affairs issues.

Lead by example, be a role model. Even if your behaviour in the past has been risky, show that you can change and therefore your friends can too.

Respect your friends as adults.

Use simple language.

Throw back issues to the group. You are not there to solve their problems but to help your friends to see their own solutions.



ANNEX 1
Workshop Tools





ACTIVITY 1: TAKING ACTION: Making a Difference



RELEVANT FOR ALL MODULES

Objectives 	To identify goals, commitments and strategies for personal action. To identify the skills and support we have and need to take action.
Time 	30 minutes
Materials 	Handout - Taking Action: The Action Chart
Steps 	<ol style="list-style-type: none">1. Ask participants to break into pairs or small groups and take 5 minutes each to think about and fill out the commitment to action handout.2. Bring the group back together and ask for a few volunteers to share the commitments and strategies identified. Facilitate discussion about themes and reactions.3. Divide participants into groups of no more than 6-8 and ask them to develop role-plays that capture the ideas they've identified in their individual worksheets.4. Explain that the purpose of this is to rehearse what they've committed to in their worksheets. Ask that people take enough time to really think through what they would say and how they would go about it and then depict this in the role-play.5. Have all groups present and then discuss themes and issues emerging.
Facilitator's notes 	Remind people that it's always easier to make commitments than to implement them. Ask people what support they think they'll need to act on their commitments. Ask them to agree on a date when they'll meet with at least one other group member to discuss the progress to date.
KEY POINTS 	Acting on commitments may be hard. With support and encouragement it is possible to start to effect change. It is important to go back to review commitments. Meeting with other group members to assess progress and challenges and to adapt plans will ensure that the issues remain a topic of conversation and implementation is more effective.
Additional Resources 	Can allow participants to work as individuals and groups. Let them exchange these plans and find some one to hold them accountable.



TAKING ACTION: The Action Chart ⁷⁵



Use the **Action Chart** at the end of every activity to record participants' suggestions for action. Also use it in the last activity of the workshop, as a way of getting the participants to commit themselves to actions they

will take after the workshop. Draw the **Action Chart** on a sheet or piece of flip chart paper. Remember that you will probably need more than one sheet during the workshop.

TAKING ACTION	AN ACTION CHART
Actions that <u>I</u> can take to promote change at the personal and interpersonal level:	
What skills/ strengths do I have that I can use to promote the change?	
What support do I have?	
What support do I need?	
Actions that <u>We</u> (group) can take together to promote change at the community and policy level:	
What skills/ strengths do we have that I can use to promote the change?	
What support do we have?	
What support do we need?	

⁷⁵ This activity is adapted from Men As Partners: A Program for Supplementing the Training of Life Skills Educators, 3rd Edition (unpublished), EngenderHealth, and is used by permission.








CLOSE OF DAY REVIEW/RECAP: PLUS-DELTA-ACTION



This is a quick but important activity that offers workshop participants an opportunity to reflect on what they've learned during the day. In doing a close of the day review/recap of this nature, you are also encouraging

workshop participants to sift through their memories of the day and select and reinforce key lessons learned. Doing this thus increases the likelihood of knowledge and values retention.

Objectives 	To review the day and to give participants an opportunity to reflect on what they learned over the course of the day and to inform the facilitators about what they found useful and what they would do differently.
Time 	15 minutes
Materials 	<ul style="list-style-type: none">• Flip chart paper• Koki pens
Steps 	<ol style="list-style-type: none">1. Draw two lines down the middle of the flip chart and create three equal sized vertical columns. At the top of the first draw a + sign, on the next draw a delta sign (Δ- the Greek sign for change) and on the third column write "ACTION".2. Ask participants to identify what they liked, what they would change and what action they plan on taking as a result of the days activities. Write their comments down in the appropriate column.3. Draw the discussion to a close by offering a brief summary of the key points mentioned as well as any other points you feel are important but weren't mentioned.4. Remind the participants to reflect on the day over the course of the evening and be ready to discuss any insights the next morning.
Facilitator's notes 	This is a quick but important activity that offers workshop participants an opportunity to reflect on what they've learned during the day. In doing a close of the day review/recap of this nature, you are also encouraging workshop participants to sift through their memories of the day and select and reinforce key lessons learned. Doing this thus increases the likelihood of knowledge and values retention.



PRE/POST WORKSHOP QUESTIONNAIRE



NAME OF PARTICIPANT (OPTIONAL)							
SEX	MALE			FEMALE			
EMPLOYMENT STATUS	Unemployed	Permanent	Contract	Seasonal	Other (please Specify): _____		
SECTOR	Agriculture	Mining	Fishing	Transport	Other (please Specify): _____		
HOW OFTEN DO YOU SEE YOUR SPOUSE/FAMILY	Every day	Once a week	Once a month	Every 3-6 months	Once a year	Less than once a year	
Make an 'X' in the box if you are Agree or Disagree with the statement					Agree	Disagree	
1	Men are cleverer than women.						
2	Men should have the final say in their relationship.						
3	Women should do the cooking and other housework.						
4	It is possible for a man to infect another man with HIV.						
5	If a man forces his wife or partner to have sex, it is rape.						
6	Men have the right to decide when to have sex with their partner.						
7	Under some circumstances it is acceptable for men to beat their partners.						
8	A woman invites rape when she wears revealing clothes.						
9	Sometimes men cannot control their sexual urges.						
10	It is a man's responsibility to provide for his family.						
11	It is not my business to interfere in other people's relationships even if there is violence.						
12	Men who work far from home should have girlfriends to take care of their needs.						
13	A man is more of a man once he has fathered a child.						
14	Unprotected anal sex is the riskiest form of sexual contact.						
15	Knowing one's status is the best way of reducing the spread of HIV and AIDS.						

SAMPLE AGENDA FOR A 4 DAY GENDER, MIGRATION AND HIV WORKSHOP

DAY ONE

TIME	THEME	OBJECTIVE	ACTIVITY
08:00-08:15	Getting to know each other		Arrival and registration
08:15-08:30		To establish workshop environment	Group norms/contract
08:30-08:45		To know the participants and different skills	Establishing expectations and learning environment
08:45-09:00	Getting to know the programme	To provide information about the programme	Programme overview
09:00-10:30	Connections and migration	To establish a relationship between migration, gender and HIV	Experiencing migration Connections
TEA BREAK			
10:45 -13:00	Gender socialization	To highlight societal norms and expectations	Gender values clarification Act like a man/woman
LUNCH BREAK			
14:00-16:00	Gender socialization		Gender fishbowl Thinking about fatherhood
END OF DAY PLUS/DELTA			

DAY TWO

TIME	THEME	OBJECTIVE	ACTIVITY
08:00-08:30	Overview	To revise the previous days work	Gender Socialization Connections and migration
08.30 - 10.30	Understanding HIV and gender	To establish a link between Gender imbalance, HIV and the role of men	Sexual vulnerabilities
TEA BREAK			
10.45-13:00	Understanding HIV and gender	To establish a link between Gender imbalance, HIV and the role of men	HIV case studies
LUNCH BREAK			
14:00-16:00	Power, privilege and health	To establishing a relationship between power, privilege and health	Who is powerful Power status and health
END OF DAY PLUS/DELTA			



SAMPLE AGENDA FOR A 4 DAY GENDER, MIGRATION AND HIV WORKSHOP






DAY THREE

TIME	THEME	OBJECTIVE	ACTIVITY
08:00-08:30	Overview	To revise the previous days work	Understanding HIV and gender Power privilege and health
08:30-10:30	Alcohol abuse	To assist participants understand the dangers of alcohol and alcohol abuse	Talking about alcohol and alcoholism
TEA BREAK			
10:45 - 13:00	Alcohol abuse		Values around gender and alcohol use Alcohol abuse: risks, violence and HIV
LUNCH BREAK			
14:00-16:00	Alcohol abuse		Alcohol and decision-making
END OF DAY PLUS/DELTA			

DAY FOUR:

TIME	THEME	OBJECTIVE	ACTIVITY
08:00- 09:00	Overview	Revision	Power, privilege and health Alcohol and alcoholism
09:00-10:30	Gender-based violence	To assist participants to understand violence and its impact	Violence against women in daily life Violence clothesline
TEA BREAK			
10:45-13:00	Building leadership, mobilising communities and Taking Action	To encourage participants to take action	New kinds of courage Establishing a CAT
LUNCH BREAK			
14:00-16:00	Community mobilization	To encourage participants to join a community action team	
END OF WORKSHOP – EVALUATION			

ACTIVITY: GENDER, MIGRATION AND WORKSHOP EVALUATION

Objectives 	To evaluate the process and content of the workshop
Time 	30 minutes
Materials 	<ul style="list-style-type: none"> • Flip chart paper • Koki pens • Handout – Pre/Post Workshop Questionnaire – one per participant • Handout – Workshop evaluation form – one per participant
Steps 	<ol style="list-style-type: none"> 1. Begin by reminding participants of the training objectives. See the workshop agenda for further guidance on this. 2. Break participants into groups of 3. Ask each threesome to discuss the following questions: <i>What are the three most important things that I learned?</i> <i>How will this workshop affect the way that I do my work and live my life?</i> <i>What was good about the content of the workshop? Which aspects of content need improvement?</i> <i>What was good about the process of the workshop? Which aspects of the process need improvement?</i> <i>What was good about the logistics of the workshop? Which aspects of logistics need improvement?</i> 3. After 10 minutes, bring the participants back together. Ask them to share their discussions, making a note of suggested improvements in content, process and logistics on flip chart paper. Allow 10 minutes for this. 4. Then ask participants to get out the Knowledge and Opinions Survey that they did on the first day and to do it again and then compare their answers. Allow participants a few minutes to complete the survey and then ask people to talk about how their knowledge and opinions have changed over the course of the workshop. 5. Collect the surveys and explain that the results of these surveys will be used to show that the gender and HIV workshops are working. 6. Close the workshop by thanking everyone for their participation and commitments to action that they have made.
Facilitator's notes 	It is important that you always include a pre and post test in your workshop programme. This will give you critical information about whether you are achieving your goals. The handout should be given out on the first morning and then again at the end of the workshop. Your workshop report should include an analysis of the pre and post tests. To do this analysis, simply record the scores for each question in the pre test and determine the percentage response to that question. Do the same at the end of the workshop to determine whether there have been any shifts in knowledge, values and attitudes.



WORKSHOP EVALUATION FORM

Workshop Title: _____

Workshop dates: _____

Workshop Venue: _____

To be completed by each participant at the end of the workshop

You have just attended the above-mentioned workshop. The organizers would be grateful for your help to improve the development /organization of similar learning events by answering the following questions:

1. What is your overall impression of the workshop/course?

😊	😐	😞

2. Rating your workshop experience:

	excellent	good	fair	poor
Did the objectives of the workshop meet your expectations?				
Did the programme of the workshop meet your expectations?				
Did the learning methods relate with the learning objectives?				

3. What would you recommend in order to improve this workshop?

4. How would do you rate the following items:

	excellent	good	fair	poor
The organization of the workshop.				
The facilities.				
The schedule.				
The duration.				



WORKSHOP EVALUATION FORM

5. Please read the following statements and tick the appropriate box.

	1 False	2 Inclined to be false	3 Inclined to be true	4 True
I was informed of the programme and workshop objectives prior to the workshop.				
At the beginning of the session, the facilitator clarified the expectation of the participants.				
The facilitator recalled the objectives and the programme.				
The workshop methods were highly participatory.				
The facilitators ensured the participation of everybody.				
The facilitators used case studies, examples linked to reality.				
The facilitators took the participants' expectations into consideration.				
The theory-practice balance was good.				
The facilitators had the right level of expertise.				
The documentation was sufficient and appropriate.				
The mix of the group had a positive effect on the learning process.				

6. Please add any other comments related to previous points:



7 Please describe in one sentence the benefits you gained from this workshop.

8 Please list:

The most interesting learning sessions:

The most appropriate topics:

Topics to cancel:

Topics to add:

9 What new ideas, skills or attitudes do you intend to implement when you return home?



ANNEX 2

Relevant International and Regional Commitments and Instruments



RELEVANT INTERNATIONAL AND REGIONAL COMMITMENTS RELATING TO MIGRATION

INTERNATIONAL INSTRUMENTS

Migrants should enjoy all of the rights applicable in international human rights law. **The Universal Declaration of Human Rights (1948)**, the **International Covenant on Civil and Political Rights (ICCPR) (1966)** and the **International Covenant on Economic, Social and Cultural Rights (ICESCR) (1966)** set out the human rights and fundamental freedoms of all persons. They include the right to life, liberty and security; the right not to be held in slavery or servitude; the right not to be subjected to torture or to cruel, inhuman or degrading treatment or punishment; the right not to be subjected to arbitrary arrest, detention or exile; the right to freedom of movement and residence within the borders of each state; the right to marry and to have a family; and the right to work, to free choice of employment and to just and favourable working conditions.

The goal of the **International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (1990)** is to guarantee minimum rights for all migrant workers and members of their families, both legal and undocumented. The Convention prohibits torture or cruel, inhuman or degrading treatment or punishment (article 10), slavery or servitude and forced or compulsory labour (article 11), and arbitrary or unlawful interference with privacy or attacks on honour and reputation (article 14). Further, the Convention entitles migrants “to effective protection by the State against violence, physical injury, threats and intimidation, whether by public officials or by private individuals, groups or institutions” (article 16). As of July 2008 no SADC countries had ratified this convention.

Many of the provisions of the **Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (1979)** are of particular importance to migrant women: the elimination of sex role stereotyping (article 5); the suppression of traffic in women and of exploitation or prostitution of women (article 6); and provisions concerning education, employment and health (articles 10, 11 and 12). Article 14 of CEDAW is unique in that it addresses the particular situation of rural women, requiring states to eliminate discrimination against that particular group of women.

In addition to the United Nations conventions, there are a number of International Labour Organization (ILO) conventions for the protection of the rights of migrants. These include the **Migration for Employment Convention (No. 97) (1949)** and the **Migrations in Abusive Conditions and the Promotion of Equality of Opportunity and Treatment of Migrant Workers Convention (No. 143) (1975)**.

In June 2001, the **United Nations General Assembly Special Session (UNGASS)** on HIV/AIDS adopted the Declaration of Commitment on HIV/AIDS. Paragraph 50 of the Declaration acknowledges the needs of migrants and mobile populations as a vulnerable group that should be explicitly addressed:

“by 2005, develop and begin to implement national, regional and international strategies that facilitate access to HIV/AIDS prevention programmes for migrants and mobile workers, including the provision of information on health and social services”.

REGIONAL INSTRUMENTS IN AFRICA

The African **Union’s African Charter on Human and People’s Rights (1981)** ensures basic human rights for all. This and the **Protocol on the Rights of Women in Africa (2003)** calls for the elimination of discrimination (article 2) and harmful practices against women (article 5). The Protocol also grants women a series of economic and social rights (article 13). This is relevant to women who migrate for economic reasons, as it stipulates the right to equal employment opportunities and to equal pay and equal benefits.

“... policies on HIV and AIDS for migrant/mobile populations and displaced populations should be developed and harmonised.” This output specifically looks at four target areas: 1) high transmission areas like cross border sites and high traffic sites [...], 2) health issues for displaced and mobile populations including undocumented migrants, focusing on treatment continuity, health services, and messages [...], 3) transit at border points, and 4) antiretroviral treatment for migrants and the equity in treatment access across countries.

The **SADC HIV and AIDS Business Plan: Strategic 5-Year Business Plan 2005-2009** describes the regional priorities that have been identified by the SADC member states on HIV and AIDS. Output 1.4 of the Business Plan states:

In July 2003, all SADC countries signed the SADC Declaration on HIV/AIDS in Maseru, Lesotho (commonly referred to as “The Maseru Declaration”). In this Declaration, the SADC countries state that halting and rolling back HIV infection constitutes a top priority on the SADC agenda, and an integral part of the regional programme for the eradication of poverty. Article 3c of the Declaration makes reference to the needs of people living close to national borders:

“Enhancing the regional initiatives to facilitate access to HIV/AIDS prevention, treatment, care and support for people living along our national border including sharing of best practices.”

NATIONAL INSTRUMENTS

Each country also has its own laws and these too can be of relevance. For instance:

The **Constitution of the Republic of South Africa (1996)** guarantees the same rights and freedoms to everyone living within the boundaries of the country. The Bill of Rights of the Constitution (articles 7-39) guarantees rights and freedoms to all “persons” in the country. This applies to EVERYBODY who lives within its borders.



RELEVANT INTERNATIONAL AND REGIONAL COMMITMENTS RELATION TO GENDER EQUALITY

SADC COMMITMENTS TO GENDER EQUALITY

African heads of state have made binding commitments to achieving gender equality in a number of international, regional and national declarations and conventions. These were reaffirmed and summarised in the **Solemn Declaration on Gender Equality** issued in Addis Ababa by the heads of state and government of member states of the African Union from 6-8 June 2004 as follows:

“We reaffirm our commitment to the principle of gender equality as enshrined in Article 4 (I) of the Constitutive Act of the African Union, as well as other existing commitments, principles, goals and actions set out in the various regional, continental and international instruments on human and women's rights, including the Dakar Platform for Action (1994), the Beijing Platform for Action (1995), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW - 1979), the African Plan of Action to Accelerate the Implementation of the Dakar and Beijing Platforms for Action for the Advancement of Women (1999); the Outcome Document of the Twenty-third Special Session of the United Nations General Assembly Special Session on the Implementation of the Beijing Platform for Action (2000); UN Resolution 1325 (2000) on Women, Peace and Security; and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (2003).

The 1997 **SADC Declaration on Gender and Development** makes it clear that all SADC governments have a responsibility to promote gender equality and to end domestic and sexual violence. The SADC Declaration declares, inter alia, that:

- Member states undertook in the SADC Treaty {Article 6(2)} not to discriminate against any person on the grounds of gender, among others.
- All SADC member states have signed and ratified or acceded to the UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), or are in the final stages of doing so.

It also affirms that:

- Gender equality is a fundamental human right.
- Gender is an area in which considerable agreement already exists and where there are substantial benefits to be gained from closer regional co-operation and collective action.
- The integration and mainstreaming of gender issues into the SADC Programme of Action and Community Building Initiative is key to the sustainable development of the SADC region.

The 2004 Maputo Declaration also contains clear language recognizing the importance of gender equality and the empowerment of women:

The 2001 Abuja Declaration on HIV/AIDS, Tuberculosis and other Related Infectious Diseases also contains important commitments to addressing HIV as a “State of Emergency”. Relevant sections include:

“We recognise that the empowerment of women is crucial to the development of our societies. We pledge to ensure that our legal and institutional structures provide adequate guarantees, which protect and enhance the political, economic and social status of women. We condemn the exploitation of women in the international sex trade and trafficking that exploits poverty in ACP countries. We further condemn child abuse and child trafficking. We call upon the UN system to take necessary steps to stop these practices.

- Article 22. We consider AIDS as a State of Emergency in the continent. To this end, all tariff and economic barriers to access to funding of AIDS-related activities should be lifted.
- Article 23. To place the fight against HIV/AIDS at the forefront and as the highest priority issue in our respective national development plans. To that end, WE ARE RESOLVED to consolidate the foundations for the prevention and control of the scourge of HIV/AIDS, Tuberculosis and Other Related Infectious Diseases through a comprehensive multi-sectoral strategy which involves all appropriate development sectors ... and also to protect those not yet infected, particularly the women, children and youth through appropriate and effective prevention programmes.
- Article 26. WE COMMIT OURSELVES to take all necessary measures to ensure that the needed resources are made available from all sources and that they are efficiently and effectively utilized. In addition, WE PLEDGE to set a target of allocating at least 15% of our annual budget to the improvement of the health sector.
- Article 30. WE UNDERTAKE to mobilize all the human, material and financial resources required to provide CARE and SUPPORT and quality treatment to our populations infected with HIV/AIDS, Tuberculosis and Other Related Infections, and to organize meetings to evaluate the status of implementation of the objective of access to care.
- Article 35. WE COMMIT OURSELVES to scaling up the role of education and information in the fight against HIV/AIDS in recognition of the essential role education, in its widest sense, plays as a cost-effective tool for reaching the largest number of people.

USING HUMAN RIGHTS COMMITMENTS TO STRENGTHEN ACCOUNTABILITY

The binding commitments made by governments across the SADC region listed throughout this manual provide civil society organisations with a way to hold officials accountable to their promises and obligations related to HIV and AIDS, gender equality and human rights.

The Francois-Xavier Bagnaut Center for Health and Human Rights suggests that human rights and HIV and AIDS (and by extension gender) work together in three separate but connected ways:

RELEVANT INTERNATIONAL AND REGIONAL COMMITMENTS RELATION TO GENDER EQUALITY

- **Accountability:** Human rights provide a system for holding governments accountable for their actions.
- **Advocacy:** Governments are responsible for what they do, do not do, and should do for their populations. This enables activists to engage in a wide range of advocacy actions targeted towards securing human rights enjoyment and protection for people living with and affected by HIV and AIDS and all other groups vulnerable to HIV infection.
- **Approaches to Programming:** Human rights-based approaches to programming aim to integrate human rights principles such as non-discrimination, equality and participation, including the greater participation of PLWHA, into the response at local, national and international levels.⁷⁶

A number of useful documents are available describing strategies that can be used by citizen activists to enforce commitments made by their national and regional government bodies. These include:

- “HIV/AIDS and Human Rights in a Nutshell: A quick and useful guide for action, and a framework to carry HIV/AIDS and human rights action forwards” produced by the Francois-Xavier Bagnaut Center for Health and Human Rights available at: <http://www.hivpolicy.org/Library/HPP000730.pdf>.
- “Coordinating with Communities: Supporting the use of the guidelines on the community sector involvement in the coordination of National AIDS responses” developed by ICASO, the International HIV/AIDS Alliance and AFRICASO available at: <http://www.hivpolicy.org/Library/HPP000283.pdf>.
- An Advocate’s Guide to the International Guidelines on HIV/AIDS and Human Rights prepared by the International Council of AIDS Serving Organisations (ICAS) available at http://www.icaso.org/publications/Advocates_Guide_EN.pdf.

International Commitments Involving Men and Boys in Achieving Gender Equality

A review of international legislation and UN declarations presented at the **fifty-first session of the Commission on the Status of Women in 2007** reports that, “Equality between women and men is a fundamental principle of international law established in the United Nations Charter” and cites the following commitments:

The 1994 International Conference on Population and Development affirms the need to “promote gender equality in all spheres of life, including family and community life, and to encourage and enable men to take responsibility for their sexual and reproductive behaviour and their social and family roles.”⁷⁷

The Programme of Action of the World Summit on Social Development (1995) and its 2000 review also addressed the role of men, in particular with regard to sharing family, household and employment responsibilities with women.⁷⁸

The Beijing Platform for Action (1995) restated the principle of shared responsibility; and argued that women’s concerns could only be addressed “in partnership with men.”⁷⁹

The twenty-sixth special session of the General Assembly on HIV/AIDS (2001) recognized the need to challenge gender stereotypes and attitudes and gender inequalities in relation to HIV/AIDS through the active involvement of men and boys.⁸⁰

An expert group meeting on the role of men and boys was convened in 2003 in Brasilia by the United Nations Division for the Advancement of Women (DAW/DESA), in cooperation with ILO and UNAIDS to inform the CSW at its forty-eight session.⁸¹ The **UN CSW** (Commission on the Status of Women) adopted agreed conclusions calling on Governments, entities of the United Nations system and other stakeholders to, inter alia:

- Promote reconciliation of work and family responsibilities.
- Encourage the active involvement of men and boys in eliminating gender stereotypes.
- Encourage men to participate in preventing and treating HIV/AIDS.
- Implement programmes to enable men to adopt safe and responsible sexual behaviour.
- Support men and boys to prevent gender-based violence.
- Implement programmes in schools to accelerate socio-cultural change towards gender equality.

⁷⁶ HIV/AIDS and Human Rights in a Nutshell: A Quick and Useful Guide for Action, and a Framework to Carry HIV/AIDS and Human Rights Action Forwards, produced by the Francois-Xavier Bagnaut Center for Health and Human Rights (Toronto, Canada; 2004).

⁷⁷ See paragraphs 4.11, 4.24, 4.25, 4.26, 4.27, 4.28, 4.29, 5.4, 7.8, 7.37, 7.41, 8.22, 11.16, 12.10, 12.13 and 12.14 of the Cairo Programme of Action, and paragraphs 47, 50, 52, and 62 of the Outcome of the Twenty-First Special Session of the General Assembly on Population and Development.

⁷⁸ See paragraphs 7, 47 and 56 of the Programme of Action of the World Summit for Social Development, and paragraphs 15, 49, 56 and 80 of the Outcome of the Twenty-Fourth Special Session of the General Assembly on Further Initiatives for Social Development.

⁷⁹ See paragraphs 1, 3, 40, 72, 83b, 107c, 108e, 120 and 179 of the Beijing Platform for Action.

⁸⁰ See paragraph 47 of the Declaration of Commitment on HIV/AIDS: “Global Crisis – Global Action”.

⁸¹ Report of the Expert Group Meeting on “The role of men and boys in achieving gender equality”, p. 21-24 <http://www.un.org/womenwatch/daw/egm/men-boys2003/reports/Finalreport.PDF> (Brasilia, Brazil: 2003).



RELEVANT INTERNATIONAL AND REGIONAL COMMITMENTS RELATION TO GENDER EQUALITY



In the ten-year review of the Beijing Platform for Action, member states emphasized that changing men's attitudes and behaviours required a range of strategies including: legislative and policy reform, the implementation of programmes, the involvement of educational systems and the media, and partnerships with NGOs, the private sector and leaders from all segments of society, including religious leaders.

The review also encouraged member states to create opportunities for sharing experiences and good practices across regions and stressed that this offered important opportunities for cross fertilization.⁸¹

As a signatory to these international commitments, South Africa has made significant efforts to reach and engage men and boys. Sonke Gender Justice was commissioned by the national Office on the Status of Women to develop the South Africa country report submitted to the 51st session of the UN CSW. This report, available at <http://www.genderjustice.org.za/sa-country-report-2007.html>, chronicles the efforts of many government and civil society organisations. One such initiative described is the One Man Can Campaign developed and coordinated by Sonke Gender Justice.

⁸¹ Ibid., paragraph 669.