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# GENDER MAINSTREAMING Training Manual



USAID Zambia Community HIV Prevention Project (USAID Z-CHPP)

December 2017

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December 2017.

**Disclaimer:**

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## Overview of the USAID Zambia Community HIV Prevention Project (USAID Z-CHPP)

The United States Agency for International Development (USAID)/President's Emergency Plan for AIDS Relief (PEPFAR)-funded Zambia Community HIV Prevention Project (Z-CHPP) is a five-year cooperative agreement led by Pact to accelerate progress towards Zambia's goal of reducing new HIV infections. The project supports Zambia to reach the United Nations Program on HIV (UNAIDS) 2020 goal of having 90% of all people living with HIV (PLHIV) know their status, 90% of those who know their HIV positive status receiving sustained anti-retroviral therapy (ART), and 90% of those on ART achieving viral suppression.

To accomplish its goal, Z-CHPP will increase the adoption of high-impact HIV services and protective behaviors among at-risk populations using evidence-based and locally owned solutions. Z-CHPP has four specific objectives:

1. Key determinants of risky behavior mitigated among priority populations;
2. Increase in completed referrals from community programs to high impact services;
3. Actions adopted by communities to reduce young women's vulnerability to HIV, unintended pregnancy, and sexual and gender-based violence (SGBV); and
4. Strengthened capacity of local stakeholders to plan, monitor, evaluate, and ensure the quality of prevention interventions.

Z-CHPP maximizes the impact of USAID resources by focusing where the greatest gains can be achieved: in high-prevalence districts, especially those that are densely populated; targeting populations at high risk of infection or infecting others; and tailoring approaches to different segments of the population. Activities are implemented directly by Pact and its core international partner, Plan, as well as by local partners through sub-grants. This approach leverages existing relationships at the community level by engaging and supporting traditional and religious leaders, community-based service providers, and the decentralized government structures.

Z-CHPP implements activities in 25 priority districts across Lusaka, Central, Copperbelt, Western, North Western, and Southern provinces. Within each district, Z-CHPP aims to achieve a high saturation of interventions, focusing first on rapid scale-up of HIV testing services (HTS) and reaching PLHIV who are outside of the treatment cascade, then expanding the coverage and scope of activities with a comprehensive package of interventions to reach priority high-risk populations, specifically:

- Adolescent girls and boys (ages 10-19 years);
- Young women and men (ages 20-24 years);
- PLHIV;
- Sero-discordant couples; and
- Other priority populations, including male sexual partners of adolescent girls and young women (AGYW), cane cutters, miners, fish traders, long-distance truck drivers, and other migrant workers.

## Background to the Training Guide

This publication has been prepared as a guide for facilitating a gender mainstreaming workshop for Z-CHPP partners and their various project cadres working at the community level. The training manual serves as a resource for both experienced gender experts as well as new professionals just beginning their work in gender mainstreaming. The content is appropriate for all Z-CHPP volunteers: prevention volunteers, mentors, connectors, district coordinators, community theater members, change agents, etc.

Broadly, the training is designed to

1. Equip participants with information on how socially constructed gender norms affect the daily lives of women and men;
2. Create space for participants to identify and address the harmful impact of gender norms on fueling the spread of HIV; and
3. Support participants with the knowledge and skills needed to mainstream gender into their respective program activities.

## Facilitation Skills

### THE WORKSHOP TEAM

A workshop requires more than one person to implement effectively, and the facilitation team should be present throughout the entire workshop so that transitioning from one module to the next are smooth and effective. A successful workshop is a team effort, and everyone's role is critical:

- **Lead Facilitator:** Has overall responsibility for everything that happens during the workshop sessions— ensuring that objectives are met, participants are engaged, and training runs smoothly. S/he clearly delegates roles and responsibilities to co-facilitators and invites and prepares guest speakers.
- **Co-Facilitator(s):** Supports the lead facilitator to deliver workshop material.
- **Lead Logistician:** Has overall responsibility for the smooth operation of the workshop— before, during and after. Duties may include arranging and liaising with the workshop venue; organizing accommodations, transportation, per diem, reimbursements, tea breaks and meals; purchasing supplies; and coordinating during emergency situations.
- **Support Logistician:** Supports the lead logistician, including photocopying, note taking, monitoring participants' requests, setting up the training room, etc.

### TRAINING METHODOLOGY

The Gender Mainstreaming manual was written based on the following principles:

- This training fills an immediate need—the USAID Z-CHPP project team is charged with cascading gender mainstreaming training to all program volunteers.
- Sessions balance the importance of delivering technical content with the benefits of participatory learning.
- Learning is two-way—participants and facilitators learn from each other through group activities.
- Time is allowed for discussion, reflection, and feedback.
- A mutually respectful environment is necessary between facilitator and participants.
- A safe atmosphere and comfortable environment should be provided for optimal learning.

To promote maximum participation, the training room should be set up for participants to sit in small groups of five- seven people; often referred to as a “table group” in this manual. This can be done with round or square tables—or no tables at all. This training could be conducted using a room where participants sit in small circles on the floor if necessary. Whether chairs and tables are used or not, a classroom style or theater set-up is not recommended for participatory training workshops.

To enhance learning and limit boredom a range of training methodologies are used. This workshop is highly participatory and the use of PowerPoint presentations is not advised:

- Mini-Lectures: Information presented by the facilitator or a guest speaker.
- Case Study: Table groups apply new learning to a “real life” example.
- Role-play: Two or more people enact scenarios in drama format. Role-plays are always fully debriefed so that learning can be extracted afterwards.
- Small group work and discussion: Participants share experiences and ideas, jointly develop tools or solve a problem together. Small groups should not exceed seven people.
- Voting: Participants state their opinion about a topic and then discuss their ideas with the group.

### **IMPORTANT FACILITATOR ROLES**

It is the responsibility of the facilitators to present each session’s background material and activities as clearly as possible. Skills used to enhance communication include the following:

#### **Non-Verbal Communication**

- Maintain eye contact with everyone in the group when speaking. Try not to favor certain participants or certain areas of the room.
- Move around the room without distracting the group. Avoid pacing. Always stand where everyone can see you.
- Use positive non-verbal body language (e.g., nodding and smiling).
- Determine whether it is best to sit or stand. Typically, it is better to stand in front of the group when training and facilitating, particularly when introducing content, giving instructions for a task, brainstorming, etc. However, if participants are working in small groups and/or sensitive topics are being discussed, sometimes sitting with the participants creates the air of greater trust and intimacy.
- Dress and act professionally at all times.
- Facilitators are different than teachers or lecturers. It is not the job of a facilitator to know every answer to every question. Rather, it is the job of the facilitator to make everyone feel welcome to share their opinions, to encourage wide participation, and to create a positive learning environment for everyone present.
- The best facilitators are humble facilitators.

#### **Verbal Communication**

##### Questioning Techniques

- Ask open-ended questions that encourage responses. If a participant answers with a simple “yes” or “no” then follow up: *tell me more about that, how did that make you feel, or what happened that led you to that decision?*
- The facilitator does not have to answer every question. When a participant asks a question, the facilitator can turn the question to the group: *what do others think about this issue?*

- If the facilitator is not sure of something a participant has said, try paraphrasing: *so, in other words or if I understand you correctly, you are saying...Is that right?* And then allow time to correct you if necessary.

### Speaking Style

- Tone is important. Never sound harsh, mean, directive or judgmental.
- Always be respectful in an honest, natural way.
- Speak slowly and clearly.
- Avoid using slang.

### Discussion-Management Skills

- Help the group set norms at the beginning of the workshop. Such things as “show respect, everyone participates, mobile phones on mute, take risks” should be included as norms.
- Share personal experiences to build a bond with participants.
- Be sure participants talk more than facilitators. Direct questions to the group to avoid dominating the conversation.
- Encourage all participants to speak and participate. Encourage quiet people without embarrassing them. Gently tell more talkative participants to give others a turn.
- Be aware of underlying tensions and brewing arguments between/among participants. Work to remain a respectful atmosphere. Participants are welcome to disagree, as long as they remain calm and respectful of each other.
- Reinforce statements by sharing relevant personal experiences: *that reminds me of a past workshop when....*
- Summarize discussions. Be sure that everyone understands the concept before moving forward. Encourage those that have lingering questions to ask for assistance during breaks.

### Time Management

- Maintain control at all times. If participants are excited about an issue or a discussion, it is fine to let the discussion continue for another 10 minutes, but try not to interfere too much with the timing of subsequent sessions.
- Remember that the facilitator is responsible for delivering the objectives in the allotted time.
- Never blame the participants if you are running late and never tell the participants that you have to cut something out of the workshop due to time. Never say such things as *we spent too much time on Session 5 so now we don't have time for Session 6!*
- If two - three participants are in a debate or focused on a concept that others clearly understand, suggest they continue the conversation after the workshop or during the break, and gently bring everyone back to the topic at hand.
- If you find yourself running late, do not panic! This happens all the time to experienced facilitators. Participants take their cues from the facilitator—if you are nervous, they will be nervous. If you are relaxed and convey the sense that the sessions are on target and on time, the participants will also be relaxed. Just keep the session moving along as best you can.



During the break, discuss with the organizing team what and where activities or material can be adjusted.

- Similarly, if you are running ahead of time, do not panic! You can take longer for lunch, end early or continue as planned. This way if one session goes long in the future, you have extra time.

## **Content Delivery**

### Setting the Learning Climate

- Read the training design and review all materials and activities several times to become fully familiar and comfortable with the content.
- Prepare and organize all materials needed for each session (handouts, flipcharts, etc.) ahead of time, and keep them close at hand during the sessions. It is important to appear organized at all times.
- Set up the room and your materials at least 20 minutes before the workshop begins each morning. This way you can greet participants as they arrive and be prepared should any last minute problems arise.
- Start on time and establish the facilitator's role by calling the group together.
- Anticipate questions and be prepared with answers.

### Presenting Objectives

- Gently transition from one session to the next, making a link between the two. For example, *now that we know how HIV can be transmitted, we are going to look at how HIV impacts the body if transmission occurs.*
- Tell participants what they will do during each activity in order to achieve the session's objectives.
- It is always a good idea to write workshop and session objectives on flipcharts and hang them in the training room for everyone to refer to during the training.

### Reflecting on Material Presented

- Allow enough time for participants to absorb new material. Do not move too quickly.
- Encourage participants to share their reactions to new material; encourage them to share past experiences relevant to the new material.
- Ensure that participants receive feedback from both the facilitators and other participants.
- Ask participants to identify key points that emerged during the day.
- Help participants draw general conclusions from the training.

### Applying Material to Real Life

- Encourage participants to discuss how new information and skills will be helpful in their own project activities.
- Help participants anticipate challenges that they might experience in the community and brainstorm ways to overcome these challenges.

- Discuss what other information is needed to enable participants to successfully achieve their project responsibilities.

### The Training Team

- Clarify everyone's roles and responsibilities at the beginning of the workshop. What is the responsibility of the lead facilitator? Co-facilitator(s)? You need to work together to ensure no task is forgotten, and no task is duplicated.
- Meet with the team at the end of every day to debrief and see if changes need to be made.
- Pay attention to logistics (meals, accommodation, per diem, transportation, etc.) Poor logistics can ruin a workshop and take attention away from important technical topics.
- Handle any disagreements within the training team quickly. Participants can quickly sense if the team has a conflict and it always has a negative effect on the training. Remember that the #1 priority of the workshop is participant learning. By focusing on participants, hopefully all internal conflicts can be solved quickly.

## Overview of Training Modules

This training guide is organized into seven modules:

	<b>Theme</b>	<b>Time Allotted</b>
<b>Module 1</b>	Introduction	1.5 Hours
<b>Module 2</b>	Gender and Development Concepts	2.5 Hours
<b>Module 3</b>	The Life Cycle of Gender Norms	2 Hours
<b>Module 4</b>	Gender and HIV Linkages	1.5 Hours
<b>Module 5</b>	Gender-Based Violence	3 Hours
<b>Module 6</b>	Five-Domains of Gender Analysis Matrix	Option 1: 1 hour Option 2: 3.5 Hours
<b>Module 7</b>	Action Planning and Comments	As Needed (1-4 Hours)

This training program can be delivered in two and a half days. Delivering training uninterrupted, on consecutive days, is strongly recommended in order to allow participants to return home and begin implementing their gender action plans in a timely manner. The guide assumes approximately six hours of content will be delivered on days one and two, and the third (final) day of training will end after lunch. This guide does not include suggested break times; however, in the next section there is a sample agenda to help guide first-time facilitators.

If time or resources do not allow for three consecutive days of training, training can occur across a longer time period, such as three Fridays in a row. Note that if presented in this style, organizers may want to add extra time at the beginning of each session to review key concepts from previous sessions. Organizers may also want to add time for an overall review on the final day to ensure participants have retained all information.

## How to Use the Training Guide

**Each module includes the following components:**

**Title:** The main theme or topic of the module.

**Learning Objectives:** What the participants are expected to learn or be able to do after completing the module.

**Time:** Approximate time needed to deliver the module; facilitators may adjust as necessary.

**Session Overview:** Brief summary of the content that the module includes.

**Materials and Preparations:** Materials needed for the module as well as tasks for the facilitator to complete before the session begins to ensure that the training runs smoothly. Required handouts and flipcharts appear under this heading. This section can be treated as a checklist to ensure facilitator(s) are ready for the module. This section assumes organizers will familiarize themselves with the material and designate roles and responsibilities for the facilitation team and does not list these tasks explicitly for each module.

**Note:** In the training guide annex there are nine handouts in total. If the facilitation team would like to include other handouts for the participants, they are welcome to do so.

**Methodology:** Rationale for the methodology used in the module and tips on conducting the session most effectively.

**Activity Instructions:** Step-by-step process for conducting each training activity. When appropriate, this section also presents technical content to be shared during interactive activities, such as small group work.

**Trainer Tips:** This section presents technical content to enrich discussions or include in a mini-lecture. Regardless of the content included in the Trainer Tips, facilitators should always feel free to expand and enrich content as needed. Not all modules will have trainer tips.

## Sample Agenda

Day 1		Day 2		Day 3	
08:30 – 10:00	Module 1	08:30 – 09:00	Recap	08:30 – 09:00	Recap
10:00 – 10:15	Break	09:00 – 10:30	Module 4	09:00 – 10:00	Module 7 *
10:15 – 12:45	Module 2	10:30 – 10:45	Break	10:30 – 10:45	Break
12:45 – 13:45	Lunch	10:45 – 12:45	Module 5	10:45 – 12:45	Module 7
13:45 – 16:00	Module 3	12:45 – 13:45	Lunch	12:45 – 13:00	Closing & Final Evaluation
16:00	Closing	13:45 – 14:45	Module 5	13:00 – 14:00	Lunch
		14:45 – 15:45	Module 6 <u>or</u> Day 2 Review		
		15:45	Closing		

**\*Note:** If the facilitation team has decided to conduct Option 2 of Module 6, you need to adjust the Day 3 schedule to accommodate the additional material. This means that Module 7, Action Planning, will continue after lunch.

## Module 1: Introduction

**Objectives:** By the end of this session, participants will be able to:

- Articulate the groups' collective expectations for the training.

**Time:** 1.5 hours

**Session Overview:**

- Opening
- Participant Introductions
- Workshop objectives and agenda
- Participant expectations
- Workshop norms/ground rules

**Materials and Preparations:**

- Materials: Flipcharts and felt marker pens
- Optional: Schedule a guest speaker, if desired. Share clear expectations with that person about what to say and how long to speak (up to 10 minutes). Although not critical, many people choose to invite a senior member of staff to deliver opening remarks. If you know of someone inspiring or someone who can speak to the project's success, inviting them to speak at the outset of the Module 1 could provide added motivation.
- Prepare a flipchart:

*Participant Introductions*

1. Find someone in the room who you do not know/do not know well
  2. Interview each other (5 minutes each):
    - What is your name?
    - What is your role in Z-CHPP? What district do you work in?
    - What is your biggest professional achievement?
    - What do you expect to get out of this training?
    - What is the thing you love most about working in an HIV program?
- Prepare a flipchart:

*Norms/Ground Rules*

**Note:** In order to save time, the facilitator may list some basic ground rules on the flipchart in advance and ask participants to expand the list.

- Make copies of Handout 1: Workshop Objectives
- Optional: Prepare a flipchart listing the Workshop Objectives.

**Methodology:** There are many advantages to conducting an interactive introduction. First, a participatory approach encourages participation from everyone right from the beginning of the workshop. Secondly, it allows even the most introverted participants to get to know at least one other person in the room. An interactive introduction is also a good method for practical reasons: because people tend to talk more about themselves than they do others, when participants are asked to introduce their partner to the large group, they tend to take less time to do so than if they were introducing themselves, so this portion of the training moves forward in a timely manner.

**Activity Instructions:**

1. Welcome your group to the workshop and thank them for participating. Acknowledge that adults have many responsibilities in life, such as juggling work and family obligations, and you appreciate the fact that they are making time for this workshop. Also, note that some participants may be away from home and/or missing other important activities to be at the workshop.
2. Introduce yourself and other key staff for the workshop: facilitators, logistic support, etc.
3. If you have invited a guest speaker, invite her/him to make their opening remarks (this should not take more than 10 minutes).
4. Introduce the *Participant Introductions* activity.
  - Show the flipchart, *Participant Introductions*.
  - Explain that participants are going to work in pairs to interview each other and then each person will introduce his/her partner to the large group.
  - Ask everyone to find someone in the room who they either do not know or who they do not know well.
  - Review the interview questions on the flipchart. Each person has five minutes to interview his/her partner and may ask additional and/or follow-up questions as they like.
  - Allow 10 minutes for pairs to exchange information and respond to the questions on the flipchart.
5. When participants are ready, explain that they will come to the front of the room by pairs and introduce each other to the large group. Ask for one pair to stand and introduce each other, using the questions listed on the flipchart. Move on to the next pair and continue until everyone has been introduced to the group.
6. Next, distribute Handout 1: *Workshop Objectives* and review the objectives with the participants. If you have also listed the objectives on a flipchart, post it for the duration of the workshop so that participants and facilitators can easily refer to it as needed.

7. Ask if participants have any questions or need clarification about the objectives or if there are any objectives not listed that they expected to see. This discussion can prevent frustration among participants later on. It also ensures common understanding of the workshop objectives.

A complete list of training objectives follows:

	<b>Module</b>	<b>By the end of this workshop participants will be able to:</b>
<b>Objective 1</b>	1	Articulate the group’s collective expectations for the training.
<b>Objective 2</b>	2	Define gender-related terms.
<b>Objective 3</b>	2	Explain various stereotypes related to gender roles and how they can be limiting to men and harmful to women.
<b>Objective 4</b>	2	Understand key development approaches/concepts that aim to address these gender stereotypes.
<b>Objective 5</b>	3	Explain their own perceptions and assumptions related to masculine and feminine attributes.
<b>Objective 6</b>	3	Identify how gender norms and stereotypes can be harmful for girls and women and limiting for boys and men throughout the life cycle.
<b>Objective 7</b>	4	Describe the linkages between gender and HIV.
<b>Objective 8</b>	5	Define sexual and gender-based violence (SGBV).
<b>Objective 9</b>	5	Understand how gender stereotypes can perpetuate SGBV.
<b>Objective 10</b>	5	Explain the linkages between SGBV and the spread of HIV.
<b>Objective 11</b>	6	Understand how to conduct a gender analysis using the PEPFAR Five-Dimensions Gender Analysis Framework.
<b>Objective 12</b>	7	Develop a gender mainstreaming action plan for their Z- CHPP activities.

8. Review the workshop agenda with the group. Explain that times are not shown to allow flexibility with timing of sessions. Share the approximate timing of morning and afternoon tea breaks and the lunch break.
9. Show the flipchart, *Norms/Ground Rules* that you prepared in advance and ask participants to add to the list. Be certain to include such norms as keep mobiles silent, respect each other’s opinion, speak through the chair, no mini meetings, etc. Post the flipchart where it is visible for the duration of the workshop.
10. Thank participants and transition to Module 2.



## Module 2: Gender Terminology and Concepts

**Objectives:** by the end of this session, participants will be able to:

1. Define various gender-related terms;
2. Explain various gender stereotypes and how they can be limiting to men and harmful to women; and
3. Understand key development approaches and concepts that aim to address these gender stereotypes.

**Time:** 2.5 hours

**Session Overview:**

- Define gender-related terminology (sex, sex roles, gender, gender roles, gender stereotypes, gender norms).
- Identify potentially harmful practices that stem from gender stereotypes.
- Define the following key concepts: Equality vs. Equity, Gender Relations, Women in Development (WID), Gender and Development (GAD), Practical Gender Needs vs. Strategic Gender Needs, and Women's Empowerment.

**Materials and Preparations:**

- Materials: Flipcharts and felt marker pens.
- Ensure that at least one facilitator for this session is very comfortable with the terminology and concepts being covered and can answer a range of questions if they arise.
- Make copies of *Handout 2: Gender-related Terminology*.
- Make copies of *Handout 3: Key Gender Concepts*.
- Flipcharts: Prepare the following six flipcharts and hang them in the front of the room, covered:
  - 1) *What is Sex?* Sex is the biological and physiological characteristics that describe the differences between individuals as male or female. Sex characteristics are:
    - Universal and naturally unchanging
    - Defined by genetic make-up such as chromosomes, external and internal genitalia, and hormonal status
  - 2) *What is Gender?* Gender is the collection of social, cultural, and psychological features that a society often considers as either masculine or feminine. Gender is:
    - Variable across cultures
    - Learned
    - Continually subject to change
  - 3) *Sex Roles* are biologically and physiologically determined function distinct to females and males. They are naturally unchanging.

- 4) *Gender Roles* are behaviors, activities, tasks and responsibilities that females or males learn in society.
  - 5) *The Problem* is not that girls/women and men/boys are biologically different, the problem is that society values them differently based on biological differences.
  - 6) *Gender Stereotypes* are rigidly held and oversimplified beliefs about the characteristics of females and males. They are expectations of how people “should be” because they are male or female.
- Flipchart: Write the following on a flipchart (include A, B, C, D, E, F).
    - A. 1980s approach to address women’s inequality
    - B. Short-term and long-term approaches to gender
    - C. The power relationship between men and women
    - D. A current approach that looks at the needs of women, girls, men and boys
    - E. Confidence building in a group
    - F. Sameness vs. Fairness
  - Write each of the following concepts on one index card.
    - Equity vs. Equality
    - Women’s Empowerment
    - Women in Development (WID)
    - Gender and Development (GAD)
    - Strategic vs. Practical
    - Gender Relations

**Methodology:** This session blends small-group work with plenary work. The first hour entails a large group conversation around sex vs. gender, sex roles and gender roles, gender stereotypes, gender norms, and the effects of stereotypes on sexual practices. Although this may be a review for many participants, it is important groundwork, and some participants might be very new to these concepts. The small-group work allows participants to think more deeply about some development interventions that work towards gender equality.

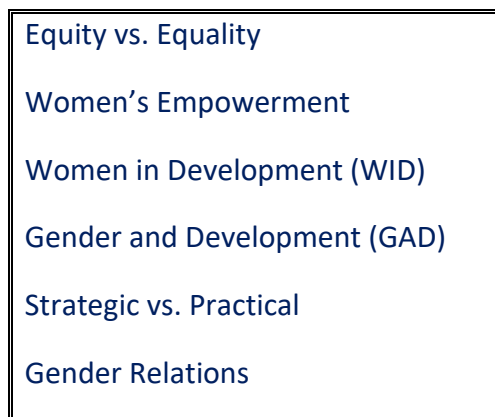
**Activity I Instructions:**

1. Explain that now we are going to start by reviewing and clarifying some important gender-related terminology.  
Note: Use the information in the Trainer Tips section to help you lead these discussions.
2. Ask, “*Who can explain the difference between sex and gender?*” and invite participants to share answers until you are satisfied each term is accurately defined.
3. Show the flipchart *What is Sex* and review the definition of sex with the group.
4. Show the flipchart *What is Gender* review the definition of gender with the group.
5. Now ask, “*What are sex roles?*” and take several responses until you are certain that the participants fully understand this concept. Show the flipchart *Sex Roles*, review the definition of sex roles, and ask the group to share examples of female sex roles and male sex roles (e.g., women’s sex roles are pregnancy, giving birth, and breast-feeding; men’s sex roles are impregnation.) Write these on the flipchart.

6. Next ask, “*What are gender roles?*” Again, take a few answers from participants, show the flipchart *Gender Roles*, and review the definition of gender roles. Ask the group to share examples of male gender roles and female gender roles (there are many) and record these on the flipchart.
7. Now ask, “*What are gender stereotypes?*” Again, take a few answers from participants and show the flipchart with the definition of *gender stereotypes*. Ask the group to brainstorm examples of gender stereotypes for men and gender stereotypes for women and record these on a flipchart in two columns– men and women.
8. Divide participants into four groups.
  - Ask two groups to brainstorm how gender stereotypes are limiting or restrictive to men.
  - Ask the other two groups to brainstorm how gender stereotypes are harmful to women.
9. Invite one of the “restrictive to men” groups to present, and ask the second group to add to the list. The facilitator might also need to expand the list if the participants miss key aspects. Repeat the report-out with the “harmful to women” groups.
10. Summarize the session on terminology by revealing the flipchart with the statement “*The problem is not that girls/women and men/boys are biologically different, the problem is that society values them differently based on their biological differences.*”
11. Invite comments or observations about the various terminology or the final statement.

**Activity II Instructions:**

1. Explain that you are now going to examine some key concepts commonly referred to when talking about gender through a matching game.
2. For this activity participants can remain at their table groups. Distribute the six index cards you prepared, one to each table:



3. Next reveal the flipchart that you prepared with the following definitions. Be sure that the letters, A,B,C,D,E or F are written before each statement so that groups can match the definitions with the concepts:
  - A. A 1980s approach to address women's inequality.
  - B. Short-term and long-term approaches to gender.
  - C. The power relationship between men and women.

- D. A current approach that looks at the needs of women, girls, men and boys.
  - E. Confidence building in a group.
  - F. Sameness vs. fairness.
4. Ask each table group to discuss the concept on their card and decide which definition (A – F from the flipchart) matches their concept. Allow groups 10 minutes to discuss and match.
  5. When all groups have finished, lead a discussion to reveal the correct answers and ensure everyone understands each concept. Use the trainer tips as a reference.

**Trainer Tips for Module 2:**

Monitor the time and ensure discussions in the large and small groups do not stray too far off topic. Be sure that the discussions are helpful and provide needed clarity to the participants.

Use the following content to inform your facilitation of the discussion of key gender-related terminology:

**What is Gender?** *Gender* is the collection of social, cultural, and psychological features that a society often considers as either masculine or feminine. *Gender* is:

- Highly variable across cultures;
- Learned behavior; and
- Continually subject to change.

**What is Sex?** *Sex* is the biological and physiological characteristics that describe the difference between individuals as female and male. *Sex* classifies a person as either male or female. *Sex* characteristics are:

- Universal and naturally unchanging; and
- Defined by genetic make-up such as chromosomes, external & internal genitalia, and hormonal status.

<b>The Difference Between Sex and Gender</b>	
<b>Sex</b>	<b>Gender</b>
<ul style="list-style-type: none"> <li>• Biological/born with it</li> <li>• Same throughout time</li> <li>• Same everywhere</li> </ul>	<ul style="list-style-type: none"> <li>• Social/Learned</li> <li>• Changes over time</li> <li>• Changes according to social context</li> </ul>

**What are Sex Roles?** *Sex roles* are biologically- and physiologically-determined functions distinct to females and males. *Sex roles* are naturally unchanging and include:

- Women: Pregnancy, giving birth, breastfeeding
- Men: Impregnation

**What are Gender Roles?** *Gender roles* are behaviors, activities, tasks, and responsibilities that females or males learn in society, e.g., cooking, income generation, and decision making. *Gender roles* can:

- Can change over time;
- Are affected by age, race, economic status, culture, education, religion, technology, ethnicity, etc.; and
- Can change based on individual choices, social or political changes, natural disasters, and conflict.

Differences Between Sex Roles and Gender Roles	
Sex Roles	Gender Roles
<ul style="list-style-type: none"> <li>• Women: Pregnancy, giving birth, breastfeeding</li> <li>• Men: Impregnation</li> </ul>	<ul style="list-style-type: none"> <li>• Women: Cooking, taking care of children, nursing the sick, washing clothes cleaning/sweeping the home, babysitting, serving food</li> <li>• Men: Decision makers, breadwinners</li> </ul>

**What are Gender Stereotypes?** *Gender stereotypes* are rigidly-held and oversimplified beliefs about the characteristics of females and males.

- *Gender stereotypes* define how people should be and they limit ones' options and life choices for everyone: women, men, boys, and girls. They also violate human rights.
- *Gender stereotypes* strengthen assumptions that reinforce inequality.
- Society overlooks the reality of individual differences and instead judges females and males simply for being a man or being a woman.
- For example: men are strong and women are weak; women are emotional and men are able to make important and objective decisions.

Illustrative Gender Stereotypes	
Masculine	Feminine
<ul style="list-style-type: none"> <li>• Aggressive</li> <li>• Adventurous</li> <li>• Assertive</li> <li>• Powerful</li> <li>• Unemotional</li> </ul>	<ul style="list-style-type: none"> <li>• Obedient</li> <li>• Timid</li> <li>• Passive</li> <li>• Weak</li> <li>• Emotional</li> </ul>

How Gender Stereotypes Influence Behaviors and Risks Associated with Sexual Relationships	
Aggressive - Adventurous	Timid - Passive
Behaviors: Has many sexual partners. Dominates in the relationship. May use	Behaviors: Afraid to say "no." Unable to negotiate terms of relationships, including

psychological or physical violence to exert control. May use money as a way to bribe/coerce in the relationship.	safe sexual interactions. May be vulnerable because of a need for money for school or family.
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**Note:** The problem is not that girls/women and men/boys are biologically different, the problem is that society values them differently based on these differences. Gender stereotypes reinforce the power imbalance that exists in society between men and women. The gender power imbalance perpetuates gender discrimination and gender inequalities at all levels and greatly constrains the advancement of women in a nation. Gender equality demands that people of both sexes are free to develop their personal abilities and make free choices. Gender equality means that no one is held back by gender stereotypes or prejudices.

### How Can Gender Stereotypes be Restrictive to Men?

- Being the sole provider in a family causes stress and pressure. This is especially stressful if a man is poor and/or can't find work.
- Feelings of stress can lead to physical illness, risky behaviors (like drug use and alcohol consumption), and suicide.
- Men are not taught to be/allowed to be emotional, so they have no outlet for feelings. They must remain strong even when they feel sadness, for example after a death of a spouse or family member.
- Men may feel they need to be violent even though they do not want to, but because they feel the need to live up to social expectations.
- Married men may be expected to have "side chicks," and as such they might be forced into sexual relationships they do not want.
- Men may be pressured into having multiple sex partners—increasing the risk of HIV and STIs for men and women.
- Gender norms may limit a man's role in the family or prevent him from enjoying fatherhood.
- The role of "leader of the house" can sometimes come with violence and emotional distance. This stifles relationships with a wife and/or children.
- Any man that does not fit into the social ideal of big, strong, and powerful does not feel like a productive member of society.

### How Can Gender Stereotypes be Harmful to Women?

- Women are taught to be submissive, which can lead to a range of issues in their personal and professional lives, including:
  - Being a victim of sexual and gender-based violence
  - Not having a say in when, how or where to have sex
  - Not being able to say "no" to unwanted sexual advances/sex
  - Being coerced into sex
  - Not participating in decision-making processes and not speaking their mind

- Doing things because it is their “duty” even if they find them hurtful, humiliating, or demoralizing
- Women can be prevented from securing an education.
- Women can be pressured not to seek employment.
- Once employed, women are told to focus on the home, not on their career.
- Women often do not reach their potential because they are taught to put others before themselves.
- Women’s work days are long and arduous because they are tasked with all household chores and all child rearing responsibilities.
- Women who do not marry and/or do not have children are judged and thought to be a failure.

## Gender Concepts

### Gender Equality vs. Gender Equity

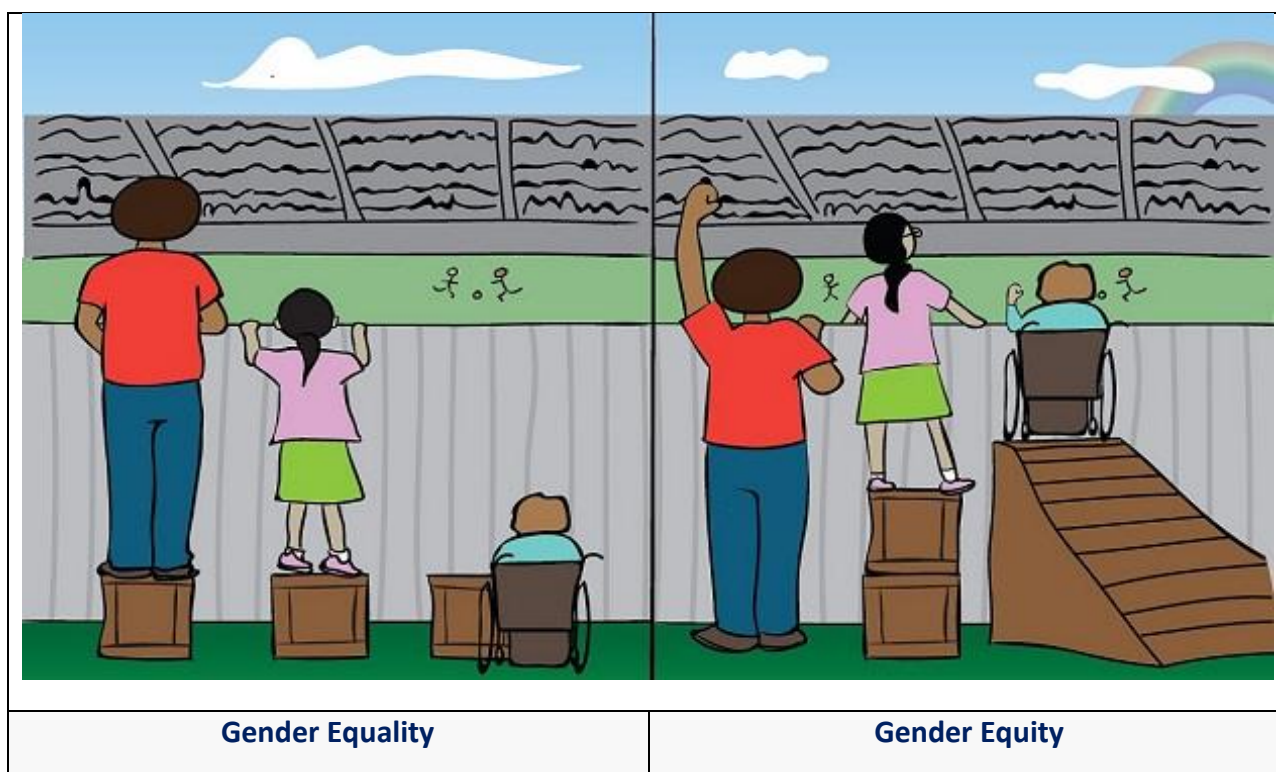
*Gender Equality* refers to receiving the same resources regardless of sex. For example, all Zambian children have the right to free primary school, no matter if you are a boy or a girl.

*Gender Equity* refers to the fair sharing of resources, opportunities, and benefits according to any given social framework. For example, in primary school, boys may do better academically because before and after school they have time to rest and do homework. Meanwhile their sisters are tasked with domestic chores because of society’s expectation of daughters. Therefore, boys are learning more and earning better grades.

**Note:** When discussing equality vs. equity, many groups find the graphic below to be helpful. You can show this on a PPT or make a simple stick-figure drawing on flipcharts. Talking points include:

- The first picture shows gender equality, because all three individuals are standing on the same size box. However, only one individual can clearly see the game.
- The second picture shows equity, because each person is receiving a resource (box) according to his/her needs. Therefore, everyone can see the game.
- Ask, “*In the first picture, who is happy/unhappy?*” (Answer: the tall boy is happy and the others are unhappy.)
- Ask, “*In the second picture, who is happy/unhappy?*” (Note: Participants may respond that everyone is happy. But push them to think deeper. In some cases, the tall boy may now be unhappy because others are getting more resources than he is.)
- This is often the other side of equity programs. For example, DREAMS targets girls because girls have been marginalized in Zambian society, and DREAMS strives to bring about great equity. However, now we hear people complain that boys deserve DREAMS programs too.
- It is important to understand stakeholders’ differing perspectives about gender equity so we are prepared for those conversations.





**Gender Equality**

**Gender Equity**

### Gender Relations

*Gender relations* refers to how men and women relate to each other because of an imbalance of power; more specifically, the roles men and women are expected to play and the impact of their interactions. Power relations tend to result in one party being worse off than the other, creating problems at both household and social levels.

### Practical Needs vs. Strategic Needs

This is a concept that was first coined in the 1980s by a Pakistani woman working in women's empowerment. Since then, these concepts have been widely adopted by many organizations.

Simply put,

- Practical approaches and interventions are short-term and designed to meet an immediate need and work within existing gender norms.
- Strategic approaches and interventions are long-term and aim to address the root of the problem and ultimately change gender norms.

Quality development work should include both practical and strategic approaches, so that the program meets immediate needs while also working towards a long-term solution. For example, Z-CHPP uses both approaches in its work on condom use. The *short-term* intervention is teaching young women how to use male and female condoms. The *long-term* intervention is working with



young men and women to ensure that women have the power to negotiate condom use in a relationship.

### **Women in Development (WID)**

When development assistance began in the 1960s and 1970s, no one thought to ask if men and women received services equally. Development projects simply reported “people served” and thus did not have the information to explain who was benefitting and who was not. When USAID first started collecting information on “women served” and “men served,” development professionals realized there were huge inequalities—mostly because men were making all the decisions and women were not involved in development programming.

As a result, USAID established the WID department in the 1980s with the specific objective to respond to these inequities by designing programs around the understanding that women were not receiving their share of development assistance. WID programs only targeted women and girls because they were trying to make up for social inequities.

### **Gender and Development Approach (GAD)**

In the 1990s, the GAD approach grew out of the WID movement. This approach to development advocates a shift from directing benefits to women to addressing the needs of women, men, boys, and girls. GAD was developed with the understanding that to achieve real gender equality, we need to work with men and boys as well as women and girls. Therefore, GAD had the objective of removing disparities in social, economic, and political equality between women and men as a pre-condition for achieving people-centered development. Although GAD programs do not condone violent or oppressive behavior, they attempt to understand the underlying reasons *why* men perpetuate violence and oppression in order to solve gender inequality.

### **Women’s Empowerment**

A Brazilian man, Paulo Freire, coined the concept of *empowerment*. Freire believed that disadvantaged populations should seek education as a way to empower themselves. Since the 1970s, however, many people have considered *empowerment* as being synonymous with *women’s empowerment*. Empowerment is both a process and an improved end result.

The women’s empowerment approach takes participants through a facilitated process of identifying their place in patriarchy, setting goals for themselves, and working towards those goals through improved access to knowledge, skills, and training. *Women’s empowerment* is a process of self-actualization and confidence building. Integrating *empowerment* into any development sector is prone to yield improved results.

## Module 3: The Social Construction of Gender

**Objectives:** By the end of this session, participants will be able to:

1. Explain their own perceptions and assumptions related to masculine and feminine attributes.
2. Identify how gender stereotypes can be harmful for girls and women and limiting/restrictive for boys and men throughout the life cycle.

**Time:** 3 hours

**Session Overview:**

- Participants work in two groups to identify social and cultural assumptions about boys and girls.
- Participants draw linkages between gender stereotypes and how they are harmful to girls/women and limiting to boys/men across the life cycle.

**Materials and Preparations:**

- Flipchart and felt marker pens
- Square “Post-it notes”
- Prepare a flipchart: *Describe how gender stereotypes can be harmful and/or limiting for girls/women and boys/men at each stage of the life cycle*
- Prepare six flipcharts with the following six headings. Under each heading, create two columns—label one column *Male* and the other column *Female*. Post the flipcharts around the room with space between the flipcharts and cover them.
  - 1) *Infancy (0-2)*
  - 2) *Childhood (3-10)*
  - 3) *Adolescence (11-19)*
  - 4) *Young Adulthood (20-35)*
  - 5) *Adulthood (36-65)*
  - 6) *Elderly (66+)*

**Methodology:** This module helps participants explore the pervasiveness of gender norms and stereotypes in society. Through this exercise, participants have the chance to examine their own perceptions and assumptions about masculine and feminine attributes. This helps illustrate what the larger society and individual communities believe. The module then guides participants to identify the negative effects of gender norms and stereotypes on women/girls and men/boys across the life cycle, which helps illuminate how gender norms are a pattern that can begin as early as birth.

**Activity I Instructions:**

1. Ask the participants to close their eyes and think about their individual answer to this question: *“If you had the chance to have just **ONE** child—and only **ONE** child, but you had to choose whether it was a boy or girl, which would you choose?”*
2. Allow participants a few seconds to reflect individually, then ask those who would choose a girl to move to one side of the room and sit at a table together, and those who would choose a boy to move to the other side of the room and sit at a table together.

**Note:** The two groups do not have to be equal in number.

3. Explain that now the two groups will discuss why they chose the sex of the child that they did. Remind the participants that this is a brainstorming activity so all answers should be recorded. There does not need to be agreement in the small groups on the responses shared.

Distribute flipchart paper and a marker pen to each table. Ask for a volunteer at each table to facilitate the discussion about why they chose a boy or a girl, and ask for another volunteer to record all responses on the flipchart to present to the large group.

4. Give the groups 20 - 30 minutes (depending on the size and level of participation in the small groups) to complete this task. Challenge the participants to think deeply, to be honest, and to develop a long list. Encourage each group to record 10 - 15 ideas on their flipchart.
5. When groups are ready, invite the presenter from the **girl** group to share its list with the large group. Remind participants that the point is not to argue points or judge, but to learn together.

When the girl group has finished reporting, invite the **boy** group to report out.

6. Process the activity with the following questions:
  - Does either list include any reasons related to sex roles/biological differences? (For example, did the girl group identify having a baby as a reason why they wanted a girl?)
  - If any sex-based roles are listed, underline or circle the item on the list.  
**Note:** There are likely to be only one-two reasons listed related to sex/biological differences, if any.
  - So, if that is the case, what do these lists consist of? **Answer:** gender stereotypes.
  - What do the items listed say about girl children? What expectations do these lists create for a girl child? What about the boys? What expectations are we creating for boys before and after they are born?
  - What happens if your girl child fails to exhibit the desirable characteristics and traits you listed? Would you be upset? Would the girl be reprimanded? What would the outcome be?
  - Ask the same questions about boys.

- What happens to boys and girls who do not fit these stereotypes? How are they treated by society?
- Outside of work and Z-CHPP, how can you challenge yourself to eliminate gender stereotypes in your personal life?

**Activity II Instructions:**

1. Explain that the participants are now going to explore the potential harmful impacts on males and females that are produced through some of these rigid and deeply reinforced gender stereotypes and gender roles.
2. Ask the participants to remain in the **boy** and **girl** groups to complete this task.
3. Uncover the flipchart prepared earlier, and read the task: *“Describe how gender norms and stereotypes can be harmful to and/or limiting for girls/women and boys/men at each stage of the life cycle.”* Ensure everyone understands the task.
4. Now uncover each of the six life cycle flipcharts, and read the headings aloud to the group. Explain that everyone’s life follows these stages.
5. Distribute multiple Post-it notes to the boy table group and to the girl table group.
6. Explain the task: Each group should discuss and identify the harmful practices, negative consequences, and limitations and restrictions that are created by gender roles and gender stereotypes for boys/men and girls/women at each of the six stages of the life cycle.

Remind participants of the gender stereotypes they brainstormed in the morning and the lists they just created with reasons for choosing a boy or a girl.

As soon as the participants identify a negative or harmful consequence, someone should write it on a Post-it note and stick it on the appropriate life stage in the male or female column.

**Note:** If participants seem confused by the task, share a few examples in the large group. For example, because women are considered weak and powerless, they are victims of rape or sexual assault. This Post-it could be stuck on the adolescent, young adulthood or adulthood chart (or all three) under female. Also, because boys are encouraged to have many sex partners, they expose themselves to increased risk of STIs/HIV. This could be stuck on the adolescent chart under male.

7. Encourage the groups to identify at least two-three negative or harmful outcomes for each stage of the life cycle.

**Allow 30 minutes.**

8. When the groups have completed the task, invite all of the participants to move and sit in front of the wall with the life cycle charts so you can review them together.

**Note:** At this time you can move the flipcharts so they are hanging next to each other.

9. Move from flipchart to flipchart reading the Post-its, requesting clarification when needed, and leading a brief discussion of the responses. Ask if any new ideas come to mind as you move through the cycle. The facilitator is free to add anything that is left out.
10. When you have reviewed all of the charts, ask someone to summarize or make an observation about the activity and the learning that may have taken place. Use these questions if needed to start the discussion:
  - Was anyone surprised to see how these practices and beliefs harm both sexes, but primarily females, across the life cycle?
  - Do you see any stereotypes or norms that repeat throughout the life cycle?
  - What does this tell you about how to make social changes? Where do we need to start?

**Closing:**

1. Tell participants that in the morning we will explore the linkages between gender and HIV.
2. Ask for any questions about today’s topics and ensure everyone understands the material covered. Ask, *“Is there anything that is unclear? Anything that you would like us to review tomorrow?”*
3. If there is time, go around the room and ask each participant to share their number one learning (or their “a-ha!” moment) of the day.
4. Thank participants for their time and effort.

**Trainer Tips for Module 3:**

**Examples for each stage of the life cycle:**

<b>Infancy</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"> <li>• Boys from a very young age are told not to cry.</li> <li>• Boys might not receive as much physical affection, in order to “toughen them up.”</li> <li>• Some Zambian cultures perform a ceremony when boys are about 2 years old, rubbing the father’s semen on his limbs to make him strong. This puts the child at risk of contracting HIV.</li> </ul>	<ul style="list-style-type: none"> <li>• Girl children are often viewed as a burden.</li> <li>• Infanticide can happen in extreme cases where boys are preferred.</li> <li>• Some Zambian cultures perform a ceremony when girls are about 2 years old, rubbing the father’s semen on her limbs to make her strong. This puts the child at risk of contracting HIV.</li> <li>• If a girl baby was unwanted, she might receive less love/affection as an infant.</li> </ul>

<ul style="list-style-type: none"> <li>• A baby boy who does not walk or show strength by one year old is thought to be a failure.</li> </ul>	<ul style="list-style-type: none"> <li>• Girls might receive less food/nutrients, or might not receive the same health care as a boy.</li> </ul>
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<b>Childhood</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"> <li>• Boys continue to be told not to cry, to “be a man” from a very early age. This suppresses feelings/emotions.</li> <li>• Boys are not allowed to show emotion.</li> <li>• Defilement can occur and boys might be afraid to report it for fear of appearing weak.</li> <li>• Boys are ridiculed if they play with girls, play with girls’ toys, or do anything that is perceived as feminine.</li> <li>• Boys are expected to play with guns, cars, trucks, etc. that reinforce male gender stereotypes and roles.</li> </ul>	<ul style="list-style-type: none"> <li>• Girls are to be seen, not heard.</li> <li>• Girls are more likely to be kept from school to perform household chores.</li> <li>• Girls that go to school still have many household chores; this impacts their ability to study/do homework and leads to fatigue during school hours.</li> <li>• Defilement occurs and may not be reported.</li> <li>• Girls are expected to play with dolls and other toys that reinforce female gender stereotypes and roles such as motherhood, nursing, etc.</li> <li>• Although Female Genital Mutilation, FGM, is not a part of Zambian cultures, FGM is performed in the country by immigrants and should be addressed during field work.</li> <li>• Girls with younger siblings are often tasked with being a second mother.</li> </ul>

<b>Adolescence</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"> <li>• Boys are encouraged to be violent and aggressive.</li> <li>• Boys are encouraged to have sex early, and with many partners.</li> <li>• Boys are encouraged to drink and/or try drugs.</li> </ul>	<ul style="list-style-type: none"> <li>• Girls are taught to be submissive in the home and school, leading them to avoid speaking up, having opinions, or appearing smart.</li> <li>• Girls are taught to be submissive in male-female relationships, leading to sexual coercion, unwanted sexual advances, and sexual assault.</li> </ul>

<ul style="list-style-type: none"><li>• At a young age, boys are considered “men” who have control over all women, including their mothers.</li></ul>	<ul style="list-style-type: none"><li>• Girls living in poverty may seek out “sugar daddies” to provide for their families, school fees, food, etc.</li><li>• This is the first time girls become sexualized. Girls are taught that their worth is in their bodies and begin to experiment with sex.</li><li>• Girls’ mobility may be restricted in hopes that they remain a virgin and out of trouble. So whereas boys have the time and space to grow up, have experiences, and meet friends, girls have a more restricted space with fewer options.</li></ul>
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<b>Young Adulthood</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"> <li>• There is no male equivalent to a “kitchen party”, so many men enter marriage with little/no idea of how to act. Men may rely on role models from their own childhoods, which may be negative.</li> <li>• Being the family leader is more taxing once a man is married and begins to have children. This is very stressful for men who cannot find employment or who have a low paying job.</li> <li>• In extreme cases the “need to provide” leads to illegal behavior.</li> <li>• Men might feel social pressure to have side chicks, whether or not they want them.</li> <li>• Young men who choose not to marry receive backlash from family/society.</li> <li>• Few men spend time around children during their adolescence which might make them feel unprepared for fatherhood; feeling inadequate.</li> <li>• Because men have been restricted from the home/kitchen, they are not able to care for themselves.</li> </ul>	<ul style="list-style-type: none"> <li>• This is when girls get married. “Kitchen parties” teach young women how to please their husbands and how to be submissive, not how to stand up for themselves.</li> <li>• Men’s infidelity is never responsible for breaking up a family but a woman’s infidelity is grounds for divorce.</li> <li>• Women remain in abusive marriages and relationships to keep their family together.</li> <li>• Young women who choose not to marry receive backlash from family/society.</li> <li>• Women are encouraged not to work when they marry.</li> <li>• Women are relegated to support positions and not senior decision-making positions.</li> <li>• Women suffer sexual harassment and/or assault in the workplace.</li> <li>• Women are promised jobs or promotions in exchange for sex.</li> <li>• Women are tasked with all household and childrearing duties, whether or not she works.</li> <li>• If a woman did not partake in labia elongation as an adolescent, it might be forced on her at this stage, which can be very painful.</li> <li>• Young women are often discouraged from attempting advanced education.</li> <li>• If a couple cannot get pregnant, it is the woman who is blamed. This can lead to violence, shame, and sometimes divorce.</li> </ul>



<b>Adulthood</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"> <li>• Many themes continue from young adulthood: pressure to be the head of the family, be emotionless, and be strong at all times.</li> <li>• Men feel pressure to make all decisions themselves.</li> </ul>	<ul style="list-style-type: none"> <li>• Many themes continue from young adulthood, including pressure to be submissive in all areas of life professional and personal.</li> <li>• Women often lack decision-making power in any area of their life. Women feel that their actions are judged by what is their “duty” and not about what the woman wants or makes her happy.</li> <li>• The pressure to keep a marriage together can cause women to endure domestic violence.</li> <li>• Women are expected to please their husbands at all costs.</li> <li>• Women are expected to focus on family and not work so many women drop out of the workforce or take support jobs.</li> <li>• Few women are in top decision making positions of in government, corporate, political parties, etc., across all sectors.</li> <li>• Women are subjected to spiritual cleansing when they become a widow.</li> <li>• Women are tasked not only with caring for children, but also elderly or sickly family members.</li> <li>• Most of a family’s resources are in the husband’s name so women do not have collateral if they wish to start a small business or take out a loan.</li> <li>• In some areas of Zambia, it is believed that wife battery is a sign of love. Therefore women are taught to actually <i>desire</i> a beating.</li> </ul>

<b>Elderly</b>	
<b>Males</b>	<b>Females</b>
<ul style="list-style-type: none"><li>• Men continue to feel pressure as head of household, even after his earning potential has waned.</li><li>• If you do not leave a legacy to the next generation, you are seen as a failure. This will be reflected in the size of your funeral.</li><li>• Men still cannot show emotion, even when mourning the death of someone very close to them.</li><li>• Older men may be accused of witchcraft.</li></ul>	<ul style="list-style-type: none"><li>• Widows are often subjected to spiritual cleaning.</li><li>• Because women often are totally dependent on their husbands throughout life, when they become widowed they may be forced into poverty, without a way to fend for themselves.</li><li>• Older woman may be accused of witchcraft.</li></ul>

## Module 4: Gender and HIV Linkages

**Objectives:** By the end of this session, participants will be able to:

- Describe the linkages between gender and HIV.

**Time:** 2 hours

**Session Overview:**

- Small groups investigate how gender, power, and the cycle of poverty shape the various vulnerabilities men and women have to HIV infection.
- Facilitator delivers a mini-lecture on women's physical, economic, and cultural vulnerabilities to HIV infection.

**Materials and Preparations:**

- Flipcharts and felt marker pens
- Prepare three index cards, each with one of the following tasks:
  - Group 1: Identify gender and power relationships in the following sectors—political, economic and religious.
    - How do these relationships fuel the spread of HIV?
  - Group 2: We often hear about the cycle of poverty, gender, and HIV/AIDS.
    - What does this mean?
    - How are poverty, gender, and HIV/AIDS related? What are the linkages?
    - What is needed to break out of this cycle?
  - Group 3: Answer the following questions:
    - What are the different biological and cultural vulnerabilities and risks to women with respect to the spread of new HIV infections?
    - What are the different biological and cultural vulnerabilities and risks to men with respect to the spread of new HIV infections?
- Optional: Visual aid for mini-lecture (Flipcharts or handout)
- Review the content in Trainer Tips for the mini-lecture to ensure you know the information well, and are able to discuss it effectively. If neither you nor another facilitator is comfortable with the topic, you may invite an outside specialist or technical expert to speak on the relationship between gender and HIV vulnerability.

**Methodology:** Small-group work followed by a mini-lecture. A mini-lecture is an effective method for transferring knowledge, and sometimes is the best choice for new content. Additionally, in any group, some participants are introverts who learn best through a quiet lecture or presentation and appreciate a break from group work. To make the lecture more effective, try to

use a visual aid such as flipcharts or a handout. Limit your presentation to 15 minutes and encourage participants to ask questions throughout.

**Activity Instructions:**

Greet everyone and wish participants a good morning. To reintroduce the training, quickly review the previous day's material and/or conduct an energizer of your choosing.

Divide participants into three groups, using the method of your choice (numbering, tables, assignments, etc.).

1. Explain that each group has a different question or task to complete and then will report out.
2. Distribute the index cards with the tasks to group 1, group 2, and group 3. Give each group a flipchart paper and marker pen.

**Group 1: Instructions**

Identify the gender and power relationship in the following sectors:

- Political
- Economic (i.e., workplace, types of jobs, etc.)
- Religious

How do these relationships fuel the spread of HIV?

**Group 2: Instructions**

We often hear about the *cycle* of poverty, gender, and HIV/AIDS.

- What does this mean?
- How are gender, power, and HIV related? What are the linkages?
- What is needed to break out of this cycle?

**Group 3: Instructions**

What are the different biological & cultural vulnerabilities and risks to women with respect to the spread of new HIV infections?

What are the different biological & cultural vulnerabilities and risks to men with respect to the spread of new HIV infections?

3. Allow up to **30 minutes** to discuss the questions and prepare a flipchart to present to the large group.

4. When the groups are ready, invite **Group 1** to present. Ask the others, *“Is there anything you would like to add?”* If the group omitted key information, the facilitator can share that content at this point OR wait for the mini lecture at the end of the session.
5. Continue with the **Group 2** and **Group 3** presentations in the same way.
6. If you choose to deliver the mini-lecture, allow 15 - 20 minutes to cover the key content in the Trainer Tips. You are encouraged to add anecdotes, personal stories, or local context to make this a stronger, more relevant presentation for your audience.
7. After the lecture, ask participants if there are any remaining questions.

**Trainer Tips for Module 4:** Use the following information to deliver the mini-lecture:

### **Group 1**

#### **Gender and Power Relationships in the Political Sector**

- Think about the roles that women and men play in influencing decisions and policies at various levels—national, sub-national local levels. There are more men than women in high-level decision-making roles at the national level, thereby having a much greater influence on policy and funding decisions across all sectors. This includes policy issues and funding decisions that have a direct impact on the lives of women, including such areas as family planning and reproductive health, age of marriage, inheritance laws, land ownership, legal redress for rape, and GBV, etc. The voice of fifty percent (50%) of the population is often missing at the highest political levels.
- Women are recruited by politicians and parties to sing and dance during various political campaigns but women are not encouraged or supported financially to launch their own campaigns and run for office.
- If women do hold political office it is often at local levels.
- When women do dare to run for higher office, they are discriminated against and in some cases, threatened. There is little funding to support women’s campaigns.
- When women do get elected to higher office, they are often ostracized by the men who “know how to play the game”, or the women may be labeled as “aggressive” or “unladylike” to undermine the power they have. With so few women at the top, there are no support networks to help women learn how to navigate the political system.
- When women do get elected to higher office they often try hard to be accepted into the “boys club” by shying away from women’s issues. Therefore, we find that women politicians are not always great advocates for issues important to women such as reproductive health, childcare, sexual harassment, etc.
- When quotas exist oftentimes women politicians are “tokens” who are controlled by male party leaders or family members.

### **Gender and Power Relationships in the Economic Sector**

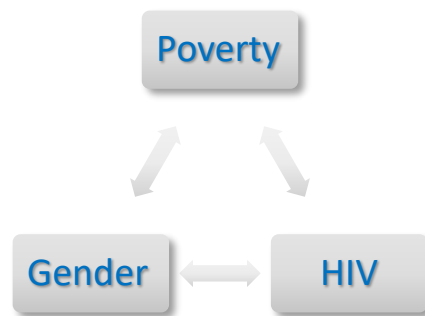
- Think back to the life cycle activity. When the group discussed the types of toys that are given to boys and girls, they noted how gender-specific toys can set children on a course that may even influence their choice of “acceptable careers.” As they age, boys are encouraged to pursue math and science in school and choose careers in medicine, IT, engineering, law, etc., positions with power. Meanwhile girls are pushed to study social sciences and pursue careers as teachers and nurses, positions without power.
- Financially, these career choices leave women less secure than men.
- Women often lack access to fair-wage jobs and have minimal education and work experience.
- In the home, man control the finances and makes decisions on how household resources are spent.
- Women are deprived of their property rights.
- Women are often denied access to loans and credit; they be charged higher rates of interest when they do secure a loan; they may be required to provide high collateral; or they may be required to have their husband’s signature on the loan.
- Without access to capital, it is difficult for women to start or expand a business. Thus, women end up working for others instead of owning a business.
- Women are often forbidden from work or pressured to stop working after they are married.
- High paying jobs are most often given to men, even if women candidates are more qualified, because the “man has to support his family” or the “woman will leave when she marries or has children.”
- Women are at risk of sexual coercion in order to secure employment or promotions.
- With less money and less access to resources, women become economically dependent on people with resources, including transactional sexual relationships. Women in dependent or transactional relationships are especially vulnerable to abuse and unwanted sex.
- The power imbalance created by economic dependency and violence can leave women unable to negotiate condom use.
- The same factors that put women at risk of engaging in dependent or transactional relationships prevent them from leaving the partners who refuse to use condoms and put them at risk of HIV infection.
- Women in poverty are particularly at risk. Poverty forces many women into subsistence sex work, transactional relationships, or human trafficking, all of which put women at risk of sexual assault and make it difficult or impossible to negotiate condom use during consensual sex.

### **Gender and Power Relationships in the Religious Sector**

- Most religious bodies/churches are dominated by men and many churches will not allow women to preach. Women are considered “unclean” because of menstruation.

- Religious leaders abuse their position of power by demanding sex in return for exorcisms or in exchange for blessings. This is often between an older man and a much younger woman, or an underage girl.
- Many religious leaders interpret the Bible in ways that reinforce submissiveness, obedience to the husband or other men in the family, devotion to household duties, etc.
- Some churches preach against the use of condoms, contraceptives, and/or ARVs.

### Group 2: The Cycle of Gender, Poverty, and HIV



Poverty, gender, and HIV are closely inter-related and each element can be the cause of or the result of the others. This relationship occurs at all levels of society: household, community, and national. Examples include:

- Men are tasked with being the head of the household; therefore, when a man dies he leaves his wife and children in poverty.
- Poverty pushes women and girls into transactional sex (money, food, rent, gifts, etc.), which puts them at risk of contracting HIV with every new sexual partner.
- Women may receive more money/better gifts for not using a condom. Extreme poverty and a lack of power forces girls and women to accept these risky arrangements.
- A lack of power and negotiation skills leave women unable to negotiate for safer sex, both in and out of marriage.
- Men are allowed to be promiscuous in Zambian culture, therefore men often have several “side-chicks” at any one time. Each woman, and the man, is at greater risk of contracting HIV.
- Once a woman discloses her HIV status she risks divorce and/or abandonment, leaving her in poverty.

How do we break free from this cycle?

- Information: Getting correct information about gender, HIV, and economic empowerment to women and girls.
- Education: Ensuring that women and girls can afford and access both traditional and non-traditional education.

- Changing gender norms: This is a longer-term solution that would alter the power imbalance so that women have greater control of their bodies and be in a position to negotiate sex on terms that do not put them at risk.

### **Group 3: Biological and Cultural Factors Putting Women and Men at Risk of Contracting HIV**

#### **Women: Biological Factors**

- The viral load in semen is higher than in vaginal secretions.
- Women have a larger mucosal surface in their vaginal membrane where lesions can occur, facilitating infection.
- When sex is forced, bleeding and tearing can occur in the cervix, which increases risk of infection.
- Especially in younger women, vaginal membranes are thin and more susceptible to lesions, which are a potential route for infection.
- Vaginal membranes remain exposed to infectious fluids for hours after intercourse.
- STIs often go undetected, which increases a woman's vulnerability to HIV. When a person has an STI, they have high concentrations of CD4 cells in the inflamed areas of the mouth, genitals, or rectum. A high concentration of CD4 cells has been proven to attract the HIV virus.
- Women who engage in anal sex (either by choice, coercion or by force) are at the highest risk of contracting HIV. Since women are always the "receptive partner", sex for a woman is 13 times riskier than for males as the "insertive partner." The lining of the rectum is thin and can easily tear, which can cause HIV to enter the bloodstream.

#### **Men: Biological Factors**

- Uncircumcised men are more vulnerable than circumcised men. Infected fluids can get stuck in the foreskin, therefore exposing men to the virus for a longer period of time.
- Men who engage in anal sex (either by choice, coercion or rape) are at the highest risk of contracting HIV. Men can either be the "receptive partner" or the "insertive partner." Being the "receptive" partner is far riskier as the lining of the rectum is thin and can easily tear, which can cause HIV to enter the bloodstream. A man is 13 times more likely to contract HIV as a "receptive" partner than an "insertive" partner. However, insertive partners can also contract HIV. This happens when there is a cut or abrasion on the tip of the penis, allowing blood to enter the body.

#### **Cultural Factors**

- Think back to the Life Cycle activity again. Women are taught to be submissive from a very early age, which has ramifications throughout her life. Many of the below points link with the submissive role that women play.
- In many cultures, male dominance is demonstrated and maintained through sexual coercion or sexual violence.



- Traditional leaders are most often men, limiting the power of women and reinforcing the stereotype that women cannot be leaders.
- The sexual exploitation of women and girls is one of the most common forms of gender violence and an ongoing factor in the spread of HIV.
- Women and girls are often taught to regard their bodies as the property of men.
- Women and girls are often raised to consider themselves powerless over violence. The occurrence and/or threat of violence means women and girls experience little or no control over when and how sex happens in their lives.
- Women and girls often lack negotiating power and social support for insisting on safer sex or rejecting sexual advances.
- Anyone with multiple sex partners puts all of their other partners at higher risk of contracting HIV. Many societies expect women to be faithful but forgive men who are not, and in these circumstances, women have greater vulnerability to HIV.
- Child sexual abuse generally occurs to more girls than boys. Women exposed to child sexual abuse are more likely to engage in HIV-related risk behaviors, such as early sex, more partners, and drug or alcohol use.
- Harmful traditional practices such as sexual cleansing, (non-medical) circumcision, relegating girls to sheds during their first menses, initiating young boys into “manhood” and giving them sexual targets to reach, all increase male and female risk of STIs and HIV transmission.
- Women are encouraged to please men at any cost including harmful practices such as labia elongation and dry sex. Substances put in the vagina to promote dry sex (such as vinegar and Boom) can cause the vagina to become swollen and irritated, making tearing more likely and a woman even more vulnerable to HIV.

## Module 5: Sexual and Gender-Based Violence

**Objectives:** by the end of this session, participants will be able to:

1. Define Sexual and Gender-Based Violence (SGBV);
2. Understand how gender stereotypes can perpetuate SGBV; and
3. Explain the linkages between SGBV and the spread of HIV.

**Time:** 2 hours and 30 minutes

**Session Overview:**

- Definition of terms
- Case study: Stellan and Banji
- Summarize linkages between SGBV and HIV

**Materials and Preparations:**

- Flipcharts and felt marker pens
- Make two signs for the “Vote with your feet” activity and hang them at opposite ends of a wall. If desired, connect the two signs with tape to indicate a continuum.
  - Sign 1: Strongly Agree
  - Sign 2: Strongly Disagree
- Prepare a flipchart: *Violence is a tool of oppression and is used to exert power and control over another.*
- Prepare a flipchart/s with the following information:
  - Types of SGBV:**
    - Physical: Physical force that results in injury, pain, or impairment.
    - Sexual: Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances. This can be through force or coercion by anyone, regardless of their relationship to the victim.
    - Emotional: Actions or words that impair a person’s psychological wellness or personal integrity.
    - Economic: Actions that deny and/or control a person’s access to resources.
- Prepare handout: *Stellan and Banji Case Study*
- Prepare handout: *Violence and HIV*

**Methodology:** This module consists of three activities. In the first, the participants “vote with their feet” to indicate and discuss their various perspectives around SGBV. In activity two, participants define key terms and discuss the ways which women experience SGBV across the categories of physical, sexual, emotional, and economic violence. The third activity engages small

groups in a case study analysis that addresses the different aspects of how and why women get trapped in situations of violence. At the end of the session, it is necessary to have a conversation about what to do in case a woman wants to report a case of SGBV.

**Activity I Instructions:**

1. Ask participants, “*What is violence?*” Take several comments before displaying the flipchart you prepared: “**Violence** is a tool of oppression and is used by a group/individual to exert power and control over another group/individual.”
2. Ask, “How does “violence” relate to SGBV?” “What are the differences?” Take several comments until participants understand that SGBV is a form of violence that takes advantage of an existing power imbalance between men and women.
3. Clarify that *GBV* and *SGBV* are essentially the same thing. Some organizations prefer SGBV and some GBV. The United Nations and Z-CHPP often use SGBV. The United Nations defines SGBV as any action “*that is perpetrated against a person’s will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion. It can be physical, emotional, psychological or sexual in nature, and can be in the form of denial of resources or access to services. It inflicts harm on women, girls, men and boys.*”
4. For this training we can use SGBV and GBV interchangeably.
5. Now that some basic terms are defined, explain that participants will examine some of their personal views on gender in an activity called “Vote with your Feet.”
  - **Allow 20 minutes** for “Vote with your Feet.”
6. Show the two signs on the wall (Strongly Agree and Strongly Disagree) and explain that there is a continuum between the two signs.
7. Explain that you will read a statement and participants should stand along the continuum (under one of the signs or anywhere along the continuum) to indicate their opinion on the statement.

**Note:** If all the participants choose one side, it is fine for a facilitator to play the “devil’s advocate” and choose an opposing view. This will push participants to think through the situation more deeply and understand why they have the opinion that they have. This is helpful in preparing participants for the possible resistance or pushback they may get from their communities. However, always make sure in the end that the facilitator clearly explains that s/he took the opposing position merely to provoke dialogue.

8. Read the first statement:

- *SGBV only happens in poor and/or marginalized homes.*

Allow time for participants to move to the point on the line that represents their opinion/view. Once everyone has chosen a spot, ask for volunteers (from different

points along the continuum) to share the reason for where they chose to stand. If there are dramatically different perspectives, facilitate a respectful conversation to ensure both sides are able to express their feelings.

Spend about 5 minutes discussing the first statement.

Next, read two or more of the following statements and process them in the same way as the first statement:

- *Men are naturally violent and sometimes they cannot control themselves.*
- *A husband has the right to control his wife's behavior by disciplining her.*
- *Sometimes victims of SGBV provoke the abuse through their inappropriate behavior (the way they dress, cooking bad food, flirting, etc.)*
- *Women are just as likely to promote norms around violence as men.*

9. When finished, thank everyone for their participation and ask them to return to their seats. If there remains disagreement in the group, you can assure participants that they will continue to discuss these issues.

### Activity II Instructions:

1. As noted earlier, the definition of SGBV includes four categories. Ask if anyone remembers what they are.
2. When the four types of SGBV have been identified by participants, uncover the flipcharts you prepared and review each of the four definitions:
  - **Physical:** Physical force that results in injury, pain, or impairment.
  - **Sexual:** Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances. This can be through force or coercion by anyone, regardless of their relationship to the victim.
  - **Emotional:** Actions or words that impair a person's psychological wellness or personal integrity.
  - **Economic:** Actions that deny and/or control a person's access to resources.
3. Divide the participants into four groups.
  - Assign one category of SGBV to each group.
  - Ask the groups to brainstorm examples of SGBV in their respective category.
  - Allow 15 minutes to brainstorm and write the lists on flipcharts.
4. Post the groups' flipcharts on the wall so they are visible to everyone, and invite a volunteer from each group to present their work. Ask the other groups if they have anything to add.

**Note:** If key examples are missing, the facilitator should add them. See Trainer Tips for complete lists.

5. Summarize the activity by reminding the group of how varied SGBV can be and the fact that SGBV *infringes on human rights and reinforces the unequal values that societies assign to men and women.*

**Activity III Instructions:**

1. Distribute copies of the case study and ask one participant to read the case aloud to ensure understanding.
2. Divide participants into four groups. Assign two tables the questions about Stelloh and two tables the questions about Banji.
3. Ask the groups to discuss the case study and answer the questions that pertain to their assigned person. (Allow 20 - 30 minutes.)

**The Story of Stelloh and Banji**

Stelloh lives with her husband, Banji, and her three children in a small house near the market. When they got married, Banji paid a high bride price to her family and, from the beginning, expected Stelloh to work hard to make up for it. He would often tell her that he had paid a good price for her so she better work and be a good wife or else he would send her back and demand the money be returned from her family.

Stelloh worked from early in the morning until late in the evening selling vegetables in the market. When she got home, she would be tired, but she had to cook dinner, fetch water, wash clothes, and look after her young children as well.

Banji would take the money that Stelloh earned at the market and would go out in the evening. He would not come home until late, and often, he would be drunk and start shouting at Stelloh. He would beat her in front of the children. Sometimes he would make her sleep outside to punish her if the food was cold or not cooked to his liking – and to show the neighbors that he was the boss in his house. Many of their neighbors were afraid of Banji and ignored the situation. Stelloh was too ashamed to talk with her friends or neighbors about her husband. Although they would often see her with bruises on her face, they kept quiet.

Questions Related to Stelloh:

- Is this situation realistic? Have you met women like Stelloh?
- How do you think Stelloh would describe their sex life?
- How might Stelloh cope with the abuse?
- What reasons does she have to stay in this relationship, despite the violence?

- How could HIV enter this household?

Questions Related to Banji:

- Why might Banji perpetuate violence against his wife?
- In your experience, do people confront those who are violent towards women? Why or why not?
- How does our social structure support SGBV?
- Do you think it is possible that Banji's life would improve if he stopped being violent? In what ways?
- How could HIV enter this household?

4. When the groups are ready, invite one of the Stellah groups to share their answers. Ask the other Stellah group if they had different answers or anything further to add.
5. Next ask one of the Banji groups to share their answers. Ask the other Banji group if they had different answers or anything further to add.
6. If these points don't come out during the report out, bring them up while summarizing the activity:
  - **A woman is NEVER to be blamed for the violence committed against her.**
  - Domestic violence occurs because men feel entitlement over women and because the community does not value women equally to men. Men are socialized to feel entitled to have control over women and many feel justified in demonstrating their power over women through violence.
  - Poverty, alcohol, unemployment, and other such factors may be the **context** of violence, but **the difference in status between women and men is the root cause of domestic violence.**
7. Before closing module, it is important to reinforce the relationship between SGBV and HIV.
8. Ask the group, "*How can SGBV potentially lead to the transmission of HIV?*"
  - Write responses on a flipchart. (For example, forced sex can cause the spread of HIV; forced sex is often more abrasive to the vaginal lining causing tearing, which makes a woman more vulnerable to contracting the virus.)
9. Ask the group, "*How can issues related to HIV potentially lead to increased SGBV?*"
  - Write responses on a flipchart. (For example, when a woman discloses her status, she is vulnerable to SGBV. When a woman suggests the use of a condom to protect herself, she is vulnerable to SGBV. When a woman tries to refuse sex because she is fearful her partner is HIV+, she is vulnerable to SGBV.)
10. Distribute the handout: *Violence and HIV*.

11. In closing, ask the participants, *“If you are confronted with SGBV during your work in Z-CHPP, what are some resource centers for SGBV? What do you do if someone confides in you about SGBV?”*

- Ensure everyone knows Z-CHPP protocol. See notes in Trainer Tips for specific information.

12. Thank participants and close the session.

**Trainer Tips for Module 5:**

**Examples of SGBV by category:**

PHYSICAL	SEXUAL
<ul style="list-style-type: none"> <li>• Beating</li> <li>• Molestation</li> <li>• Harassment</li> <li>• Slapping</li> <li>• Harming/hurting/inflicting pain in any physical way</li> <li>• Domestic Violence</li> <li>• Forced pregnancy</li> <li>• Forced Abortion</li> <li>• Forced Marriage</li> <li>• Torture</li> </ul>	<ul style="list-style-type: none"> <li>• Rape/marital rape</li> <li>• Defilement</li> <li>• Corrective rape</li> <li>• Sexual harassment</li> <li>• Sex trafficking</li> <li>• Forced abortion</li> <li>• Forced pregnancy</li> <li>• Unwanted sexual comments</li> <li>• Sexual assault</li> <li>• Incest</li> <li>• Traditional ceremonies such as spiritual cleansing or opening the way</li> <li>• Prolonged sex as punishment</li> </ul>
ECONOMIC	EMOTIONAL
<ul style="list-style-type: none"> <li>• Withholding family finances or resources</li> <li>• Preventing women from accessing assets</li> <li>• Destroying diplomas</li> <li>• Forbidding education</li> <li>• Destroying jointly owned assets</li> <li>• Insisting that only a man's name is on all family assets</li> <li>• Prohibiting employment</li> <li>• Unequal pay for the same work</li> <li>• Property grabbing</li> <li>• Prohibiting women from working</li> </ul>	<ul style="list-style-type: none"> <li>• Forced marriage</li> <li>• Humiliation (public and private)</li> <li>• Yelling/shouting/verbal abuse</li> <li>• Demeaning remarks</li> <li>• Neglect/ignoring</li> <li>• Intimidation</li> <li>• Silent treatment</li> <li>• Isolation/forced confinement</li> <li>• Threats</li> <li>• Sexual denial</li> <li>• Withholding love</li> </ul>

**Questions for Stelah Group.** The answers in bold are from the case study discussions in the first set of cascaded workshops:

- Is this situation realistic? Have you met women like Stelah? **Yes, this is very realistic.**



- How do you think their sex life is, according to Stellan? **I think Stellan feels like she is being raped every day. There is no way she feels loved or fulfilled by a man that is violent towards her and demeans her so regularly.**
- How might Stellan cope with the abuse? **She probably copes because it is common to her. Maybe her mother was a victim, or her sister. Maybe she tells herself he doesn't mean it and that one day he'll change. She probably thinks this is normal. She might also tell herself she is protecting her children (When in reality, this is not normal and she is only role modeling bad behavior for her kids, increasing their chances of perpetuating violence in the future.).**
- What reasons does she have to stay in this relationship, despite the violence? **She is probably too scared to leave. Scared that he will kill her if she tries to go, scared that she will be homeless and/or hungry. Scared of public shame. Scared of bringing her family dishonor, or forcing her parents to repay the dowry. She probably does not have any confidence left and believes she would not be able to make it on her own without Banji.**
- How could HIV enter this household? **At any time, Banji could bring HIV home and Stellan does not have the power to protect herself. If it goes untreated, the children could lose one or both parents.**

**Questions for Banji Group.** The answers in bold are from the case study discussions in the first Cascade workshops:

- Why might Banji perpetuate violence against his wife? **He likely thinks it is normal. It is likely his father was violent to his mother. It could be that the elders in his family specifically told him he had to beat his wife to ensure she remains obedient and faithful.**
- In your experience, do people confront those who are violent towards women? Why or why not? **Usually not. People think it isn't my business, it is family business. Even mothers are known to tell their daughters to go back to an abusive house and "work out their marriage" so it doesn't happen again. There is a social assumption that the woman did something wrong to cause the violence.**
- How does our social structure support SGBV? **Because neither men nor women speak up, everyone continues to do it. When no one stands up against something, there is an understanding that it is OK.**
- Do you think it is possible that Banji's life would improve if he stopped being violent? In what way? **Very likely. He might experience a much more loving relationship with his wife.**

- How could HIV enter this household? **At any time, Banji could bring HIV home and Stelloh does not have the power to protect herself. If it goes untreated, the children could lose one or both parents.**

**Reporting and Referrals for SGBV Victims:**

- Z-CHPP encourages you to refer SGBV victims to a One Stop Center or the YWCA.
- The Victim Support Unit, VSU, at the police station is NOT always a good option as VSUs are often overworked and cannot take on new clients.
- The One Stop Centers and YWCA have contacts at the VSU and will ensure the case is pursued. **Therefore, the Z-CHPP program encourages all referrals to go to the One Stop Centers or the YWCA.**
- When in doubt, talk to your district coordinator first. Remember to ALWAYS keep information confidential until the victim is ready to disclose publicly. Our number one priority is to do no further damage, or put the victim in greater danger.
- It is true that many rural areas do not have access to a One Stop Center or a YWCA. In these circumstances speak to your district coordinator so that the correct course of action can be determined.

## Module 6: Gender Analysis Frameworks and Tools

**Objectives:** By the end of this session, participants will be able to:

- Understand how to conduct a gender analysis using the *PEPFAR Five-domains of Gender Analysis Matrix*.

**Time:** Can range from 1- 3 hours depending on option chosen (see below)

**Note:** There are three options for this Module.

**Option 1:** If the facilitators think that the information in this module will confuse participants, they may omit this module entirely.

**Option 2:** If the facilitators want to provide an overview of a gender analysis matrix, with the understanding that participants are not expected to conduct a gender analysis, the one-hour option is best.

**Option 3:** If the facilitators want participants to actually apply their own work to the gender analysis matrix, they should choose the three-hour option.

**Content:**

- Introduces participants to the PEPFAR Five Domains of Gender Analysis Matrix.
- Allows participants time to apply their own Z-CHPP work to the matrix.

**Materials and Preparations:**

- Flipcharts, felt marker pens, and tape
- Prepare two flipcharts:

**Flipchart One: Five Domains**

Access to assets and resources	
Knowledge, cultural norms, beliefs and perceptions	
Gender roles & responsibilities in time and space	
Legal rights and status	
Balance of power and decision making	

**Flipchart Two:**

	Positive Program Aspect	Needs Work
Resources		
Culture		
Time and Space		
Legal Rights		
Power and Decision Making		

**Methodology:** The session begins with a short presentation to explain how the *Five Domains of Gender Analysis Matrix* is used, followed by a large group discussion using a Z-CHPP example. Then, if the facilitators wish, they can include small group work where participants apply their own work to the matrix and then report out.

**Activity I Instructions:**

1. Ask, “Does anyone know what a gender analysis matrix is?”
2. Take several responses until you are satisfied with the responses. **Answer:** a gender analysis matrix is a guide to help an organization analyze the extent to which their development project is gender-aware.
3. Ask, “Why do we conduct a gender analysis? Why is it important?”
4. Take several answers until you are satisfied.

**Answer:** As development professionals, we find that our biases, experiences, and perceptions may keep us from fully seeing a situation at the community level. Gender analysis is a procedure through which a team is able to ask questions to extract specific information and move beyond those biases. We conduct a gender analysis to see if our program is reaching men, women, boys and girls, and what we could change to make the program even better.

5. It may be helpful to give participants some background facts:
  - There are many gender analysis matrixes. None of them are correct or incorrect, they are just different.
  - We chose to use the *Five Domains of Gender Analysis Matrix* because it is one of the simpler frameworks and it is frequently used by USAIS and PEPFAR.

- When a gender analysis is actually carried out (outside of a workshop), it is most effective when conducted by a diverse team that represents many perspectives: program leadership, volunteers, community members, finance personnel, and technical experts. Often, the analysis is facilitated by an outside expert.
  - The analysis process happens over several weeks, or even several months. If done properly, it is not a quick process.
  - Today we are concerned with conducting a gender analysis that specifically relates to HIV.
6. Reveal the flipchart you prepared listing the Five Domains, and read them aloud.
  7. Explain that taken together, the Five Domains (or themes) give us a full visual of a project. Every aspect of a project, or a project outcome, should be captured in one of these domains.
  8. Start with “access to assets and resources.”
    - Ask participants, “What do you think this domain/theme refers to?” and “What are some examples of assets and resources?”
    - Write notes in the right hand column as participants share ideas.
  9. Move onto “knowledge, cultural norms, beliefs and perceptions,” and follow the same procedure, asking “What do you think this domain/theme refers to?” and “What are some examples?”
  10. Continue in the same way with the last three domains, writing notes as participants explain the domains and share examples.

<b>1. Access to assets and resources</b>	This includes access to tangible things that might limit a woman from fully participating in her society economically, politically, or socially: income, land, business, equipment, water, employment, inheritance, banking, transportation, education, information, etc.
<b>2. Knowledge, cultural norms, beliefs and perceptions</b>	This includes cultural-based gender perceptions that shape a person’s life ambition (or lack thereof). They often relate directly to the stereotypes discussed yesterday. For example, men being strong and in charge, women being weak and submissive.
<b>3. Gender roles and responsibilities in time and space</b>	Time and space are exactly as they sound. What do women do throughout their day? Is there a sexual division of labor? Think about your program. Are your meetings at 21:00? Who is going to attend? Is your

	outreach at a church or a bar? Are you appropriately scheduling things for women to attend?
<b>4. Legal rights and status</b>	Anything law or policy related: how men and women are treated in the eyes of the law. This can also mean budget allocation and implementation of laws. For example, Zambia has very good legislation on gender rights. However, it is often not implemented, there is no budget to support implementation, and there is no penalty for breaking the law.
<b>5. Balance of power and decision making</b>	Do women have the power to speak their mind? Are they in decision making positions? Can they influence others? Think about all levels: household, extended family, community, institutional, and national.

11. Tell participants that a simple way to conduct a gender analysis is to apply the Five Domains to your project and integrate the findings into the project, either before the project starts, during the planning phase, or even after a project as started.
12. Explain that the Five Domains articulate a generic gender analysis strategy. Since we are addressing gender and HIV in this training, we will review the Five Domains with respect to HIV.
13. Use the remaining time to walk the large group through one-two examples of a Z-CHPP program component. Choose an example that is relevant to the majority of your participants.
14. Use the second flipchart you prepared to capture the discussion.
 

**Note:** An example from DREAMS is included in the Trainer Tips.
15. Use the following questions to guide the conversation:
  - What is something your program is doing **well** in terms of assets and resources? What gender inequality is being addressed? What is something your program is NOT doing well, or **needs to improve**, in terms of assets and resources?
  - What is something your program is doing **well** in terms of culture? What gender inequality is being addressed? What is something your program is NOT doing well, or **needs to improve**, in terms of culture?
  - What is something your program is doing **well** in terms of time and space? What gender inequality is being addressed? What is something your program is NOT doing well, or **needs to improve**, in terms of time and space?
  - Does your program address laws and policies? Are you doing any advocacy work to change current politics or budget allocation? If not, could you?

- What is something your program is doing **well** in terms of decision-making and power? What gender inequality is being addressed? What is something your program is NOT doing well, or **needs to improve**, in terms of decision-making and power?

16. Hopefully by the end of this large group exercise, the participants will begin to understand how the matrix can help us see our program from a holistic gender perspective. If participants are confused, they should not worry too much. We are merely introducing them to the concept of gender analysis and to a new tool. Reassure them that they will not be required to do any type of gender analysis like this for Z-CHPP.

### Activity II Instructions:

It is essential that someone who understands gender analysis deeply is co-facilitating this session. If you are unsure of who has the right skill set, please contact the Z-CHPP Gender Specialist.

1. If time allows and the facilitators want to give participants the opportunity to dig deeper into this topic, break participants into groups according to their cadre. For example, connectors, prevention volunteers, community theater agents, change agents, etc.
2. Distribute the handout: *Five Domains Gender Analysis Matrix*. Explain that the five domains are in the row across the top, and the questions to ask about your program are in the left-hand column. Ask each cadre to complete as much of the chart as possible in the time that remains. The facilitators should circle around the room during this activity as it is likely that participants will need some extra help.

**Allow groups 45- 60 minutes** to complete the matrix.

3. The most essential part of this activity is the report-out. Although it seems a bit dull, most of the learning happens when participants hear how others are analyzing their Z-CHPP programming. Invite groups to present one by one (consider asking each group to present only one or two domains for the sake of time), and allow time for the other groups to offer constructive feedback. Facilitators should correct any incorrect or incomplete analyses and help guide the report outs as needed. Consider doing an energizer between group reports to keep participants engaged.

**Note:** The most common mistake when conducting a gender analysis is that organizations do not think deeply enough. Encourage participants to think through detailed aspects of their programs to determine where the gender gaps exist. Remember, it is difficult to change and improve things until you have identified the gender gaps. Finding those gaps does not mean you are failing; it is a natural part of gender mainstreaming and leads to new and creative ideas and solutions.

**Trainer Tips for Module 6:**

For more information on the framework itself, the 52-page PEPFAR document offers additional guidance, links, and resources for this topic:

<https://www.pepfar.gov/documents/organization/219117.pdf>

**The Five Domains of Gender Analysis Matrix: DREAMS Example**

	<b>Positive Program Aspect</b>	<b>Needs Work</b>
<b>Resources</b>	Encouraging girls to stay in school so they can access better education and jobs.	A program for out-of-school girls to help them with skills acquisition or information education in order to gain employment.
<b>Culture</b>	Traditionally adolescent girls are seen and not heard. This program listens to, and thus helps give voice to girls, who would otherwise be ignored.	Because DREAMS is not reaching sexual partners, graduates from DREAMS tend to marry young men who are traditional, and do not support their new thinking and/or learning.
<b>Time and Space</b>	DREAMS meetings are always during the day and work hard to create safe spaces.	Because many of the safe spaces are in churches or schools, DREAMS is often disagreeing or compromising with teachers and pastors about what is appropriate to talk about with adolescent girls.
<b>Laws and Policy</b>	Z-CHPP is doing some advocacy to change the laws regarding testing of adolescents under the age of 16.	DREAMS does no advocacy work or advocacy training.
<b>Decision Making and Power</b>	DREAMS helps girls and young women decide what they want for themselves, and encourages them to act on those feelings.	At large, the community is not supportive of young women speaking their mind. More needs to be done with families and fiancés.



## Module 7: Action Planning and Commitments

**Module Objectives:** by the end of this session, participants will be able to:

- Develop a cadre-specific gender mainstreaming action plan for their Z- CHPP activities.

**Time:** 2 - 4 Hours (timing will depend on the group)

**Content:**

- Gender Mainstreaming Action Plan
- Gender Mainstreaming Tools
- Workshop closing and evaluation

**Materials and Preparations:**

- Prepare handout: *Action Plan*
- Prepare handouts of the relevant *Z-CHPP Gender Mainstreaming Tools*
- Optional: Prepare a training evaluation form (see example in Annex)

**Methodology:** Group work organized by cadre. It is critical that this module closes the workshop. New knowledge on gender mainstreaming is important, but knowledge alone will not lead to application unless the participants are able to devote time to exploring exactly how, where, and when they can integrate gender into their project activities.

**Activity Instructions:**

1. Organize the tables so that participants sit by cadre for this activity. For example, lay counselors, mentors, connectors, site managers, district coordinators, peer educators, etc.
2. Explain that the last module in the workshop is “action planning” in order to ensure that gender is mainstreamed or integrated into each cadre’s respective responsibilities.
3. Ask, “*Can anyone explain what an action plan is?*” and “*Why do we develop action plans?*” and “*What information do we need to include when we prepare an action plan?*”
4. Write participants’ responses on the flipchart.
5. Next, engage the participants in a thorough recap of the first two days of the workshop. Review the learning objectives and the agenda:
  - For each module/theme, ask participants to share one new learning; something that was inspiring or exciting. Be sure that everyone participates at least once.

- This step is important so participants can hear what others are most excited by; it might also remind them of something they had forgotten.

6. When Module 6 has been thoroughly reviewed, explain the task:

- Ask each cadre to list their top three most important responsibilities under the Z-CHPP project. **Allow 20 minutes.**
- Ask one person per cadre to record the answers.

**Note:** Timing for the remaining activities will vary greatly depending on the participants. At a minimum, groups should have 1 - 2 hours for the remaining tasks. Some Z-CHPP cascades workshop groups have needed more time. If necessary, break for lunch and then reconvene to conclude.

7. After each group has reported their key responsibilities, explain that they are now going to identify one- two new gender mainstreaming activities/tasks for each area of responsibility.

- This task may prove difficult. The groups may struggle to identify ways to mainstream gender OR they may identify superficial activities.
- As the groups work, facilitators should spend some time with each one to make sure they are on the right track and to encourage them to think more deeply about the activities being proposed.
- Remind participants that they cannot change the Z-CHPP program, so each group must identify actions that are feasible within Z-CHPP, and actions that they themselves have the power to implement.
- As each group finishes, the facilitator should check one last time to ensure they have identified clear and effective activities for gender mainstreaming.

8. When all groups have completed the task, disseminate the *Action Plan* handout.

9. Explain that the groups have already determined the information in the first two columns of the action plan: area of responsibility and gender mainstreaming idea.

- Now each group needs to decide who is responsible, when the action will take place, and what, if any, additional resources are needed.
- During this step the facilitators should visit each group and provide additional guidance or help as needed.

**Note:** Although each participant completes an action plan to take home, the information in the action plan is the same for everyone in the cadre.

10. As the groups finish their work, distribute the relevant Z-CHPP Gender Mainstreaming Tool to each cadre. Finalized tools exist for the following cadres:

- Community Change Agents and Positive Male Role Models
- HIV Prevention Champions
- Lay Counselors
- Community HIV Prevention Volunteers

**Note:** All participants do not need all tools, only the tool for their cadre. DREAMS volunteers and staff do not have a tool because they have the Stepping Stones Guide.

11. Give the groups time to review the tools within their group. Lead a brief discussion with the entire group as to how the tools will be helpful during their community work.

12. When all cadres have finished their action plans, one of the facilitators should take a photograph of the plans to share with the Z-CHPP Gender Specialist. Remind participants that project and partner staff will follow up to ensure action plans are being implemented. Progress on gender mainstreaming plans will be incorporated into the project/partner evaluation.

13. To close the workshop, ask each group to share the one gender-mainstreaming item that they are most excited about. Clap after each presentation.

14. Remind participants that gender mainstreaming does not end here. This workshop is just the beginning. Now that they have the tools and knowledge, participants can continue to address gender in their work. Encourage participants to include gender conversations in their personal lives and model the behavior they wish to see in others.

15. If you would like participants to complete a workshop evaluation, distribute the Evaluation Form at this time and allow ten minutes for completion. A sample evaluation form is included in the Annex.

16. Thank participants for their time, their attention, and their commitment. Close the workshop.

# Annexes

## Handout 1: Z-CHPP Gender Mainstreaming Training Guide

**Learner Objectives:** By the end of the workshop, participants will be able to:

1. Articulate the group's collective expectations for the training.
2. Define gender-related terminology.
3. Explain various stereotypes related to gender roles and how they can be limiting to men and harmful to women.
4. Understand key development approaches/concepts that aim to address these gender stereotypes.
5. Explain their own perceptions and assumptions related to masculine and feminine attributes.
6. Identify how gender norms and stereotypes can be harmful for girls and women, and limiting for boys and men throughout the life cycle.
7. Describe the linkages between gender and HIV.
8. Define sexual and gender-based violence (SGBV).
9. Understand how gender stereotypes can perpetuate SGBV.
10. Explain the linkages between SGBV and the spread of HIV.
11. Understand how to conduct a gender analysis using the PEPFAR Five-Domains Gender Analysis Matrix.
12. Develop a gender mainstreaming action plan for their Z-CHPP activities.

## Handout 2: Gender-Related Terminology

**What is Sex?** *Sex* is the biological and physiological characteristics that describe the difference between individuals as female and male. *Sex* classifies a person as either male or female. *Sex characteristics* are:

- Universal and naturally unchanging, and
- Defined by genetic make-up such as chromosomes, external and internal genitalia, and hormonal status.

**What is Gender?** *Gender* is the collection of social, cultural, and psychological features that a society often considers as either masculine or feminine. *Gender* is:

- Highly variable across cultures;
- Learned behavior; and
- Continually subject to change.

### The Difference Between Sex and Gender

Sex	Gender
<ul style="list-style-type: none"> <li>• Biological/born with it</li> <li>• Same throughout time</li> <li>• Same everywhere</li> </ul>	<ul style="list-style-type: none"> <li>• Social/Learned</li> <li>• Changes over time</li> <li>• Changes according to social context</li> </ul>

**What are Sex Roles?** *Sex roles* are biologically and physiologically determined functions distinct to females and males. *Sex roles* are naturally unchanging and include:

- Women: Pregnancy, giving birth, breastfeeding
- Men: Impregnation

**What are Gender Roles?** *Gender roles* are behaviors, activities, tasks, and responsibilities that females or males learn in society, e.g., cooking, income generation, and decision making. *Gender roles* can:

- Change over time;
- Are affected by age, race, economic status, culture, education, religion, technology, ethnicity, etc.; and
- Change based on individual choices, social or political changes, natural disasters, and conflict.

### Differences Between Sex Roles and Gender Roles

Sex Roles	Gender Roles
<ul style="list-style-type: none"> <li>• Women: Pregnancy, giving birth, breastfeeding</li> <li>• Men: Impregnation</li> </ul>	<ul style="list-style-type: none"> <li>• Women: Cooking, taking care of the children, nursing the sick,</li> </ul>

cleaning/sweeping the home, babysitting, washing clothes, serving food

- Men: Decision makers, breadwinners

**What are Gender Stereotypes?** *Gender Stereotypes* are rigidly-held and oversimplified beliefs about the characteristics of females and males.

- For example: men are strong and women are weak; women are emotional and men are able to make important and objective decisions.
- Society overlooks the reality of individual differences and instead judges females and males simply for being a female or male.
- *Gender stereotypes* strengthen assumptions that reinforce inequality.
- *Gender stereotypes* define how people should be and they limit ones' options and life choices for everyone: women, men, boys, and girls. They also violate human rights.

### Illustrative Gender Stereotypes

#### Masculine

- Aggressive
- Adventurous
- Assertive
- Powerful
- Unemotional

#### Feminine

- Obedient
- Timid
- Passive
- Weak
- Emotional

### How Gender Stereotypes Influence Behaviors and Risks Associated with Sexual Relationships

#### Aggressive - Adventurous

Behaviors: Has many sexual partners. Dominates in the relationship. May use psychological or physical violence to exert control. May use money as a way to bribe/coerce in the relationship.

#### Timid - Passive

Behaviors: Afraid to say "no." Unable to negotiate terms of relationships, including safe sexual interactions. May be vulnerable because they need money for school or family.

- The problem is not that girls/women and men/boys are biologically different, the problem is that society values them differently based on these differences.
- Gender stereotypes reinforce the power imbalance that exists in society between men and women. The gender power imbalance perpetuates gender discrimination and gender inequalities at all levels, and greatly constrains the advancement of women in a nation.

- Gender equality demands that people of both sexes are free to develop their personal abilities and make free choices. Gender equality means that no one is held back by gender stereotypes or prejudices.

### **How Can Gender Stereotypes be Restrictive to Men?**

- Being the sole provider in a family causes stress and pressure. This is especially stressful if a man is poor and/or can't find work.
- Feelings of stress can lead to physical illness, risky behaviors (like alcohol consumption) and suicide.
- Men are not taught to be/allowed to be emotional, so they have no outlet for feelings. They must remain strong even when they feel sadness, for example after a death of a family member.
- Men may be forced into violence even though they do not want to participate, but because they feel the need to live up to social expectations.
- Married men may be expected to have "side chicks," so they might be forced into sexual relationships they do not want.
- Men may be pressured into having multiple sex partners, increasing risk of HIV and STIs for men and women.
- Gender norms may limit a man's role in the family or prevent him from enjoying fatherhood.
- The role of "leader of the house" can sometimes come with violence and emotional distance. This stifles relationships with a wife and/or children.
- Any man that does not fit into the social ideal of big, strong, and powerful does not feel like a productive member of society.

### **How Can Gender Stereotypes be Harmful to Women?**

- Women are taught to be submissive, which can lead to a range of issues in their personal and professional life including:
  - Being a victim of sexual and gender-based violence
  - Not having a say in when, how, or where to have sex
  - Not being able to say "no" to unwanted sexual advances/sex
  - Being coerced into sex
  - Not participating in decision-making processes and not speaking your mind
  - Doing things because it is your "duty" even if you find them hurtful, humiliating, or demoralizing
- Women can be prevented from securing an education.
- Women can be pressured to not seek employment.
- Once employed, women are told to focus on the home, not on their career.

- Women often do not reach their potential because they are taught to put others before themselves.
- Women's work days are long and arduous because they are tasked with all household chores and all child rearing responsibilities.
- Women who do not marry and/or do not have children are judged and thought to be a failure.

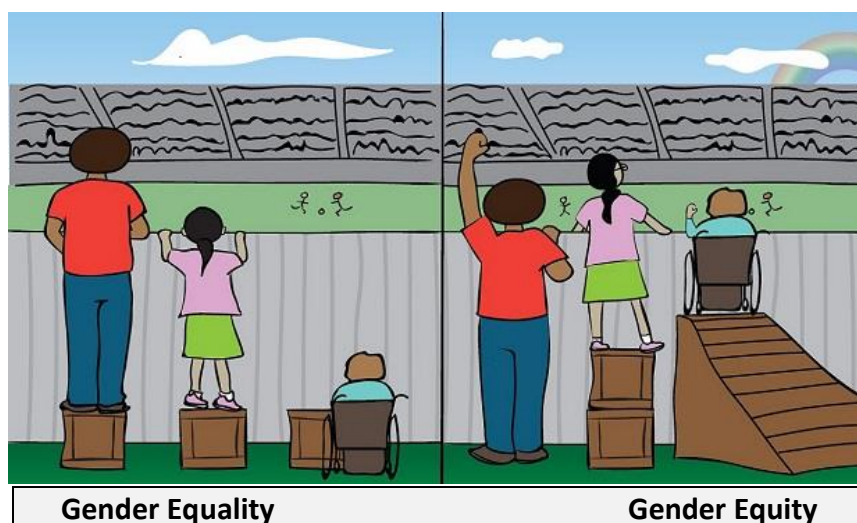


## Handout 3: Gender Concepts

### Gender Equality vs. Gender Equity

**Gender Equality** refers to receiving the same resources regardless of sex. For example, all Zambian children have the right to free primary school, no matter if you're a boy or a girl.

**Gender Equity** refers to the fair sharing of resources, opportunities, and benefits according to any given social framework. For example, in primary school, boys may do better academically because before and after school they have time to rest and do homework. Meanwhile their sisters are tasked with domestic chores during these times because of society's expectation of daughters. Therefore, boys are learning more and earning better grades.



- The first picture shows gender equality, because all three individuals are standing on the same size box. However, only one individual can clearly see the game.
- The second picture shows equity, because each person is receiving a resource according to his/her needs. Therefore, everyone can see the game.

### Gender Relations

Gender relations refer to how men and women relate to each other because of an imbalance of power. More specifically, the roles men and women are expected to play and the impact of their interactions. Power relations tend to result in one party being worse off than the other, creating problems at both household and social levels.

### Practical Needs vs. Strategic Needs

This is a concept that was first coined in the 1980s by a Pakistani woman working in women's empowerment. Since then, these concepts have been widely adopted by many organizations. Simply put:

- Practical approaches and interventions are short-term and designed to meet an immediate need and work within existing gender norms.
- Strategic approaches and interventions are long-term and aim to address the root of the problem and ultimately change gender norms.

Quality development work should include both practical and strategic approaches, so that the program meets immediate needs while also working towards a long-term solution. For example, Z-CHPP uses both approaches in its work on condom use. The short-term intervention is teaching young women how to use male and female condoms. The long-term intervention is working with young men and women to ensure that women have the power to negotiate condom use in a relationship.

### **Women in Development (WID)**

When development assistance began in the 1960s and 1970s, no one thought to ask if men and women received services equally. Development projects simply reported “people served” and thus did not have information to explain who was benefitting and who was not. When USAID first started collecting information on “women served” and “men served,” development professionals realized there were huge inequalities. This was mostly because men were making all the decisions and women were not involved in development programming.

As a result, USAID established the WID department in the 1980s with the specific objective to respond to these inequities by designing programs around the understanding that women were not receiving their share of development assistance. WID programs only targeted women and girls because they were trying to make up for social inequities.

### **Gender and Development Approach (GAD)**

In the 1990s, the GAD approach grew out of the WID movement. This approach to development advocates a shift from directing benefits to women to addressing the needs of women, men, boys, and girls. GAD was developed with the understanding that to achieve real gender equality, we need to work with men and boys as well as women and girls. Therefore, GAD had the objective to remove disparities in social, economic and political equality between women and men as a pre-condition for achieving people-centered development. Although GAD programs do not condone violent or oppressive behavior, they attempt to understand the underlying reasons *why* men perpetuate violence and oppression in order to solve gender inequality.

## **Women's Empowerment**

A Brazilian, Paulo Freire, coined the concept of empowerment. Freire believed that disadvantaged populations should seek education as a way to empower themselves. Since the 1970s, many people have considered empowerment as being synonymous with women's empowerment. Empowerment is both a process and an improved end result.

The women's empowerment approach takes participants through a facilitated process of identifying their place in patriarchy, setting goals for themselves, and working towards those goals through improved access to knowledge, skills, and training. Women's Empowerment is a process of self-actualization and confidence building. Integrating empowerment into any development sector is prone to yield improved results.

## Handout 4: Gender and HIV

### Gender and Power Relationships in the Political Sector

- Think about the roles that women and men play in influencing decisions and policies at various levels—national, sub-national, and local levels. There are more men than women in high-level decision-making roles at the national level, thereby having a much greater influence on policy and funding decisions across all sectors. This includes policy issues and funding decisions that have a direct impact on the lives of women, including such areas as family planning and reproductive health, age of marriage, inheritance laws, land ownership, legal redress for rape and SGBV, etc. The voice of fifty percent (50%) of the population is often missing at the highest political levels.
- Women are recruited by politicians and parties to sing and dance during various political campaigns but women are not encouraged or supported financially to launch their own campaigns to run for office.
- If women do hold political office it is often at local levels.
- When women dare to run for higher office, they are discriminated against and in some cases, threatened. There is little funding to support women’s campaigns.
- When women do get elected to higher office, they are often ostracized by the men who “know how to play the game,” or the women may be labeled as “aggressive” or “unladylike” to undermine their power. With so few women at the top, there are no support networks to help women learn how to navigate the political system.
- When women do get elected to higher office they often try to be accepted into the “boys club” by shying away from women’s issues. Therefore, the few women politicians are often not great advocates for issues important to women such as reproductive health, childcare, sexual harassment, etc.
- When quotas exist, women politicians are often “tokens” who are controlled by male party leaders or family members.

### Gender and Power Relationships in the Economic Sector

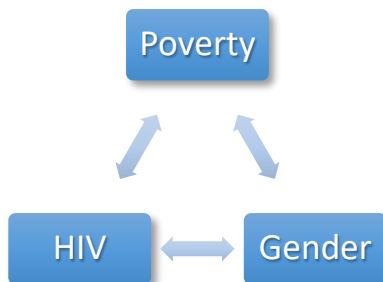
- Think back to the life cycle activity. When the group discussed the types of toys that are given to boys and girls, they noted how gender-specific toys can set children on a course that may influence their choice of “acceptable careers.” As they age, boys are encouraged to pursue math and science in school and choose careers in medicine, IT, engineering, law, etc. —positions with power. Meanwhile girls are pushed to study social sciences and pursue careers as teachers and nurses—positions without power.
- Financially, these career choices leave women less secure than men.
- Women often lack access to fair-wage jobs and have minimal education and work experience.

- In the home, the men control the finances and makes decisions on how household resources are spent.
- Women are deprived of their property rights.
- Women are often denied access to loans and credit; they may even be charged higher rates of interest when they do secure a loan.
- Without access to capital, it is difficult for women to start or expand a business. Thus, women end up working for others instead of owning a business.
- Women are often forbidden from work or pressured to stop working after they are married.
- High paying jobs are most often given to men, even if women candidates are more qualified, because the “man has to support his family” or the “woman will leave when she marries or has children.”
- Women are at risk of sexual coercion in order to secure employment or promotions.
- With less money and less access to resources, women become economically dependent on people with resources— including transactional sexual relationships. Women in dependent or transactional relationships are especially vulnerable to abuse and unwanted sex.
- The power imbalance created by economic dependency and violence can leave women unable to negotiate condom use.
- The same factors that put women at risk of engaging in dependent or transactional relationships prevent them from leaving the partners who refuse to use condoms and put them at risk of HIV infection.
- Women in poverty are particularly at risk. Poverty forces many women into subsistence sex work, transactional relationships, or human trafficking, all of which put women at risk of sexual assault and make it difficult or impossible to negotiate condom use during consensual sex.

### **Gender and Power Relationships in the Religious Sector**

- Most religious bodies/churches are dominated by men and many churches will not allow women to preach. Women are considered “unclean” because of the menstrual process.
- Religious leaders abuse their position of power by demanding sex in return for exorcisms or in exchange for blessings. This is often between an older man and a much younger woman, or an underage girl.
- Many religious leaders interpret the Bible in ways that reinforce submissiveness, obedience to the husband, or other men in the family, devotion to household duties, etc.
- Some churches preach against the use of birth control, contraceptives and/or antiretroviral (ARV) drugs.

## Group 2: The Cycle of Gender, Poverty, and HIV



The cycle of poverty, gender, and HIV is inter-related, and each element repeats itself, causing the cycle to repeat itself. Each aspect is related to each other and every aspect can be the cause of or the result of another. This relationship happens at all levels of society: household, community, and national. Examples include:

- Men are tasked with being head of the household; therefore, if/when a man dies he leaves his wife and children in poverty.
- Poverty pushes women and girls into transactional sex (money, food, rent, gifts, etc.), which puts them at risk of contracting HIV with every new sexual partner.
- Women often receive higher payment for not using a condom. Extreme poverty forces women to accept this risky arrangement. Sometimes women aren't able to negotiate for safer sex regardless of price.
- Men are allowed to be promiscuous in Zambian culture, therefore men often have several side-chicks at a time. Each "side-chick" is then at greater risk of contracting HIV.
- Once a woman discloses her HIV status she risks divorce and/or abandonment, which puts her into poverty.

How do we break free from this cycle?

- Information: Getting correct information about gender, HIV, and economic empowerment to women and girls.
- Education: Ensuring that women and girls can afford and access both traditional and non-traditional education.
- Changing gender norms: This is a longer-term solution that would alter the power imbalance so that women have greater control of their bodies and gain the power to negotiate sex on terms that don't put them at risk.

### **Group 3: Biological and Cultural Factors Putting Women and Men at Risk of Contracting HIV**

#### **Women: Biological Factors**

- The viral load in semen is higher than in vaginal secretions.
- Women have a larger mucosal surface in their vaginal membrane where lesions can occur, facilitating infection.
- When sex is forced, bleeding and tearing can occur in the cervix, which increases the risk of infection.
- Especially in younger women, vaginal membranes are thin; therefore, more susceptible to lesions, which are a potential route for infection.
- Vaginal membranes remain exposed to infectious fluids for hours after intercourse.
- STIs often go undetected which increases a woman's vulnerability to HIV. When a person has an STI, they have high concentrations of CD4 cells in the inflamed areas of the mouth, genitals, or rectum. A high concentration of CD4 cells has been proven to attract the HIV virus.
- Women who engage in anal sex (either by choice, coercion, or by force) are at the highest risk of contracting HIV. Since women don't have a penis, they are always the "receptive partner" which is 13 times riskier than being the "male partner." The lining of the rectum is thin and can easily tear which can cause HIV to enter the bloodstream.

#### **Men: Biological Factors**

- Uncircumcised men are more vulnerable than circumcised men. Infected fluids can get stuck in the foreskin, therefore exposing men to the virus for a longer period of time.
- Men who engage in anal sex (either by choice, coercion or by force) are at the highest risk of contracting HIV. Men can either be the "receptive partner" or the "insertive partner." Being the "receptive" partner is far riskier than being the "insertive partner" as the lining of the rectum is thin and can easily tear which can cause HIV to enter the bloodstream. A man is 13 times more likely to contract HIV as a "receptive partner" than an "insertive partner." However, "insertive partners" can also contract HIV. This happens when there is a cut or abrasion on the tip of the penis, allowing blood to enter the body.

#### **Cultural Factors**

- Think back to the Life Cycle activity again. Women are taught to be submissive from a very early age, which has ramifications throughout her life. Many of the below points link with this submissive role that women play.
- In many cultures, male dominance is demonstrated and maintained through sexual coercion or sexual violence.

- Traditional leaders are most often men, limiting the power of women and reinforcing the stereotype that women cannot be leaders.
- The sexual exploitation of women and girls is one of the most common forms of gender violence and an ongoing factor in the spread of HIV.
- Women and girls are often taught to regard their bodies as the property of men.
- Women and girls are often raised to consider themselves powerless over violence. The occurrence and/or threat of violence, means women and girls experience little or no control over when and how sex happens in their lives.
- Women and girls often lack negotiating power and social support for insisting on safer sex or rejecting sexual advances.
- Anyone with multiple sex partners puts all of their other partners at higher risk of contracting HIV. Many societies expect women to be faithful but forgive men who are not, and in these circumstances, women have greater vulnerability to HIV.
- Child sexual abuse generally occurs to more girls than boys. Women exposed to child sexual abuse are more likely to engage in HIV-related risk behaviors such as early sex, more partners, and drug or alcohol use.
- Harmful traditional practices such as sexual cleansing, (non-medical) circumcision, relegating girls to sheds during their menses, initiating young boys into “manhood” and giving them sexual targets to reach, all increase male and female risk of STIs and HIV transmission.
- Women are encouraged to please men at any cost including harmful practices such as labia elongation and dry sex. Substances put in the vagina to promote dry sex (such as vinegar and Boom) can cause the vagina to become swollen and irritated, making tearing more likely and a woman even more vulnerable to HIV.



## Handout 5: Violence and HIV

### Relationship between Violence and HIV

- Forced sex is associated with HIV risk
- Proposing condom use may increase women's risk of violence
- Disclosing HIV status may increase risk of violence

### Principles for Addressing Violence and HIV

All programs seeking to address SGBV must primarily protect the dignity, rights, and wellbeing of those at risk for, and survivors of, SGBV. The following section outlines four fundamental principles for integrating a SGBV response into existing programs. It also lists specific actions for putting these principles into practice. These principles are as follows:

- Do no harm
- Privacy, confidentiality, and informed consent
- Meaningful engagement of people living with HIV (PLHIV), in particular women living with HIV and SGBV survivors
- Accountability, monitoring, and evaluation

### Actions to Address Gender-based Violence

#### Community-based actions

- Include SGBV in HIV prevention curricula and peer education programs
- Provide information about and access to SGBV support services
- Mobilize communities on SGBV and HIV— specifically the links between the two and how harmful gender norms, beliefs, and practices contribute to both
- Support life-skills education

#### Structural actions

- Ensure protective laws and policies are in place and enforced to prevent SGBV
- Challenge harmful gender norms, roles, and behaviors to reduce acceptance of SGBV
- Support access to education for women and girls because increased educational attainment has been linked to increased protection from violence and HIV infection
- Promote women's and girls' economic security through livelihood programs
- Support research on female-initiated methods of HIV prevention

## **Addressing SGBV within Prevention Programs for Youth**

### Community-based actions

- Train and sensitize child- and youth-serving program staff and volunteers on SGBV and the particular risk factors that children and young people face. For example, sexual violence which includes forced sex and coercion.
- Ensure that services and programs are tailored to the distinct needs of girls, boys, young women, and young men, acknowledging that programming is not necessarily the same for each group.
- Establish linkages between prevention programs and age-appropriate services for young SGBV survivors.
- Include information on SGBV in school-based HIV prevention programs.

### Structural actions

- Include HIV and SGBV prevention information in comprehensive sexuality education.
- Support efforts to prevent all forms of violence and abuse, especially child maltreatment and child sexual abuse.
- Support economic empowerment and education for young women.

## **Addressing SGBV within HIV testing and counseling (HTC) and HIV Care Services**

A 2006 World Health Organization expert meeting identified four thematic areas for addressing SGBV within HTC:

1. Barriers to accessing services
2. Safe disclosure of test results
3. Ability to negotiate risk reduction behaviors
4. Access to post-test support and care

Violence, or fear of violence, can prevent PLHIV from seeking or accessing care and support services consistently. Several studies among women living with HIV reveal large gaps between the number of women living with HIV and the proportion of those women receiving treatment, care, and support (Lindsey 2003).

Addressing SGBV within care and support programs can have a direct impact on advancing PEPFAR's care and support strategies and reaching target goals. Specifically:

- Expanding integration of HIV prevention, care and support, and treatment services with family planning and reproductive health services, so that:

- Women living with HIV can access necessary care;
- All women know how to protect themselves from HIV infection;
- All women have access to women-initiated prevention technologies such as female condoms and microbicides (once the latter are approved); and
- Expanding PEPFAR's commitment to crosscutting integration of gender equality in its programs and policies, with a focus on addressing and reducing SGBV.

### Actions to Address SGBV within Positive Prevention Efforts

- Train and sensitize providers on the increased risk of violence for PLHIV, particularly women living with HIV.
- Train and sensitize providers on SGBV, especially on the sexual and reproductive health rights of PLHIV.
- Address how the health care setting can put SGBV survivors at increased risk of pressure and coercion around pregnancy and childbearing issues.
- Train and sensitize providers on barriers that SGBV can pose for treatment access and adherence, ensure services are available at no or low cost, and that financial support is available for related expenses such as food and transportation.

### **Summary of Actions to Address Gender-Based Violence**

#### Situational analysis

- Assess provider knowledge, attitudes, and practices
- Review policies and protocols with respect to client safety, privacy, and confidentiality
- Review existing local or national data on SGBV prevalence
- Review relevant laws and policies including obligations of health providers
- Identify existing services (including basic health, sexual and reproductive health, mental health, and social, legal, financial, and family services)

#### Staff training and sensitization

- Ensure all facility staff, including program managers, health providers, counselors, and administrative staff:
  - Are sensitized routinely to SGBV
  - Trained on SGBV organizational policies and protocols
  - Integrate SGBV into core and supplemental training programs
  - Provide SGBV training to others on a consistent, regular basis

### Organizational policies and protocols

- Ensure client safety, privacy, and confidentiality (includes management of client information)
- Establish accountability and enforcement mechanisms.

### Infrastructure and supplies

- Ensure facilities allow for client safety and privacy (e.g., private screening rooms) and procure emergency supplies
- Provide information, education, and communication materials such as rapid test kits and male and female condoms

### Public sector coordination

- Establish and maintain linkages with public sector responders (e.g., police and public health providers)
- Support training on and sensitization to SGBV, human rights, gender power relations, and legal obligations

### Related services

- Map existing services (including health, social, legal, and financial) to establish referral pathways and protocols

### SGBV screening

- Where referral services are available, adopt protocols to screen clients for SGBV
- Train staff to identify risk factors, ask clients about violence, and validate their experience

### Care for SGBV survivors

- Where referral services are available, adopt protocols for care of SGBV survivors

## Handout 6: The Story of Stelah and Banji – Case Study

Stelah lives with her husband, Banji, and her three children in a small house near the market. When they got married, Banji paid a high bride price to her family and, from the beginning, expected Stelah to work hard to make up for it. He would often tell her that he had paid a good price for her so she better work and be a good wife or else he would send her back and demand the money be returned from her family.

Stelah worked from early in the morning until late in the evening selling vegetables in the market. When she got home, she would be tired, but she had to cook dinner, fetch water, wash clothes, and look after her young children.

Banji would take the money that Stelah earned at the market and would go out in the evening. He would not come home until late, and often, he would be drunk and start shouting at Stelah. He would beat her in front of the children. Sometimes he would make her sleep outside to punish her if the food was cold or not cooked to his liking—and to show the neighbors that he was the boss in his house. Many of their neighbors were afraid of Banji and ignored the situation. Stelah was too ashamed to talk with her friends or neighbors about her husband. Although they would often see her with bruises on her face, they just kept quiet.

Considerations for Stelah:

- Is this situation realistic? Have you met women like Stelah?
- How do you think their sex life is – according to Stelah?
- How might Stelah cope with the abuse?
- What reasons does she have to stay in this relationship, despite the violence?
- How could HIV enter this household?

Considerations for Banji:

- Why might Banji perpetuate violence to his wife?
- In your experience, do people confront those who are violent towards women? Why or why not?
- How does our social structure support SGBV?
- Do you think it is possible that Banji's life would improve if he stopped being violent? How so?
- How could HIV enter this household?

## Handout 7: Examples of SGBV

PHYSICAL	SEXUAL
<ul style="list-style-type: none"> <li>• Beating</li> <li>• Molestation</li> <li>• Harassment</li> <li>• Slapping</li> <li>• Harming/hurting/inflicting pain in any physical way</li> <li>• Domestic Violence</li> <li>• Forced pregnancy</li> <li>• Forced Abortion</li> <li>• Forced Marriage</li> <li>• Torture</li> </ul>	<ul style="list-style-type: none"> <li>• Rape/marital rape</li> <li>• Defilement</li> <li>• Corrective rape</li> <li>• Sexual harassment</li> <li>• Sex trafficking</li> <li>• Forced abortion</li> <li>• Forced pregnancy</li> <li>• Unwanted sexual comments</li> <li>• Sexual assault</li> <li>• Incest</li> <li>• Traditional ceremonies such as spiritual cleansing or opening the way</li> <li>• Prolonged sex as punishment</li> </ul>
ECONOMIC	EMOTIONAL
<ul style="list-style-type: none"> <li>• Withholding family finances or resources</li> <li>• Preventing women from accessing assets</li> <li>• Destroying certificates</li> <li>• Forbidding education</li> <li>• Destroying jointly owned assets</li> <li>• Insisting that only a man's name is on all family assets</li> <li>• Prohibiting employment</li> <li>• Unequal pay for the same work</li> <li>• Property grabbing</li> <li>• Prohibiting women from working</li> </ul>	<ul style="list-style-type: none"> <li>• Forced marriage</li> <li>• Humiliation (public and private)</li> <li>• Yelling/shouting/verbal abuse</li> <li>• Demeaning remarks</li> <li>• Neglect/ignoring</li> <li>• Intimidation</li> <li>• Silent treatment</li> <li>• Isolation/forced confinement</li> <li>• Threats</li> <li>• Sexual denial</li> <li>• Withholding love</li> </ul>

## Handout 8: Five Domains of Gender Analysis Matrix

Five Domains				
<b>Access to assets and resources</b>	<b>Knowledge, cultural norms, beliefs, and perceptions</b>	<b>Gender roles, time, and space</b>	<b>Legal rights and status</b>	<b>Balance of power and decision making</b>

Within this domain, what are some gender-related issues that might limit or constrain achieving your results?

What are some ways for Z-CHPP to overcome these constraints?

Within this domain, what are some gender-related issues that might facilitate opportunities to better achieve results?

What are some ways for Z-CHPP to take advantage of these opportunities and use them to achieve better results?

How do the Z-CHPP activities affect men and women within your domain? Do they accommodate gender norms and stereotypes? Do they push gender norms and stereotypes to change?

*Adapted from USAID's Five Domains of Gender Analysis Matrix.*

## Handout 9: Action Plan for Gender Mainstreaming

Area of Responsibility	Mainstreaming Idea(s)	Who Is Responsible?	What is the Timeline?	What Resources are Needed?
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A

B

C



## Handout 10: Gender Mainstreaming Training Evaluation

1. On a scale of 1 – 4, please rate each learning objective:

**1 = not met**

**2 = partially met**

**3 = met,**

**4 = exceeded**

### Learning Objective

1. Define gender-related terminology.
2. Explain various stereotypes related to gender roles and how they can be limiting to men and harmful to women.
3. Understand key development approaches/concepts that aim to address these gender stereotypes.
4. Explain their own perceptions and assumptions related to masculine and feminine attributes.
5. Identify how gender norms and stereotypes can be harmful for girls and women, and limiting for boys and men throughout the life cycle.
6. Describe the linkages between gender and HIV.
7. Define sexual and gender-based violence (SGBV).
8. Understand how gender stereotypes can perpetuate SGBV.
9. Explain the linkages between SGBV and the spread of HIV.
10. Understand how to conduct a gender analysis using the Five Domains Gender Analysis Matrix.
11. Develop a gender mainstreaming action plan for your Z-CHPP activities.

**2. Please list and comment on the two modules that will contribute most to your ability to mainstream gender into your Z-CHPP activities and why:**

(1)

(2)

**3. Please provide any other feedback on the workshop you wish to share or want us to know. You may use the back of the paper.**



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