

GBV Response

Training



GBV Response

Who is the Training for?

The GBV Response training modules are focused on community-level response to GBV and are relevant for all community leaders, as well as GBV teams. The training is designed to build on GBV Core Concepts training for staff and community leaders to deepen their understanding of forms of GBV, drivers and consequences of GBV within communities, and how to apply survivor-centered principles to better support survivors of GBV.

How Does the Training Link to the Toolkit Guidance?

The content covered in the GBV Response training modules is most closely linked to the *GBV Response* chapter of **Toolkit Guidance** and draws from *GBV Response Tools and Resources*.

Time and Resources Required

The training content can be covered in two full days, with time allowed for breaks and lunch. The training modules are designed to focus on a specific form or type of GBV, and the two-day training course can be repeated to focus on additional forms of GBV. Training modules build on each other, so GBV programs are recommended to organize continuous, two-day trainings with the recommended sequencing. Remember that participants should first complete **GBV Core Concepts** training.

Training schedules to consider for GBV Response:

- Core Concepts (foundational training): 2 days
- GBV Response (focused on understanding and responding to one form of GBV): 2 days*

**Where possible, teams can reserve an additional half to full day with community leaders for action planning to strengthen GBV response.*

The training modules accommodate low-technology settings, requiring only the Toolkit Guidance, flipchart paper and markers, individual notebooks/paper and pens, and printed/ photocopied tools and handouts.

GBV Response Training Outline: Understanding and Responding to a Form of GBV

Intended Audience



GBV Teams



All Community Leaders

Module	Overview of Module	Estimated Time
Day 1		
<u>Review of GBV Core Concepts</u>	Participants briefly review GBV Core Concepts, as covered during two-day GBV Core Concepts training. *Find module under GBV Core Concepts	1 hour, 30 minutes
Day in the Life of a Woman or Girl	This exercise invites participants to imagine the daily reality of a woman or girl in their community and sets the tone for subsequent discussions.	30 minutes
Forms of GBV: Context, Definitions & Risk Factors	Facilitators introduce a specific form of GBV that will be in focus through the two-day training. Participants will begin to develop a deeper understanding of this form of GBV, including contextual risk factors.	1 hour, 30 minutes
Forms of GBV: Building Understanding	Through hypothetical scenarios, participants reflect on the experience of GBV for a survivor and consider the attitudes and behaviors that drive GBV in their community.	2 hours
Day 2		
Forms of GBV: Consequences	Participants review individual, family, and community consequences of a specific form of GBV.	45 minutes

Reinforcing Protective Factors	Participants consider factors that reduce vulnerability to GBV, as well as factors that mitigate risks of consequences for survivors, and begin to outline protective actions that communities can take.	1 hour, 45 minutes
Role of Community Leaders	Participants identify roles that community leaders play in GBV response and identify actions that leaders can take to reduce risks and strengthen support for survivors.	1 hour, 45 minutes
Responding to Survivors	This module devotes more time for participants to practice responding to survivors who disclose incidents of GBV, building on the GBV Core Concepts training module: Connecting Survivors with Support Services.	2 hours, 30 minutes

Day in the Life of a Woman or Girl

Summary

This exercise invites participants to imagine the daily reality of a woman or girl in their community and sets the tone for subsequent discussions.

Learning Objectives

Participants and facilitators will:

- Reflect on challenges and opportunities for women and/or girls in the community

Materials and Preparation

1. Select a brief profile for guided imagery: Woman or girl? Married? Displacement status? Any other identifying factors that may contribute to risks?
2. Prepare questions for guided imagery that are appropriate to the community context and selected profile. Review and adapt **Handout: Sample Questions for Guided Imagery.**

Time

30 minutes

Procedure

Step 1: Guided imagery (15 minutes)

1. Ask participants to close their eyes, if they're comfortable doing this, and imagine themselves in the life of a woman or girl. Share a very brief profile of the woman or girl imagined.
2. Ask participants to silently consider answers to questions. Ask a series of questions about the woman or girl's day in the community. See sample questions in Handout.

Step 2: Reflections (15 minutes)

Ask participants to share reflections from the guided imagery. How did it feel to place yourself in the life of a woman or girl? Did you think about something that you hadn't considered before? What questions will stay with you?

Key Discussion Points/Additional Facilitation Notes

- Guided imagery can be adapted for any training, though it is specifically indicated for trainings on *GBV Response* and *GBV Risk Mitigation*. The exercise can also be adapted for group discussions or team meetings.

Handout: Sample Questions for Guided Imagery

Married woman with young children

- What time does she wake up in the morning?
- Does she wake in a bed? Where did she sleep last night?
- Where does she go to use the toilet? Is she able to use the toilet in privacy? Does she feel safe there?
- What are her first responsibilities?
- Does she prepare a meal for her family? Does anyone help her? What does she prepare for her husband? What does she prepare for her children? Does she prepare food for any others? Does she eat herself?
- Does she have a way to bathe in the morning? Who collected the water? How far is the bathing facility? Is it private? Does she feel safe there?
- Does she dress for the day? Does she have fresh clothes to wear? Is she helping her children to dress?
- What is her husband doing this morning?
- Will she be leaving the home today? Will she be working? What things might she need to do?
- What is she worrying about?
- She needs to visit the market today—how long will she need to walk? Is the walk to the market safe?
- In the market, a young man grabs her and whispers something crude as she passes. His friends laugh. How does she feel? What might she say or do? What will others think if they saw? How would her husband react?
- Does she have money to buy the things she needs in the market? What is she thinking about as she makes decisions about her purchases?
- Back home, what responsibilities does she have? How much time will she spend cooking today? Cleaning? Collecting water or fuel? Caring for the children?
- Will she spend any time today relaxing? Reading? Listening to the radio? Visiting friends? Visiting a community center?
- Will her husband spend any time today relaxing? Talking with others? How much time will he spend today cooking? Cleaning? Collecting water or fuel? Caring for the children?
- When her husband comes home at the end of the day, is she happy to see him? Do they embrace? Do they talk about their days?
- When she tells her husband that she wasn't able to purchase everything she needed at the market, how does he react?
- Sometimes, her husband becomes very angry and hits her. How does this make her feel? Does she talk with anyone about this? Do her neighbors know? What do they think about her? Do they think she is a good wife? What would her parents say if they knew? Would they invite her to stay with them? Would they be embarrassed?
- When evening comes, is it safe for her to leave her home? Can she walk through her community in the dark? Can she leave her community in the dark? What dangers would she face?
- When she needs to use the toilet at night, where does she go? Does she feel safe?
- When she is ready to sleep at night, does she feel hungry?

- What is she worrying about as she tries to sleep?
- Is she hopeful about the day to come?

Adolescent girl

- What time does she wake up in the morning?
- Does she wake in a bed? Where did she sleep last night?
- Does she live with her family? Does she live with anyone else? Does she feel safe in her home?
- Where does she go to use the toilet? Is she able to use the toilet in privacy? Does she feel safe there?
- What are her first responsibilities?
- What does she eat in the morning? Does she prepare her own food? Does she prepare food for others? What do her brothers eat?
- Does she have a way to bathe in the morning? Who collected the water? How far is the bathing facility? Is it private? Does she feel safe there?
- Does she dress for the day? Does she have fresh clothes to wear? Is she helping any others to dress?
- What are her brothers doing this morning?
- Will she be going to school today?
- What would she love to do today?
- What will she spend most of her day doing?
- She needs to visit the market today—how long will she need to walk? Is the walk to the market safe? What dangers might she face?
- In the market, a young man grabs her and whispers something crude as she passes. His friends laugh. How does she feel? What might she say or do? What will others think if they saw? How would her parents react?
- What responsibilities does she have at home? How much time will she spend cooking today? Cleaning? Collecting water or fuel? Caring for other children?
- Will she spend any time today playing? Reading? Listening to the radio? Visiting friends? Visiting a community center?
- Will her brothers spend any time today playing?
- What does she dream about for her future? Is she hopeful?
- She imagines being married to a kind man one day. Will she be able to choose who she marries?
- Will her parents expect her to marry soon? Will they insist that she marry while she is young? What would they do if she refused?
- She wants to understand more about how her body is changing. Who can she ask about these things? If she is shy to talk to her mother, is there anyone else who can help her? Can she visit the clinic on her own? Is there any other service in the community for her?
- When she needs to use the toilet at night, where does she go? Does she feel safe? What dangers might she face?
- When she is ready to sleep at night, does she feel hungry?
- What is she worrying about as she tries to sleep?
- Is she hopeful about the day to come?

Forms of GBV: Context, Definitions & Risk Factors

Summary

In this module, facilitators introduce a specific form of GBV that will be in focus through the two-day training. Participants will begin to develop a deeper understanding of this form of GBV, including contextual risk factors.

Learning Objectives

Participants will:

- Define a specific form of GBV
- Identify risk factors for a specific form of GBV in their community

Facilitators will:

- Better understand the cultural and security context, and common practices and traditions, that directly relate to the form of GBV in focus

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. Relevant Fact Sheets from *GBV Response Tools and Resources* available for facilitator (and printed for distribution, if training is focused on GBV staff)
4. Consider preparing flipcharts with lists of risk factors associated with the form of GBV in focus

Time

1 hour, 30 minutes

Procedure

***The following steps can be followed for any form of GBV. Procedural notes for two common forms of GBV—intimate partner violence (IPV) and early and forced marriage (EFM)—are further outlined below.**

Step 1: Establishing context (30 minutes)

1. Open a discussion to collect information on the cultural and security context, as well as common practices, that directly relate to the form of GBV in focus. For example, if you will focus on sexual assault and rape, you can open a discussion on the security context and the types of violence that more commonly affect women and adolescent girls. If you will focus on EFM or IPV, you can discuss community expectations related to marriage, and how these might be changing during the emergency.

2. Express interest in learning from participants, even if you are very knowledgeable about community practices. Highlight points of agreement and acknowledge disagreements. Different points of view are expected, and questions can be further addressed during the training. Try to put participants who may be uneasy or defensive at ease. The training will allow opportunity to further explore community practices.

Step 2: Defining the form of GBV in focus (30 minutes)

Present information on the form of GBV in focus. Shift away from the community context to first share global definitions and information on patterns of violence, drawing from the *Fact Sheets* in GBV Response Tools and Resources. Note key elements on flipchart and address questions.

Step 3: Identifying risk factors (30 minutes)

Remind participants that different forms of GBV occur in every part of the world and that the imbalance of power between men and women is the root cause of all GBV. Ask:

- Does the form of GBV in focus occurs in all contexts?
- What factors might make women and girls vulnerable to the form of GBV in their community?
- Are particular groups of women or girls most at risk?
- Are risks increasing?

Collect ideas from participants and highlight additional risk factors, based on global evidence.

Key Discussion Points/Additional Facilitation Notes

- Consider this session an opportunity to learn about community practices and attitudes toward the form of GBV in focus. Create a safe space for participants to share ideas and consider different views, as well as new information.
- Don't feel pressured to share all available information on the form of GBV, and don't expect participants to absorb all information shared. Cover key points, as appropriate to your context and audience, and remember that participants will continue to learn about the form of GBV in subsequent sessions.

Understanding Forms of GBV: Context, Definitions & Risk Factors

Early and Forced Marriage

Procedure

Step 1: Establishing context: Marriage practices

Questions to open discussion and learn about practices from participants might include:

- When are girls/women expected to marry? When are boys/men expected to marry? How are spouses selected, or arranged? Who makes choices about marriage? Are gifts or money exchanged?
- What about uncommon circumstances? Are there different practices with certain populations—like divorced or widowed women? Girls who have been raped? Others?
- Have marriage practices have changed since the emergency? Have ceremonies changed? Are people marrying younger? Are marriages occurring between different communities?

Step 2: Defining early/forced marriage

Explain that early and forced marriage is considered a form of GBV. Acknowledge that there may be important customs and reasons behind these practices that you will spend more time discussing, and that you will want to hear their opinions. First, you want to share definitions and information from global evidence:

- Early marriage is a formal or informal union where one or both parties is under the age of 18.
- Forced marriage occurs at any age when at least one spouse does not offer full consent.
- “Child marriage” is another term to describe early marriage, particularly where an early marriage is forced.
- Marriage under the age of 18 is against international human rights standards, as interpreted through conventions that have been agreed to by nearly every country in the world (CEDAW, the Convention on the Rights of the Child). In 1994, countries agreed to eliminate child marriage and to enforce laws to ensure that marriage is only based on the free and full consent of both spouses (International Conference on Population and Development (ICPD)).
- EFM is linked to numerous risks and consequences for individuals, families, and communities that will be further explored in the training.

Step 3: Identifying risk factors: Early/ forced marriage

- Who is most at risk of early marriage in the community? Who is most at risk of forced marriage (including adults)?
- Globally, EFM largely impacts adolescent girls. Are some girls at particular risk of EFM? Are risks increasing? Note factors that might make adolescent girls particularly vulnerable to EFM in the community.
- Remind participants of discussion of risk factors during the core concepts review. Refer to the GBV tree. Ask participants to reflect further on the vulnerability of adolescent girls. Women are vulnerable to violence because of an imbalance of power linked to gender discrimination. Children are vulnerable to violence because of an imbalance of power linked to age. Children are dependent on adults, they don't have the same rights and freedoms, they can be more easily tricked and coerced, etc. Adolescent girls (age 10-19) are at the intersection of these two axes of power. They are both vulnerable because of gender discrimination and because of their age. Adolescent girls, correspondingly, are disproportionately affected by GBV.

Understanding Forms of GBV: Context, Definitions & Risk Factors

Intimate Partner Violence

Procedure

Step 1: Establishing context: Marriage practices

Questions to open discussion and learn about practices from participants might include:

- Who makes choices about marriage? Are gifts or money exchanged? Once married, is one spouse understood to join the others' family? With whom do married couples live? Is polygamy practiced by some?
- Is divorce permissible, and if so, under what circumstances? Can a wife initiate divorce? Who gains custody of children in a divorce? What are the possible living arrangements for a divorced woman—would she return to her parents' home? Might she live on her own?
- Are husbands and wives considered equals in their relationships? Who is expected to make decisions? Is one spouse expected to obey the other?
- Is a husband ever expected by his family, or neighbors, to beat his wife? Is this considered a good or bad practice, or does it depend on circumstances? What if the wife is considered lazy in her responsibilities? What if the wife doesn't seek the husband's permission to visit friends or spend money? What if the wife is unfaithful?

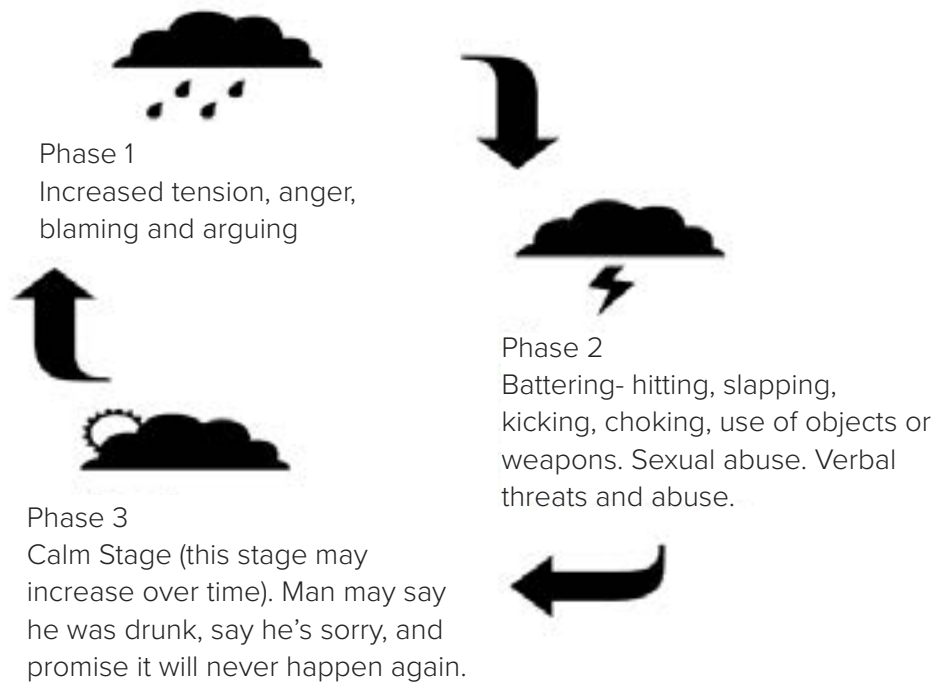
Step 2: Defining intimate partner violence

Draw from points listed below to define IPV and provide a brief overview of the problem.

- IPV is an abuse perpetrated by a current or former partner or spouse. The term domestic violence is often used interchangeably.
- IPV may include physical, sexual, or psychological violence, as well as controlling behaviors and the denial of resources, opportunities or services.
- Overwhelmingly, IPV affects women and is perpetrated by men. Women can also be violent in relationships with men, but this is not as common and often occurs in self-defense. Women do not usually hold power in relationships or within communities, and IPV like other forms of GBV is an abuse of power.
- While men are far more likely to experience violence by strangers or acquaintances, women are often at greatest risk of harm from their partners. In fact, globally, 38% of all murdered women are killed by their intimate partner.
- IPV is a violation of women's rights, as interpreted through international human rights law, including conventions ratified by nearly all countries. Countries have also committed to ending violence against women and girls by 2030 as a Sustainable Development Goal.
- National laws related to IPV vary by country, and 76% of countries have some laws related to domestic violence. Many laws related to IPV address only physical violence and only apply to married couples. Legal protection remains weak for sexual violence as a form of IPV, where laws are lacking in more than one in three countries. More than half of countries do not have laws related to economic violence as a form of IPV. For two in three countries, unmarried intimate partners are not protected under the domestic violence laws.

Introduce common patterns of IPV

- IPV can vary in type (sexual, physical, economic, etc), frequency, and severity.
- In some contexts, IPV is very common and even expected, where husbands are expected by both men and women to exert power over their wives and even to physically discipline their wives for major infractions. Sometimes people think this type of abuse is good for families and communities, but all IPV carries harmful consequences.
- In communities where some level of IPV is common and tolerated, some men perpetrate IPV that is considered too severe, unprompted, or not proportionate to perceived infractions of their wives. These men may go weeks or months without abusing their wives. We refer to this as a “cycle of violence” that mirrors a storm--- there is a period of calm (nice weather), then increased tension builds (rain clouds), then violence erupts (lightening), followed again by a period of calm. During the period of calm, the husband may regret his actions and promise it won’t happen again. Everyone (husband, wife, neighbors, leaders...) might be convinced that the violence won’t happen again. But this cycle tends to repeat and can become increasingly dangerous.



Consider drawing a pictorial representation of the cycle of violence.

Step 3: Discuss risk factors of intimate partner violence

- Remind participants of discussion of risk factors during the core concepts review. Refer to the GBV tree. Ask participants who might be most vulnerable to IPV? What factors might determine who perpetrates IPV? Draw out ideas from participants without writing these down, as some might be problematic. If participants share problematic views, such as amoral women are most at risk of IPV, acknowledge the viewpoint as likely common and ask for different perspectives.
- Close discussion by sharing risk factors that have been identified through research and consistently associated with increased likelihood of IPV across different settings. Many of these may align with points leaders have raised. Draw from some risk factors outlined on the next page.

Risk factors associated with a woman's increased likelihood of experiencing IPV include:

- Low level of education
- Early/forced marriage
- Exposure to violence between parents
- Sexual abuse during childhood
- Experiences with other forms of prior violence
- Holding beliefs that accept violence and gender inequality

Risk factors associated with a man's increased likelihood of committing IPV include:

- Young age
- Low level of education
- Witnessing or experiencing violence as a child
- Harmful use of alcohol
- Personality disorders
- Holding beliefs that it is acceptable for a man to beat his partner
- Past history of abusing partners

Relationship factors associated with risks of IPV

- Conflict or dissatisfaction in the relationship
- Male dominance in the family
- Economic stress
- Man having multiple partners
- Disparity in educational attainment

Community and societal factors associated with risks of IPV

- Social norms where women and men are not considered equal
- Social norms that associate manhood with dominance and aggression
- Poverty
- Low social and economic status of women
- Weak legal sanctions against IPV
- Restrictions on women's rights in divorce
- Weak community sanctions against IPV
- Broad community acceptance of violence as a way to resolve conflict

Key Discussion Points/Additional Facilitation Notes

In this training guide, IPV is discussed in the context of marriage and separation/divorce within heterosexual relationships. These notes are developed to guide discussions in contexts where leaders largely expect intimate partnerships to be limited to traditional or legal marriage between men and women/girls. Discussion with GBV teams and community leaders may be adapted in contexts where other intimate partnerships are recognized and safe to explore, including discussions related to intimate relationships between unmarried adolescents, or intimate relationships between same-sex partners.

Forms of GBV: Building Understanding

Summary

Through reflection on hypothetical scenarios, participants reflect on the experience of GBV for a survivor and consider the attitudes and behaviors that drive GBV in their community.

Learning Objectives

Participants will and facilitators will:

- Identify challenges, including social consequences, that survivors face in the community
- Recognize common attitudes toward survivors and perpetrators of GBV

Materials and Preparation

1. Flipchart paper and markers
2. Prepare scenarios relevant to context and form of GBV in focus. Sample scenarios are provided for EFM, IPV, and rape that can be adapted. Consider printing/copying scenarios for distribution to groups.

Time

2 hours

Procedure

***The following steps can be followed for any form of GBV. Procedural notes for three forms of GBV—intimate partner violence (IPV), early and forced marriage (EFM), and acquaintance-perpetrated rape—are further outlined below.**

Step 1: Group exercise: Reflection GBV through a scenario. (30 minutes)

1. Share a hypothetical scenario involving an incident of GBV. The scenario should be relevant to the context with names that they are easily recognized but not the same as any participants.
2. Divide participants into two groups. Ask one group to reflect on the survivor's position and the other group to focus on the perpetrator. Ask each group to focus their discussion on questions related to the drivers of the incident and consequences that the survivor or perpetrator might experience. Groups can identify a notetaker and a representative to report back.
 - a. Sample questions for survivor's group to consider:
 - i. What are her greatest worries?
 - ii. How will her family react?
 - iii. What do her neighbors think?
 - iv. Who could help her?

b. Sample questions for perpetrator's group to consider:

- i. What was he feeling and thinking?
- ii. What do his neighbors think of him?
- iii. How does he treat other people in his life?
- iv. Will he face any consequences for his actions?

Step 2: Plenary discussion: Reflections on scenario (1 hour, 30 minutes)

1. Ask a representative from the survivor's group to briefly share answers to their questions and points from discussion. Ask probing questions, including questions to understand how the survivor's situation might be different under different circumstances.
2. Ask a representative from the perpetrator's group to briefly share answers to their questions and points from discussion. Ask probing questions, including questions about how perpetrators might be held more accountable for their actions.
3. Remind participants of the GBV tree, and the roots of the tree. Where women and girls are not equal, they are vulnerable to different forms of GBV. While men have greater power than women and girls, not all men abuse this power to perpetrate GBV; those who do should be held accountable.

Key Discussion Points/Additional Facilitation Notes

- Hypothetical scenarios should resonate with participants without being overly specific to the community. They can be read as a story from another place, to discuss how this community would react to similar events.
- Remind participants to not share stories that identify real individuals.
- Prepare for participants to make harmful comments, including victim-blaming or rationalization of GBV. Address harmful comments without judging, shaming, or arguing with participants. Clarify, acknowledge that others likely share the idea, ask for other perspectives, highlight potential consequences, and draw reference to **GBV Core Concepts** training. See **Handout: Facilitator Strategies for Managing Challenges** in *Foundations: Key Approaches* for more detailed strategies.

Building Understanding- Early/ Forced Marriage

Procedure

Step 1: Group exercise: Reflect on EFM through a scenario. (30 minutes)

1. Adapt the scenario below for relevance in the context. Change names so that they are easily recognized but not the same as any participants. Read the scenario aloud.

Sarah is a 16-year-old student who loves to study and has big dreams for her life. She lives with her family and helps to care for her younger sisters. One day, she learns that her father is in debt to an older, wealthier man in their community named Adam. Four years ago, her father needed money to pay medical bills after an injury and asked to borrow money from Adam. Adam did not believe Sarah's father would be able to repay a loan, so he instead offered to give the money in exchange for Sarah's hand in marriage, once she was a bit older. Adam has now come calling for Sarah. She is devastated and does not want to marry Adam, who is much older and already has two wives. She feels betrayed by her father, but she does not wish to anger or humiliate him, and he gave his commitment to Adam.

2. Divide participants into two groups. Ask one group to reflect on Sarah's position and the other group to focus on her father. Groups can identify a notetaker and a representative to report back.
 - a. Questions for Sarah's group to consider:
 - i. What are Sarah's main concerns?
 - ii. What choices does Sarah have?
 - iii. What would Sarah's future look like if she marries Adam?
 - iv. Who could help her?
 - b. Questions for the father's group to consider:
 - i. What are the father's main concerns?
 - ii. What choices does he have?
 - iii. Would Sarah's father be willing to listen to Sarah's concerns?
 - iv. What, or who, could help Sarah's father to call off the wedding?

Step 2: Plenary discussion: Reflections on scenario¹ (1 hour, 30 minutes)

1. Ask a representative from Sarah's group to briefly share answers to their questions and points from discussion.
 - Ask: Would it be possible for Sarah to simply refuse to marry Adam?
 - Ask: If Sarah reported the issue to authorities and sought legal help, how would this affect her relationships with family? With her community?
2. Ask a representative from Sarah's father's group to briefly share answers to their questions and points from discussion.
 - Acknowledge that Sarah's father is in a difficult position
 - Ask: Would the situation be different if the father's interests were more than financial—if he really wanted Sarah to marry Adam?
 - Ask: Do some parents believe there are benefits to early marriage? Who- or what- is driving this practice?
3. Remind participants of the GBV tree, and the roots of the tree. Where girls are not equal, they will be vulnerable to EFM and other forms of GBV.

¹ Adapted from IRC's EMAP Implementation Guide

Building Understanding- Intimate Partner Violence

Procedure

Step 1: Group exercise: Reflect on IPV through a scenario. (30 minutes)

1. Adapt the scenario below for relevance in the context. Change names so that they are easily recognized but not the same as any participants. Read the scenario aloud.

Miriam lives with her husband, Ali, and their three children. When they got married, Ali paid a bride wealth to her family. He often tells her that he had paid a good price for her so she should work hard and be a good wife, or else he will send her back and demand the money back from her family.

Miriam works from early in the morning until late in the evening selling vegetables in the market. When she gets home, she is tired, but she still has to cook dinner, fetch water, wash clothes, and look after her young children.

Ali often takes the money that Miriam earns at the market and goes out in the evening. He comes home late, and often, he starts shouting at Miriam. He beats her in front of the children. Sometimes he makes her sleep outside to punish her if the food is cold or not cooked to his liking, and to show the neighbors that he is the boss in his family. Many of their neighbors ignore Miriam. Although they often see her with bruises on her face, they just keep quiet.

2. Divide participants into two groups. Ask one group to focus on Miriam and the other group to focus on Ali. Groups can identify a notetaker and a representative to report back.
 - a. Questions for Miriam's group to consider:
 - i. What do her parents say about the abuse?
 - ii. What do her neighbors think?
 - iii. How does she cope with the abuse?
 - iv. Who could help her?
 - b. Questions for Ali's group to consider:
 - i. What has he been taught about what it means to be a man?
 - ii. What do his neighbors think of him?
 - iii. How does he treat other people in his life?
 - iv. How does he feel when he abuses Miriam? What is he thinking?

Step 2: Plenary discussion: Reflections on scenario² (1 hour, 30 minutes)

1. Ask a representative from Miriam's group to briefly share answers to their questions and points from discussion.
 - Ask: Would Miriam be less vulnerable to abuse—and could she more easily receive help—if her neighbors and family believed she had equal rights in her marriage and equal value as a woman?
2. Ask a representative from Ali's group to briefly share answers to their questions and points from discussion.
 - Acknowledge that Ali may feel frustrated, angry, disrespected, etc.
 - Ask: Would Ali take out his frustration and anger on someone with high status in the community?
 - Ask: Would Ali still beat Miriam if he believed he would face consequences for his actions?
3. Remind participants of the GBV tree. The root cause of IPV is the same as other forms of GBV. Where women are not equal, men have opportunities to abuse this power imbalance. Not all men will abuse power, and those who do should be responsible for their actions.

² Adapted from IRC's EMAP Implementation Guide

Building Understanding- Rape

Procedure

Step 1: Group exercise: Reflect on rape through a scenario. (30 minutes)

1. Adapt the scenario below for relevance in the context. Change names so that they are easily recognized but not the same as any participants. Read the scenario aloud.

Tamra is a 25-year-old woman who lives with her new baby, her husband, and her husband's family. She weaves baskets, and she sometimes moves through the community to sell the baskets and earn money for her family. Last week, as she passed the home of her husband's cousin, Ben, he called her inside to see some of her baskets. Tamra doesn't usually enter other people's homes, but since Ben is family, she wanted to be polite. Once inside, he began to look at her in a way that made her uncomfortable, and she wondered if he had been drinking. Ben asked her to come to him, but she said she should be getting home. As she turned to leave, Ben grabbed her from behind. She cried as he tore her clothes off and then forced himself on her. As soon as Ben released her, Tamra quickly covered herself and escaped. She saw Ben's neighbors watching her as she ran home.

2. Divide participants into two groups. Ask one group to reflect on Tamra's position and the other group to focus on Ben. Groups can identify a notetaker and a representative to report back.
 - a. Questions for Tamra's group to consider:
 - i. What are her greatest worries?
 - ii. What are Ben's neighbors saying about her?
 - iii. Will her husband and his family be upset with her when they hear about what happened?
 - iv. Who could help her?
 - b. Questions for Ben's group to consider:
 - i. Does he understand that he has hurt Tamra?
 - ii. How does he treat other people in his life?
 - iii. Is he worried about his family's reaction?
 - iv. Is he worried about any punishment or consequences?

Step 2: Plenary discussion: Reflections on scenario (1 hour, 30 minutes)

1. Ask a representative from Tamra's group to briefly share answers to their questions and points from discussion.
 - Acknowledge that Tamra is likely upset and worrying over the rape itself, which was a horrible experience, as well as how people will treat her. Survivors of rape are often blamed.
 - Ask: How would Tamra's situation be different if she were younger and not married?
 - Ask: How would Tamra's situation be different if Ben were an outsider to the community?

- 2.** Ask a representative from Ben's group to briefly share answers to their questions and points from discussion.
 - Ask: If Ben is confronted with the accusation that he raped Tamra, but he says that Tamra agreed to have sex with him, who will people believe? What will happen?
 - Ask: Is Ben likely to hurt Tamra again? Will he hurt someone else?
 - Ask: Would Ben face different consequences if he were an outsider to the community?
- 3.** Remind participants of the GBV tree. The root cause of rape is the same as other forms of GBV. Where women are not equal, men have opportunities to abuse this power imbalance. Not all men will abuse power, and those who do should be responsible for their actions.

Forms of GBV: Consequences

Summary

Participants review individual, family, and community consequences of a specific form of GBV.

Learning Objectives

Participants will:

- Identify individual, family, and community/societal consequences of form of GBV in focus
- Understand that survivors require support and access to services

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. Relevant *Fact Sheets* from *GBV Response Tools and Resources* available for facilitator (and printed for distribution, if training is focused on GBV staff)
4. Facilitator can consider preparing flipchart with list of consequences associated with type of GBV in focus

Time

45 minutes

Procedure

Step 1: Present information on consequences (20 minutes)

1. Remind participants of their review of *GBV Core Concepts*, including review of consequences of GBV. Participants previously identified: 1. Health consequences for survivors, 2. Emotional/ psychological consequences for survivors, 3. Relationship/social consequences for survivors, 4. Consequences for family members and wider communities.
2. Share information on specific and common consequences of the form of GBV in focus, drawing on global evidence outlined in *Fact Sheets*. Address questions.

Step 2: Discuss common social consequences in the community (35 minutes)

Either in plenary, or in small groups, ask participants about consequences related to the form of GBV in focus in their community. Questions to consider:

- How would partners/ family members react?
- Would the survivor be in danger from her family?
- Would anyone show sympathy for the survivor?
- How would a survivor's position in the community be affected?
- Would she be able to continue school/ work/ social activities?
- Would people blame her?
- Would people believe her?
- Would people agree that this was a problem?
- How would her marriage/ marriage opportunities be affected?
- What would people think of her family?

Record key words and points on flipchart.

Key Discussion Points/Additional Facilitation Notes

- While health consequences of GBV are largely consistent across contexts, social consequences related to specific forms of GBV vary greatly.
- Support from family and those close to survivors is essential and can help to prevent or mitigate many harmful consequences of GBV. Survivors should be believed and not blamed or judged for their experiences with violence

Reinforcing Protective Factors

Summary

Participants consider factors that reduce vulnerability to GBV, as well as factors that mitigate risks of consequences for survivors, and begin to outline protective actions that communities can take.

Learning Objectives

Participants will:

- Consider how their community could better protect women and/or girls against a form of GBV
- Consider how their community could reduce consequences for survivors

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. Relevant *Fact Sheets* from GBV Response Tools and Resources available for facilitator
4. Flipchart notes from **Forms of GBV: Context, Definitions & Risk Factors** training module.
5. Flipchart notes from **Forms of GBV: Consequences** training module.

Time

1 hour, 45 minutes

Procedure

Step 1: Plenary discussion: Mitigating risks of a form of GBV (40 minutes)

Remind participants of risk factors for the form of GBV in focus, as reviewed during the *Forms of GBV: Context, Definitions & Risk Factors* module. Display flipchart notes if possible. Discuss actions that community members could take to better protect women and/or girls from the form of GBV in focus and note major points on flipchart.

- Are people aware that this form of GBV occurs in the community and is a serious problem? What could be done to raise awareness of the problem?
- Are there risks related to the physical or security environment that could be addressed? (If participants have received training in GBV Risk Mitigation refer to risks identified during the training.)
- What attitudes or beliefs help to perpetuate the form of GBV? Does everyone hold these beliefs? What would help people to shift toward more protective beliefs?
- What could be done to better protect individuals and groups of women or girls most at risk?

Step 2: Small group discussion: Mitigating consequences for survivors (40 minutes)

1. Ask participants to think of a survivor. Share a brief, hypothetical scenario related to the form of GBV in focus. For example:
 - A woman is regularly beaten by her husband.
 - A 16-year-old girl was forced to marry an older man.
 - A 14-year-old girl was raped by her 18-year-old neighbor.
 - A woman was raped while collecting firewood outside the community.
2. Remind participants of the range of consequences identified in the *Forms of GBV: Consequences* training module. Display flipchart notes if possible. Explain that participants will consider what could help the survivor to reduce her risks to consequences.
3. Divide participants into small groups and ask them to consider key questions related to mitigating consequences for a survivor (examples below). Ask groups to record answers on flipchart for display.
 - How would partners/ family members help?
 - Who else in the community could help, and how?
 - What would be required for the survivor to be able to (safely and comfortably) continue her education/work/ social activities?
 - What services could benefit the survivor, and how could she be helped to access these?

Step 3: Plenary (25 minutes)

1. Ask groups to display their flipcharts on stands, or by taping them to a wall. Allow time for participants to review all groups' flipcharts. Reflect on common ideas. Ask questions to clarify points and address any harmful suggestions.
2. Ask what recommendations/ suggested actions from groups might be taken up by community leaders. Explain that participants will be able build on these ideas and plan actions for community leaders in the next session.

Key Discussion Points/Additional Facilitation Notes

- Survivors of GBV deserve to be believed and supported, and those who receive support from family and close members of their community will face fewer consequences and risks.
- Some forms of GBV may be considered normal, or not widely recognized as forms of violence.
- Prepare for participants to raise potentially harmful ideas as protective strategies. Address harmful comments without judging, shaming, or arguing with participants. Clarify, acknowledge that others likely share the idea, ask for other perspectives, highlight potential consequences, and draw reference to concepts reviewed during training. See **Handout: Facilitator Strategies for Managing Challenges** in *Foundations: Key Approaches* for more detailed strategies.

Role of Community Leaders

Summary

Participants identify roles that community leaders play in GBV response and identify actions that leaders can take to reduce risks and strengthen support for survivors.

Learning Objectives

Participants will:

- Consider opportunities to strengthen GBV response in the community
- Identify specific actions that leaders can take

Facilitators will:

- Increase understanding of community leaders' roles in GBV response.
- Identify leaders' current or planned actions that a GBV team could support

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator reference
3. Flipchart notes from [Reinforcing Protective Factors](#) training module
4. Consider printing/copying the [Handout: GBV Response Action Planning](#) for distribution.
5. Notebook paper and pens for participants

Time

1 hour, 45 minutes*

**An additional half or full day may be planned with community leaders for GBV Response action planning.*

Procedure

Step 1: Plenary discussion: Common roles of leaders (20 minutes)

Open a discussion around community leaders' involvement in responding to the form of GBV in focus. Use a brief, hypothetical case if helpful.

- Do different leaders have different roles/ responsibilities?
- Who involves leaders? Are survivors likely to contact leaders, or do others?
- What are leaders' dominant concerns when a case is brought to their attention?
- Are leaders likely to respond in a way that adheres to the principles of a survivor-centered approach?

Step 2: Group discussions: Actions leaders can take (1 hour)

1. Remind participants of protective factors identified in the previous module, as well as ideas for actions that could reduce consequences for survivors. Explain that participants will further consider actions that community leaders might take.
2. Divide participants into groups, as most appropriate for action planning (e.g., based on leadership roles, or sections of the community). Ask groups to agree on a notetaker. (*The notetaker will be responsible for maintaining notes or draft action plans, if groups will be meeting for an additional day of action planning, or meeting at a later stage to refine plans.*)
3. Ask groups to consider actions that community leaders might take to strengthen response to the form of GBV in focus, related to the five strategies outlined below. Groups should consider roles for leaders in all strategies but may elect to focus on particular strategies.
 - a. Increasing access to response services
 - b. Supporting individual survivors
 - c. Sharing information and influencing others
 - d. Strengthening safety and protection
 - e. Holding perpetrators accountable
4. Groups can create lists of actions on flipchart or begin planning using the Handout: *GBV Response Action Planning*.
5. Visit each group as they plan. Help groups to consider new actions, drawing from the *Ideas for Engagement* section of the GBV Response chapter of the Toolkit.
6. Toward the end of time, ask groups to briefly share ideas for action they would like to take forward. Ask groups to agree on plans for additional meetings or follow up, if relevant (and if a day of action planning is not planned as part of the training).

Step 3: Personal reflections and commitments (25 minutes)

Ask participants to reflect on ideas that came out of group discussion, as well as other parts of the training, and consider what changes or new actions they would like to take. Invite participants to find private space to quietly reflect and record their personal plans and commitments.

Key Discussion Points/Additional Facilitation Notes

- Consider planning an additional half or full day to further develop action plans for GBV response. As an alternative, consider making plans for follow-up meetings with participants.
- Note information learned about community leaders' roles, participants who demonstrate commitment, and ideas for improving community response to update the GBV program's strategies and plans, community leader mapping, or criteria for engagement, as relevant.

Handout: GBV Response Action Planning

Increasing Access to Response Services

Action	Steps Required	Timeframe	Participants	Lead

Supporting Individual Survivors

Action	Steps Required	Timeframe	Participants	Lead

Sharing Information and Influencing Others

Action	Steps Required	Timeframe	Participants	Lead

Strengthening Safety and Protection

Action	Steps Required	Timeframe	Participants	Lead

Holding Perpetrators Accountable

Action	Steps Required	Timeframe	Participants	Lead

Responding to Survivors

Summary

This module devotes more time for participants to practice responding to survivors who disclose incidents of GBV, building on the *GBV Core Concepts* training module: **Connecting Survivors with Support Services**.

Learning Objectives

Participants will:

- Build skills in survivor-centered response
- Feel prepared to refer a survivor to appropriate support services, in line with her wishes

Materials and Preparation

1. Flipchart paper and markers
2. Copies of community GBV referral pathways for display and distribution
3. Copies of *Tip Sheet: What to do and say when a survivor discloses GBV³* in GBV Response Tools and Resources for distribution.

Time

2 hours, 30 minutes

Procedure

Step 1: Review of available services (30 minutes)

Display and/or distribute copies of the community GBV referral pathway. Use flipchart to present relevant referral information that may be missing from referral pathways, such as specific service points or contact information.

Cover the following points:

- Remind participants that specialized GBV response services and medical services are priority referrals for survivors.
- Discuss which services are particularly relevant for survivors of the form of GBV in focus. Provide information on the range of options service providers can offer survivors.
- Remind participants of the importance of consent, and of supporting survivors to make their own decisions about which services they want to receive.
- Discuss consent for services in the context of the form of GBV in focus. Are most survivors adults? Should survivors under 18 be able to elect services themselves?

³ The Tip Sheet is adapted from: IASC (Inter-agency Standing Committee). Pocket Guide: How to support survivors of gender-based violence when a GBV actor is not available in your area, 2015. The Pocket Guide is available in more than 15 languages, while the Tip Sheet is only available in English, French, and Arabic. Facilitators can access the Pocket Guide for download here: <https://www.gbvguidelines.org/en/pocketguide/>

Step 2: Review of Tip Sheet (20 minutes)

Distribute the *Tip Sheet: What to do and say when a survivor discloses GBV* in GBV Response Tools and Resources. Call on volunteers to review major points in the *Tip Sheet*, as covered during the *GBV Core Concepts* training: *Look, Listen, Link*. In low literacy settings, the facilitator can present information from the Tip Sheet.

Step 3: Roleplay practice (1 hour, 30 minutes)

1. Ask participants to divide into pairs. Explain that pairs will practice helping to link a survivor to support services through roleplay. (With an uneven number of participants, a third participant can observe one pair.)
2. Share a brief scenario for pairs to roleplay, suitable to the context and relevant to the form of GBV in focus. Examples:
 - A woman confides in you that she was raped yesterday, while traveling outside the community for livelihood purposes. (Rape)
 - A mother tells you that she believes her young daughter has been assaulted by a neighbor. (Rape or sexual assault of a child)
 - A married woman confides in you that her husband has been beating her. (IPV)
 - A 16-year-old girl asks for your help to stop a forced marriage. (EFM)
3. Ask pairs to select one person to play the role of a survivor (or parent/guardian of a survivor), while the other participant practices in their actual capacity as a GBV team member or community leader, receiving a survivor and helping to connect her with services.
4. Allow pairs to roleplay for 10 minutes. Then stop pairs and ask those who played in the role of survivors to share brief feedback to their partner.
5. Ask for volunteers to share reflections with the larger group. How did survivors feel? What did your partners do or say that was good? Did you feel supported? Did you understand that it was your choice to seek services?
6. In the same pairs, ask participants to switch roles, using the same or a different scenario.
7. Allow pairs to roleplay for 10 minutes. Then stop pairs and ask those who played in the role of survivors to share brief feedback to their partner.
8. Ask for volunteers to again share reflections with the larger group.
9. Monitor participants' engagement in roleplay and adapt the exercise to fit needs and interests. Consider the following options:
 - Ask participants to shift pairings.
 - Ask a pair of volunteers to demonstrate a roleplay to the larger group and then discuss the demonstration.
 - Provide new scenarios.
 - Update scenarios with new information or complicating factors for pairs to consider.
 - Shift to group or plenary discussion about good actions to take in response to a scenario (if energy for roleplay diminishes).

Step 4: Wrap up (10 minutes)

Review principles of a survivor-centered approach and the benefits of response services. Address questions or points of confusion.

Key Discussion Points/Additional Facilitation Notes

- The roleplay exercise is designed around circumstances of a survivor (or parent/caretaker of a survivor) disclosing an incident. With groups of community leaders, consider introducing a scenario where someone else reports an incident of GBV. Help leaders think through the challenge of acting in line with a survivor-centered approach.