

Traditions and Opportunities Training Manual

A Toolkit for GBV Programs to Engage Community Leaders in
Humanitarian Settings



Training Manual

**Traditions and Opportunities: A Toolkit for GBV Programs to Engage Community Leaders in Humanitarian Settings
Training Manual**

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Acknowledgements

This Training Manual is part of a Toolkit and is designed for use in conjunction with the Traditions and Opportunities Guidance, Tools and Resources. The Toolkit is intended to support GBV programs to safely and effectively engage community leaders to advance GBV prevention and response in humanitarian settings. We hope that Training Manual will prove useful to GBV teams interested in building skills for community leader engagement and organizing trainings for community leaders.

This Toolkit was developed by International Medical Corps (IMC), with generous collaboration from a broad network of GBV specialists and organizations who contributed through formative interviews, sharing of tools and resources, and review of draft materials. The Toolkit draws heavily from formative research and piloting by International Medical Corps' GBV program teams in Cameroon, Iraq, and Mali. In each of these locations, community leaders, government authorities, GBV sub-cluster coordination groups, and partner organizations provided input and feedback.

The Toolkit, including this Training Manual, was written by Micah Williams, Sophie Read-Hamilton, Dakota Hankin, Robyn Yaker, Samrawit Assefa, and Shiromi Perera. Samrawit Assefa and Laura Canali led assessments in pilot countries, with support from International Medical Corps' GBV program teams. Jacqueline Uwimana, Ernest Deline, Beatrice Essebe, and Priscille Feumba led piloting of the Toolkit in Cameroon, with support from Yolande Djoukouo, Pasma Moluh Ange, Rigobert Taiwe, Issac Jamalou, and Kartumi Abba. Harriet Omina Oyombe, Angela Mutunga, and Jiwan Adnan led piloting of the Toolkit in Iraq, with support from Abdulwahed Monem, Ayman Anies, and Zahraa Alshaibani. Amenan Tanou, Marie Chantal Gboze, and Mohamed Kalifa Cisse led piloting of the Toolkit in Mali, with support from Almoudou Tandina, Maïmounata Maïga, Fatouma Dicko, Daouda Sanogo, and Ernest Deline. Laura Canali, Camilla Marthinsen, and Tamara Obonyo provided technical support for the development of the Toolkit, and Micah Williams led the development process, with support from Shiromi Perera.

Affari Project designed the Toolkit into a user-friendly resource. The Toolkit was translated from English to French and Arabic with the support CLEAR Global and their community of linguists.

Development of this resource would not have been possible without the generous support of the United States Office Bureau for Humanitarian Affairs.

Introduction

Inaction within the community is often due to not knowing what can be done. Training community leaders can help them experience issues through a different perspective and become motivated to support women and girls.

- Experienced GBV Specialist



How Does the Training Manual Link to the Toolkit Guidance, Tools and Resources?

The Toolkit for GBV Programs to Engage Community Leaders in Humanitarian Settings includes multiple ideas for working with community leaders across different dimensions of GBV programming: response, risk mitigation, transformative change, and support for women leaders. Organizing trainings for community leaders is one way, but not the only way, to engage community leaders across these key areas of engagement.

The Training Manual is best used in conjunction with the **Toolkit Guidance**, Tools and Resources. Chapters of the Toolkit Guidance that most closely link to training modules are indicated at the start of each training section, under the heading: How does the Training Link to the Toolkit Guidance?

For Which Audiences is Training Intended?

The Training Manual is designed for three main audiences:



GBV teams, defined as a team of GBV practitioners within one (local, national, or international) organization or multiple organizations supporting a common GBV prevention and response program. Some training modules are specifically designed to help GBV teams apply Toolkit guidance, while all training content may be beneficial for GBV teams.



All community leaders. Community leaders are members of the community who serve in formal or informal leadership positions. They are both male and female, and they have roles in their communities that help them to influence or serve others.



Women leaders. While women leaders are included among all community leaders, this Toolkit focuses additional attention on supporting and empowering women leaders. Some training modules are therefore specifically tailored to women leaders.

Intended audiences are outlined at the start of each training section with the heading: *Who is the Training for?* Audiences are also indicated with icons at the top of each module and in training outlines.

Using the Manual and Planning Trainings

How to Use the Training Manual

GBV program teams can use sections of the training manual according to program plans and community needs. Programs are recommended to review the content of training, adapt training material as appropriate to their programming context, tailor the content to select audiences, and conduct a safety and ethical review before organizing trainings. Brief guidance on these steps is provided below.

Overview of Training Sections

GBV Core Concepts. This training is foundational and recommended for all GBV staff and all community leaders. GBV Core Concepts training modules establish a common understanding of power and the root cause of GBV, the importance of a survivor-centered approach, consequences of GBV, and support available for survivors. A *GBV Core Concepts Review* module is included in the training section and recommended to include at the start of any subsequent trainings with community leaders.

Foundations: Key Approaches for Engaging Community Leaders. This training section covers theoretical and practical approaches for GBV teams to apply when engaging community leaders. The training modules related to communication skills and advocacy may also be relevant for women leaders.

Foundations: Planning for Engagement. This training section is closely linked with the Building a Foundation chapter of the Toolkit Guidance and is designed to help GBV program teams plan for community leader engagement.

GBV Response. GBV Response training modules can be adapted to focus on specific forms of GBV, to deepen understanding of drivers and consequences of GBV within communities, and to build knowledge and skills for a survivor-centered response. This training section is indicated for all community members and GBV teams.

GBV Risk Mitigation. This training section focuses on identifying community-level GBV risks and setting plans to address risks. The modules are designed for community leaders but are also relevant for GBV teams.

Transformative Change. This training section explores root causes of GBV and considers community-level changes that could prevent GBV. Two modules in this section are devoted to theories and approaches for social behavior change programming and are only indicated for GBV teams, while other modules are relevant for both GBV teams and community leaders.

Women's Leadership. This training section explores concepts of leadership and invites participants to reflect on their individual and collective strengths and vision. Women's leadership training modules are designed for emerging and current women leaders and can also be relevant for GBV teams.

Section Format

Each training section is designed with the same format. At the top of each section, information is provided to briefly answer the following questions:

- Who is the Training for?
- How Does the Training Link to the Toolkit Guidance?
- Time and Resources Required

Training Outline

An outline is provided at the top of each section with the following information:

- Module Titles
- Summaries of Modules. *Including notes where modules may be found in other training sections.*
- Time recommended for each module.

Training Module Format

Each training module is designed with the same format. Facilitators will find information under the following headings:

- **Module Title**
- **Summary**
- **Learning Objectives.** Some modules include learning objectives for both participants and facilitators.
- **Materials and Preparation.** The training modules accommodate low-technology settings and generally only require the Toolkit Guidance, flipchart paper and markers, individual notebooks/paper and pens, and printed/ photocopied tools and handouts. Additional materials such as tape, scissors, stickers, or yarn may be recommended, but modules can be adapted to limit use of most materials.
- **Time.** Recommended time may be adapted for different training audiences and needs.
- **Procedure.** This section includes notes to the facilitator on how to deliver the training. An estimated time is included for each step of procedure.
- **Key Discussion Points/ Additional Facilitation Notes.** These notes include points for the facilitator to consider ahead of, and during facilitation. Facilitators are recommended to review notes before delivering trainings.
- **Handouts.** Some training modules include handouts that may be printed and distributed for facilitator and/ or participant use. Other modules call for use of tools from the Toolkit Guidance, Tools and Resources.

Preparing Training Content

Tailoring to Participant Groups

The Training Manual is designed for three main audiences: GBV teams, all community leaders, and women leaders. GBV programs can tailor training plans and content for relevance to a selected main audience, or for a combined audience, where GBV teams participate in trainings with all leaders or with women leaders.

Additionally, GBV programs can tailor trainings to meet the needs of a particular audience group, with consideration of the group's level of knowledge and experience, familiarity with the GBV program and GBV programming goals, and dynamics within the group, including participants' familiarity with one another, their sense of unity, and sensitivity to participants' diverse experiences and perspectives, as well as their different experiences with power.

Finally, facilitators can tailor training plans to meet the needs of individual participants, including accommodations for participants with disabilities. All training content can be adapted for participants with low literacy. Facilitators can limit reliance on flipcharts and written handouts and invite verbal or illustrated report back after groupwork.

Adapting Content for Context

The Training Manual was developed for use by GBV programs in global humanitarian contexts. Programs can adapt the content for greater relevance and sensitivity to specific security and cultural contexts.

Many training modules rely on hypothetical scenarios. Details included in these scenarios, including environmental contexts and names, can be adapted for relevance. GBV programs may also choose to use hypothetical scenarios that don't mirror real contexts too closely, to explore ideas at a greater distance.

GBV programs can consider common family structures, types of relationships, and living arrangements when adapting training content. This may include consideration of whether extended families live together, whether polygamy is practiced, and the extent to which diverse sexual orientations, gender identities, gender expressions are recognized. The Training Manual does not include specific attention to the additional risks faced by women and girls within the LGBTI community. The Training Manual discusses intimate partner violence in the context of marriage and separation/divorce within adult, heterosexual relationships, as community leaders in many humanitarian contexts will largely expect intimate partnerships to be limited to traditional or legal marriage between men and women, or early/forced marriage between men and adolescent girls. This content 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.

Safety and Ethics

Engagement of community leaders for GBV prevention and response, including engagement in trainings, can present risks to GBV programs and participants. It is therefore important for GBV programs consider safety and ethical risks before planning a training and work to mitigate risks before and during trainings.

Considering safety and ethics when planning trainings

GBV programs should carefully consider the composition of training audiences, with attention to the diversity of communities, power dynamics, and potential risks related to groups in conflict. Trainings should be organized in neutral settings that are not limited to specific ethnic, religious, or other cultural groups and in locations that can be safely accessed by participants, including participants with physical disabilities. GBV programs can consider consulting security specialists to identify safe locations for training, and to plan for participant travel if required. As with all other GBV prevention and response programming activities, GBV teams planning trainings should have access to support and security services.

Considering safety and ethics during trainings

Attention should be paid to the safety and wellbeing of both facilitators and participants during trainings. Exploring concepts related to GBV is often uncomfortable and challenging, and some participants may feel threatened during discussions. GBV programs should be prepared to end trainings and seek support if threats are made against facilitators or participants.

Discussing GBV can also trigger vicarious stress for both facilitators and participants and can trigger strong emotions related to past or current experiences with violence and trauma. It is important for facilitators to acknowledge the challenging nature of the subject matter, and the emotional content of training modules. Facilitators can express appreciation to participants for their willingness to engage in training and encourage participants to care for themselves and check in on one another during the training. Facilitators can also help to create a “safe space” for sharing ideas that emphasizes the importance of confidentiality and not sharing stories that would identify other individuals.

Facilitators must have knowledge of GBV response services and should be able to provide basic support and refer any participant who seeks help or discloses an incident of GBV during the training.

Organizing Trainings








Setting Agendas

The Toolkit does not outline a specific program to follow; GBV program teams can adapt and apply relevant sections of the Toolkit to engage community leaders through existing or planned GBV prevention and response programs, as appropriate to program goals, context, resources, and team capacity. GBV programs can use sections of the Training Manual that relate to program plans, in conjunction with the Toolkit Guidance, Tools and Resources.

GBV Core Concepts training is the only training section that should be considered mandatory, both for GBV teams engaging community leaders and community leaders engaged for additional training.

Each training section includes an overview of possible agendas and a training outline with a breakdown of modules and expected time to cover each module. A review of GBV Core Concepts is indicated at the start of all training plans. Trainings that are tailored for GBV teams are more adaptable, where GBV programs may spread training content over a longer timeframe, organizing individual modules into team workplans. For most trainings with community leaders, GBV teams are recommended to dedicate full days to trainings and adhere to recommended sequencing.

The table below includes an overview of time required for different training topics and audiences. Trainings can be extended to allow further time for participants to explore topics, or to cover multiple topics. Generally, continuous trainings should be limited to a maximum period of five days, as energy for participation and retention will wane.

Training Topic	Audience	Time	Notes
Core Concepts	 GBV Teams  All Community Leaders	2 days	Foundational training, to be completed before additional trainings
Key Approaches	 GBV Teams	2 days	
Key Approaches	 Women Leaders	1 day	Can be added to 2-day training on Women's Leadership
Planning for Engagement	 GBV Teams	2 days	
GBV Response	 GBV Teams  All Community Leaders	2 days	The 2-day training is focused on understanding and responding to one form of GBV and can be repeated to address multiple forms of GBV.

GBV Risk Mitigation	 GBV Teams  All Community Leaders	1 ½ days	
Transformative Change	 GBV Teams	2 days	
Transformative Change	 All Community Leaders	1 ½ days	
Women's Leadership	 GBV Teams  Women Leaders	2 days	

Full days of training include 5 ½ to 6 ½ hours of training content. This allows time for lunch (for full day trainings) and other breaks and exercises within an 8-hour training day. The training outlines at the top of each section do not include specific times for introductory sessions, lunch, breaks, energizers, recaps, or feedback and evaluations. GBV program teams should use the times indicated for modules to develop training agendas that also include the following:

- At least 30 minutes at the start of the first day for introductions, review of logistical details and the agenda, time to establish expectations and discuss safe space. If pre-tests will be included, these must also be completed at the start of the first day.
- At least 15 minutes at the start of each subsequent day to recap the previous day
- At least 15 minutes to wrap up each day
- At least 30 minutes to wrap up the final day of training, including feedback and evaluation of the training. If post-tests will be included, these must also be completed at the end of the last day.
- At least 45 minutes for lunch. If lunch is not provided on site, more time will be required.
- At least two 15-minute breaks are recommended for each full-day of training, with light refreshments if possible.
- Brief time for energizers between or during sessions is recommended.

Introductions and Icebreakers

Dedicating attention to introductions can help set an important tone of respect and participation. Facilitators can open trainings with an exercise to introduce participants, rather than simply asking participants to share their names. As a simple exercise, participants can identify partners, spend time learning about their partner, and then introduce their partner to the wider group. Even where participant groups include leaders or GBV teams who work together on a regular basis, trainings provide a fresh opportunity for colleagues to learn new things about each other and deepen relationships.

Similarly, icebreakers, conducted as part of introductory exercises and/or throughout the training, can help build comfort and trust among participants and create a safe space for learning.

Energizers

Including energizers between or during training modules can help to keep participants engaged. Facilitators can ask volunteers to lead energizers, particularly during trainings with GBV staff who have prior training experience. Energizers are brief exercises that allow for positive interaction. Examples are provided below.

- **Simple Stretches:** Lead participants in simple stretches, or exercises like running in place.
- **Animal Noises:** Choose three or four animals that make distinct noises (e.g., frog, dog, lion, cat, duck, sheep, cow). Assign an animal to each participant by whispering or passing out slips of paper. Ask participants to close their eyes and use animal sounds to find other members of their animal group. The group that comes together quickest wins.
- **Swapping Chairs/Places:** Create a circle of chairs with enough seats for all but one participant, or ask participants to stand in a tight circle, shoulder to shoulder. Stand in the middle of the circle and call for everyone- including yourself- with a specific color or other identifier to switch places. For example, “If you are wearing yellow, switch places!” Someone should be left in the middle after all spaces are taken, and this person then makes a new call for switching places.
- **Simone Says:** Ask participants to stand up and follow your directions and actions, but only when you proceed the direction with “Simone says.” For example, if you say, “Simone says, put your hand on your head,” everyone should follow, but if you say, “Put your hand on your head,” they should ignore your direction. Participants are “out” and sit down when they fail to follow Simone’s rules.
- **Rainstorm:** Sit in a close circle. Explain that a sound will be passed, and participants should continue to make this sound until a new sound is passed to them. Start by rubbing your palms together and pass the sound to one side of the circle. When the rubbing palms sound comes around the circle and back to you, change the sound to snapping fingers and pass the snapping sound in the same direction. As the sound travels, participants will make a combination of rubbing and snapping sounds until everyone is snapping, and the sound is passed back to you. Change the sound again to clapping hands (and then slapping thighs, stomping feet, and then reverse the order of sounds to gradually move back to hand rubbing). The sounds created by the group will be reminiscent of a rainstorm.

Assessment and Feedback

Participants who dedicate their time to attending trainings should have an opportunity to provide feedback on the experience. Collecting feedback can also help GBV programs refine plans and improve the training experience for future participants. Facilitators can invite participants to share feedback during the training and can consider introducing an option for participants to share anonymous feedback. One simple option is to place a box in the training hall where participants can drop notes with feedback or questions. In the least, facilitators should invite feedback at the end of a training to collect information on participants’ satisfaction, as well as their recommendations. Each participant can provide feedback, anonymously, on paper. In low literacy settings, facilitators can ask questions orally and provide a scale, asking participants to respond with numbers (e.g. 1-5) or images (e.g. happy face/ sad face).

In addition to feedback on satisfaction and recommendations, facilitators may wish to assess knowledge gained through the training. When requesting feedback on satisfaction, facilitators can also ask participants to gauge their increased knowledge. Facilitators can also include pre- and post-tests before and after the training, respectively. Pre-tests establish a baseline on specific points of knowledge and can help programs assess direct outcomes of trainings. Pre/post tests are not a perfect measure of training outcomes, though, and while this method may be helpful when training GBV teams, testing community leaders can risk establishing a positive rapport from the start of training, so GBV programs should consider potential benefits and drawbacks and select the right approach for their context and training audience.

Sample questions for collecting post-training feedback include:

- Did the training meet your expectations?
- How satisfied are you with the training (provide scale)?
- How much did you learn during the training (with a scale from nothing to very much)?
- Did the training lead you to think about anything in a new or different way? Can you share?
- Did you develop a connection with one or more people during the training who you plan to work with to help your community?
- What ideas will you remember and take forward from the training?
- Have you committed to any new actions or ideas that you would like to share?
- Would you be interested in participating in more trainings with the GBV program? What would you like to learn more about?
- What messages were clearest in the training?
- Which part of the training was the most confusing?
- What recommendations could you give the GBV program to improve this training?

Suggestions for Facilitation

Setting a Respectful Tone

In any learning environment, it is important to set a tone of respect. Among adult learners, training facilitators should be conscious of not treating training participants as a teacher might treat young students. Participants should take active part in setting expectations and should feel free to make suggestions and share their ideas. This may be particularly important with community leaders, who are often accustomed to being afforded high levels of respect.

Facilitators should, themselves, be familiar with the content covered in the *Toolkit Guidance, Tools and Resources* related to a strengths-based approach, and the **Foundations: Key Approaches** section of this Training Manual, which includes modules on *Communication: Listening & Sharing* and *Communication: Showing Respect*.

Some important ways to set a tone of respect during training include:

- Learn participants' names
- Start sessions on time
- Don't shorten breaks or lunch time unless participants agree
- Practice active listening
- Demonstrate an interest in learning from and with participants
- Encourage participation
- Move around the room and sit at times amongst participants

Participatory Learning

The Toolkit identifies a participatory approach as a key approach to engaging community leaders in all activities, including training. A participatory approach honors the experience, perspectives, and ideas that everyone brings to a learning environment. It values process and not only outcomes and recognizes that participants are more likely to embrace new ideas when they are meaningfully engaged.

Modules in this Training Manual are designed for participatory learning. Facilitators should, themselves, be familiar with the content covered in the *Toolkit Guidance, Tools and Resources* related to a participatory approach, and the **Foundations: Key Approaches** section of this Training Manual, which includes a module on *Participatory Methods*.

Some tips to keep in mind:

- Express empathy for participants' perspectives and experiences
- Listen
- Encourage questions
- Ask for input from participants who haven't yet contributed (without pressuring individuals)
- Ask small groups to make time for each participant to contribute
- Provide clear instructions
- Visit groups during exercises to check on participation
- Be aware of participants' body language
- Change things up if participation is low
- Don't talk to the flipchart
- Move around the room; don't stand in one spot
- Invite feedback

Setting Expectations

At the beginning of the training, facilitators can ask participants about their expectations. This provides an opportunity for facilitators and participants to establish a mutual understanding of the content that will- and won't- be covered, to reduce confusion or frustration. In some cases, facilitators may be able to adapt content to meet expectations, or they might be able to plan for additional trainings.

As part of a process of setting expectations, facilitators can also ask participants to help establish "ground rules" at the start of a training. Facilitators can ask participants to agree on any important rules that are not first suggested by the group. Common ground rules include:

- Speak one at a time; allow each person time to talk
- Start and end on time; return promptly from breaks
- Silence mobile phones; step outside if you need to take a call
- Confidentiality (opinions and personal information shared during training will be kept in confidence by all participants)
- Do not share stories that would identify others (in particular, never share identifying information about an incident of GBV in the community)

Establishing Safe Space

Related to suggested ground rules, as well as information under Ethics and Safety above, GBV programs should try to establish “safe space” during trainings. A space that is conducive to learning about GBV should feel safe in two major ways, briefly outlined below.

Safe to...

- Ask questions
- Disagree
- Share
- Express emotion

Safe from...

- Harm
- Judgement
- Gossip
- Ridicule
- Discrimination

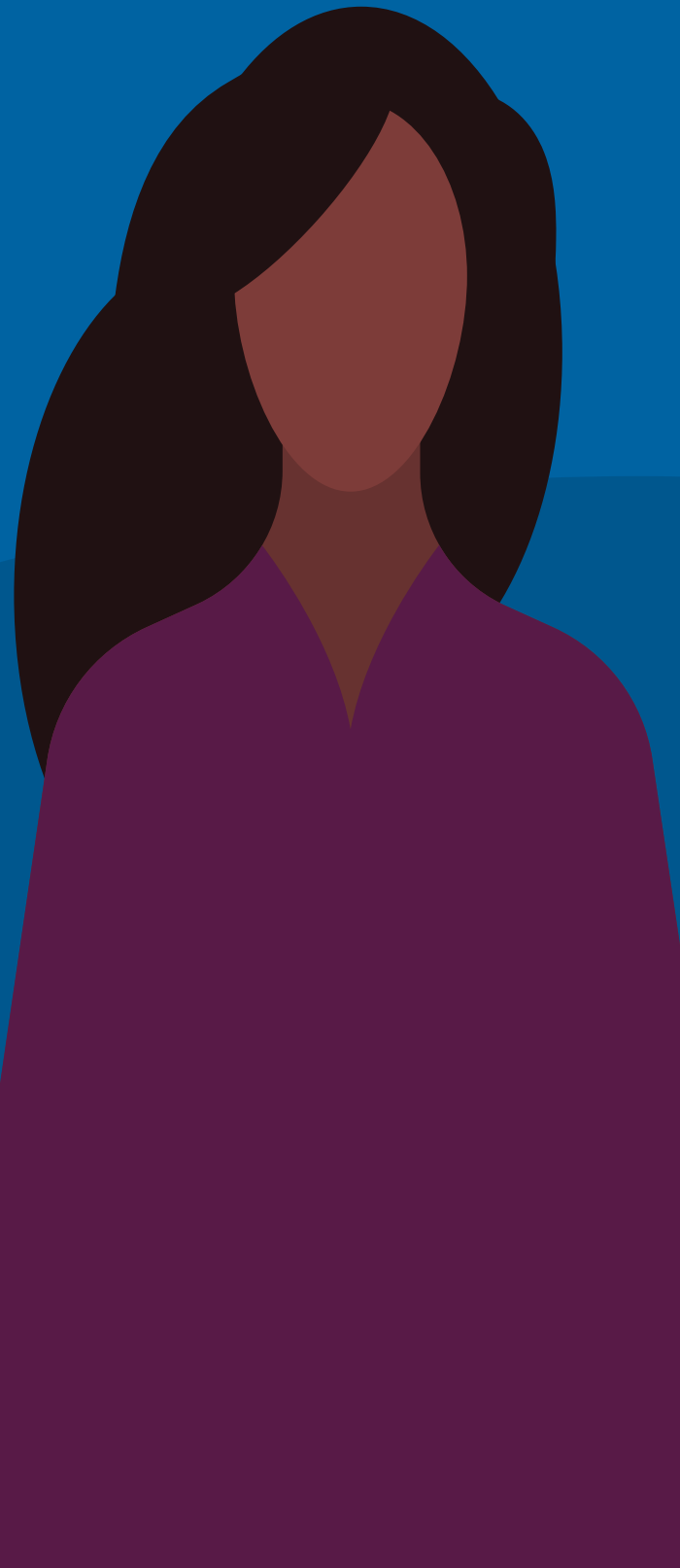
Facilitators and participants share responsibility for creating safe space, though facilitators can set an important tone by discussing an interest in establishing such a learning environment. From the start of a training, facilitators can share their intentions and express concern for participants’ feelings and safety. As discussed under Safety and Ethics, facilitators should also ensure that referral services are available for any participants who seek help or disclose incidents of GBV.

Managing Challenges

Facilitators are likely to encounter challenges during trainings, including conflict between participants and the expression of harmful ideas. Establishing expectations and ground rules can help to reduce challenges, and facilitators can invoke agreed-upon ground rules to manage some challenges when they arise. The **Foundations: Key Approaches** section of this Training Manual includes a module: *Managing Facilitation Challenges*. Facilitators can review the *Handout: Facilitator Strategies for Managing Challenges* in this module. Facilitators can also build comfort and skill in meeting different facilitation challenges through roleplay and independent practice.

Training Content

GBV Core Concepts Training



GBV Core Concepts

Who is the Training for?

The GBV Core Concepts training modules in this manual are relevant for both GBV teams and community leaders. All GBV staff should receive training in GBV Core Concepts, and GBV teams should begin with GBV Core Concepts when organizing trainings for community leaders. GBV Core Concepts lay a foundation for further learning and community leader engagement, by establishing a common understanding of power and the root cause of GBV, the importance of a survivor-centered approach, and sharing essential information related to consequences of GBV and support available for survivors.

How Does the Training Link to the Toolkit Guidance?

The content covered in the GBV Core Concepts training modules is most closely linked to the *Core Concepts and Approaches* chapter of **Toolkit Guidance**. Training modules also draw from *Tools and Resources* within the *GBV Response* chapter.

Time and Resources Required

The training content can be covered in two full days, with time allowed for breaks and lunch. Training modules build on each other and are all essential for foundational learning, so GBV programs are recommended to organize continuous, two-day trainings with the proposed sequencing.

- A training module is also included to review GBV Core Concepts. GBV programs are recommended to review GBV Core Concepts at the start of subsequent trainings with community leaders after foundational training in GBV Core Concepts.

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 Core Concepts Training Outline

Intended Audience



GBV Teams



All Community Leaders

Module	Overview of Module	Estimated Time
Day 1		
Why Focus on Women and Girls?	This participatory exercise helps participants reflect on gender roles and gender discrimination. The exercise encourages participants to reflect on common or dominant attitudes within their community, rather than disclosing their own beliefs and practices, which allows for freer discussion of sensitive topics.	1 hour, 30 minutes
Types of GBV	Participants briefly discuss types of GBV and reflect on common forms of GBV within the community.	30 minutes
Causes and Contributing Factors	Participants explore concepts of root causes and contributing factors of GBV and consider how GBV manifests in their community.	2 hours
Understanding Power	Participants explore concepts of power and reflect on their own sources and exercise of power.	1 hour, 30 minutes
Day 2		
Consequences of GBV	Participants review physical, emotional, and social consequences of GBV, as well as the benefits of GBV response services.	2 hours
Guiding Principles	Participants discuss principles of a survivor-centered approach and consider how to apply the principles in support of survivors.	2 hours, 15 minutes
Connecting Survivors with Support Services	Participants receive information on available services and referral mechanisms, as well as advice on how to provide supportive referrals for survivors who disclose incidents of GBV. This session can be further reinforced with further training on GBV Response.	2 hours
Review Session to Open Subsequent Trainings		
Review of GBV Core Concepts	Designed as an opening session for training plans focused on different GBV topics, to briefly review GBV Core Concepts with participants who have already completed the two-day GBV Core Concepts training.	1 hour, 30 minutes

Why Focus on Women and Girls?

Summary

This participatory exercise helps participants reflect on gender roles and gender discrimination. The session is easy to adapt for different age groups, literacy levels, and training spaces, including outdoor venues. The exercise encourages participants to reflect on common or dominant attitudes within their community, rather than disclosing their own beliefs and practices, which allows for freer discussion of sensitive topics.

Learning Objectives

Participants will:

- Reflect on gender differences in the community and challenges that women and girls face
- Understand that gender roles are socially ascribed, different between communities, and can change

Facilitators will:

- Better understand gender roles and expectations in the community
- Better understand group dynamics and participant perspectives to shape communication for subsequent sessions

Materials and Preparation

1. Prepared statements with different true/not true statements for distribution (in low literacy environments, statements can instead be read aloud by a facilitator). Examples provided in [**Handout: Scenarios for Roleplay Practice**](#). (print/photocopy and cut select statements for distribution)
2. Scissors
3. Materials for drawing a line. Can use tape, markers, chalkboard, rope, or simply indicate two points outdoors such as two trees.

Time

1 hour, 30 minutes

Procedure

Step 1: Participatory exercise (1 hour)

1. Introduce a large diagram on a board or wall, or designate areas of a room/ outdoor space. One end is designated as “very true” and the other “not at all true”.



2. Distribute prepared statements- at least one per participant. Explain that for each statement the group will have to decide whether the statement is *very true*, *not at all true*, or somewhere between the two... Each statement will be placed somewhere along the line, depending on how true it is.
3. Start with a sample question or two... such as “the sun is in the sky” (*very true*), or “goat is the most delicious meat” (*different opinions*). Ask how true is it?
4. Once participants understand the activity, ask for a first volunteer to read a statement aloud. Ask how true is it? The volunteer can offer an opinion and then the group can discuss. In the end, the volunteer holding the piece of paper gets final say over where the statement is placed along the line. (In low literacy settings, participants can indicate placement of statements read aloud with colored cards, stickers, tape, or simply by standing along a line.) Encourage discussion and friendly debate. Maintain good humor and cut discussion over individual statements to keep time. Call time and ask the participant holding the paper to make a final decision on where to place the statement along the line.
5. If time allows, invite participants to introduce additional statements for discussion and placement.

Step 2: Group reflections (30 minutes)

1. After at least ten statements are placed, break the exercise and lead the group in reflection. Where did most statements fall—close to very true or not at all true? What does this mean for the community, and for women and girls? Do they have the same opportunities as men and boys? Are they equally valued?
2. Ask participants to reflect on how the situation for women and girls- as represented through the exercise- may be different in different places, or how it might change.
 - Discuss variance within communities, as highlighted through the exercise.
 - What would the results of the exercise look like in other communities? Are there differences between communities in the context, such as urban/rural, or refugee/ host community? What differences do we see across countries?
 - Discuss changes over time. Would results look the same if our parents/grandparents engaged in this exercise 30 years ago? Would the results have been more positive, or less positive for women and girls? Will the results look the same 30 years from now?
 - What changes are possible? Who will make these changes occur?
3. If possible, keep results of the exercise on display for reference during the remainder of the training.

Key Discussion Points/Additional Facilitation Notes

- The exercise can serve as an icebreaker and set a good tone for participant-led learning. Show participants you are interested in their perspectives and in learning more about the community.
- Though you may be from, or very familiar with the community, resist the temptation to assert your opinions over others in this exercise. Opinions related to specific statements about women and girls are less significant than the overall results and reflections.

Handout: True/False Statements

Each participant will receive a statement for this exercise. Sample statements below can be selected and cut out for distribution. Facilitators are advised to select statements in consultation with staff familiar with the community context. Additional statements can be adapted or created. When creating new statements, be sure they are written so that a *true* statement might reflect higher status for women and girls, or greater gender equality. (*Statements such as “women are not allowed to own property” will not work with the activity.*)

Be sure to review each statement for relevance and appropriateness before distribution. Statements that are likely to be more sensitive are shaded at the bottom of the list.

Women are equally represented in government

Women are equally represented in community leadership structures

Girls have equal access to school as boys

Parents are as happy to have a girl baby as a boy baby

Girls play as much as boys

Men share responsibilities for raising children

Girls and women eat as much fish and meat as men and boys

Women choose who they marry

Women and men enjoy equal access to public spaces (markets, parks, cafes, centers, etc.)

Girls can talk openly about menstrual hygiene

Women and girls are supported (not blamed or shamed) if they experience rape

Women and men enjoy equal access to technology (phones, radio, computers, TV, etc.)

Women are able to vote

Women have the same rights to divorce as men

The community is not tolerant of men who beat their wives

Women are equally represented in professional positions

Girls are equally represented in secondary school

Women are equally represented in university

Men contribute to housework and cooking

Women fully participate in community decision-making

Girls do not marry (marriage is not expected until 18+)

Husbands and wives make big family decisions together

Women are allowed to move freely, without male escort

Women have property rights in inheritance

Both husbands and wives control family finances

Statements highlighted below may be too sensitive for trainings in some contexts.

Women feel free to purchase condoms

Women are expected to enjoy sex as much as men

Adolescent girls are free to access family planning services

Women can access family planning services without their husbands' permission

Women can negotiate condom use with their partners

Types of GBV

Summary

The module allows participants to briefly discuss types of GBV and reflect on common forms of GBV within the community.

Learning Objectives

Participants will:

- Identify types of GBV
- Identify types of GBV common in community

Facilitators will:

- Better understand manifestations of GBV in the community.

Materials and Preparation

1. Flipchart paper and markers

Time

30 minutes

Procedure

Step 1: Brainstorm (10 minutes)

Ask participants what types of violence in the community most affect women and girls. Ask what if women or girls face challenges or risks related to their status in the community. Write down answers from brainstorm on flipchart.

Step 2: Common types of GBV (20 minutes)

Ask participants about common types of GBV that may not have been mentioned.

Explain that most types of GBV fall within the four main categories of GBV. Discuss how types of GBV might fall within these categories:

- Sexual
- Physical
- Psychological
- Economic

Key Discussion Points/Additional Facilitation Notes

- **Examples of sexual violence:** rape, attempted rape, unwanted sexual contact, sexual exploitation and abuse, forced prostitution, and sex trafficking.
- **Examples of physical violence:** hitting with open hand (slapping), hitting with closed hand (punching), kicking, biting, pulling hair, hitting with weapon (stick, bottle, etc.), cutting/stabbing, burning, choking, trafficking for forced labor, some harmful traditional practices.
- **Examples of psychological violence,** or emotional and social abuse: consistent harassment, insults, degrading treatment, consistent poor treatment in public, in front of family, friends, children, intentional humiliation, threats to harm or kill, threats to take away children, isolation from family/friends, confinement, or locking inside the house.
- **Examples of economic violence:** regularly denying access to food, money, clothing, medication, education, not allowing to work, forcing to work, taking all earnings, denial of property rights.

Causes and Contributing Factors of GBV

Summary

Participants explore concepts of root causes and contributing factors of GBV and consider how GBV manifests in their community.

Learning Objectives

Participants will:

- Distinguish between root causes and contributing factors of GBV.
- Understand that every act of violence involves a choice to use violence.

Facilitators will:

- Learn about contributing factors of GBV in the community

Materials and Preparation

1. Prepared flipchart paper with an outline of a tree: trunk and branches
2. Flipchart paper
3. Green, blue, brown, and black markers

Time

2 hours

Procedure

Step 1: Identifying problems (10 minutes)

Introduce the “GBV tree” with an outline of a tree. Ask participants about the main types of GBV and forms of GBV common in the community. Use a green marker to write examples on the tree branches.

Step 2: Causes (30 minutes)

Open a discussion about why these forms of violence happen in the community. What are the causes? Facilitate discussion to draw out different views among participants. Record ideas on flipchart paper.

Once ideas have been collected and discussed, explain that GBV, like a tree, has roots- or root causes. The root cause of GBV is gender discrimination/ inequality, where women’s and girls’ rights are not respected, and they occupy a lower status in the community relative to men and boys. Use a **black** marker to write root causes over the roots of the tree outline. Explain that the root cause of GBV is the same in all countries, and across all cultures. Where roots are strong- or discrimination against women and girls is widespread- the GBV tree will be bigger.

Step 3: Contributing factors (10 minutes)

Next ask how we should understand other factors that the group identified as causes—such as drug abuse, frustrations, conflict, disaster like flood, drinking, poor lighting, etc.? These are “contributing factors” that may also influence the extent of GBV, or the likelihood that individuals experience GBV. Contributing factors are like water for a tree. Use a **blue** marker to highlight examples of contributing factors above the tree outline, illustrated as rain. Facilitate discussion about contributing factors in the community. Explain that contributing factors are different in each environment. Where roots are strong and rain is plentiful, the GBV tree can thrive.

Step 4: Abuse of power (10 minutes)

Finally, suggest that something is missing from the tree, and our understanding of why GBV occurs. We know that even in an environment with a strong GBV tree, not every man who abuses his wife. Not everyone rapes. While we may have common influences, our decisions may be different and each act of GBV is the result of an individual’s decision to use violence. Use a **brown** marker to write “choice to use violence” or “abuse of power” on the trunk of the tree outline.

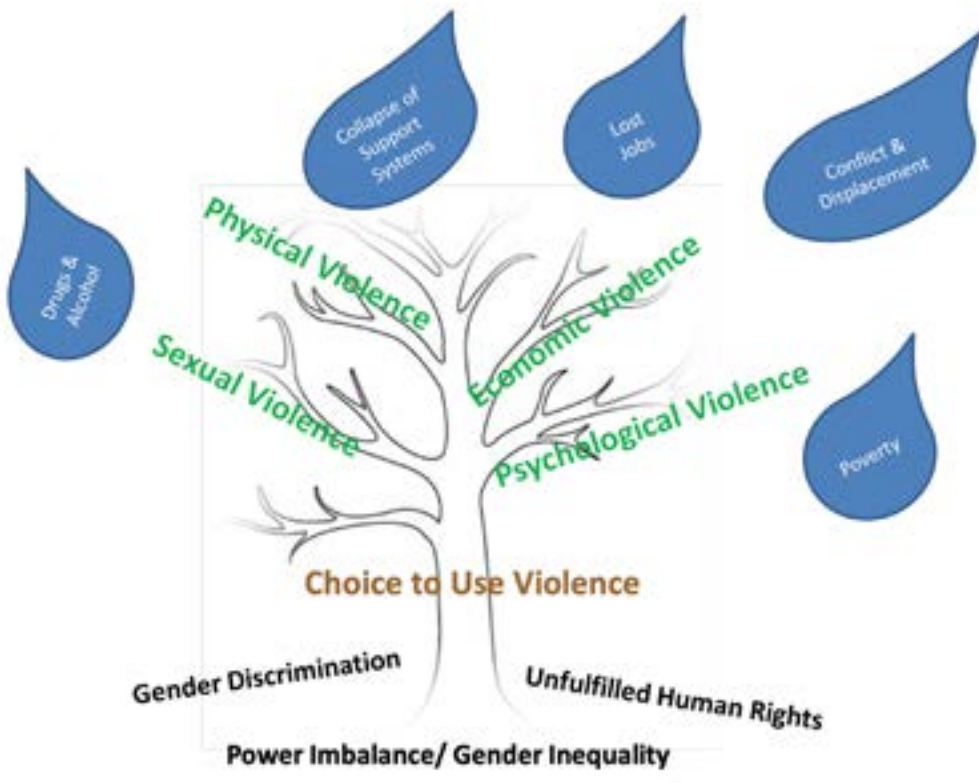
Step 5: Risk factors (30 minutes)

As participants discuss the fact that every act of GBV is the result of an individual’s decision, someone will likely raise the idea that a survivor’s (rather than a perpetrator’s) action could be the direct cause of GBV. Open this idea for discussion-- What if a wife behaves badly? Is unfaithful? What if a young girl dresses badly? Walks alone at night? Acknowledge that it is common for survivors to be blamed for violence they experience.

Return to the image of the tree. All women and girls- everywhere in the world- face risks of GBV because of the root cause of gender discrimination. Women and girls who live in contexts with considerable discrimination and contributing factors (strong roots and a lot of rain) are more at risk. And even in these environments of high risk, some women and girls will be at higher risk than others. We can think about this as some women and girls living further from the tree, and some living very close to the tree. Many of the risk factors that make some women and girls highly vulnerable cannot be controlled (disabilities, age, refugee status, etc.), while others relate to choices (dress, use of alcohol, employment in male-dominated industries, school attendance). These choices- even if we disagree with them or judge them— are not choices to experience violence. A survivor never makes a choice to be a victim of violence; that choice is the perpetrator’s choice alone.

Key Discussion Points/Additional Facilitation Notes

- This exercise can be completed quickly if the facilitator simply draws a tree and explains about causes and contributing factors. Time is built into the session to allow participants to explore the ideas, including common myths about causes of GBV that contribute to victim-blaming.
- Don’t be alarmed if participants express attitudes of victim-blaming. The training should provide a safe space to air ideas. This session provides an opportunity for participants to begin challenging their beliefs with an informed perspective on why GBV occurs, but a single training will not be sufficient to change beliefs and practices.
- GBV team members, particularly those involved with direct support to survivors, should believe that survivors are never to blame for the violence they experience, and they should be prepared to support survivors without judgement.



Example of tree

Understanding Power

Summary

Participants explore concepts of power and reflect on their own sources and exercise of power.

Learning Objectives

Participants will:

- Understand how power imbalances, and abuses of power, relate to GBV
- Reflect on sources and exercise of power

Facilitators will:

- Increase understanding of sources of power, and power imbalances, within the community

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review
3. Four chairs

Time

1 hour, 30 minutes

Procedure

Step 1: Plenary discussion: Identifying sources of power (20 minutes)

On flipchart, write the word POWER. Ask for examples (without names) of people who have power in the world, in the community. Power is relative, which means that when we identify someone with power it is always in relation to someone with less power. Ask what gives someone power? What are their sources of power? Sources of power might be real or perceived, and include:

- Social (leader, teacher, parent)
- Economic (wealth, control of resources)
- Political
- Physical (strength, size, access to weapons)
- Age-related

Step 2: Activity: Exploring power (20 minutes)¹

1. Take four empty chairs and place them in any formation (e.g., column or a pyramid).

¹ Adapted from: Hunter, D., Chair Powe: *Three Types of Power* | *Training For Change*. Original source of chair exercise cited as Theatre of the Oppressed as used by Babu Ayindo and Daniel Hunter. https://www.trainingforchange.org/training_tools/chair-power-three-types-of-power/

2. Ask participants which chair is the most powerful. Allow for discussion and probe for different perspectives (e.g., with a pyramid formation, is the chair in front more powerful, because of its leadership position, or are chairs grouped together more powerful, because of their power as a group?).
3. Ask a volunteer to move one chair into a position that makes it more powerful than the others (e.g., stacked on top of another). Discuss with participants whether the chair is indeed more powerful.
4. Ask four volunteers to quickly sit in the chairs in such a way that they feel theirs is most powerful and then ask them to freeze. Ask participants: Whose chair is most powerful? How did they make it the most powerful? What expressions of power do you see?

Step 3: Plenary discussion: Types of power (30 minutes)

Review types of power in the *Core Concepts and Approaches* chapter of the Toolkit Guidance.

Ask volunteers to summarize the four types of power in their own words:

- Power within
- Power over
- Power with
- Power to

Explain that expressions of power can be positive or negative. Which type of power can lead to harm? Those with *power over* others can abuse that power. (Refer back to the *Causes, Contributing Factors* modules and the GBV tree.) The imbalance of power between men and women is the root cause of GBV.

Which types of power are positive? People can harness *power within*, *power with*, and *power to* to create change and prevent GBV.

Step 4: Self-reflection (20 minutes)

Ask participants to reflect, independently, on a time when they felt powerless. Did someone have power over you? Was it fair? How did you feel? How would you have changed the situation if you could have?

Ask participants to reflect, independently, on their own power. What are your sources of power? Who has less power than you? Do you think about the power you have over others? Do you take advantage of that power or abuse that power? What actions could you take to better balance the power you experience?

Key Discussion Points/Additional Facilitation Notes

- We should strive to a greater balance of power between people, as we are all equal in our human rights. Power imbalances between people can be abused and exploited.
- GBV occurs when a person chooses to abuse power. While not all men abuse power over women, all women live in a context of power imbalance that is unjust. Women and girls experience the power imbalance in their daily lives, and this limits their opportunities, contributes to stress and fear, and puts them at risk of different forms of GBV.
- Those in positions of power, including community leaders, can exercise power in positive ways to create more balance between people.
- Everyone has power within, and we can all contribute to positive change.

Consequences of GBV

Summary

Participants review physical, emotional, and social consequences of GBV, as well as the benefits of GBV response services.

Learning Objectives

Participants will:

- Identify consequences of GBV
- Identify types of support and services that can mitigate consequences of GBV
- Understand the benefits of quality medical care within 72 hours of sexual violence

Facilitators will:

- Better understand social consequences of different forms of GBV in the community

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review
3. *Fact Sheets* in *GBV Response Tools and Resources* for reference

Time

2 hours

Procedure

Step 1: Small group discussions: Types of consequences (20 minutes)

1. Divide participants into four small groups. Ask groups to reflect on one or more specific forms of GBV (e.g., rape, IPV, early/forced marriage).
2. Assign each group one category of consequences: 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.
3. Ask groups to discuss relevant consequences for assigned form/s of GBV. Groups should identify a notetaker and someone to report on behalf the group.

Step 2: Plenary discussion: Consequences of GBV (30 minutes)

1. Ask representatives of each group to share brief summaries of consequences. Ask for additional contributions or clarifications.
2. If only one form of GBV was discussed in small groups, consider consequences of a second form of GBV, either in plenary or again in small groups.
3. Ask which consequences can be prevented. How? Who can help with this?

Step 3: Small group discussions: Types of support for survivors of GBV (30 minutes)

1. Ask participants to return to their small groups.
2. Reflecting on forms of GBV previously discussed and assigned consequences (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), ask groups to consider:
 - a. How can family, friends, or community members help to reduce consequences?
 - b. What services could help?
 - c. What support and services are currently available in this community?
4. Groups should identify a notetaker and someone to report on behalf the group.

Step 4: Plenary discussion: Services and support for survivors (40 minutes)

1. Ask representatives of each group to report back.
2. Probe for common family and community reactions to GBV. Explain that social consequences of GBV vary considerably across contexts, based on how GBV is understood and the likelihood that families and communities blame survivors.
3. Add information to be sure available services are covered.
4. Review the importance of timely medical care after rape. Survivors can receive post-exposure prophylaxis (PEP) to prevent HIV within 72 hours (3 days) of incidents; survivors can receive emergency contraception (EC) within 120 hours (5 days) of incidents.

Key Discussion Points/Additional Facilitation Notes

- Participants more familiar with GBV topics can consider multiple forms of GBV simultaneously when exploring consequences and services.
- Facilitators can review a summary of consequences of GBV in the *Core Concepts and Approaches* chapter of Toolkit Guidance and refer to *Fact Sheets* in *GBV Response Tools and Resources* for more details on consequences of different forms of GBV.
- Facilitators can refer to the GBV tree from the Causes and Contributing factors module during this exercise. Consequences of GBV can be considered poisonous fruit of the GBV tree. Highlight major consequences with **red** marker among the tree leaves.

Guiding Principles

Summary

Participants discuss principles of a survivor-centered approach and consider how to apply the principles in support of survivors.

Learning Objectives

Participants will:

- Identify four guiding principles of a survivor-centered approach
- Consider ways to apply guiding principles in support of a survivor

Materials and Preparation

1. Flipchart paper and markers
2. Prepared translations (if required) of guiding principles

Time

2 hours, 15 minutes

Procedure

Step 1: Plenary discussion: Reflecting on support to survivors (30 minutes)

Building on group discussion during the module on Consequences of GBV, ask participants to reflect on what might help survivors to recover from incidents of GBV. Facilitate a group discussion with emphasis on the following questions and points:

- What actions or words can help survivors to feel supported and safe?
- Will all survivors benefit from the same type of support? What might account for differences? (Each individual will react differently to violence and may have different preferences. Different needs will also relate to type of GBV, consequences experienced, age of survivor, etc.)
- Putting the survivor at the center of the helping process promotes recovery, reduces risks of further harm, and reinforces agency and self-determination.

Step 2: Small group discussions: Defining and applying guiding principles (45 minutes)

1. Explain that anyone involved with supporting GBV survivors should abide by four principles of a survivor-centered approach. Write the four guiding principles on flipchart: Respect, Confidentiality, Safety, and Non-Discrimination.

2. Divide participants into four groups and assign each group responsibility for one of the guiding principles. Each group will discuss their assigned principle related to the following questions and present back to the wider group:
 - a. What does it mean?
 - b. Why is it important?
 - c. How, specifically, do you apply the principle in your role (as a community leader or a GBV team member) if a survivor seeks help from you?
 - d. How, specifically, do you apply the principle if someone else informs you about an incident of GBV?
5. Visit each group and encourage participants to identify specific actions— do or don't do- that could help a survivor.

Step 3: Plenary discussion (1 hour)

1. Invite each group to present their guiding principle and points from discussion. Ask participants from other groups to contribute further thoughts after each presentation. Be sure that each principle is well-defined (see definitions below).
2. Record key words and ideas on flipchart (e.g., respect survivors' wishes, keep information confidential, believe the survivor, don't gossip).
3. After each group presents, reflect on common ideas captured on flipchart that are essential to a survivor-centered response.
4. To emphasize the importance of principles in real survivors' lives, consider sharing anonymized case studies that highlight good or bad practice and related benefits/ consequences.

Safety: The safety and security of the survivor and others, including her children and people who have assisted her must be prioritized. Individuals who disclose an incident of GBV or a history of abuse are often at risk of further violence from the perpetrator(s) or from others.

Confidentiality: Each survivor has the right to choose whether, and to whom, they share their story. Maintaining confidentiality means not disclosing any information at any time to any party without informed consent from a survivor.

Respect: Each survivor has the right to self-determination. All actions taken in response to GBV should be guided by respect for the choices, wishes, rights and dignity of the survivor.

Non-discrimination: Survivors of violence should receive equal and fair treatment regardless of their age, gender, disability, race, religion, nationality, ethnicity, sexual orientation, or any other characteristic.

Key Discussion Points/Additional Facilitation Notes

- While a survivor-centered approach is particularly important in response to individual survivors of GBV, guiding principles of a survivor-centered approach can be applied to all actions related to GBV prevention and response. When establishing services and protection structures, for example, community leaders and GBV teams can be guided by “the survivor” in a general sense, where any actions taken on behalf of an individual survivor should be based on her specific wishes.

Connecting Survivors with Support Services

Summary

Participants receive information on available services and referral mechanisms, as well as advice on how to provide supportive referrals for survivors who disclose incidents of GBV. This session can be further reinforced with further training on GBV Response.

Learning Objectives

Participants will:

- Identify available services and existing referral pathways for GBV response
- Feel prepared to refer a survivor to support services, in line with her wishes

Materials and Preparation

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

Time

1.5 hours

Procedure

Step 1: Presentation: Referral pathway (20 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:

- Review services, one by one, with information on the range of support available to survivors.
- Explain that specialized GBV response services and medical services are priority referrals for survivors.
- From the first point of entry into the referral pathway, service providers are expected to share information with survivors on additional service options and provide confidential referrals for additional services, based on their wishes.
- It is very important that survivors make decisions about which services they want to receive. Anyone who wishes to help a survivor can share information on services, and the benefits of these services, and then support her choices, even if she declines all services.

² 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/>

- Adult survivors must consent to services. Children should also be able to share their preferences about services. In the case of young child survivors, decisions about services are guided by an idea of the child's best interest, where their best interest is usually represented by parents or guardians.
- If anyone, including the person receiving a survivor, faces imminent danger, security services should be sought.

Step 2: Review of Tip Sheet (30 minutes)

1. Distribute the *Tip Sheet: What to do and say when a survivor discloses GBV in GBV Response Tools and Resources*. Ask participants to take time to independently read the Tip Sheet (or extracts from the IASC Pocket Guide). In low literacy settings, the facilitator can present information from the Tip Sheet.
2. Open discussion to review advice in the Tip Sheet. Ask participants to summarize and share key points or questions related to recommendations under:
 - Look
 - Listen
 - Link

Step 3: Roleplay practice (1 hour)

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. Examples:
 - A woman confides in you that she was raped yesterday, while traveling outside the community for livelihood purposes.
 - A mother tells you that she believes her young daughter has been assaulted.
 - A married woman confides in you that her husband has been beating her.
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. If a survivor of GBV confided in you, do you feel prepared to respond in a supportive way? Would you be able to share information on available services? What additional information or practice would help you to feel more prepared?

Step 3: Wrap up (10 minutes)

Review essential GBV response services within the referral pathway and address questions or points of confusion.

Key Discussion Points/Additional Facilitation Notes

- Participants should consider how to apply the guiding principles of a survivor-centered approach when helping survivors connect with support services.
- GBV team members and community leaders may be able to further contribute to supporting survivors of GBV, depending on their roles and responsibilities, as well as survivors' wishes. Clarify if additional training opportunities on GBV Response are available or planned.

Review of GBV Core Concepts

Summary

This session is designed as an opening session for training plans focused on different GBV topics, to briefly review GBV Core Concepts with participants who have already completed the two-day GBV Core Concepts training. GBV Core Concepts training is foundational for GBV teams and community leaders.

Learning Objectives

Participants will:

- Review GBV Core Concepts
- Reflect on GBV Core Concepts in the context of the training topic

Facilitators will:

- Gauge participants' comprehension and acceptance of GBV Core Concepts
- Adapt training sessions as relevant

Materials and Preparation

1. Prepared flipchart paper with an outline of a tree- trunk and branches
1. Flipchart paper
2. Green, blue, brown, black, and red markers

Time

1 hour, 30 minutes

Procedure

Step 1: Review causes and contributing factors of GBV (30 minutes)

1. With participants, review the GBV tree.
 - Types of GBV are the branches, with leaves in **green**.
 - Root causes of GBV (power imbalance between men and women, discrimination) are the roots of the tree, in **black**. Root causes of GBV are the same everywhere. Where these roots are strong, problems of GBV will be great.
 - Other factors that contribute to risks and increases of GBV, such as drug abuse, displacement, poverty, etc. are like the rain, illustrated as **blue** raindrops. Contributing factors are different in each environment. With strong roots and a lot of rain, GBV problems can grow...
 - Finally, every act of GBV involves a choice that someone makes to exert power over another person and perpetrate violence. That choice is illustrated on the trunk, in **brown**.
2. Ask participants who is vulnerable to GBV. All women and girls are at risk of GBV because of the power imbalance between men and women. Those who are at higher risk because of disability, refugee status, etc. may be thought of as "living close to the tree." Allow time for reflection on women and girls who face particular risks in the community.

Step 2: Review consequences of GBV (30 minutes)

1. Explain that consequences of GBV can be considered the poisonous fruit of the GBV tree. Assign each group one category of consequences: 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. Ask groups to discuss for 10 minutes and be prepared to report back with:
 - Examples of common consequences, related to their assigned category, in this community
 - Types of support or services that can help to prevent or mitigate consequences
3. Call groups back for plenary discussion. Ask groups to quickly share their answers, with each group building on points raised. Highlight select consequences by using red marker to illustrate these as fruit on the GBV tree.
4. Draw out important points from plenary discussion, including:
 - Health consequences of sexual violence can be prevented, particularly within 72 hours.
 - Support from family and those close to survivors is essential. Survivors should be believed and not blamed or judged for their experiences with violence
 - Services should be provided in line with GBV guiding principles

Step 3: Review guiding principles (15 minutes)

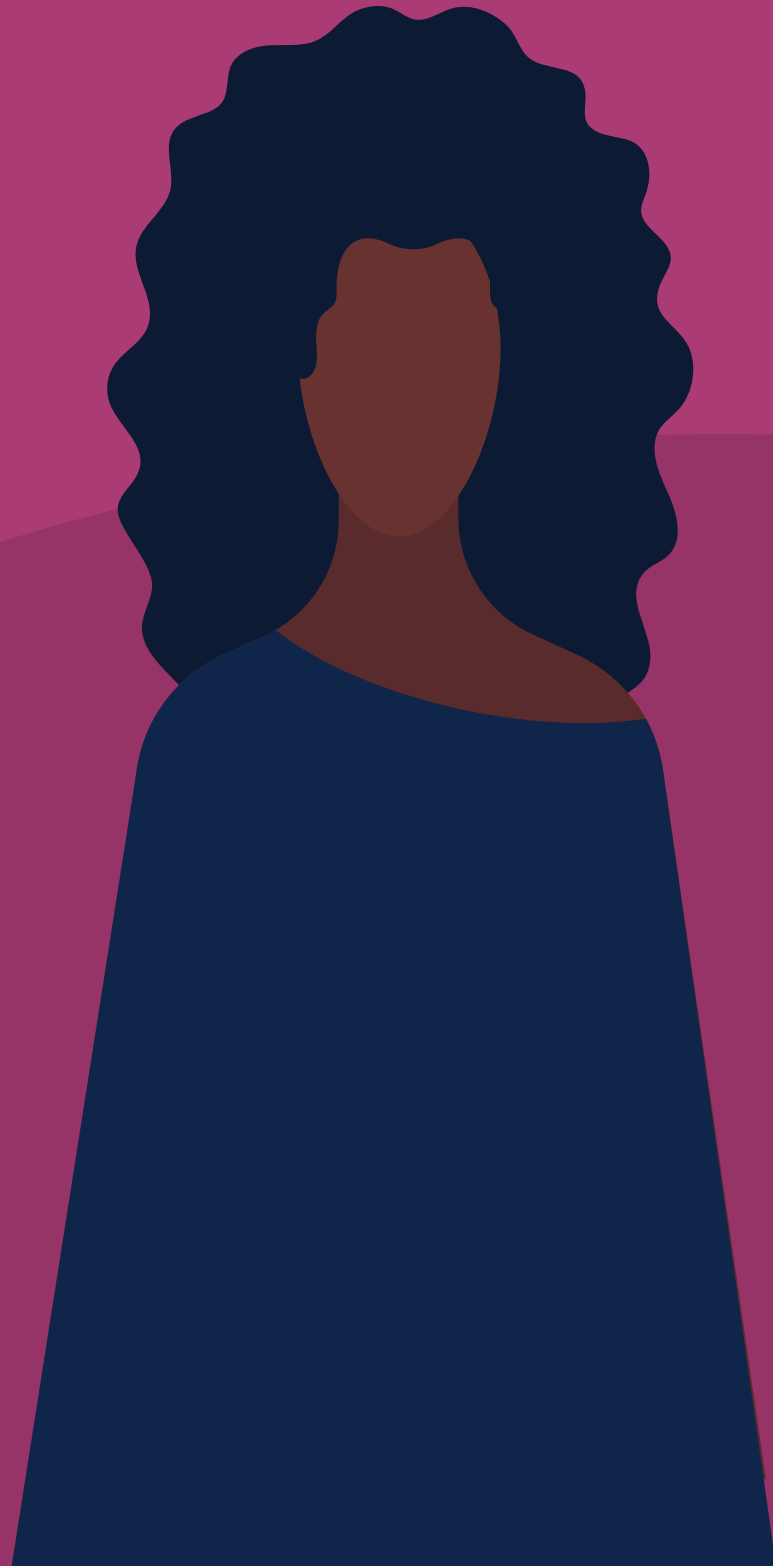
1. Ask for four volunteers to identify a guiding principle and explain how it might be applied in support of a survivor: Respect, Non-discrimination, Confidentiality, Safety.
2. Address any questions from the group about principles

Step 4: Review the GBV referral pathway (15 minutes)

1. Display or distribute the GBV referral pathway
2. Identify essential services and address any questions about services
3. Review the importance of respecting survivors' wishes and supporting survivors to decide about which services to seek.

Foundations: Key Approaches for Engaging Community Leaders

Training



Key Approaches for Engaging Community Leaders

Who is the Training for?

Key Approaches for Engaging Community Leaders training modules are designed for GBV teams, particularly GBV staff within GBV teams who work closely with community leaders. Several modules within Foundations: Key Approaches may also be relevant for women leaders, including current or emerging leaders.

How Does the Training Link to the Toolkit Guidance?

Training GBV staff who work closely with community leaders is part of the first step toward *Building a Foundation for Engagement*. The content covered in the Key Approaches for Engaging Community Leaders training modules is most closely linked to the *Core Concepts and Approaches* and *Building a Foundation for Engagement* chapters of **Toolkit Guidance**. Training modules also draw from Tools and Resources within all *Key Areas of Engagement*.

Time and Resources Required













The full training content can be covered in two full days, with time allowed for breaks and lunch. GBV programs can also spread the training over a longer timeframe, organizing individual modules into team workplans. Remember that participants should first complete GBV Core Concepts training.



Training schedules to consider for Key Approaches:

- Core Concepts (foundational training): 2 days
- Key Approaches (full content for GBV teams): 2 days
- Key Approaches (modules recommended for women leaders): 1 day

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.

Key Approaches for Engaging Community Leaders Training Outline

Module	Intended Audience	Overview of Module	Estimated Time
Ecological Model	 GBV Teams  Women Leaders	Participants review the ecological model and consider how the ecological model would be applied to engagement of community leaders.	30 minutes
Intersectional Feminist Approach	 GBV Teams  Women Leaders	Participants explore an intersectional feminist approach and how it would be applied to engagement of community leaders.	1 hour, 30 minutes
Strengths-Based Approach	 GBV Teams	Participants explore a strengths-based approach and how it would be applied to engagement of community leaders.	1 hour, 30 minutes
Focusing on Benefits	 GBV Teams	GBV teams practice using a benefits-based approach to address issues and articulate a positive vision with community leaders.	30 minutes
Communication: Showing Respect	 GBV Teams  Women Leaders	Participants explore how respect is communicated and consider how to practice respectful communication with community leaders.	45 minutes
Communication: Listening & Sharing	 GBV Teams  Women Leaders	This session focuses on building skills for effective communication, including active listening. Communication skills are essential for building relationships and engaging community leaders through meetings, trainings, group discussions, or any other activity.	2 hours
Communication: Advocacy	 GBV Teams  Women Leaders	This session distinguishes advocacy from other forms of communication with community leaders. Participants will consider possible reasons for advocating with leaders and review a process for planning for advocacy.	1 hour, 30 minutes

Participatory Methods	 GBV Teams	<p>This session provides an overview of a participatory approach. GBV teams practice applying participatory methods to facilitation and group learning.</p>	<p>2 hours, 45 minutes</p>
Managing Facilitation Challenges	 GBV Teams	<p>GBV teams practice managing harmful comments and other challenges to facilitating group discussions, trainings, and other participatory activities.</p>	<p>1 hour, 45 minutes</p>



Ecological Model

Summary

Participants review the ecological model and consider how the ecological model would be applied to engagement of community leaders.

Learning Objectives

Participants will:

- Understand the ecological model as a framework for understanding and preventing GBV
- Consider the ecological model in relation to engagement of community leaders

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review

Time

30 minutes

Procedure

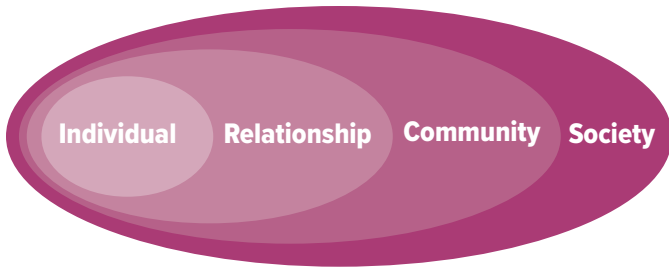
Step 1: Review the ecological model (15 minutes)

Review the information on the ecological model and contributing factors in the *Core Concepts and Approaches* chapter of the Toolkit Guidance.

Step 2: Plenary discussion (15 minutes)

Ask participants to reflect on roles of community leaders at different levels of the ecological model. Ask how GBV teams might engage with leaders to affect change- including reducing risk factors and increasing protective factors- at each level. Examples might include:

- Individual: Building leaders' knowledge and skills, supporting leaders to shift attitudes and practices.
- Relationship: Promoting support for survivors within families, holding perpetrators of IPV accountable.
- Community: Identifying and addressing community-level risks, increasing access to information and services, fostering positive social norms.
- Society: Increasing access to justice, supporting laws and policies, contributing to large-scale information campaigns.



Ecological Model

Key Discussion Points/Additional Facilitation Notes

- The ecological model helps us understand factors that influence the likelihood of an individual to experience GBV, or to perpetrate GBV. The ecological model also provides a helpful framework for understanding the different levels of work required to effectively prevent GBV.
- While some work with community leaders may cut across different levels of the ecological model, it can be helpful for teams to consider the level/s of change they are aiming to affect, to identify appropriate strategies and audiences.



Intersectional Feminist Approach

Summary

Participants explore an intersectional feminist approach and how it would be applied to engagement of community leaders.

Learning Objectives

Participants will:

- Understand why an intersectional feminist approach is foundational to GBV prevention and response programming
- Consider how to apply an intersectional feminist approach, particularly when engaging community leaders

Materials and Preparation

1. Toolkit Guidance available for review
2. Prepared questions to distribute for small group discussion

Time

1 hour, 30 minutes

Procedure

Step 1: Define an intersectional feminist approach (15 minutes)

1. Review the definition of an intersectional feminist approach in *Core Concepts and Approaches* chapter of the Toolkit Guidance.
2. Ask participants to describe this approach in their own words. What are the key elements?

Step 2: Self-reflection (10 minutes)

1. Intersectional feminism recognizes the power imbalance between men and women as the root cause of all GBV but also recognizes additional power imbalances, or forms of discrimination and oppression, that intersect with discrimination against women and girls. Each of us has our own set of intersecting privileges and oppressions, based on identifying factors such as race, ethnicity, nationality, legal status, class, caste, disability status, and education level.
2. Ask participants to take a few minutes and independently reflect on their privileges—that is, the factors that might give them power in relation to others.
3. After time for reflection, ask if participants were able to identify personal privileges. Did some identify areas of privilege they had not considered? Ask participants to reflect—in their lives and work—on if and how they exercise power related to their privilege.

Step 3: Small group discussions (25 minutes)

1. Divide participants into small groups and ask groups to discuss at least one of the following questions:
 - a. In addition to gender discrimination, what forms of oppression and discrimination are dominant in this community? What other forms of oppression might exist that we don't even see?
 - b. Intersectional feminism suggests that it's important to not see people through only one lens, or to assume all people of the same sex or race have the same opportunities and experiences. Why is this important for GBV programming?
 - c. Intersectional feminism is not just about mapping or noting factors of identity—such as male/female, or people with disabilities, or refugees—it's about examining power. How can our program be more attentive to power imbalances?
2. Allow 20 minutes for discussion, with designated focal points for note taking and reporting back.

Step 4: Plenary discussion (40 minutes)

1. Bring the groups back together and ask representatives from each group to briefly share major points from discussion.
2. As a group, discuss two additional questions:
 - a. What forms of oppression and privilege do male community leaders experience?
 - b. What forms of oppression and privilege do women community leaders experience?
3. Wrap up discussion with final points and reflections.

Key Discussion Points/Additional Facilitation Notes

- Individual experiences with oppression and discrimination relate to their risks of GBV. Those at the intersection of multiple forms of oppression will be more vulnerable. For example, adolescent girls are at the intersection of discrimination against women and girls and vulnerability related to age and are therefore at high risk of multiple forms of GBV. Adolescent girls who also belong to minority groups or have disabilities are at even further risk.
- Reflecting on diversity is always important. There is diversity even within the category of “community leaders.”
- Community leaders, particularly formal leaders, carry privilege relative to others in communities by virtue of their leadership status. But leaders may also experience forms of oppression based on other factors. Helping leaders reflect on times when they have felt powerless, or discriminated against, can help to build their understanding of GBV.

Strengths-Based Approach

Summary

Participants explore a strengths-based approach and how it would be applied to engagement of community leaders.

Learning Objectives

Participants will:

- Reflect on leaders' strengths
- Consider how to apply a strengths-based approach to programming

Materials and Preparation

1. Flipchart paper and markers
2. Prepare scenarios for group exercise (examples provided in Handout). Print, copy, cut scenarios for distribution
3. Toolkit Guidance available for review

Time

1 hour, 30 minutes

Procedure

Step 1: Define a strengths-based approach (15 minutes)

Review the definition of a strengths-based approach in the *Core Concepts and Approaches* chapter of the Toolkit Guidance.

Step 2: Small group exercise: Scenarios (25 minutes)

1. Review scenarios in small groups. Ask groups to read the scenario and discuss:
 - a. What positive attributes do you recognize in leaders?
 - b. What opportunities do you identify to reinforce positive practice?
 - c. What would you emphasize when engaging with a leader in this environment?
2. Allow 20 minutes for discussion, with designated focal points for note taking and reporting back.

Step 3: Plenary discussion (50 minutes)

1. Bring the groups back together and ask representatives from each group to read their scenario aloud and then share major points from discussion. If multiple groups work with the same scenario, ask additional groups to build on points raised.
2. Reflect on the exercise in group. Was it difficult to focus on strengths, rather than concerns and challenges? Does focusing on strengths prohibit us from also noting challenges and concerns? How can we meaningfully apply a strengths-based approach to our work?

Key Discussion Points/Additional Facilitation Notes

- Consider adapting scenarios for contextual relevance.
- A strengths-based approach is both a principled approach for working with community leaders and an effective one. It is often particularly important for community leaders to feel respected and heard, based on expectations related to their position within communities.
- A strengths-based approach is linked to other approaches, including focusing on benefits (or a benefits-based approach), a participatory approach, and a survivor-centered approach.

Handout: Scenarios for Small Group Exercise

Scenario 1. Juba, South Sudan

You are planning a 16 Days of Activism Campaign. You have reached out to Mr. Solomon, a local leader who participates in the GBV protection working group and has coordinated with humanitarian agencies for 10 years. He often makes big promises but is very busy with his work and doesn't always follow through with plans. Mr. Solomon is fluent in multiple languages, including English and Arabic. He enjoys planning and socializing with people. Mr. Solomon has a good relationship with your GBV team. He frequently hosts meetings in his office (located in a large building with multiple conference rooms) with a nice courtyard. Mr. Solomon has three daughters and four sons (all are unmarried and under the age of 18yrs). He often talks about his wife and family with great pride.

Scenario 2. Kachin, Myanmar

Your program is supporting displaced communities in northern Myanmar who are largely organized according to religion. Church leaders carry great influence and help to mobilize essential services for communities. Your organization is not faith-based, and your program serves multiple communities that belong to different churches. You are concerned that services for women and girls are limited, and uptake of services that are available, including the group activities that your program implements, is low.

Scenario 3. Kampala, Uganda

Your team is traveling from Kampala to several remote communities to assess GBV response capacity, in anticipation of expanding GBV programming. In each community, you meet with community leaders and discuss the assessment and program plans. During the last meeting, you met with three leaders- two men and one woman- who were very happy to have you visit. They offered tea and coffee and spent a lot of time talking about their community and their concerns and needs. Each leader invited you back for future visits. The leaders were not, though, very interested in discussing women's health or security concerns for women and girls. They were very focused on needs related to water and education. The leaders valued education and were concerned that resources for schools, including teacher training, were limited. The leaders asked multiple times about what resources your organization might offer their community.

Focusing on Benefits¹

Summary

GBV teams practice using a benefits-based approach to address issues and articulate a positive vision with community leaders.

Learning Objectives

Participants will:

- Articulate a positive vision
- Frame issues in terms of benefits

Materials and Preparation

1. Flipchart paper and markers
2. Place four flip charts around the room, with the titles “individual benefits”, “family benefits”, “community benefits”, and “societal benefits”.

Time

30 minutes

Procedure

Step 1: Visualization exercise (10 minutes)

1. Tell participants to relax and close their eyes. Think about anything they want, so long as they do NOT think of an elephant! Don't think about its grey skin, or its tusks, or its big ears, or its tail. Don't think about what it eats or where it lives or how it uses its trunk to bathe. Whatever they do, do NOT think of an elephant!
2. Wait a few seconds and ask people what they thought about.
3. Was anyone successful at not thinking about an elephant? If so, ask how they managed.
4. Explain:
 - Usually, if people managed to not think of an elephant, it was because they switched their focus to something else.
 - Often, with GBV programming, we only ever talked about what we don't want to see: violence!
 - But it is difficult to ask people to focus on a problem—and to not perpetrate GBV—What DO want to see?
 - For those who did not visualize an elephant, usually it is because we are able to try hard to visualize something else in its place—with GBV work, we need to be able to visualize nonviolence and its benefits.

¹ This session is adapted from: *Raising Voices. (2009). Principles of Community Mobilization Series Staff Skill Building Library Practicing Benefits-Based Practicing Benefits-Based Conversations: Issue Framing Module, Principles of Community Mobilization Series.* <https://raisingvoices.org/wp-content/uploads/03/2013/downloads/Activism/SBL/PracticingBenefitBasedConversationsIssueFraming.pdf>

Step 2: Plenary discussion: Talking about problems (5 minutes)

Ask-When we talk to leaders or others only about the problems around us, how do they feel? Are they eager to meet with us to talk more about problems?

Discuss, and share brief experiences.

Step 3: Group exercise: What do we want? (15 minutes)

Challenge participants to visualize equality and nonviolence. What benefits do they see? Ask participants to move around the room and write down brief notes under each flip chart- capturing some individual/family/ community/societal benefits of nonviolence and equality.

Call group back together. Conduct a “gallery walk” or ask volunteers to read examples from different flip charts. Briefly discuss how these points might be highlighted during engagement with community leaders and other community members.

Key Discussion Points/Additional Facilitation Notes

- Be prepared to continue to challenge participants to re-frame issues and statements to focus on benefits.
- Participants may want to discuss the limitations of framing issues in positive terms. It is also appropriate and important to focus on the serious consequences of GBV. The challenge of this session- and community engagement- is to not only focus on problems.

Communication: Showing Respect²

Summary

Participants explore how respect is communicated and consider how to practice respectful communication with community leaders.

Learning Objectives

Participants will:

- Reflect on their approaches to communication
- Identify communication skills to strengthen

Facilitators will:

- Learn different ways that respect is communicated within the community
- Learn about communication practices that are appreciated within the team

Materials and Preparation

1. Flipchart paper and markers
2. Notebooks/paper and pens for participants

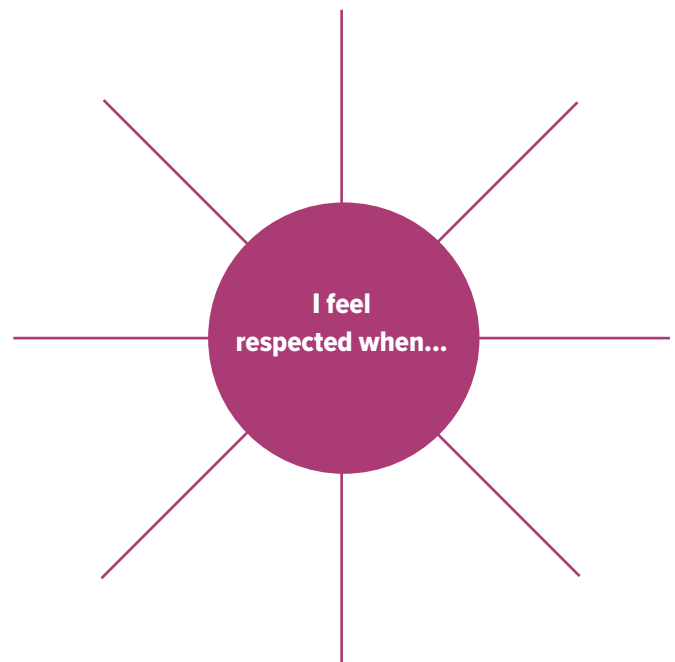
Time

45 minutes

Procedure

Step 1: Independent exercise (10 minutes)

Ask each participant to draw a wheel—a small circle with at least five spokes around it. Demonstrate on a flipchart. In the center of the circle, participants can write “I feel respected when...” (or just “respect” if they lack space). Ask participants to imagine they are talking with another person. What would that person do or say during a conversation to let you know they respect you? Write words or phrases on spokes around the circle to complete the statement “I feel respected when...” Add more spokes as needed.



² Adapted from *Make Me a Change Agent: A Multisectoral SBC Resource for Community Workers and Field Staff: Showing Respect*, [Coregroup.org](https://www.coregroup.org)

Step 2: Plenary discussion (30 minutes)

1. Ask volunteers to share points from their independent exercise—when do we feel respected? Ask if others agree with volunteered points—which points are common? Are there points of disagreement? Participants are free to add to their respect wheels, as they collect ideas from others.
2. Discuss the following:
 - What are nonverbal signals of respect? Is eye contact expected? What are the common ways people show respect in this community? Do signals of respect vary within the population?
 - What types of greetings are expected at the beginning of a conversation in this community? Do greetings vary within the population? Do greetings depend on the type of meeting, what a person is doing, the status of person, or relationship?
 - How do we demonstrate respect during communication with community leaders? Are there differences between leaders? Do you think leaders would feel similarly about when they feel respected? What would their respect when look like?

Step 3: Independent assessment (5 minutes)

1. Ask participants to return to their own wheels and review the things that make them feel respected, but this time, they should consider whether they often show respect in these ways through their own communication.
2. Ask participants to:
 - a. Draw a star next to ways you often show respect for others
 - b. Circle any practices you would like to increase or improve
 - c. Make any notes about questions you have about your communication style, or ideas for improvement

Key Discussion Points/Additional Facilitation Notes

- All social groups share expectations about how people demonstrate respect, even though we don't often talk or think about these. We have learned to communicate since childhood, and it is helpful to be more conscious of the ways respect (or lack of respect) is demonstrated, particularly when we are communicating with people from different social and cultural groups who might have different expectations.
- Respectful communication is particularly important with community leaders, who are commonly afforded high levels of respect based on their positions in communities. GBV teams should be familiar with and mindful of expected pleasantries and customs.
- Communication skills, just like any other skill, can be improved with effort and practice.

Communication: Listening & Sharing

Summary

This session focuses on building skills for effective communication, including active listening. Communication skills are essential for building relationships and engaging community leaders through meetings, trainings, group discussions, or any other activity.

Learning Objectives

Participants will:

- Review key elements of communication
- Practice effective communication

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance. Photocopy for distribution, or have available to review *Tip Sheet: Communication Skills* in Building a Foundation Tools and Resources

Time

2 hours

Procedure

Step 1: Brainstorming: Why do we communicate? (15 minutes)

Open with a brief brainstorming exercise on the different purposes of communication. Why do people communicate—what purposes does communication serve? Highlight examples on flipchart, such as: to express emotions, build relationships, educate, counsel, share, persuade, advocate, request help.

After collecting a list of purposes, ask participants about how different purposes might be served by different means of communication. For which purposes might radio be a good means of communication? What about billboards? Intimate conversations?

In this exercise, we want to focus on interpersonal communication skills, and how we can strengthen skills to engage leaders one-on-one and through different activities.

Step 2: Group Exercise: Characteristics of good communication (25 minutes)

1. Invite participants to sit in a circle, removing all chairs that are not being used. Only the facilitator should be standing, so there is one less chair than people in the room.
2. Explain that this session will focus on facilitating. Introduce a flipchart with the question the group will answer through an exercise: What are the characteristics of a good communicator?

3. Explain: One participant, starting with the facilitator, will make a statement that starts with “Everybody who...” For example, “Everybody who is wearing a skirt!” Then everyone wearing a skirt needs to switch chairs, finding a seat among those who are changing chairs. Whoever is left standing will add one point to the Good Communicator list and then lead another round of “Everybody who...”
4. Once the flipchart includes several good examples, close the game, and collect other important points from the group to add to the list.
5. Review and discuss characteristics of a good communicator. Highlight:
 - Uses clear language
 - Focuses on the positive
 - Interest in connecting
 - Listens
 - Seeks to understand
 - Shows Empathy

Step 3: One-on-one practice (1 hour)

1. Ask participants to divide into pairs. Explain you will have quick conversations to practice communication skills.
2. Choose a topic for pairs to briefly discuss. Examples:
 - Are mobile phones good or bad for society?
 - Is it better to be a morning person or a night person?
 - Which animals are best to keep as pets?
3. Ask pairs to discuss the topic amongst themselves for five minutes. Then stop discussion and ask pairs to give each other brief feedback on their communication. Ask for volunteers to share with the larger group—How did your partner show you they were listening to you? Did they ask questions, or demonstrate in other ways that they were interested in your point of view? Did they seek to connect with you and find similarity? Did they express disagreement respectfully?
4. In the same pairs, ask participants to now practice through a roleplay, rather than a discussion. One person will play the role of a GBV team member, and the other person will play the role of a community leader. The GBV team member wants to bring an issue to the community leader’s attention for discussion. Examples:
 - Women have complained that their husbands are not allowing them to visit the women and girls safe space.
 - Idle young men have been spending time around the market, drinking, and they are harassing women.
 - Plans have been set for placement of new water points, but women are expressing concern about the plans.
5. Ask the pairs to engage in roleplay for ten minutes. Then stop the roleplays and ask pairs to give each other brief feedback. Ask for volunteers to share with the larger group:
 - For those who played GBV team members, what did you have in mind as you raised the issue with a “community leader”?
 - For those who played community leaders, how did you feel about the way the “GBV team member” approached you? Did you feel respected? Did you feel they were interested in your point of view? Did you feel heard?
6. If time allows, ask pairs to switch positions for another role play as GBV team member/ community leader.

Step 4: Review Tip Sheet (20 minutes)

1. Distribute/ review together the *Tip Sheet: Communication Skills* in Building a Foundation Tools and Resources.
2. Review the Tip Sheet together and discuss.

Key Discussion Points

- Communication skills can be developed and improved just like any other skills. It's helpful to reflect on strengths and areas for improvement. Participants can find ways to practice communication skills to improve confidence and comfort for communicating with leaders.
- Connecting with others, including community leaders, involves listening, understanding, and empathy. Leading with an interest in real connection will help to build relationships that are foundational to all work with community leaders to prevent and respond to GBV.
- Roleplay exercises can be adapted if participants include women community leaders.



Communication: Advocacy

Summary

This session distinguishes advocacy from other forms of communication with community leaders. Participants will consider possible reasons for advocating with leaders and review a process for planning for advocacy.

Learning Objectives

Participants will:

- Differentiate advocacy from other forms of communication
- Review a process for planning advocacy with leaders

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review
3. Photocopies of *Planning Tool: Advocacy with Leaders* in Supporting Women Leaders Tools and Resources and *Planning Guide and Tool: Advocacy with Leaders on Behalf of Survivors* in GBV Response Tools and Resources (Copies for each participant or enough to small groups to share)
4. Photocopies of *Fact Sheets* in GBV Response Tools and Resources (Several copies of each tool to share)
5. Identify issues or scenarios for practice ahead of session

Time

1 hour, 30 minutes

Procedure

Step 1: Plenary Discussion: Defining advocacy and identifying advocacy opportunities (30 minutes)

1. Open discussion with a brainstorming session. What ideas come to mind when people think about advocacy? Capture key words on flipchart.
2. Ask: What is the difference between advocacy and awareness-raising, or information-sharing?
3. Help to define advocacy. Generally, advocacy is the act or process of supporting a cause or issue. Communication focused on advocacy generally differs from other forms of information-sharing in the following ways:
 - a. Advocacy includes an “ask” or a specific action/change/outcome you would like to see.
 - b. Advocacy is focused on specific, target audiences or decision-makers who can act on the “ask.”

4. If copies of the Toolkit Guidance are available, ask participants to review chapters devoted to Key Areas of Engagement to identify Ideas for Engagement that involve advocacy. If copies are not available, ask participants for examples of “asks” they might have for community leaders related to the following:
 - a. GBV Response (e.g., requesting action on behalf of a survivor)
 - b. GBV Risk Mitigation (e.g., asking leaders to address specific risks)
 - c. Supporting Women Leaders (e.g., advocating for women’s participation in decision-making forums)
5. Discuss hypothetical examples, or examples from practice among the team. Ask participants to reflect on different approaches that might be required when advocating with leaders to take specific actions, rather than general communication with leaders about issues, concerns, or program plans.

Step 2: Review of tools and practice (45 minutes)

1. Divide participants into small groups. Explain that groups will practice planning communication with leaders focused on advocacy
2. Assign each group a hypothetical issue or brief scenario. Distribute one of two planning tools (*Advocacy with Leaders in Supporting Women Leaders Tools and Resources* or *Planning Guide and Tool: Advocacy with Leaders on Behalf of Survivors* in GBV Response Tools and Resources), as relevant to selected scenarios/issues.
3. Ask groups to review relevant sections of the Toolkit Guidance and practice completing the planning tools. Groups can also consult Fact Sheets on different forms of GBV.
4. Spend time with each group to help participants with their practice and answer questions.

Step 3: Wrap-up discussion (15 minutes)

Discuss the practice exercise with all participants together. Focus on the process of planning, rather than the “answers,” or how groups completed planning tools. Collect feedback on how the team could adapt and use the tools in their work with leaders, and what further support might be required for advocacy.

Address remaining questions and highlight key points.

Key Discussion Points/Additional Facilitation Notes

- Advocacy with community leaders can include a range of issues or “asks”—from requests that will be welcome and non-controversial to potentially very sensitive matters. Careful planning, including an ethical and safety review, is important for sensitive matters.
- Whenever GBV teams want to request specific action or support from community leaders, it can be helpful to clarify the request and plan for a meeting. Teams can also practice communicating for advocacy through roleplay.
- This module can be adapted for use with current or emerging women community leaders.

Participatory Methods

Summary

This session provides an overview of a participatory approach. GBV teams practice applying participatory methods to facilitation and group learning.

Learning Objectives

Participants will:

- Review key elements of a participatory approach
- Practice participatory facilitation

Materials and Preparation

1. Flipchart paper and markers (preferably three flipchart stands/ taped papers)
2. Toolkit Guidance available for review
3. Photocopies of *Discussion Guides* in GBV Response Tools and Resources, GBV Risk Mitigation Tools and Resources, Transformative Change Tools and Resources, Supporting Women Leaders Tools and Resources. (Several copies of each tool—with at least one tool per participant)
4. Photocopies of *Fact Sheets* in GBV Response Tools and Resources (Enough copies for sharing 1:4 among participants)

Time

2 hours, 45 minutes

Procedure

Step 1: Plenary discussion: Exploring benefits of a participatory approach (45 minutes)

Review a participatory approach in *Core Concepts and Approaches* in Guidance, Tools and Resources.

1. Open discussion by asking if participants can highlight key words or features of a participatory approach. Write features on flip chart as each is briefly affirmed and discussed. Examples include:
 - Mutual learning
 - Recognizes others' expertise/ capacity/ strengths-based
 - Diversity
 - Community-led change
 - Methods increase participation
 - Listening

2. Using a second flipchart, ask participants for examples of methods for group learning or decision making that increase participation. Write and briefly discuss examples from participants and then highlight additional examples, such as:
 - Small group discussions (where facilitator does not dominate)
 - Community mapping (through transect walks, illustration, etc.)
 - Diagramming (Venn diagrams, etc.)
 - Voting (including agree/disagree exercises)
 - Ranking (exercises where participants rank ideas/ choices)
 - Card sorting (where participants write ideas on individual cards that are collected and then sorted into categories/ prioritized by the group)
 - Networking (activities that encourage exchange among participants)
3. Using a third flipchart, ask participants what would be required of a GBV team member to facilitate a participatory exercise or group discussion. Record key words/ ideas from participants. Once the flip chart is filled with ideas, invite participants to participate in a sorting exercise where the ideas are organized into three categories:
 1. Knowledge
 2. Skills
 3. Qualities

Some ideas may not easily fall within these categories, but the exercise can help participants reflect on measures facilitators can take to prepare for participatory group discussions and exercises—including becoming familiar with content (knowledge), practicing facilitation techniques such as active listening and respectful communication (skills). Participants can also reflect on the personal characteristics and beliefs that an effective facilitator should hold (qualities), as well as any personal attributes that may be important in the context. Some qualities may be developed or reinforced, while others may be inherent.

Step 2: Practice: Facilitating group discussions (2 hours)

1. Ask participants to divide into groups of four. Explain that you will practice participatory facilitation of discussions related to GBV in small groups. Each person will have a turn.
2. Distribute *Discussion Guides* from the Tools and Resources sections of all Key Area of Engagements in the Toolkit Guidance. Distribute so that members of groups have different *Discussion Guides*. Allow time for participants to read through *Discussion Guides*. Explain that *Discussion Guides* are tools to assist facilitators. Review major components of *Discussion Guides* together, clarifying as a group which components might be considered required, and which components are suggestive. Facilitators are not bound to suggested questions or prompts.
3. Ask for volunteers within each group to take the first turn as facilitators. They will practice facilitating a discussion with a group of community leaders (the group can determine characteristics of the leaders if they wish), starting with introductions. Allow 15 minutes for the first discussion.
4. After 15 minutes, ask groups to stop facilitated discussions. Ask group members who acted as community leaders to provide brief feedback to their facilitator.
5. Ask for volunteers to share with the larger group—What did facilitators do that was very positive? How did they open discussion? Did you feel comfortable speaking? Did you feel heard? Did you feel open to learning from the facilitator? What did you learn that you want to remember when it's your turn to facilitate a group discussion?

6. In the same groups, ask participants to rotate the role of facilitator. Each facilitator can lead a new discussion, using *Discussion Guides*. Allow 15 minutes for each practice round, followed by brief feedback within the group, and brief discussion among the larger group.
7. After all participants have taken a turn with practice facilitation, wrap up with a final group discussion on takeaways for participants. Draw reference to flip charts from the first exercise where participants defined a participatory approach and outlined requirements for facilitators.

Key Discussion Points

- A participatory approach is highly valued in GBV programming, particularly the importance of ensuring that populations most affected by GBV—diverse groups of women and girls—participate in the design and delivery of all interventions.
- Participatory methods are useful for working with different populations, including community leaders who may have greater power relative to other members of communities.
- Participatory facilitation honors the knowledge and contributions of others and is more effective for adult learning and promoting social change than conventional methods of teaching.
- Language matters—we talk about “engaging” leaders rather than “targeting” them, and “discussing ideas” rather than “educating.”

Managing Facilitation Challenges

Summary

GBV teams practice managing harmful comments and other challenges to facilitating group discussions, trainings, and other participatory activities.

Learning Objectives

Participants will:

- Reflect on common challenges to facilitating GBV discussions
- Build skills for managing harmful comments and other challenges

Materials and Preparation

1. Flipchart paper and markers
2. Scissors
3. Sample roleplay assignments based on different scenarios printed/photocopied and cut for distribution. Examples provided in **Handout: Scenarios for Roleplay Practice**. (print/photocopy enough for the group plus at least two extra scenarios)
4. **Handout: Facilitator Strategies for Managing Challenges** printed/photocopied for distribution (one per participant)

Time

1 hour and 45 minutes

Procedure

Step 1: Roleplay practice (30 minutes)

1. Divide participants into small groups. Explain that participants will play different assigned roles – facilitator and community leaders. Participants will receive notes on their roles and characteristics and should not share these with others.
2. Distribute prepared roleplay assignments.
3. Allow 15 minutes for roleplay. Then ask participants to come out of their roles and briefly discuss the experience amongst themselves.

Step 2: Plenary discussion (15 minutes)

1. Bring the groups together and ask how facilitators felt during the exercise. Ask those who played roles of community leaders if they identified with, or recognized, these roles.
2. Ask participants to highlight specific challenges that emerged from community leaders during roleplay. Capture challenges on flipchart.
3. Once multiple challenges are highlighted, ask participants to sort these first into two general categories: 1. General challenges to facilitation (such as interrupting), and 2. Challenges that might be more specific to GBV (such as denying the problem of GBV or shifting the focus of discussion). Some challenges might relate to both categories—such as challenges with women’s participation and leadership in group discussions. Briefly indicate categories of challenges on flipcharts. Consider breaking challenges down into further categories—such as harmful statements, denial, etc.

Step 3: Review strategies for managing challenges (30 minutes)

Distribute *Handout: Facilitator Strategies for Managing Challenges*. Ask participants to read through the handout and then open discussion to reflect on some of the suggested strategies. Participants can share experiences and discuss the benefits of different approaches.

Step 4: Roleplay in front of the group (30 minutes)

1. Ask for volunteers willing to roleplay another group discussion front of the larger group.
2. Distribute prepared roleplay assignments
3. Applying points and strategies discussed, ask the volunteer facilitator to lead a group discussion.
4. Close group roleplay after a few minutes. Congratulate and thank volunteers and ask for feedback from the audience. What strategies did they see the facilitator apply? What other strategies might have proved effective?
5. If time allows, continue roleplay with the same volunteers to adjust facilitation strategies, and/or ask for new volunteers.

Key Discussion Points/Additional Facilitation Notes

- Setting ground rules and expectations for group discussions and group activities can reduce facilitation challenges. Guidance on this is included at the top of each *Discussion Guide*, under Key Areas of Engagement Tools and Resources.
- Facilitators must be trained to provide basic support and referrals for any survivors of GBV who disclose incidents or seek help during/ after group activities.
- Facilitators can practice meeting different facilitation challenges through regular roleplay exercises. They can also practice independently, to become more comfortable talking about relevant topics.

Handout: Scenarios for Roleplay Practice

Scenario 1

Facilitator: You will facilitate a discussion with a group of community leaders about the importance of abiding by the legal age of marriage (18) in a community where girls are often married at young ages. You want to discuss the benefits of waiting to marry.

Community leader 1: You want to discuss the benefits of marrying girls at an earlier age. You talk over the facilitator and try to have conversations with other community leaders when the facilitator is talking.

Community leader 2: You disagree with the facilitator and feel defensive about community customs related to early marriage. Your facial expressions and body language are not happy (frown, cross your arms across your chest).

Community leader 3: You agree with the facilitator that girls should not be married, but you are in a lower position of authority than other community leaders and do not want to disrespect their views.

Scenario 2

Facilitator: You will facilitate a discussion with a group of community leaders about the benefits of healthy and equal relationships, where husbands and wives share in household decision-making.

Community leader 1: You feel defensive and do not want to hear from the facilitator about what should happen between husbands and wives. You show your feelings with facial expressions and body language (frown, cross your arms across your chest).

Community leader 2: You don't think this is an important conversation for discussion. You want to talk about the importance of women respecting their husbands, as this is a major source of problems in the community.

Community leader 3: You agree with the facilitator and want to make long speeches. You don't listen to others, and you interrupt other community leaders and the facilitator.

Scenario 3

Facilitator: You will facilitate a discussion with a group of community leaders about addressing risks that women face when they move outside the community for livelihoods activities. You are hoping that community leaders can help to identify solutions to this problem.

Community leader 1: You are a quiet by nature and in a lower position of authority than other community leaders, so you are not likely to talk. But you have already started to organize community members in your area of the community—women are planning to travel out of the community in groups, with accompaniment of men volunteers.

Community leader 2: You strongly believe that women should be confined to the home and men should be responsible for livelihood activities. You don't want to hear other ideas.

Community leader 3: You think that community leaders have more important matters to discuss than this. You need to shift this discussion to focus on the issue of registration for food assistance.

Scenario 4

Facilitator: You will facilitate a discussion with a group of community leaders about strengthening access to GBV response services. Clinical services for survivors of rape are critical, and best received within 72 hours of incidents, but survivors from this community must travel to a referral hospital an hour away. Survivors are often uneasy about the bus trip or unable to pay bus fare. You want to identify solutions to this challenge with community leaders.

Community leader 1: You are part of a village savings and loans group that manages a fund to assist vulnerable women. Your group would like to help survivors access care, but as a woman leader you don't find it easy to speak in front of this group.

Community leader 2: You are a senior leader and do not believe that rape happens in your community. You are upset by the suggestion that your community has this problem, and you will not tolerate a facilitator or organization that disrespects your community.

Community leader 3: You are very vocal and want to dominate discussion. You will interrupt others just to repeat what they have said and be heard, but you are not really listening and don't have ideas to bring to this discussion.

Handout: Facilitator Strategies for Managing Challenges

Type of challenge/ harmful comment	Facilitator strategies
<p>Dominating/ interrupting</p>	<ul style="list-style-type: none"> • Thank eager or dominating participants for their inputs and ask to hear from someone who hasn't participated. • Introduce a talking stick, where only the participant holding a stick speaks.
<p>Silent/ low participation</p>	<ul style="list-style-type: none"> • Ask to hear from everyone. • Move around the circle to collect thoughts from everyone, one at a time, with the option to pass if participants do not want to speak. • Use hypothetical scenarios, or ask what some in the community, or others in the community might think. It is sometimes more difficult to participants to share their own views.
<p>Changing subject/ shifting focus from women and girls (e.g., "Why are we only talking about women? The men in this community are not getting any assistance.")</p>	<ul style="list-style-type: none"> • Acknowledge other issues and concerns and remind participants of the reasons your program is focused on women and girls. • Ask participants if there is agreement that women and girls face some specific problems (if not the only problems) that require attention. • Share information on other forums for discussing issues. • Offer to connect with relevant partners/ colleagues who might follow up with leaders to discuss other concerns.
<p>Denial of GBV (e.g., "This is against our religion and is not a concern in this community.")</p>	<ul style="list-style-type: none"> • Express empathy for the concerns underlying the denial of GBV—none of us wants this to happen. • Acknowledge the difficulty of confronting GBV. Recognize that GBV is a problem all over the world. • Introduce hypothetical scenarios, including scenarios from different contexts. • Reframe discussion to focus on benefits of nonviolence and equality.

Victim-blaming
(e.g., “This wouldn’t happen if women respected their husbands.”)

Reinforcing/ justifying discrimination or perpetration of GBV
(e.g., “It’s important for husbands to maintain control of the household and discipline their wives.”)

- Harmful comments should always be addressed without judging, shaming, or arguing with participants.
- Clarify the comment and ask if the participant supports the view. Sometimes participants are concerned to hear their words restated.
- Acknowledge that others in the community likely share the participant’s view. This can take the pressure of the participant who raised a harmful comment while allowing the group to challenge the comment.
- Ask for other perspectives. (e.g., What do others think about that? Is anyone concerned by this idea?)
- Highlight potential consequences, drawing on facts related to GBV consequences.
- Draw reference to any previous discussions or trainings on GBV core concepts. Ask about the comment in relation to what participants know about power, GBV causes and contributing factors, etc.

Disclosure of a personal experience with GBV

- Validate the survivor’s experience. Thank them for sharing. Acknowledge that it is difficult to talk about these things, even though many people experience GBV.
- Speak on behalf of the group to remind everyone about the importance of respect and confidentiality.
- Follow up with the participant after the session to ask if they would like to be connected with services.

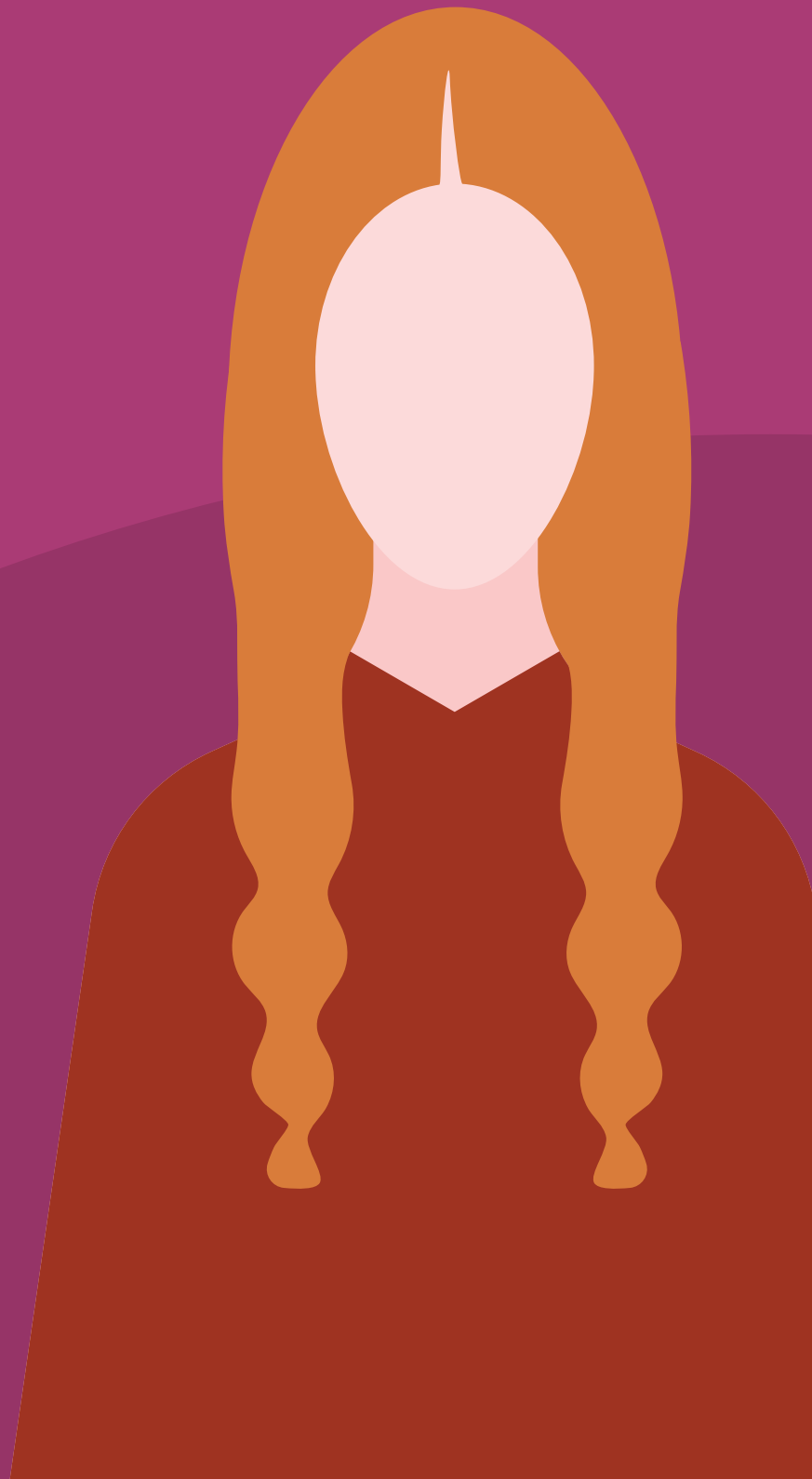
Sharing details of someone else’s experience with GBV

- Stop a participant who begins to share any potentially identifying details about an incident of GBV.
- Remind participants about the importance of confidentiality.
- Introduce hypothetical scenarios.
- Follow up with the participant after the session with information on services that might be shared with the survivor.

Threats of violence

- End a group discussion or activity if a participant threatens violence against the facilitator or other group member. Seek security services and report the incident, as appropriate

Foundations: Planning For Engagement With Community Leaders Training



Foundations: Planning For Engagement With Community Leaders

Who is the Training for?

Planning for Engagement training modules are designed for GBV teams. The training modules are recommended for GBV programs interested in increasing engagement with community leaders and staff within GBV teams who work closely with community leaders.

How Does the Training Link to the Toolkit Guidance?

The content covered in the Planning for Engagement training modules is closely linked to the *Building a Foundation for Engagement* chapter of **Toolkit Guidance**. The training modules follow outlined steps in the *Building a Foundation for Engagement* chapter, and participants will use tools from *Building a Foundation Tools and Resources*.

Time and Resources Required

The training content can be covered in two full days, with time allowed for breaks and lunch. GBV programs can also spread the training over a longer timeframe, organizing individual modules into team workplans. It may be beneficial for teams to pause between training modules to collect additional information, meet with partners, or spend time reflecting on program options before proceeding to set priorities or develop action plans for engagement.

Training schedules to consider for GBV Teams related to Planning for Engagement:

- Core Concepts (foundational training): 2 days
- Key Approaches (full content for GBV teams): 2 days
- Planning for Engagement: 2 days

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. Teams are recommended to print copies of the *Building a Foundation for Engagement* chapter of Toolkit Guidance, if possible, as modules will draw heavily from steps outlined in the chapter. It will also be beneficial for teams to have access to Key Areas of Engagement chapters to set priorities and plan activities.

Planning for Engagement with Community Leaders Training Outline

Intended Audience



Module	Module Overview	Estimated Time
Reflective Practice	This session provides space for team and individual reflection as a critical first step to planning interventions with communities. GBV programs are recommended to adopt a reflective practice that is attentive to values and exercise of power.	1 hour, 45 minutes
Stocktaking: Current GBV Programming and Leader Engagement	GBV teams review their program priorities and any current or past efforts to engage community leaders. Through this session, teams develop a common understanding that will support further reflection on potential for community leader engagement.	2 hours, 45 minutes
Mapping Community Leadership	GBV teams map known leadership structures and develop plans for collecting additional information about leaders, including women leaders.	1 hour, 45 minutes
Setting Priorities	GBV teams apply an understanding of program priorities and leadership structures to consider engaging community leaders in key areas of programming. Teams will consider needs, potential, and risks of different interventions and vote on priorities for engagement.	2 hours
Identifying Leaders for Engagement	Reflecting on community leadership structures and program priorities, participants will consider which leaders might be engaged. The team will develop criteria to guide the identification of leaders for key areas of engagement.	2 hours, 15 minutes
Communication: Listening & Sharing	This session focuses on building skills for effective communication, including active listening. Communication skills are essential for building relationships and engaging community leaders through meetings, trainings, group discussions, or any other activity.	2 hours
Team Planning for Engagement	GBV teams will draw from the Toolkit guidance and decisions and previous training modules to set plans for community leader engagement.	2 hours

Reflective Practice

Summary

This session provides space for team and individual reflection as a critical first step to planning interventions with communities. GBV programs are recommended to adopt a reflective practice that is attentive to values and exercise of power.

Learning Objectives

Participants will:

- Identify actions the GBV team can take to build a more reflective practice
- Identify practices that the GBV team can adopt to create more balance in power within the team and between the GBV program and the community
- Reflect on personal attitudes and values, with appreciation for how these relate to GBV programming

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review. Participants will reference the *Building a Foundation for Engagement* chapter (with printed copies available for distribution if possible).
3. Photocopy for distribution, or have available to review *Tip Sheet: Starting with Ourselves* in *Building a Foundation Tools and Resources*
4. Photocopy for distribution, or have available to review *Self-Reflection Exercises* in *Building a Foundation Tools and Resources*

Time

1 hour, 45 minutes

Procedure

Step 1: Team Reflection (1 hour)

1. Review Step 1 (Action 1.3) in the *Building a Foundation for Engagement* chapter.
2. Review and discuss *Tip Sheet: Starting with Ourselves*.
3. Facilitate brainstorming on steps the team can take to:
 - a. Build a more reflective practice
 - b. Reduce power imbalances within the GBV team and between the program and the community
3. Record agreed-upon plans or ideas on flipchart, with notes on next steps and responsibilities, as relevant.

Step 2: Self Reflection (45 minutes)

1. Distribute Self-Reflection Exercises (choose one exercise from the tool).
2. Review together the notes at the top of the exercise, as well as instructions.
3. Allow time for participants to complete the exercise independently.
4. Discuss the exercise, using guiding questions from the tool.

Key Discussion Points/Additional Facilitation Notes

- This session provides a good opportunity to create a safe space for team discussion. Establish ground rules. If the facilitator is in a supervisory relationship with participants, demonstrate a commitment to reflective practice. Acknowledge the power differential and reflect on your own use of power within the team and program. Be open to constructive criticism and recommendations from team members.
- Include an icebreaker or fun exercise between steps of the module if possible. Invite a volunteer to lead an exercise.

Stocktaking: Current GBV Programming and Leader Engagement

Summary

GBV teams review their program priorities and any current or past efforts to engage community leaders. Through this session, teams develop a common understanding that will support further reflection on potential for community leader engagement.

Learning Objectives

Participants will:

- Develop a common understanding of current programming and program priorities
- Review past or current efforts to engage community leaders.

Materials and Preparation

1. Flipchart paper and markers
2. Stickers/sticky notes (if available)
3. Toolkit Guidance available for review (with printed copies of the *Building a Foundation for Engagement* chapter available for distribution if possible)
4. Key program documents (e.g., strategy, theory of change), as relevant
5. Ask team members to prepare for presentations, as relevant

Time

2 hours, 45 minutes

Procedure

Step 1: Review areas of programming (45 minutes)

1. Discuss your program's objectives and key areas of work. If team members are not equally familiar with all aspects of programming, consider preparing a PowerPoint presentation or reviewing key programming documents, such as a strategy or theory of change. If your GBV program includes multiple projects or grants, try to create a big- picture view of what your program aims to achieve, rather than a list of projects/grants/indicators.
2. Review the four areas of programming outlined in the *Core Concepts and Approaches* chapter of Toolkit Guidance.
3. Title four flipcharts: 1. GBV Response, 2. GBV Risk Mitigation, 3. Transformative Change, 4. Empowerment of Women and Girls. Ask volunteers to help organize current programming interventions, or major activities, under each title. (Not all GBV programs implement in all these areas, and most will concentrate in some areas more than others.)
4. Ask the team to reflect on the representation of their GBV program across flipcharts.

Step 2: Review involvement with community leaders (45 minutes)

1. Discuss if and how the GBV program has been introduced to community leaders. Team members who led any process to introduce the program can share experience with the rest of the team. If the team identifies a need to introduce the program, review Step 2 of the *Building a Foundation for Engagement* chapter and discuss next steps.
2. If some team members have responsibilities that specifically include community leader engagement, invite them to present to the larger team about their work.
3. Invite team members to visit each flipchart and add a sticker/ sticky note (or star with colored marker) next to every intervention/ activity listed where they have personally engaged community leaders.
4. Reflect together on the program's community leader engagement, as illustrated on flipcharts. Does this feel like an accurate representation? Are there areas of work that are surprising—either because community leaders have been engaged by so many GBV team members, or perhaps not at all?

Step 3: Small group reflection: Team experiences with leaders (1 hour, 15 minutes)

1. Divide participants into small groups (unless the team is already very small). Explain that each group will reflect on experiences with community leaders (relevant to current or past GBV prevention and response work). Each group should designate a notetaker and someone to report back in plenary.
2. Ask each group to spend 30 minutes discussing the following:
 - c. Benefits (positive or beneficial experiences engaging community leaders)
 - d. Challenges (including any negative experiences engaging community leaders)
 - e. Risks (specific risks identified through experience, or concerns to flag when considering any additional community leader engagement)
6. Bring group back to plenary and ask for a first volunteer to present on Benefits, then ask other groups to build on the presentation with any additional points. Ask for a volunteer to present on challenges, then collect further points. Finally, ask for a volunteer to present on risks, then collect additional points.
7. Capture major challenges and concerns about risks on flipchart. Agree to keep these in mind as the team considers areas of community leader engagement.

Key Discussion Points/Additional Facilitation Notes

- For large GBV programs, or within programs with high staff turnover, team members may be less familiar with the full scope of the program, or other team members' responsibilities. More time may be required to present and discuss different areas of programming, and teambuilding exercises can be integrated into the training to establish trust and common ground.
- Appreciate that team members may have personal relationships and experiences with community leaders. Maintain a safe space and respectful communication.
- Save flipchart notes for use in subsequent modules.

Mapping Community Leadership

Summary

GBV teams map known leadership structures and develop plans for collecting additional information about leaders, including women leaders.

Learning Objectives

Participants will:

- Identify community leadership structures
- Develop plans for collecting further information on leadership structures
- Develop a preliminary mapping of community leaders (if sufficient information is known)

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review (with printed copies of the *Building a Foundation for Engagement* chapter available for distribution if possible)
3. Photocopy for distribution, or have available to review *Tip Sheet: Identifying Women Leaders* in Building a Foundation Tools and Resources

Time

1 hour, 45 minutes

Procedure

Step 1: Brainstorming: Who are the community leaders? (20 minutes)

Review Step 3 in the Building a Foundation for Engagement chapter. Lead a brainstorming exercise about community leadership in plenary or consider breaking into small groups of team members work across different communities or sectors of the community. Take notes on flipchart.

- What formal leadership structures exist in the community? (Consider structures based on geography, cultural group, religion, etc.)
- Outside of formal positions, which people are regarded as leaders?
- What are specific responsibilities of different leaders regarding GBV prevention and response?
- What are the relationships between leadership structures? Are there formal hierarchies, specific reporting lines, levels of authority, etc.?
- For different leaders/ leadership structures, what are their areas/religions/populations of influence?
- What are the power dynamics between different leadership structures? Between different leaders, and between leaders and the community?

Step 2: Brainstorming: Which women leaders can be further engaged? (30 minutes)

Once the team has captured known information on leadership structures, inquire further about women's leadership. Review the *Tip Sheet: Identifying Women Leaders*. Hold a discussion on the potential for women's leadership and take notes on flipchart.

- Have formal women leaders been identified?
- Are there trusted and respected women who show potential for leadership, even if they are not yet considered leaders?
- Are there girls in the community who show potential for leadership?
- Who best represents the needs of women and girls in the community?

Step 3: Mapping exercise: Community leadership (55 minutes)

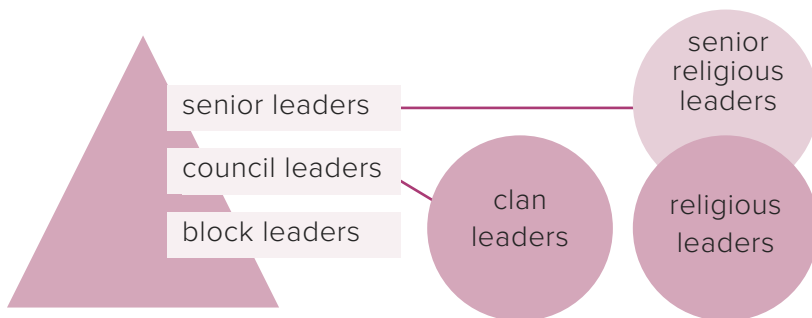
In plenary, review notes from flipcharts and take stock of the team's level of knowledge about community leadership, as well as any pending questions. Be sure to capture key questions or gaps in team knowledge.

If the team has very limited knowledge of community leadership structures, use the guidance in Step 3 of the *Building a Foundation for Engagement* chapter to develop a plan for collecting additional information, including next steps and responsibilities.

If the team has a fair amount of knowledge about community leadership structures, develop a preliminary list or diagram or other visual representation of community leadership and highlight leaders that the team has identified for initial engagement.

Visual representations of leadership structures can capture entire communities or specific sectors of communities. These can include information on the following:

- Structures and hierarchies, including multiple or overlapping structures (e.g., camp leadership, religious leadership, traditional leadership, influential networks)
- Relationships between leaders and leadership structures
- Areas of influence (e.g., specific religious groups, clans, or community blocks)
- Roles of leaders related to GBV (e.g., decisions about services, resolving disputes, marriage and divorce settlements, etc.)



Sample mapping of community leaders

Key Discussion Points/Additional Facilitation Notes

- Community mapping should be based on consensus of the team. If team members disagree about the roles or levels of influence of different leaders, allow space to exchange information and perspectives and agree to collect additional information.
- At the end of this session, teams should produce the following outputs:
 - A plan for collecting additional information on leadership structures and leaders (including women leaders)
 - A preliminary mapping of community leadership (if sufficient information is known)

Setting Priorities

Summary

GBV teams apply an understanding of program priorities and leadership structures to consider engaging community leaders in key areas of programming. Teams will consider needs, potential, and risks of different interventions and vote on priorities for engagement.

Learning Objectives

Participants will:

- Apply Toolkit guidance and a decision-making tool for program planning
- Weigh risks and benefits, as well as other considerations, of program interventions

Materials and Preparation

1. Flipchart paper and markers
2. Stickers / sticky notes (if available)
3. Toolkit Guidance available for review. Participants will reference the *Building a Foundation for Engagement* chapter (with printed copies available for distribution if possible). Participants can also browse through chapters on Key Areas of Engagement to begin setting priorities.
4. Photocopy for distribution, or have available to review Decision-Making Tool: *Identifying Key Areas of Engagement* in Building a Foundation Tools and Resources.
5. Flipchart notes from **Stocktaking: Current GBV Programming and Leader Engagement** training module.

Time

2 hours

Procedure

Step 1: Small group exercise: Exploring potential across key areas of engagement (1 hour)

1. Briefly review your program's goals, as identified during the *Stocktaking: Current GBV Programming and Leader Engagement* training module. What problems is your program trying to address?
2. Divide the team into four groups, assigning each a key area of engagement. (You can eliminate a key area of engagement if the program will not consider any interventions in that area.)
3. Share relevant flipcharts from the *Stocktaking: Current GBV Programming and Leader Engagement* training module with the groups. These notes can help to remind participants about current activities related to key areas of engagement.
4. Explain that each group will consider the potential for (further) engagement of community leaders for their respective area of engagement. After discussion, groups will capture their ideas for engagement on flip chart and present these in plenary.

- 5.** Ask teams to:
- f.** Review Step 4 in the *Building a Foundation for Engagement* chapter, answering questions in the table relevant to assigned key areas of engagement
 - g.** Review the *Decision-Making Tool: Identifying Key Areas of Engagement*
 - h.** Browse through Toolkit chapters on Key Areas of Engagement, if possible, for ideas for engagement. Consider potential ideas for engagement, with consideration of:
 - Contextual needs and priorities
 - Risks and benefits
 - Interests of GBV survivors, and of women and girls
 - Team capacity and resources
 - i.** Agree on priority actions to take with community leaders, within respective area of engagement, and record these on flipchart.

Step 2: Report back and voting (1 hour)

- 1.** Invite a volunteer from each group to briefly present their major points of discussion, as well as priorities identified. Allow for questions.
- 2.** Explain that all participants will have a chance to vote on priorities. Hand out six stickers/sticky notes to each participant. Invite participants to visit each flipchart and add stickers/ sticky notes (or stars with colored markers) on flipcharts, next to interventions that they would like to prioritize. Participants do not need to distribute their votes across flip charts (or areas of engagement) – they can use all five votes for one key area of engagement if this reflects their perspective on priorities.
- 3.** Reflect on the results of voting together. Where did the team find consensus? Which key area/s of engagement? Which idea/s for engagement?

Key Discussion Points/Additional Facilitation Notes

- Check in with groups to be sure they are weighing safety and ethical risks as they consider potential areas of engagement.
- This exercise should help teams begin to set priorities for engaging community leaders, with more detailed planning to follow.

Identifying Leaders for Engagement

Summary

Reflecting on community leadership structures and program priorities, participants will consider which leaders might be engaged. The team will develop criteria to guide the identification of leaders for key areas of engagement.

Learning Objectives

Participants will:

- Consider criteria for engaging community leaders in different areas of GBV prevention and response
- Identify leaders (or types of leaders) who might support program goals

Materials and Preparation

1. Flipchart paper and markers
2. Stickers/sticky notes (if available)
3. Toolkit Guidance available for review (with printed copies of the *Building a Foundation for Engagement* chapter available for distribution if possible)
4. Flipchart notes from **Mapping Community Leadership** and **Setting Priorities** training modules.

Time

2 hours, 15 minutes

Procedure

Step 1: Brainstorming: Which leaders to engage? (30 minutes)

Review Step 5 in the *Building a Foundation for Engagement* chapter. Refer to team discussions and decisions reached during the *Mapping Community Leadership* and *Setting Priorities* training modules. Based on the team's understanding of leadership and initial priorities for engagement, discuss which community leaders (formal/informal) the program might engage. Take notes on flipchart while the team considers questions outlined under Step 5, including:

- Which leaders might have mutual interests or areas of overlapping concern with the GBV program?
- Who are thought to be the most trusted or respected leaders and why?
- Have women and girls expressed concerns about any specific leaders?
- How do factors such as faith, ethnicity, or clan affect leaders' spheres of influence related to key areas of engagement?

Step 2: Developing criteria for community leader engagement (45 minutes)

1. Divide participants into small groups. If the team has identified any priorities for engagement of community leaders, assign specific areas of engagement or ideas for engagement to each group.

2. Ask each group to develop criteria for community leader engagement relative to their area of focus. Groups should discuss and then present agreed-upon criteria on flip chart for presentation to plenary.
3. Ask group to identify specific criteria, considering (but not limited to) the following:
 - d. Personal qualities and characteristics
 - e. Authority and influence over relevant matters
 - f. Skills
 - g. Knowledge
 - h. Values, attitudes, and beliefs

Step 3: Plenary discussion: Agreeing on criteria and identifying leaders (1 hour)

1. Invite a volunteer from each group to briefly present their major points of discussion, as well as criteria identified. Allow for questions.
2. Reflect on common criteria, as well as differences, across groups. Will it be useful for the program to have different criteria for different areas/activities of engagement? If clear criteria emerge, record the criteria on flipchart for team agreement. If more time is required, the facilitator or a volunteer can agree to draw from group notes and prepare criteria for team review before finalization.
3. Based on identified criteria, can participants begin to identify specific leaders (or types of leaders) for engagement in different areas/activities? Record in flipchart notes for the session on *Team Planning for Engagement*.

Key Discussion Points/Additional Facilitation Notes

- This session is best facilitated after the team has collected a good amount of information on community leadership and completed a mapping. It will also be useful for teams to have at least preliminary priorities identified for community leader engagement.
- Community leader criteria should not be limiting, particularly where programs will need to engage with a range of leaders for program planning and access. Criteria should rather serve to guide teams in identifying leaders who will be best placed to support key areas of engagement.

Team Planning for Engagement

Summary

GBV teams will draw from the Toolkit guidance and decisions and previous training modules to set plans for community leader engagement.

Learning Objectives

Participants will:

- Gain practice in activity planning
- Develop a purposeful and organized action plan for engaging community leaders

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review. Participants will reference the *Building a Foundation for Engagement* chapter (with printed copies available for distribution if possible). Participants should also have access to Key Areas of Engagement chapters for action planning.
3. Photocopy for distribution, or have available to review *Activity Planning Tool* in Building a Foundation Tools and Resources
4. Flipchart notes from **Setting Priorities** and **Identifying Leaders for Engagement** training modules.

Time

2 hours

Procedure

Step 1: Review priorities (20 minutes)

Review Step 5 in the *Building a Foundation for Engagement* chapter. Review major points of discussion and decisions reached during the *Setting Priorities* and *Identifying Leaders for Engagement* training modules.

Step 2: Small group work: Activity planning (1 hour)

1. Divide participants into small groups, as appropriate for program planning. Consider breaking into groups that will focus on key areas of engagement, and/or groups with staff who share common roles (e.g., GBV caseworkers, community mobilizers).
2. Distribute copies of the *Activity Planning Tool* and make relevant chapters of *Key Areas of Engagement* available for group planning.
3. Ask groups to use the *Activity Planning Tool* to begin planning community leader engagement.

Step 3: Plenary discussion: Activity planning (40 minutes)

Bring groups back together and review activity plans. Discuss next steps to unify the plan, mobilize required resources, and build activities into program workplans. Agree on plans for follow up, within regular reporting lines and meeting schedules, and/or through dedicated monitoring of community leader engagement.

Key Discussion Points/Additional Facilitation Notes

- Methods for team planning can be adapted to fit existing program planning procedures.
- Teams that incorporate limited community leader engagement into regular activities may not require extensive activity planning; teams that plan multiple, new interventions will require additional time to carefully plan activities.

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?

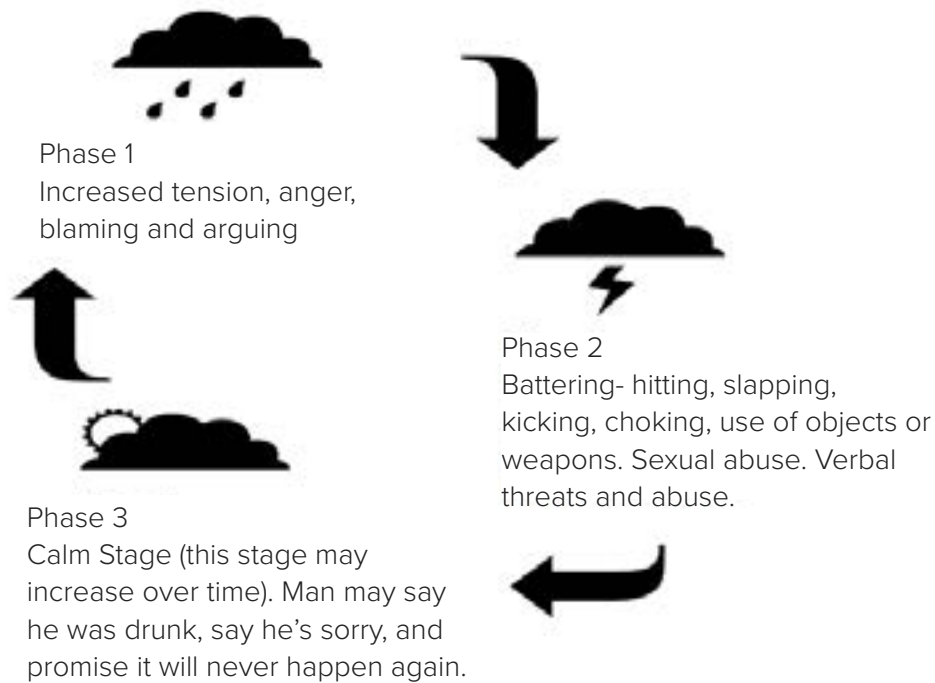
Step 2: Defining intimate partner violence

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.

GBV Risk Mitigation Training



Risk Mitigation

Who is the Training for?

GBV Risk Mitigation modules in this manual are designed for all community leaders and can also be relevant for GBV teams. The training modules focus on identifying community-level GBV risks and setting plans to address risks.

How Does the Training Link to the Toolkit Guidance?

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

Time and Resources Required

The training content can be covered in one and a half days, with time allowed for breaks and lunch during the full day. Training modules build on each other, so GBV programs are recommended to organize sessions 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 Risk Mitigation: 1 ½ days

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

GBV Risk Mitigation Outline

Intended Audience



GBV Teams



All Community Leaders

Module	Overview of Module	Estimated Time
<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
<u>Day in the Life of a Woman or Girl</u>	This exercise invites participants to imagine the daily reality of a woman or girl in their community and sets the tone for subsequent discussions. *Find module under GBV Response	30 minutes
Identifying Risks	Participants engage in a participatory exercise to identify areas of risk for women and girls and consider who might face heightened risks of GBV.	2 hours
Protection from Sexual Exploitation and Abuse	Participants learn about rights and responsibilities related to SEA and receive information on coordination, complaints, and reporting mechanisms.	1 hour, 15 minutes
Setting Plans to Reduce Risks	Participants identify risk mitigation strategies that may be reinforced, as well as new opportunities, and establish priorities and brief action plans to increase safety for women and girls in their community.	3 hours

Identifying Risks

Summary

Participants engage in a participatory exercise to identify areas of risk for women and girls and consider who might face heightened risks of GBV.

Learning Objectives

Participants and facilitators will:

- Identify safety and protection risks for women and girls in the community
- Consider groups of women and girls who may face increased risks

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. Select and adapt tool from *GBV Risk Mitigation Tools and Resources* to use during facilitation (and print tool for distribution, if training is focused on GBV staff):
 - a. *Safety Audit Checklist*
 - b. *Community Mapping Tool*
 - c. *Discussion Guide: GBV Risks*

Time

2 hours

Procedure

Step 1: Define GBV risks (10 minutes)

Drawing reference to review of *GBV Core Concepts*, remind participants that gender inequality and related power imbalances are the root cause of GBV, while risks of GBV may increase where additional factors are present (risk factors are represented by rain in the GBV tree). While the root cause of GBV is the same everywhere in the world, risk factors will vary. Identifying and addressing risks within a community can reduce the likelihood that GBV will occur. Addressing risks also allows women and girls to live more freely, with less fear.

Step 2: Identify risks through participatory exercise (1 hour, 30 minutes)

Use a tool from *GBV Risk Mitigation Tools and Resources* to lead participants in an exercise to identify risks. Ask and remind participants to focus on safety and protection risks for women and girls, including consideration of specific groups of women and girls, such as adolescent girls and women and girls with disabilities.

- a.** Safety Audit. Adapt the *Safety Audit Checklist* and consider one of the following approaches to complete the audit with training participants:
- Move through the community to collect information through observation (allow more time for this option).
 - Break into small groups with responsibility for different elements of the audit.
 - Facilitate plenary discussion, guided by the audit checklist.
- b.** Community Mapping. Refer to the *Community Mapping Tool* and use one of the following approaches to map risks:
- Group drawing: Present a map of the community, or begin with a blank paper and facilitate a discussion around areas of risk.
 - Representing space: Using an open space, participants can physically mark areas of risk during discussion.
 - Visiting space: Invite participants for a transect walk through the community to identify risks (allow more time for this option).
- c.** Group Discussion: Use the *Discussion Guide: GBV Risks* to facilitate a discussion on risks.

Step 3: Summarize findings (20 minutes)

Engage participants to highlight key findings from the participatory exercise. Record notes on flipchart. Probe to understand specific risks. Probe to understand specific or heightened risks for women and girls with intersecting vulnerabilities related to age, disability, ethnic or religious minority, etc.

Key Discussion Points/Additional Facilitation Notes

- Consider the group dynamics, including power dynamics amongst participants, to select and adapt an exercise, and to tailor discussion around GBV risks.
- Risks of GBV can include factors that predate an emergency, factors related to the emergency (conflict, disaster, displacement), and factors related to the humanitarian environment (overcrowding, poorly established services, sexual exploitation and abuse, etc.).
- Adolescent girls face intersecting vulnerabilities related to age and sex and consequently face heightened risks of GBV in emergency contexts. Women and girls with disabilities also face increased risks of GBV. Additional at-risk groups may vary by context.
- Prepare to refocus conversation on specific risks that women and girls face, as participants may steer discussion toward general risks, or risks for men and boys.

Protection from Sexual Exploitation and Abuse

Summary

Participants learn about rights and responsibilities related to SEA and receive information on coordination, complaints, and reporting mechanisms.

Learning Objectives

Participants will:

- Define SEA as a specific GBV risk in humanitarian settings
- Understand their rights related to protection from SEA
- Identify opportunities to report allegations and seek support for survivors of SEA

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. *Discussion Guide: Protection from Sexual Abuse and Exploitation from GBV Risk Mitigation Tools and Resources* available for facilitator
4. Printed copies of PSEA policies, referral pathways, or other relevant documents, for distribution

Time

1 hour, 15 minutes

Procedure

Step 1: Defining SEA (15 minutes)

Share information on sexual exploitation and abuse (SEA):

- SEA is a form of GBV that is rooted in unequal power relationships.
- SEA is committed by people in positions of power. These people might include teachers, police, or others, but in humanitarian contexts the term is commonly used to refer to acts of GBV perpetrated by Peacekeepers or humanitarian aid workers.
- Risks of SEA are directly associated with humanitarian action—the people who are meant to help bring this risk to communities they serve.
- SEA causes great harm to individuals and communities. In addition to consequences of sexual violence reviewed in Core Concepts, consequences of SEA can include:
 - Survivors (and children of survivors) are sometimes ostracized by communities
 - SEA prevents people from receiving services they need
 - SEA damages trust between communities and aid workers

Step 2: Scenario and discussion (30 minutes)

Remind participants about the importance of not sharing stories that identify individuals in the community. Explain that you would like to use hypothetical scenarios to discuss risks of SEA. Share a brief, hypothetical scenario, adapted for your context. Facilitate a discussion about risks of SEA within the community, how survivors of SEA might be treated, and actions that might reduce risks. Consider adapting the sample scenario and questions below.

A widowed woman is the only caretaker for her two young children and her aging father. While in line to register for food distribution, an NGO worker said he will give her an extra kilo of wheat each month if she visits him in the evenings to “keep him company.”

- Do you think such a situation happens in this community?
- Has the NGO worker harmed this woman? Has he helped her? What do you think should happen to him?
- What could be done to reduce the risk of such exploitation?
- How would community members react if they knew what was happening to the woman?
- Do you think the woman might seek help from anyone? Who?
- How would you respond if the woman confided in you about this situation?

Step 3: Review responsibilities, rights, and reporting options (30 minutes)

1. Explain that humanitarian workers (including staff and volunteers) and Peacekeepers are prohibited from perpetrating SEA. We have shared rules for our conduct that we must uphold, during work hours and time off, including:
 - No sexual relations with anyone under 18 (regardless of age of consent or common practice in country).
 - No exchanging money, goods, services, or employment for sex (regardless of laws and practice in country).
 - No sexual relationships with beneficiaries of assistance (because of the power imbalance and potential for exploitation).
 - Responsibility to report any suspicion of SEA by any aid worker (regardless of organization, and without collecting proof).
2. Review the rights of people affected by emergencies to be protected from SEA, including:
 - Assistance from humanitarian agencies is always free. Any requests for payment or exchange is wrong and can be reported.
 - Someone who has been exploited by a humanitarian is never at fault. Every person has the right to assistance and the right to be safe from harm and abuse.
 - Survivors of SEA can seek GBV response services and other support. GBV caseworkers are trained to support survivors of SEA.
 - Any suspicion of SEA can be reported for investigation.

- 3.** Share information on community-based services, coordination and complaints mechanisms, and reporting options.
- Distribute copies of PSEA flyers, referral pathways, contact information for PSEA focal points, and/or other relevant resources.
 - Review options for reporting any suspicions of SEA.
 - Clarify that response to survivors of SEA should be survivor centered. Survivors can be referred for services, based on their wishes and consent.

Key Discussion Points/Additional Facilitation Notes

- When training GBV teams, share organizational policies related to PSEA and be sure that staff are familiar with reporting requirements and procedures.
- Prepare to address questions or misunderstandings between SEA and *sexual harassment*. Within humanitarian organizations, sexual harassment is largely defined as relating to allegations between staff members within an organization. SEA occurs in relations between humanitarian workers and beneficiaries.

Setting Plans to Reduce Risks

Summary

Participants identify risk mitigation strategies that may be reinforced, as well as new opportunities, and establish priorities and brief action plans to increase safety for women and girls in their community.

Learning Objectives

Participants will:

- Consider specific risk mitigation strategies
- Set priorities and plans for their community

Materials and Preparation

1. Flipchart paper and markers
2. Tape
3. Review *Ideas for Engagement* in the GBV Risk Mitigation chapter of the Toolkit ahead of discussion.
4. Consider printing/photocopying **Handout: Risk Mitigation Action Planning**.
5. Prepare flipcharts ahead of time for groups.
6. Stars, or other stickers (can use colored markers if stickers are not available)

Time

3 hours

Procedure

Step 1: Taking stock of risk mitigation strategies (1 hour, 15 minutes)

1. Break participants into small groups (group members should come from common communities). Ask groups to identify a notetaker and a representative to answer questions.
2. Distribute prepared flipcharts, with headings illustrated in table.

Identifying and raising awareness of GBV risks

Current Strategies	Opportunities
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Addressing GBV risks

Current Strategies	Opportunities
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3. Explain that groups will record ideas on current strategies to 1. Identify and raise awareness of GBV risks in their community, and 2. Address GBV risks.
4. Ask groups to first reflect on strategies to identify and raise awareness of GBV risks. Provide examples for groups to consider and then allow time for groups to discuss and record ideas on flipchart:
 - Are there people (programs, volunteers, women’s associations, activists, etc.) within the community who work to raise awareness of GBV risks?
 - Are safety audits conducted?
 - Do women lead analyses of risks?
 - Is information on GBV risks shared somehow (discussion groups, radio, posters, etc.)
 - Are there risks that are not widely understood, or gaps in information sharing?
5. Ask groups to next reflect on strategies to address GBV risks. Provide examples for groups to consider and then allow time for groups to discuss and record ideas on flipchart:
 - Are there people or groups within the community who are actively working to reduce protection and safety risks for women and girls? If so, what are they doing?
 - Are women and/or girls organizing themselves to mitigate any specific risks (such as organized firewood collection, or information networks)?
 - Is there a need for groups to organize and address protection risks?
 - Does the community have preparedness plans to communicate and protect vulnerable people in the event of a new emergency or displacement?
 - Are dignity kits distributed to women and adolescent girls? If so, who receives these and is the initiative sufficient?
 - Are women and girls involved with community decision-making?
 - Are women’s and girls’ needs prioritized in the planning of humanitarian services?
 - Does the community have mechanisms for protection from sexual exploitation and abuse by humanitarian workers?
6. 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 findings and ideas. Invite questions. Ask group representatives to address any questions from participants.

Step 2: Setting priorities (45 minutes)

1. Ask participants to return to their small groups and distribute a fresh flipchart paper to each group.
2. Ask groups to reflect on the previous exercise—taking stock of current risk mitigation strategies as well as opportunities and new ideas that emerged from their own group and others. With these ideas in mind, ask groups to prepare a list of actions that they would prioritize for their community to better identify, raise awareness, and address GBV risks. Actions might relate to continuing or reinforcing current efforts, or initiating new strategies.
3. Allow time for groups to create a list of priorities and then ask groups to display their flipcharts on stands, or by taping them to a wall.

4. Distribute three stickers to each participant. Ask participants to review all groups' lists of priorities and then "vote" by placing a sticker next to **three** actions- across all flipcharts- that they would rank with highest priority. (If stickers are not available participants can draw stars next to priority actions.)
5. After all participants have voted, reflect as a group on actions that emerge as common priorities. Explain that in the next exercise, participants will have a chance to consider how these actions might be realized through planning.

Step 3: Action planning (1 hour)

Based on the outcomes of **Step 2**, consider how participants might be divided into groups for action planning. Groups members should be focused on a common community, but they might be divided by section of the community, or they might be assigned a specific category or actions, or specific roles/ responsibilities (such as focusing on actions that a protection task force would take). Action planning can also be done in plenary.

Ask participants to develop plans in line with *Handout: Risk Mitigation Action Planning*. Depending on the participant group, you can choose to limit planning to actions participants can contribute to themselves, or actions they would assign to others. If participants are assigning actions to others, they should also consider how those people/groups might be persuaded to take action.

Key Discussion Points/Additional Facilitation Notes

- Challenge participants to reinforce existing, positive strategies to mitigate risks of GBV. Focus not only on formal strategies led by humanitarian actors, but informal networks and initiatives led by women and girls within the community.
- Emphasize that risk mitigation strategies should be women-led and informed by the experiences of diverse groups of women and girls. Women and girls will face different levels and types of risks, depending on a range of factors.
- Prepare for participants to raise potentially harmful ideas as strategies to reduce risks (for example, keeping girls from school, limiting women's movement, or forcing girls into marriage). 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.
- Acknowledge that problems may be great, and many risks of GBV may lie outside of committed community members' control. Ask participants to focus on what can be done. What actions can contribute to a safer environment for women and girls?

Handout: Risk Mitigation Action Planning

GBV Risk	Action	Location	Timeframe	Participants	Lead

Transformative Change Training



Transformative Change

Who is the Training for?

Some Transformative Change training modules are only indicated for GBV teams, while others are relevant for both GBV teams and community leaders. The Transformative Change modules explore root causes of GBV and consider community-level changes that could prevent GBV.

How Does the Training Link to the Toolkit Guidance?

The content covered in Transformative Change training modules is most closely linked to the *Transformative Change* chapter of **Toolkit Guidance**. Training modules also draw from Tools and Resources within the *Transformative Change* chapter.

Time and Resources Required













The training content for GBV teams can be covered in two full days, with time allowed for breaks and lunch. GBV teams may require further training, depending on a program's selected approach for transformative change programming. Established transformative change programs include training plans for key staff. Remember that all participants should first complete GBV Core Concepts training.

Training schedules to consider for GBV Teams related to Transformative Change:

- Core Concepts (foundational training): 2 days
- Transformative Change (full content for GBV teams): 2 days
- Transformative Change (community leaders): 1 ½ days

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

Transformative Change Outline

Module	Intended Audience	Overview of Module	Estimated Time
<u>Review of GBV Core Concepts</u>	 GBV Teams  All Community Leaders	<p>Participants briefly review GBV Core Concepts, as covered during two-day GBV Core Concepts training.</p> <p>*Find module under GBV Core Concepts</p>	1 hour, 30 minutes
<u>Life of a Woman or Girl</u>	 GBV Teams  All Community Leaders	<p>This exercise invites participants to imagine the daily reality of a woman or girl in their community and sets the tone for subsequent discussions.</p> <p>*Find module under GBV Response</p>	30 minutes
Social Behavior Change Programming	 GBV Teams	<p>This session provides an overview for GBV teams of concepts and theories that relate to social behavior change programming for GBV prevention.</p>	1 hour, 30 minutes
SBC Programming Approaches	 GBV Teams	<p>GBV teams will review emerging best practices and consider approaches for social behavior change programming in their community. Teams will also review tools related to social behavior change communication.</p>	2 hours, 15 minutes
Root Cause Analysis	 GBV Teams  All Community Leaders	<p>Through an interactive exercise, participants identify systems, norms, attitudes, and behaviors that might be transformed to prevent GBV in their community.</p>	2 hours
Setting a Vision for Change	 GBV Teams  All Community Leaders	<p>Participants visualize a safer and more equitable community and consider changes that could realize this vision.</p>	2 hours, 30 minutes
Prevention Action Planning	 GBV Teams  All Community Leaders	<p>Participants establish plans to support existing initiatives and take new action to prevent GBV in their community.</p>	3 hours

Social Behavior Change Programming

Summary

This session provides an overview for GBV teams of concepts and theories that relate to social behavior change programming for GBV prevention.

Learning Objectives

Participants will:

- Have a basic understanding of theories related to behavior change and social norms
- Connect individual behaviors with processes of influencing and facilitating social change to prevent GBV

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review. Participants will reference the *Transformative Change* chapter (with printed copies available for distribution if possible).
3. *Resources for Learning about GBV Prevention Theories and Approaches* from Transformative Change Tools and Resources available for facilitator and printed for distribution.

Time

1 hour, 30 minutes

Procedure

Step 1: Review key concepts (30 minutes)

1. Together, read *Key Concepts* from the Transformative Change chapter of Toolkit Guidance, including the *Role of community leaders in transformative change to prevent GBV* and *Considerations for GBV teams preparing to engage community leaders in transformative change to prevent GBV*.
2. Discuss concepts and share information:
 - Transformative programming is often focused on changing beliefs, behaviors, and social expectations
 - Evidence demonstrates that this can happen even within relatively short-term programs

Step 2: Review theories and approaches (30 minutes)

1. Review the first two pages of *Resources for Learning about GBV Prevention Theories and Approaches* in Transformative Change Tools and Resources
2. Lead discussion:
 - Recall the ecological model from GBV Core Concepts. The ecological model explains levels of influence on behavior.
 - Multiple factors determine whether individuals adopt new behaviors

- The transtheoretical model, or “stages of change,” theory is commonly used in GBV programming. These stages can be thought of as stairsteps toward positive change, though people may spend more time on some steps than others, and they don’t always move steadily upward. It is common for people to take temporary steps back, or “relapse,” as they adopt new behaviors.

Step 3: Activity: Crossing arms (10 minutes)

1. Ask participants to stand up and cross their arms over their chests.
2. Ask participants to put their arms down and then cross their arms again—but this time in a different way.
3. Allow a moment for participants to consider a different way of crossing their arms and find a new position.
4. Briefly discuss:
 - How did it feel when you were asked to cross your arms in a new way? Had you considered that there might be multiple ways to cross arms?
 - Did you have to think about how you usually cross your arms before you could identify a new way of crossing?
 - Did the new way feel comfortable? Do you think you will cross arms this way from now on?
 - What would be required for you to always cross arms in the new way from now on?

Step 4: Present information on social norms (20 minutes)

1. Return to *Resources for Learning about GBV Prevention Theories and Approaches* and review from heading: *Social Norms*.
2. Discuss main points:
 - Social norms are shared beliefs about others’ ideas and behaviors
 - Social norms exist within “reference groups” of people who share a common cultural identity. There may be diverse reference groups within communities, and community members may be connected to reference groups, or cultural influences, outside of their communities. People displaced by emergencies, for example, may be more influenced by people in communities they fled than by those in host communities.
 - Behaviors that relate to perpetration—or prevention—of GBV are maintained, in part, through the approval or disapproval of reference groups.

Key Discussion Points/Additional Facilitation Notes

- Awareness raising is an important component of GBV prevention, but not sufficient alone. Social behavior change programming goes beyond raising awareness to work toward changes in individual behaviors and shifts in social norms.
- Transformative change programming also relates to transforming systems of power, including laws and policies. This training is focused on social behavior change programming, which is more common at the community level, and which is relevant to any efforts to influence or transform systems of community leadership.
- It should not be important for most GBV staff to master terms or specific theories, but GBV programs interested in preventing GBV should be rooted in some analysis of how to influence and sustain change.
- GBV staff should regularly reflect on their own experiences, beliefs, and behaviors.

Social Behavior Change: Programming Approaches

Summary

GBV teams will review emerging best practices and consider approaches for social behavior change programming in their community. Teams will also review tools related to social behavior change communication.

Learning Objectives

Participants will:

- Understand recommended approaches for social behavior change programming
- Identify appropriate approaches and tools for their program

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for review (with printed copies of the *Transformative Change* chapter available for distribution if possible)
3. Select and print copies of tools from *Transformative Change Tools and Resources* to share between participants:
 - a. *Steps for Developing Key Messages*
 - b. *Checklist: Communication Materials*
 - c. *Tip Sheet: Pretesting Communication*
 - d. *Tip Sheet: Involving Community Leaders in Events*
 - e. *Discussion Guide: Equitable Norms, Attitudes, and Behaviors*

Time

2 hours, 15 minutes

Procedure

Step 1: Review approaches for delivering social behavior change programs (40 minutes)

1. Introduce participants to Approaches from the *Transformative Change* chapter of Toolkit Guidance.
2. Highlight three major approaches for a GBV program, and read options in detail if the team is weighing a programming decision:
 - a. Using an established transformative change program
 - b. Creating a new transformative change program
 - c. Designing limited interventions aimed at transformative change

3. Together, read and discuss approaches related to designing limited interventions aimed at transformative change:
 - a. Building awareness, knowledge, and skills
 - b. Fostering gender equitable, respectful, and non-violent social norms, attitudes, and behaviors
 - c. Promoting women and girls' empowerment

Step 2: Present and discuss evidence and good practice (40 minutes)

1. Explain that there is growing and encouraging evidence for GBV prevention programming in humanitarian settings.
 - Partners for Prevention, a UN-led initiative in Asia Pacific, led a large-scale study of factors contributing to men's perpetration of GBV. The study found high incidence of reported perpetration, and the most important factors identified related to gender norms and relationship practices. Men and boys who hold more equitable views toward women and girls are less likely to perpetrate GBV.¹
 - The What Works to prevent violence against women and girls in conflict and humanitarian settings initiative has documented significant reductions in violence (around 50%) and multiple secondary effects. Promising approaches included programs addressing social norms, school-based interventions with community outreach, and gender transformative economic empowerment programs.²
 - An impact study of Raising Voices' SASA! program found reduced experience of physical IPV in the past year (52%)³
2. Highlight and discuss features of successful programs
 - Led by, and accountable to, women and girls
 - Rooted in theories of social norms and behavior change
 - Rooted in a local analysis of the problem
 - Participatory
 - Carefully monitored
 - Engaging whole communities
 - Engagement of men and boys is often a particular focus of GBV prevention programming, but this focusing too narrowly on men and boys can be problematic. A 'whole community' approach is preferred.
 - GBV programming should be led by women and girls and informed by their experiences
 - Male engagement initiatives should be accountable to women and girls and should not eclipse a focus on women and girls.

1 Partners for Prevention (2013) *Why Do Some Men Use Violence Against Women and How Can We Prevent It? Quantitative Findings from the UN Multi-country Study on Men and Violence in Asia and the Pacific*. Available at: [Partners4Prevention](#)

2 UK Department for International Development (2020) *What Works to Prevent VAWG: Research and Innovation Programme - Final Performance Evaluation*. Available at: [What Works - Home](#)

3 Raising Voices, LSHTM and CEDOVIP. 2015. *Is Violence Against Women Preventable? Findings from the SASA! Study summarized for general audiences*. Kampala, Uganda: Raising Voices. Available at: <http://raisingvoices.org/resources/>

3. Highlight and discuss recommended approaches for social behavior change communication, as part of social behavior change programming.
 - Reinforce existing efforts, particularly efforts led by women and girls in the community
 - Identify key audiences, including community leaders
 - Apply a benefits-based approach, emphasizing desired behaviors and the benefits of nonviolence and healthy relationships
 - Demonstrate respect and an interest in learning
 - Consider different channels of communication
 - Develop and pretest key messages
 - Carefully develop and pretest all communication materials

Step 3: Small group exercise: Review of tools (30 minutes)

1. Divide participants into small groups. Ask groups to identify a notetaker and someone to report back.
2. Distribute select tools, with each group focusing on a single tool from *Transformative Change Tools and Resources* to share between participants:
 - a. *Steps for Developing Key Messages*
 - b. *Checklist: Communication Materials*
 - c. *Tip Sheet: Pretesting Communication*
 - d. *Tip Sheet: Involving Community Leaders in Events*
 - e. *Discussion Guide: Equitable Norms, Attitudes, and Behaviors*
3. Ask groups to review and discuss their tool, with guiding questions below. Following the exercise, a group representative should be prepared to briefly “teach” other participants how to use the tool.
 - a. How might your program use this tool in work with community leaders?
 - b. Would you adapt the tool for your community and program?
 - c. Would you need additional tools, guidance, or training to use this tool?

Step 4: Plenary discussion on tools (45 minutes)

Ask representatives from each group to “teach” other participants how to use their tool, including information on how the tool might be adapted and what additional support might be required to use the tool effectively.

Invite questions from participants and identify the most useful tools for your program and community.

Key Discussion Points/Additional Facilitation Notes

- Evidence and best practices are still emerging for GBV prevention programming. The UK government's What Works initiative has helped to capture lessons on effective programming. Emerging evidence is encouraging and indicates that communities can experience important changes within relatively short timeframes.
- GBV programs interested in implementing social behavior change strategies can consider established programs. These programs have been tested and include guidance, training materials, and criteria for implementing strategies in humanitarian settings.
- GBV programs that are only able to implement smaller-scale transformative change interventions can still contribute to GBV prevention, particularly if programs are able to work in partnership to reinforce local efforts.
- GBV programs can look toward transformative changes even during early stages of a humanitarian response and consider smaller-scale activities that could be reinforced and built upon with increased participation, stability, and resources.

Root Cause Analysis

Summary

Through an interactive exercise, participants identify systems, norms, attitudes, and behaviors that might be transformed to prevent GBV in their community.

Learning Objectives

Participants will:

- Feel encouraged to share their ideas and perspectives
- Identify root causes and factors that contribute to GBV in their community

Materials and Preparation

1. Flipchart paper and markers
2. Toolkit Guidance available for facilitator review
3. Have available to review or distribute as an example (after exercise) *Sample: Root Cause Analysis* in *Transformative Change Tools and Resources*
4. Flipchart notes from **Review of GBV Core Concepts** training module.

Time

2 hours

Procedure

Step 1: Group exercise: Root cause analysis (1 hour, 30 minutes)

Lead participants through a root cause analysis. Find information on conducting a root cause analysis in Ideas for Engagement in the Transformative Change chapter of Toolkit Guidance, along with a *Sample: Root Cause Analysis* in *Transformative Change Tools and Resources*.

1. Begin the analysis with a question. Record ideas on flipchart at the top of flipchart paper. Consider the following options for opening questions:
 - a. Simply ask, “Why does GBV (or violence against women and girls) happen in this community?”
 - b. Ask participants to name common forms of GBV in the community, then start with one form and ask why it occurs in the community.
 - c. Select a form of GBV based on your knowledge of the community and ask why it occurs.
2. Ask “why” again and record responses below initial responses. Continue this process until no more “whys” can be asked.
3. Consider breaking participants into small groups to conduct parallel analyses of different forms of GBV, or to tackle different threads of the larger group discussion (for example, if participants identify factors related to law, religion, and the emergency), or if the large group dynamic is not allowing for full participation.

Step 2: Reflections to take forward (30 minutes*)

**If participants break into small groups during Step 1, break Step 1 early to allow more time for reflection in plenary.*

1. Invite participants to quietly reflect on notes from the exercise.
2. Ask questions about the process, for example:
 - What surprised you?
 - What made you uncomfortable?
 - What did you learn?
3. Ask questions about results of the exercise:
 - Did participants agree on any common root causes?
 - Do the findings align with the root causes in the GBV tree, as discussed during *GBV Core Concepts training* and review?
 - Did root causes relate to social norms? (Explain that social norms are shared beliefs about others' ideas and behaviors)
 - What factors could communities- and community leaders- most readily tackle for change?
 - What changes are required to end all GBV in this community?

Key Discussion Points/Additional Facilitation Notes

- Allow participants to lead discussion without driving them toward desired answers. Process is key in this exercise.
- The exercise can serve as an icebreaker and set a good tone for participant-led learning. Show participants you are interested in their perspectives.
- Prepare for participants to raise potentially harmful ideas as causes of GBV (for example, women's immorality, or the beliefs of a minority population). Do not judge or shame, but also be sure to address harmful comments. Acknowledge that others likely share the idea and return to the analysis to ask why this belief is common. See **Handout: Facilitator Strategies for Managing Challenges** in *Foundations: Key Approaches* for more detailed strategies for addressing harmful comments.

Setting a Vision for Change

Summary

Participants visualize a safer and more equitable community and consider changes that could realize this vision.

Learning Objectives

Participants will:

- Reflect on the myriad benefits of preventing GBV
- Identify changes that would positively impact the community

Materials and Preparation

1. Flipchart paper and colored markers to share with small groups
2. Tape
3. Optional: additional art supplies, such as paint, brushes, construction paper, scissors, magazines
4. Stars, or other stickers (can use colored markers if stickers are not available)
5. Preserve flipcharts and participant work if the training module is divided over two days.

Time

2 hours, 30 minutes

Procedure

Step 1: Group exercise: Illustrating a vision (1 hour)

1. Divide participants into small groups. Assign each group an area of focus, based on discussions during previous training sessions, including the **Root Cause Analysis**. Areas of focus can relate to environments, community structures, relationships, age range, or other physical or figurative space where discrimination, and forms of GBV occur. Examples include:
 - School
 - Family home
 - Marriage
 - Neighborhood
 - Emergency shelter
 - Girlhood
 - Market
 - Community leadership
2. Explain that each group will present **positive visions** of their areas of focus through an illustration, collage, story board, poem, or other creative expression.
3. Ask groups to work collectively on their vision and select a representative to share a summary of the vision after groupwork.

4. Distribute paper and markers and any other art supplies.
5. Circulate as groups discuss their ideas. Encourage participants to stay focused on positive visions, rather than problems. Ask probing questions, such as:
 - What would this vision look like if everyone were: Equal? Healthy? Accountable for their actions? Safe?
 - What would this vision look like if women or girls shared the same opportunities as men or boys? If men shared the same responsibilities as women? If they made decisions together?
 - How do people (women, girls, boys, and men) in this vision feel?

Step 2: Share visions (30 minutes)

1. Display visions, using flipchart stands or by taping to the wall.
2. Invite participants to take a “gallery walk” and observe other groups’ visions.
3. Invite group representatives to share features of their vision and answer questions from participants.
4. Ask questions to draw out the benefits of equitable and nonviolent communities, for example:
 - a. What are some key differences between this vision and similar environments in our community?
 - b. How is this vision better for women and girls? How is the vision better for men and boys?
 - c. What would the future look like for children who grow up in the environment you’ve envisioned?

Step 3: Brainstorm: What needs to change? (45 minutes)

1. Ask for a couple of volunteers to help record ideas on flipchart.
2. Ask participants: What changes are required (big and small) for participants’ visions to be realized?
3. Probe with follow up questions, similar to the *Root Cause Analysis* exercise. If a participant identifies a big change, such as an end to child marriage, ask what changes are required to make this possible.
4. Once ideas are collected, ask participants:
 - Which changes belong all of us (norms, attitudes, behaviors)?
 - Which changes require action from specific people or groups (shifts in armed conflict, changes in law or policy, etc.)?
 - What is the role of community leaders in making these changes possible?
 - Making personal changes?
 - Persuading or influencing others to change?
 - Sharing information?
 - Leading by example?
 - Acting with authority to make change?

Step 4: Vote on priorities for change (15 minutes)

1. Display ideas from brainstorm (Step 3) with flipchart stands, or by taping flipcharts to the wall.
2. Distribute **three** stickers to each participant. Ask participants to “vote” by placing a sticker next to three changes- across all flipcharts- that they would rank with highest priority for community leaders to support in some way. (If stickers are not available participants can draw stars next to priority actions.)
3. After all participants have voted, reflect as a group on changes that emerge as common priorities. Explain that in the next training module, participants will have a chance to consider how these changes might be realized through action planning.

Key Discussion Points/Additional Facilitation Notes

- This module can be divided over two training days, breaking after Step 1 or Step 2. Include time for recap during the second day and be sure to preserve flipchart notes and groups’ visions.

Prevention Action Planning

Summary

Participants establish plans to support existing initiatives and take new action to prevent GBV in their community.

Learning Objectives

Participants will:

- Identify community initiatives that leaders can reinforce
- Consider actions to contribute toward transformative change
- Set action plans
- Make personal commitments

Materials and Preparation

1. Flipchart paper and markers
2. Tape
3. Review *Ideas for Engagement* in the *Transformative Change* chapter of the Toolkit ahead of discussion.
4. Print/photocopy **Prevention Action Planning Tool** from *Transformative Change Tools and Resources*. The tool is attached as a handout.

Time

3 hours

Procedure

Step 1: Taking stock of prevention initiatives (30 minutes)

1. 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 representative to report back as well as a notetaker. (The notetaker will be responsible for maintaining notes or draft action plans, if groups will be meeting after the training to further develop plans.)

2. Ask groups to reflect on existing initiatives to improve opportunities for women and girls, and to create a safer and more equitable community. Groups can consider the following five categories:
 - a. **People:** Which people are helping women and girls? Who is pushing for positive change? What are they doing?
 - b. **Networks:** Are there informal associations, community groups, or networks that try to create change? What are they doing?
 - c. **Programs and Services:** What organizations or services are focused on preventing GBV or promoting women's rights? What are they doing?
 - d. **Law and Policy:** Is there any movement to change community rules, or reform current laws or policies to better protect women and girls?
 - e. **Information:** Is information available on the harm of GBV? Are there any radio programs, posters, campaigns promoting change? How is information shared?

Step 2: Plenary discussion (30 minutes)

Invite group representatives to briefly share initiatives that groups identified. Ask representatives to build on examples shared by others rather than repeat. Ask what community leaders can do to help reinforce existing initiatives to prevent GBV.

Step 3: Action planning (1 hour, 40 minutes)

1. Ask groups to develop action plans to strengthen GBV prevention in the community. Depending on the participant group, you can choose to limit planning to actions participants can contribute to themselves, or actions they would assign to others. If participants are assigning actions to others, they should also consider how those people/groups might be persuaded to take action.
2. Ask groups to consider actions that community leaders might take to strengthen existing prevention efforts, as well as new initiatives, in the following five categories:
 - a. Raising awareness
 - b. Building knowledge, attitudes, skills
 - c. Supporting women's and girls' empowerment
 - d. Influencing norms and behaviors
 - e. Creating and enforcing rules
3. Groups can use the *Handout: Prevention Action Planning* or plan with blank flipchart/ notebook paper, in line with the five categories above.
4. Visit each group as they plan. Help groups to consider new actions, drawing from the *Ideas for Engagement* section of the *Transformative Change* chapter of the Toolkit.
5. Toward the end of time, ask groups to briefly share their ideas for action. Ask groups to agree on plans for additional meetings or follow up, if relevant.

Step 4: Personal reflections and commitments (20 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 personally 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 prevention. As an alternative, consider making plans for follow-up meetings with participants. Record participant ideas related to resources and support required to accomplish plans.
- Challenge participants to reinforce existing, positive initiatives to increase women's equality and prevent GBV. Focus not only on formal strategies led by organizations, but informal networks and initiatives led by women and girls within the community.
- Emphasize that GBV prevention strategies should be women-led and informed by the experiences of diverse groups of women and girls.
- Prepare for participants to raise potentially harmful ideas as strategies to prevent GBV (for example, limiting women's movement, or forcing girls into marriage). Remind participants to focus on preventing root causes of GBV and highlight potential consequences of harmful ideas. See **Handout: Facilitator Strategies for Managing Challenges** in *Foundations: Key Approaches* for more detailed strategies.
- Note information learned about community leaders' roles, participants who demonstrate commitment, and ideas for strengthening existing GBV prevention efforts to update the GBV program's strategies and plans, community leader mapping, or criteria for engagement, as relevant.

Handout: Prevention Action Planning

Problem to Address:					
Drivers/ Risks	Action Required	Resources	Responsibilities	Timeframe	Monitoring Plans

Problem to Address:					
Drivers/ Risks	Action Required	Resources	Responsibilities	Timeframe	Monitoring Plans

Women's Leadership Training



Women's Leadership

Who is the Training for?

Women's leadership training modules are designed for emerging and current women leaders and can also be relevant for GBV teams. The training modules explore concepts of leadership and invite participants to reflect on their individual and collective strengths and vision.

Some modules within *Foundations: Key Approaches* may also be beneficial for women leaders. GBV teams can consult with women leaders to identify additional training needs that a GBV program may support directly, or through coordination with external partners and experts.

How Does the Training Link to the Toolkit Guidance?

The content covered in the Women's Leadership training modules is most closely linked to the *Supporting Women Leaders* chapter of **Toolkit Guidance**. Training modules also draw from Tools and Resources within the *Building a Foundation for Engagement* chapter.

Time and Resources Required

The training content in this section can be covered in two full days, with time allowed for breaks and lunch. Remember that participants should first complete **GBV Core Concepts** training.

Training schedules to consider for supporting women leaders:

- Core Concepts (foundational training): 2 days
- Women's Leadership: 2 days
- Key Approaches (modules indicated for women leaders): 1 day

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.

Women's Leadership Training Outline

Intended Audience



GBV Teams



Women Leaders

Module	Overview of Module	Estimated Time
<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
Where Do Women and Girls Belong?	This module sets a positive tone for participants to explore challenges and opportunities for women and girls in their community.	2 hours
Examining Leadership	Participants identify leadership structures, functions, and decision-making processes and consider how women can and might contribute to positive leadership.	3 hours
Who is a Leader?	This module challenges common conceptions of who is and who can be a leader and invites participants to explore leadership qualities amongst others and within themselves.	2 hours, 45 minutes
Individual and Collective Strength	Participants further explore types of power by first identifying individual strengths and then reflecting on the potential for collective strength and power.	1 hour, 45 minutes
Visions of Change	Participants identify positive changes they would like to see in their community and actions they can take to contribute to these changes.	2 hours



Where do Women and Girls Belong?

Summary

This module sets a positive tone for participants to explore challenges and opportunities for women and girls in their community.

Learning Objectives

Participants and facilitators will:

- Identify different forces that oppress and endanger women and girls
- Consider community-level changes that could improve conditions for women and girls
- Identify barriers to women's and girls' participation in leadership and decision-making

Materials and Preparation

1. Flipchart paper and markers
2. Large ball of yarn
3. Scissors
4. Select and adapt story from **Handout: Stories of Women and Girls** or prepare an alternative story relevant to the context.

Time

2 hours

Procedure

Step 1: Exercise: Patriarchy and forces that trap women and girls¹ (1 hour)

1. Ask for a volunteer to represent a woman or girl whose story will be told. The volunteer sits in the middle of circle and holds a ball of yarn that has been wound around her waist several times; the rest of the group sits in a circle around her at about 3-5 meters (10-15 feet).
2. Refer to *Handout: Stories of Women and Girls*. Read aloud the selected (or created) story, and ask the title question: “Why did Mena die?”, “Who hurt Janet?”, or “Why isn’t Ayesha safe?”
3. As a person from the group answers, the volunteer in the middle throws the ball to her, she wraps the yarn around her hand and throws it back to the volunteer in the middle who again wraps the yarn around her waist. Continue this process, by continuing to ask the title question. Group members provide different answers—possibly related to discrimination, social norms, cultural traditions, laws, policies, conflict, poverty, neglect of aid workers, lack of quality services, abuse by perpetrators, etc.—until the volunteer in center is thoroughly entrapped by a web of yarn.
4. Ask the volunteer in center how she feels. Ask others to reflect on her situation—how could it be improved? Which forces that bind the volunteer are most critical to address? Which forces would be easiest to change?

¹ Exercise adapted from: JASS. *We Rise Toolkit- Spider Web: Forces that Trap Us*. <https://werise-toolkit.org/en/system/tdf/pdf/tools/SpiderWeb.pdf?file=1&force=>

5. Cut individual pieces of the web as participants identify forces that the community might change. Ask the volunteer if her situation has improved. Can she escape the web?
6. Release the volunteer and continue a discussion about community changes that would allow women and girls to live their lives with more freedom and safety. Record common ideas on flipchart.

Step 2: Exercise: Designing an exclusive meeting² (30 minutes)

1. Tell participants that there will be a very important community meeting to discuss safety and priorities for healthcare and other services. They will help to set plans for this meeting, and it is very important to make sure that NO women come.
2. Participants will likely be confused and reluctant. Emphasize that for this exercise, we want to be sure to EXCLUDE women. How can we best do this? Share some prompts, such as: Where should we hold the meeting to be sure women don't feel welcome to come? Is there a time when we could hold the meeting when women are particularly busy? How long should the meeting last?
3. Refine questions to ask about specific groups of women: How could we most effectively exclude young women? Older women? Women with disabilities?
4. Once participants have considered different ways that women might be excluded from an important meeting, reverse the question: How could diverse groups of women be more involved in community decision-making?
5. Discuss ideas for inclusive decision making and note whether any of these ideas are practiced in the community. Record answers and ideas from women on flipchart.

Step 3: Reflections to take forward (30 minutes)

Summarize major points raised from the two exercises. The group has identified 1. Forces that oppress women that can be challenged, and 2. Ideas for more inclusive community decision-making. Ask the group to agree on ideas to keep in mind- and explore further- through the remainder of the training.

Key Discussion Points/Additional Facilitation Notes

- Initial exercises are useful for “breaking ice” and establishing safe space for participants to share opinions and explore ideas. Set a positive tone for active listening, consideration of different views, and respectful communication.
- Emphasize shared experiences of women and girls, while also acknowledging difference among women and girls. Women and girls all face gender discrimination, while individual women and girls experience different degrees of privilege and oppression depending on numerous factors, including race, ethnic background, sexual orientation, legal status, and disability status.
- During this module and others, it will be important to strike a balance between challenges and opportunities. Allow space for participants to discuss problems and challenges, while also encouraging the group to identify and plan for changes that might be possible.

² Exercise adapted from: The Barefoot Guide Connection. (2017, October). *The Barefoot Guide 5: Mission Inclusion; Developing an Exclusive Workshop – an activity designed to help people think about how we inadvertently exclude people* (p.90). <https://www.barefootguide.org/barefoot-guide--5-english.html>

Handout: Stories of Women and Girls

Why did Mena die?³

Mena was a 15-year-old girl living in a rural community on an Indonesian island in South East Asia. The village had limited public services, people had to travel far distances for basic health care and education. Because her family was poor, she couldn't go to school after 3rd grade. Their local school didn't offer any other grades and the cost of transportation to another school was prohibitive.

In the community, families lived together under one roof in very cramped spaces – women and men, boys and girls. Mena's mother worried about her since Mena was very pretty and she knew pretty girls could get in trouble. In her ethnic community, usually parents married their girls off at a very young age. So when a young man from the community became interested in Mena, her mother asked him to marry her. Her mother was afraid of people talking badly about Mena and what the religious leaders might say. Besides, she also wanted Mena to have someone to protect her.

The young couple had to live in similarly cramped quarters. Mena's husband didn't have any regular job which forced Mena to find work. Since Mena had only basic education, she didn't have the skills to get anything but a menial job. She worked in the market helping shopkeepers. Mena then got pregnant. During her pregnancy, she was not able to see the doctor or the nurse for any checkups. There simply was not the money nor the time to see the doctor. Her husband had lost interest in her and didn't help.

One day Mena felt some stomach discomfort. She consulted her mother about her condition, but her mother said such discomfort was common during pregnancies and she should be patient since it is a womanhood thing. Mena tried to reach her husband to ask him to take her to the hospital, but she didn't not know where her husband was. Then she felt a rush of blood come from between her legs. She didn't understand what was happening. She could not stop the bleeding. Her mother then took her to the nearby hospital on a tricycle taxi, but unfortunately Mena died before she could get there. Why did Mena die?

³ Story developed by JASS Southeast Asia staff and found in: JASS. *We Rise Toolkit- Spider Web: Forces that Trap Us*. <https://werise-toolkit.org/en/system/tdf/pdf/tools/SpiderWeb.pdf?file=1&force=>

Who hurt Janet?

Janet is a 20-year young woman who lives in a camp for internally displaced people outside a town in a West African country. Janet fled her home with her family six months ago when her village was affected by ongoing armed conflict. She is afraid the conflict will force her to move again. The camp where Janet lives now is very crowded, and she lives in a tent with two families. Janet and her family are completely dependent on food assistance and other services provided by humanitarian organizations. She understands that services are planned with government officials and community leaders, almost all of whom are men. There are not yet any health or psychosocial support services for survivors of GBV. Menstrual hygiene materials have not been distributed. Since moving to the camp, Janet has not had access to materials to manage her menstruation. She feels shy to dress and use toilet facilities every day, because she has no privacy in the camp, but during her period she is particularly shy. Yesterday, Janet started her period, so she walked to the outskirts of the camp to change and wash herself in more privacy. There, two armed men grabbed her and raped her. Janet returned to her home disheveled, bruised, and crying. Her mother understood what happened to her and scolded her for leaving the safety of their home. She advised Janet not to tell anyone about the rape, because there are no services, and she doesn't want anyone to judge or ridicule her daughter.

Why isn't Ayesha safe?

Ayesha is a 40-year-old woman who lives in a small community that has been affected by insecurity and draught. Her husband used to manage a small farm, but he has been unable to work for the past two years. Ayesha, her husband, and their three children have become reliant on food assistance, and they are registered as a family for this assistance. Ayesha also volunteers with an NGO, and she earns a small stipend to help the family buy additional food and essential items, but her husband takes this stipend, as is expected in their community where men control family finances. Ayesha's husband resents her for making money when he cannot. He has become increasingly frustrated with his situation, and lately he has been spending all of Ayesha's stipend on alcohol. He comes home late some nights, drunk and angry. Since they married, her husband has sometimes hit her, but lately the abuse has become very frequent and frightening. Last month, Ayesha's husband beat her so badly that her oldest son had to help her visit the health clinic the next day. The doctor who treated her didn't ask her any questions about her injuries, but the nurse guessed what happened and said this was unfortunately normal. She said the best thing Ayesha could do is to be more agreeable and avoid her husband's anger. Ayesha is worried every day that her husband might hurt her, or that he might turn his anger toward their children. She dreams of living with her kids, away from her husband, but he holds their registration and money. She is also afraid of losing custody of her kids to her husband. Her parents live in a nearby village, and she asked if she could bring the kids to live with them, for at least a little while, but her parents explained that they could not afford to repay the bridewealth they invested in her marriage. Anyway, it would be a dishonor to their family if she separated from her husband. Ayesha also sought help from a community leader in her village. He organized a mediation with Ayesha and her husband, where he advised her husband to refrain from alcohol and abuse and advised Ayesha to try harder to please her husband. After the mediation, Ayesha's husband threatened her that if she ever embarrassed him again by sharing their business with others, he would kill her.



Examining Leadership

Summary

Participants identify leadership structures, functions, and decision-making processes and consider how women can and might contribute to positive leadership.

Learning Objectives

Participants will:

- Identify community leadership structures
- Explore concepts of leadership

Materials and Preparation

1. Flipchart paper and markers

Time

3 hours

Procedure

Step 1: Brainstorming: Who are the community leaders? (40 minutes)

Lead a brainstorming exercise about community leadership in plenary or consider breaking into small groups, if participants represent different sectors of the community. Take notes on flipchart.

- What formal leadership structures exist in the community? (Consider structures based on geography, cultural group, religion, etc.)
- Are there women leaders within formal structures?
- Outside of formal positions, which people are regarded as leaders?
- Are there trusted and respected women who show potential for leadership, even if they are not yet considered leaders?
- Are there girls in the community who show potential for leadership?
- Who best represents the needs of women and girls in the community?

Step 2: Review and validate community mapping (20 minutes)

If the GBV team has developed a mapping of community leadership, the team can share this mapping for review, further input, and validation of participants. If the GBV team has not developed a mapping, consider developing a draft map of leadership with women leaders, or skip this step. (See the **Mapping Community Leadership** module in *Foundations: Planning for Engagement with Community Leaders*.)

Step 3: Group work: How are decisions made? (2 hours)

1. Break participants into two or more small groups, depending on group size. Consider assigning groups different community leadership structures, different sectors of the community, or formal vs. informal leadership.
2. Ask groups to consider several questions for their assigned sector/ category/ group of leaders. Each group should assign a note-taker and someone to report back to the group. Allow 40 minutes for groups to discuss:
 - c. What is the source of authority or influence? Has this changed over time, or since the emergency?
 - d. What are the areas of decision making/ areas of authority?
 - e. How, when, and where are decisions made?
 - f. How are women involved (directly or indirectly) in decision-making processes?
 - g. Are there opportunities for positive change? (Changes in leadership structure, authority, or processes? Changes in women's direct or indirect involvement? Other changes that women would like to see?)
8. Return to plenary. Ask volunteers to represent major points of discussion and summarize group answers to questions. Allow for discussion to refine mapping or clarify roles of different leaders.
9. Highlight common ideas for positive change, and any questions from the group or points of disagreement to take forward for further discussion.

Key Discussion Points/Additional Facilitation Notes

- Community leadership is not static. Even leadership structures that are steeped in long traditions will experience changes in structure, authority, or processes. Changes commonly occur during emergencies, and some of these may be sustained after emergencies.
- Many community leadership structures and processes are based on customs, rather than laws or written statutes. This can contribute to differences in understanding, practice, or experience with leadership.
- Participants may disagree about how leadership structures function. Disagreements can be noted but not all will be resolved.
- Some women leaders may be focused on disrupting or challenging existing leadership structures, while others may be focused on gaining more influence within existing leadership structures. The facilitator's role is not to determine appropriate strategies for women leaders, but it may be important to recognize and acknowledge different preferences or approaches among participants. Historically and globally, women have instigated positive change both from within, and from the outside of power structures.



Who is a Leader?

Summary

This module challenges common conceptions of who is and who can be a leader and invites participants to explore leadership qualities amongst others and within themselves.

Learning Objectives

Participants will:

- Identify qualities of good leaders
- Identify leadership qualities within themselves

Materials and Preparation

1. Flipchart paper
2. Markers (preferably one per participant)
3. Prepare profiles for discussion. Adapt profiles as required from **Handout: Profiles in Leadership**. Print, copy, cut profiles for distribution (at least one profile per group)
4. Packs of sticky notes or small, cut pieces of (preferably colored) paper with tape
5. Tape
6. Wall space for four flipcharts (or flipchart stands)
7. Paper and pens for participants (if possible and participants are able to write)

Time

2 hours, 45 minutes

Procedure

Step 1: What is a leader? (10 minutes)

Ask the group to quickly define a leader—what words or titles come to mind? Note common responses on a flip chart.

Step 2: Small Group Discussions: Profiles of Leadership (30 minutes)

1. Divide participants into groups and assign a profile for the group to discuss. Ask for each group to assign a notetaker and someone to report back in plenary.
2. Ask groups to read their assigned profile and spend 20 minutes discussing the following questions:
 - c. Is this person a leader?
 - d. Does she see herself as a leader?
 - e. What is the source of her influence?
 - f. Does she have potential for even greater influence? What support, resources, or other factors could help to expand her influence?

Step 3: Plenary discussion: Profiles of leadership (1 hour)

Invite representatives of each group to read their profile aloud and share points from discussion. Discuss common points across groups and invite reflections.

Step 4: Exercise: Qualities of good leadership (30 minutes)

1. Distribute 3-5 sticky notes or cut pieces of paper and tape to each participant.
2. Ask participants: What makes a good leader? (Note: responses may be the same as those provided in Step 1 but may differ, as here the question includes consideration of *good* leadership.)
3. Ask participants to use a marker to write single words or brief phrases—one per sticky note—and keep these to themselves until everyone is finished.
4. Display four flipcharts with stands or by taping paper to walls. Title flipcharts with the following headings:
 - Personal Characteristics
 - Authority or Influence
 - Skills & Knowledge
 - Values & Beliefs
5. Ask participants to consider where the qualities they identified fit best. Invite them to stick each of their notes on the appropriate flipchart/s.
6. Once everyone has posted their notes, invite participants to reflect. Where do most responses fall? What qualities did many people agree on? Are there any responses that participants have questions about?

Step 5: Self-reflection⁴ (35 minutes)

Explain that participants will have the opportunity to quietly reflect on their own leadership qualities and potential. Some participants may wish to make notes as they answer questions. Explain that notes will not be shared.

Ask participants to reflect on which of the qualities that emerged from the group exercise that they feel they embody. Ask questions, as appropriate to the group and discussion thus far, including:

- Can you recall a significant challenge that you have overcome in your life?
- What qualities and skills did you use to overcome that challenge?
- What role did support networks play in meeting your challenge?
- What personal characteristics do you feel you have that make you a good leader?
- What skills do you have that make you a good leader?
- What knowledge do you have that makes you a good leader?
- What values do you hold that make you a good leader?
- What additional leadership qualities do you wish you had?
- What steps might you take to further develop these qualities?
- Who in your life supports your leadership potential?
- Do you consider yourself a leader now? Why or why not?
- Do others consider you a leader? Why or why not?
- If you were a very powerful leader, what changes would you want to make for your community?

⁴ Adapted from, Women's Learning Partnership for Rights, Development, and Peace (WLP). (2001). [Leading to choices a leadership training handbook for women](#). (Pages 37-35)

- What steps might you take to contribute toward those changes now?

Allow time for participants to silently reflect on their answers.

Key Discussion Points/Additional Facilitation Notes

- Concepts of leadership are closely linked to positive types of power: power within, power with, and power to.
- Consider reviewing and validating your program's *Criteria for Community Leader Engagement* during Step 4. (See *Foundations: Planning for Engagement*)

Handout: Profiles of Leaders

Veronica

Veronica is the wife of a village chief. The chief meets with male elders to make important decisions about the community. He oversees marriages and settles disputes between community members. Men who face issues in the community raise these through elders, or directly through the village chief, but women often seek help from Veronica. Veronica is not present during formal proceedings, but she is known to be the chief's most trusted advisor, and she often persuades her husband to take decisions in favor of women who have been mistreated by their husbands or employers.

Zuleiha

Zuleiha is a studious girl who dreams of becoming a lawyer one day. In her community, most girls leave school by age 14 and many are married by age 16. Zuleiha's parents expected that only her brothers would proceed to secondary school and did not save for her education. When Zuleiha won a scholarship to cover her secondary school fees, her parents were proud, but they were also worried about her safety and reputation, attending school with almost all boys. They tried to find a husband for Zuleiha before she lost marriage opportunities. Zuleiha refused to marry and kept studying. In her final year of upper secondary, she sat for examinations to attend university. Every year since Zuleiha started secondary school, the number of girl secondary school students has increased. Girls and their parents point to Zuleiha's example as changing their ideas of what is possible for girls.

Ama

Ama manages a small stall in the market. She makes a small, but consistent profit. She noticed that women who sell seasonal goods in the market do well some seasons, but struggle during others. She organized the traders into a savings group that has helped women manage their incomes. The group has also been able to help women in need. Ama has always been committed to helping others, and when she hears from a woman who needs help with medical bills, school fees, or other important expenses, she will see if her savings group has any profits to share. She will also meet with business owners and community leaders to ask for their support.

Manal

Manal is a widow who lives with one of her three grown children in a camp for people who have fled from the conflict affecting parts of her country. Life in the camp is hard, and like other women, Manal often leaves the camp on foot to visit the mill or collect firewood. One day, while outside of the camp, an armed man assaulted and raped Manal. She was devastated by the attack and worried that she brought shame on her family. After some time, she visited the GBV program and talked with a Caseworker about what happened to her. The Caseworker helped Manal to understand that the rape wasn't her fault. She enjoyed visiting the GBV program and became very active in the Women and Girls Safe Space. She started leading some sessions, and she came to understand that many women and girls in the camp had experienced violence. Manal didn't want other women and girls to feel the shame that she had felt, so she began speaking about her experience—first within the WGSS, and then in more public meetings. She began to visit government offices and humanitarian agencies to ask what they were doing to prevent this violence from occurring.

Caroline

Caroline lives in a camp of displaced people with her husband and four children. She is very busy taking care of her family, but she somehow finds time to help others whenever she can. Caroline does not have any special status in the community, but people know her well. She is known to be kind and fair, and she does not gossip when people confide in her. Very often, women visit Caroline to ask for advice with private matters. Mostly, Caroline just listens and expresses concern. But she's noticed that many women face similar problems, so she has also worked to collect information on the types of services available in the camp. She shares this information with women who visit her.

Individual and Collective Strength

Summary

Participants further explore types of power by first identifying individual strengths and then reflecting on the potential for collective strength and power.

Learning Objectives

Participants will:

- Identify their individual strengths
- Recognize the potential of collective strength

Materials and Preparation

1. Paper large enough for body mapping (tape several flipchart sheets together)
2. Tape
3. Markers and pens (at least one marker per participant)
4. Scissors
5. Floor space for spreading out and outlining bodies
6. Large wall space for hanging body maps

Time

1 hour, 45 minutes

Procedure

Step 1: Review types of power (15 minutes)

Ask for volunteers to define types of power, as reviewed during **Core Concepts** training:

- Power within
- Power over
- Power with
- Power to

This session will allow participants to further reflect on positive expressions of power: *power within*, *power with*, and *power to*.

Step 2: Body mapping (1 hour)

**Note: This exercise can be adapted. Consider, as an alternative, asking each participant to draw the outline of a person on a single flipchart paper. This may be more appropriate in some cultural settings, with participants who are elderly or have limited mobility, or where space, time, or materials are insufficient for body mapping.*

1. Distribute paper and markers to each individual and divide the group into pairs.
2. Ask participants to take turns, tracing the outer contours of their partner's clothing and body.
3. Participants can refine their body outlines, adding details as they prefer, but ask participants to not color their outlines in, or draw on the outside as these spaces will be used.
4. Ask participants to think about their daily responsibilities. List major responsibilities, or draw representations of these, outside the outline of their body.
5. Explain that participants will have the opportunity to quietly reflect on a series of questions. They can write their answers—or draw small pictures to answer—anywhere within their body outline, or around the outside of their body outline. There are no rules for this exercise. Participants are free to skip answering some questions, think of their own questions, and illustrate their outline as they prefer.
6. Ask the following questions, allowing time for women to reflect and write/draw answers:
 - What makes you feel...
 - Strong?
 - Capable?
 - Powerful?
 - Inspired?
 - Courageous?
 - What are you really good at?
 - What else are you really good at?
 - What do you like about yourself?
 - What do you offer your family?
 - What do you offer your friends?
 - What do you offer your community?
7. Ask participants to share their body map with their partner, explaining elements that they would like to share.
8. Ask if any volunteers want to share reflections on the exercise. How did it feel to think about sources of strength, and power within? (Do not invite participants to present their body maps in detail to the full group.)

Step 3: Reflection: Individual to collective strength (30 minutes)

- 1.** Ask participants to tape their body maps on a common wall.
- 2.** Invite participants to take a “gallery walk” and quietly review body maps.
- 3.** Open discussion:
 - Did you recognize common elements across body maps? Did women identify common responsibilities? Common sources of strength?
 - If other women in this community created body maps, how might theirs look? Do women have different responsibilities? Do all women have sources of strength?
 - What surprised you?
 - Did you identify anything in other body maps that you wanted to add to your own?
 - What did you learn about others through this exercise? Did you learn anything about yourself?
 - Do you see potential, across all these body maps, for women to support each other? Do you see potential for women to build their power with—their collective power?
- 4.** Record major points, reflections, or ideas to take forward on flipchart.

Key Discussion Points/Additional Facilitation Notes

- Women’s responsibilities—and sources of power—are often less visible than men’s, as men more frequently occupy public spaces and roles.
- Sources of individual strength are personal, as each individual has different attributes, talents, and opportunities. Collective strength can draw on common and unique sources of individual strength.
- There are multiple expressions of positive power: power within, power with, and power to.



Visions of Change

Summary

Participants identify positive changes they would like to see in their community and actions they can take to contribute to these changes.

Learning Objectives

Participants will:

- Define problems to address
- Visualize positive change
- Identify personal and/or collective action to contribute to positive change

Materials and Preparation

1. Flipchart paper and markers
2. Consider reviewing *Transformative Change* chapter of Toolkit Guidance
3. Consider printing copies of *Sample: Root Cause Analysis* and/or **Prevention Action Planning Tool** in *Transformative Change Tools and Resources*.

Time

2 hours

Procedure

Step 1: Identifying problems (30 minutes)

Open a discussion in plenary or break participants into small groups. Ask participants to identify specific problems in their community that should be addressed. Consider probing questions, such as:

- What are the most pressing challenges women face?
- What is limiting girls from reaching their full potential?
- Why are women and girls at risk?

Ask participants what is driving the problem/s they identify. While gender inequality and related power imbalance is the root cause of GBV, other factors will contribute to problems women and girls face.

You can consider leading participants through a root cause analysis. Find information on conducting a root cause analysis in Ideas for Engagement in the *Transformative Change* chapter of Toolkit Guidance, along with a *Sample: Root Cause Analysis* in *Transformative Change Tools and Resources*.

Step 2: Visualizing positive changes (30 minutes)

Once participants have defined and analyzed a problem, challenge them to visualize the absence of this problem. What positive alternatives can they imagine? What positive changes are required?

Consider asking participants to illustrate positive visions, in small groups, and then present these in plenary. Alternatively, you can capture elements of discussion on flipchart.

Step 3: Setting plans to contribute to positive changes (1 hour)

As a final step, participants can set plans to contribute to their positive visions. This step should be adapted to the participant group.

- GBV teams, or organized groups of current leaders, may review existing action plans or begin to develop detailed action plans. See the *Prevention Action Planning Tool* in *Transformative Change Tools and Resources*. GBV programs can support further development and monitoring of action plans with additional time.
- Emerging women leaders, or leaders who do not work in common communities, might rather brainstorm possible actions, and then set personal plans for actions to take.

Record participant ideas related to resources and support required to accomplish plans. If relevant, set priorities for any additional trainings and/or plan for follow up with participants.

Key Discussion Points/Additional Facilitation Notes

- Adapt session to fit the interests of participant group—participants can work as a team, in small groups, or independently.
- Recall reflections and decisions reached during previous modules as participants develop visions and action plans.
- Acknowledge that problems may be great, and fully realizing positive visions may require change among forces and power sources outside of participants' control. Ask participants to focus on what can be done. How can they apply positive power to contribute to change?