GIRLS' POWER INITIATIVE
(GPI) NIGERIA
"towards an empowered womanhood"

GIRLS' POWER INITIATIVE
(GPI) Nigeria

TRAINING MANUAL

LEVEL 3



Adolescent Sexuality, Sexual And Reproductive Health And Rights

Second Edition
2003

Edited by:
BENE E. MADUNAGU

GIRLS' POWER INITIATIVE (GPI) NIGERIA

TRAINING MANUAL

Level 3

GIRLS POWER INITIATIVE
DATE 28/5/2008

ADOLESCENT SEXUALITY, SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

GENDER-BASED APPROACH ON HUMAN SEXUALITY TOWARDS AN EMPOWERED WOMANHOOD

Second Edition
2003.

All rights reserved

All rights reserved. No part of this book may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording or any information storage or retrieval system without prior permission of the copyright owner, **Girls' Power Initiative, GPI.**

ISBN 978 - 36491-3-2



FIRST EDITION
1999

SECOND EDITION
2003

Published by
CLEAR LINES PUBLICATIONS
12 Bassey Duke Street, Calabar

ALPHAS

CONTENTS

Level 3

ACKNOWLEDGEMENTS	iv
FOREWORD	vi
PREFACE	ix
GIRLS' POWER INITIATIVE (GPI)	x
• GOALS	x
BACKGROUND AND GUIDING CONCEPTS	xi
GUIDING PRINCIPLES	xii
KEY STRATEGIES IN GPI PROGRAMMES	xiii
GPI INFORMATION, EDUCATION AND SERVICES	xv
INTRODUCTION	xvi
1. KNOWING ABOUT GPI	1
2. LIFE MANAGEMENT SKILLS	9
3. INFERTILITY	32
4. THEORY AND PRACTICE OF FEMINISM	39
5. REPRODUCTIVE TRACT INFECTIONS (RTIs)	51
6. UNDERSTANDING GENDER ISSUES	63
7. CONFLICT RESOLUTION	70
8. MENOPAUSE AND SEXUALITY IN LATER LIFE	76
9. LEGAL PROVISIONS/POLICIES ON THE HEALTH RIGHTS OF GIRLS AND WOMEN	82
10. ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS	91
11. VIOLENCE AGAINST GIRLS AND WOMEN	104

ACKNOWLEDGEMENTS

In 1998, we produced our first volume of the GPI Training Manual in our enthusiasm to share our experiences in sexuality education for adolescent girls in southern Nigeria. Since then, we have again learned so much in our interaction and experience -sharing with adolescent girls that we have amassed so much information that we wish again to document and present our experiences which may help people engaged in assisting adolescents to develop their talents and experience their sexuality positively.

It is not always possible to thank everyone who has made contributions to an achievement even though no contribution is too small to be acknowledged. Yet to do so here would take a volume of its own. I would, therefore, be compelled to mention those with direct involvement in the production of this volume, if indeed that is even possible.

My special thanks go to Ms Nanette Ecker of the Global Institute For Training (GIFT), USA who with the support of Andrea Irvin of the International Women's Health Coalition (IWHC), trained three of the authors of this manual namely, Bene Madunagu, Eka Bassey and Imoh Bernard in human sexuality education course in August 1996. I am certain that both of them will be thrilled by this product in the sense that the seed of sexuality education they sowed six years ago has grown perhaps beyond expectations.

Girls' Power Initiative runs a three-year programme for each set of in-take. This means that there are three levels of curriculum. The present manual was put together by a team of facilitators in GPI South -South zone, Calabar. These women worked tirelessly at their own time, individually, in groups, and plenary sessions to put this volume together. I commend their maturity, patience and commitment for having to write and re-write to include comments and to respond to constructive criticisms that often followed their presentation of chapters assigned to them. Those women who constituted the Training Manual Review Committee (TMRC) were initially Bene E. Madunagu, Chairperson, with Eka Bassey, Assumpta Ekpenyong, Imoh Bernard, Ofonasaha Ekpoudom, Ndodeye Bassey and Enobong James as members. Victoria Edet was later invited to join the committee. From November 2002 after Ofonasaha was involved in a motor accident, Helen Kanu

was invited to join the committee. I sincerely thank all of these women for their hard work. I need to single out Ndodeye Bassey for her sense of duty as the secretary of the committee. She produced the minutes of all the committee meetings to guide the proceedings of this documentation. She also typed more than 80% of the manuscript. My appreciation also goes to Inyene Regan Emah and Violet Nwaneri for assisting Ndodeye in completing the typing of the manuscript. Other staff of the GPI South-South, Calabar Centre willingly assisted in seeking for literature in the library, files of lesson plans, providing snacks at our meetings and in photocopying documents required by the committee members.

My very special thanks go to Professor Joann Stemmermann of Harvard Graduate School of Education, and Executive Director, The Centre for Ventures in Girls' Education, Bolton, who reviewed the Girls' Power Initiative (GPI) Training Manual. The comments, suggestions and sharing of experiences I received from her, gave us the insight into how best we should package this volume. She also offered the resources that enhanced our focus to improve upon the first volume of the GPI manual. Joann further offered her time to read and make comments on this text. She also arranged other contacts in Harvard who were also very helpful in making suggestions and providing resources and contact-information. I hereby extend my thanks to them - Sue Grant Lewis, Harvard Graduate School of Education; Lisa Sjostrom, Harvard Eating Disorder Centre, Janie Ward, Harvard Alliance on Gender, Culture and School Practice. These contacts were made possible by Cece Camacho, with the support of Corinne Whitaker and Frederica Stines of the International Women's Health Coalition (IWHC).

Our sincere thanks also go to our untiring supporters and collaborators, the International Women's Health Coalition for providing the funds and the consultancy with Joan Stemmermann to make this publication possible.

BENE E. MADUNAGU
AUGUST 2003.

FOREWORD

What if girls were to keep their psychological strength, courage and voice? What would the world be like if women said what they knew and said it with authority?

- E. Debold, M. Wilson & I. Malave, ***Mother-Daughter Revolution***

In many cultures, the passage from girlhood to womanhood is often difficult. Girls are expected to conform to stereotypical images of womanhood - being dependent, soft-spoken and submissive. These limited expectations of girls and young women are often passed on from one generation to the next without questions. Research in gender bias and developmental psychology reveals inequalities in educational practices towards boys and girls, as well as harmful behaviours such as under-achievement, depression and early parenting among adolescent girls. Researchers have also learned that girls and women have different needs, learning styles and cultural experiences than boys and men.

Knowing the challenges facing girls and understanding that girls are fundamentally different from boys raises many questions. What are girls' most pressing needs and how can we address them? What do girls need for healthy development? How can we create learning environments that support girls' needs? What strategies are effective in working with girls?

While the challenges facing girls in USA, Nigeria and around the world are great, I have equally great hope that these challenges can and will be met. I believe this because I had the great pleasure to learn about Girls' Power Initiative (GPI) and meet its founders, Bene Madunagu and Grace Osakue. Through my study of the GPI Training Manual and the many hours we spent together, I can see that GPI is filling a great need and making an obvious impact on the daily lives of girls in Nigeria. The GPI programme actively addresses the deeper structural needs and services. I believe, as others do, that GPI is poised to have an impact on the lives of many girls through adaptation of the programme to new sites and developing similar types of programmes using GPI principles.

The GPI Training Manual volume 2 reflects the courage, energy, wisdom

and hope of the founders, staff, girls and community partners who have been involved in the development of the GPI programme over the past eight years. It reveals the passion, commitment and dream of building a culture that can respect and celebrate the strengths and contributions of girls and women. The designers of GPI have developed a programme that combines teaching human sexuality, sexual and reproductive rights and health with personal empowerment skills to create a balanced and powerful model for addressing gender inequalities. Pairing the educational lessons with character-building skills gives girls the necessary judgement and decision-making tools to transfer what they learned to their own lives.

GPI gives girls opportunity to learn about their most pressing needs and then put those lessons into practice immediately. With GPI supporting them, girls in Nigeria have a chance to change their own lives and change the world around them.

As a practitioner in the USA, I also work to address the challenges facing girls by designing and implementing new programmes for girls. Over the past ten years, I have worked to find and implement strategies that create supportive learning environments where girls are taken seriously and can speak about what they know and build their natural talents. I was inspired by an 11th century definition of the word courage - *to speak one's mind by telling all one's heart* - used by a colleague, Dr Annie Rogers of the Harvard Graduate School of Education. When I think of modern definitions of courage, what comes to mind is an image of physical bravery or daring. The 11th century definition of courage says more about the courage it takes to speak of personal truths. A key component in the work I do with girls and women is to help them develop their courage - the ability to take risk to speak about what they know, regardless of the consequences. Speaking about our personal truth has been a powerful tool in developing our individual and collective voices for change.

As a faculty member of the Harvard Graduate School of Education, I guide teachers in designing girl-friendly classrooms and programmes. To meet the needs of girls in a classroom or programme, we start by identifying

the psychologically healthy girl. She is purposeful, adventurous, independent, self-directed, has the ability to think critically and take initiative. She might ride a bike, play football, read a book, or go to school. Most cultures have examples of girls in stories, books or the media that have these qualities. Some examples from the United States' culture are: Laura Ingles Wilder, a pioneer girl who wrote about her life in the book, *Little House on the Prairie;* Annie, from the Broadway play, "Little Orphan Annie", a story about an orphan who is unafraid despite the hardship in her life; and Pippi Longstocking, a character from a book of the same name, is a girl who is awkward in her body but smart and able to solve difficult problems. What stories are passed down about strong women and girls in Nigerian culture? What qualities do psychologically healthy girls in Nigerian culture have? Once you know their traits then you can support those qualities in the girls you teach.

In the ten years I have worked with girls, the most important lesson I have learned is that girls are not the problem. The problem is the oppressive culture in which girls live. If we can remember this we can avoid blaming girls for the challenges they face, and we can better support each other in our pursuit of equality. I invite you to use this manual, support the vision of GPI, and work to change the lives of girls all over Nigeria.

Courageously Yours,

JOAN STEMMERMANN
Founder and Executive Director,
The Centre for Ventures in Girls' Education
Faculty Member, Harvard Graduate School of Education

PREFACE

The programme on sexuality education has been identified by the Nigerian government as being crucial for the healthy development of Nigerian children. In 1998 for instance, 60% of all reported cases of HIV/AIDS came from the age group 15-24 years, who constitute more than 50% of the national population. Hence, the concept of Sexuality Education (SE) was accepted as critical to helping young people with the acquisition of adequate knowledge, skills and responsible attitudes in order to prevent and reduce sexually transmitted infections (STIs), including HIV/AIDS. Consequently, at the 46th session of the National Council on Education (NCE) in March 1999, approval was given for the incorporation of SE into the national school curriculum. - (National Sexuality Education Curriculum for upper primary school, junior secondary school, senior secondary school and tertiary institutions in Nigeria.

- Nigerian Educational Research and Development Council (NERDC), 2001.

Girls' Power Initiative (GPI) NIGERIA

Girls' Power Initiative (GPI) is a Nigerian non-governmental, not-for-profit, and non-sectarian organisation. The organisation was founded in 1993 by Bene E. Madunagu and Grace Osakue, to address the rise of HIV/AIDS in Nigeria and to address the issue of the growing need for a programme on sexuality education. At the heart of GPI are regular weekly lessons for adolescent girls, which started in July 1994. Girls' Power Initiative has since inception been involved in educating girls, aged 10-18 years about human sexuality, sexual and reproductive health and rights and responsibilities. GPI also operates many other activities designed to inform, educate and provide support services for girls, parents and community partners.

GOALS OF GPI

1. Assist the girls to achieve personal empowerment and to reject gender inequality;
2. Educate the girls to take actions to overcome risks to their health arising from gender violence and discrimination;
3. Build their leadership skills to overcome subservient roles and take on active engagement on equal basis with their male peers;
4. Sensitise them to take social actions and educate their peers on risky behaviours that are harmful to their health;
5. To provide information in order to assist them to struggle against harmful traditional practices so that they can claim their rights as human beings;
6. To provide information through participatory learning approach in order to impart life management skills and help them overcome gender stereotypes.

BACKGROUND AND GUIDING CONCEPTS

GPI acknowledges that:

- Adolescent girls carry extra burden of risks and gender violence with very few opportunities due to gender discrimination and the traditional practice of son-preference in the patriarchal society we live in.
- All adolescent girls, irrespective of their age, educational status (in or out of school), married or unmarried, with different ethnic and social background and class (poor or rich) with or without a child (children), etc, are vulnerable to gender-based violence.
- Most adolescent girls lack basic information about their sexuality, sexual and reproductive health and rights.
- Many adolescent girls are sexually exploited, a situation compounded by ignorance, poverty and socialization of servitude.
- Adolescent girls' development goes beyond basic health problems of malaria, cough, alimentary canal infection or poor water and sanitation-based ailments, into needs arising from their anatomy and physiology, particularly those related to secondary sex characteristics of pubertal changes.
- Sexuality, sexual and reproductive health problems of adolescent girls have common roots and are inter-related.
- Socio-economic, environment and religious injunctions have strong influence on behaviour of adolescents, particularly girls.
- Gender prejudices, discrimination, gender roles and gender inequality are fundamental to the issues of female enjoyment of their sexuality, sexual and reproductive health and rights of adolescent girls.

GUIDING PRINCIPLES

Adolescent girls should:

- Be able to remain free of diseases, disability or death associated with sexuality or sexual and reproductive health and rights.
- Have the right of access to comprehensive education and correct age-specific information on reproductive health, rights and responsibilities. This must be gender-sensitive, free from stereotypes and presented in an objective, non-judgemental, constructively critical and pluralistic manner. It must be secular in character with no religious underpinnings.
- Have the right to sufficient education and information to ensure that any decision they make relating to their sexual and reproductive life career and future status, marriage and child-bearing are made with full, free and informed consent.
- Have the right to be provided with full information about STDs, including HIV/AIDS and Pelvic Inflammatory Diseases (PIDs).
- Have the right to information about all methods of birth control and contraceptives.
- Sexually active teenagers should be provided with non-judgmental information, services and counselling on contraceptives, reproductive tract infections and complications from unsafe abortion.
- Girls have the right to live their lives free from violence. Every adolescent girl, irrespective of ethnic origin or tribe, religion or class has a right to information and services offered by GPI. The organisation must therefore of necessity and ideologically, remain a secular institution that is non-religious. This is a factor that cannot be compromised.

However, we hasten to add that GPI respects the rights of individuals to their personal religious values. All adolescent girls have the right to protection from rape, sexual assault, sexual abuse and sexual harassment. All adolescent girls have the right to be fully involved in all aspects of the development of their lives and that of their communities as leaders and as equal participants. True freedom and the exercise of these rights can only be achieved in a popular democratic and just society with gender justice, equality and equity.

KEY STRATEGIES IN GPI PROGRAMMES

- **Personal empowerment** - to build self-esteem, assertiveness, self-identity, positive body image and self-assurance in girls.

- **Life management skills** - to assist girls to build risk reduction skills, economic empowerment skills through information and education to develop communication and negotiation skills to encourage career choices, values clarification and goal-setting and for positive development.

- **Healthy interpersonal development** - to inform and educate girls on friendship, love, caring, gift-giving/taking, dating, fantasies, infatuation, intimate relationships, marriage, divorce and parenting.

- **Leadership skills** - to develop leadership skills in girls through information and education and goal-setting and · sion, chairing of meetings and rapporteuring skills, public speaking skills, reading and writing skills, creative thinking and problem-solving as well as decision-making skills and personal responsibilities.

- **Sexual/reproductive health promotion** - preventing related problems of sexuality, sexual and reproductive health and rights through information and education on pubertal changes, human anatomy and physiology, sexual health, including early, unprotected and unwanted sexual activity, contraception, abortion, sexually transmitted diseases, including HIV/AIDS, infertility and cancers.

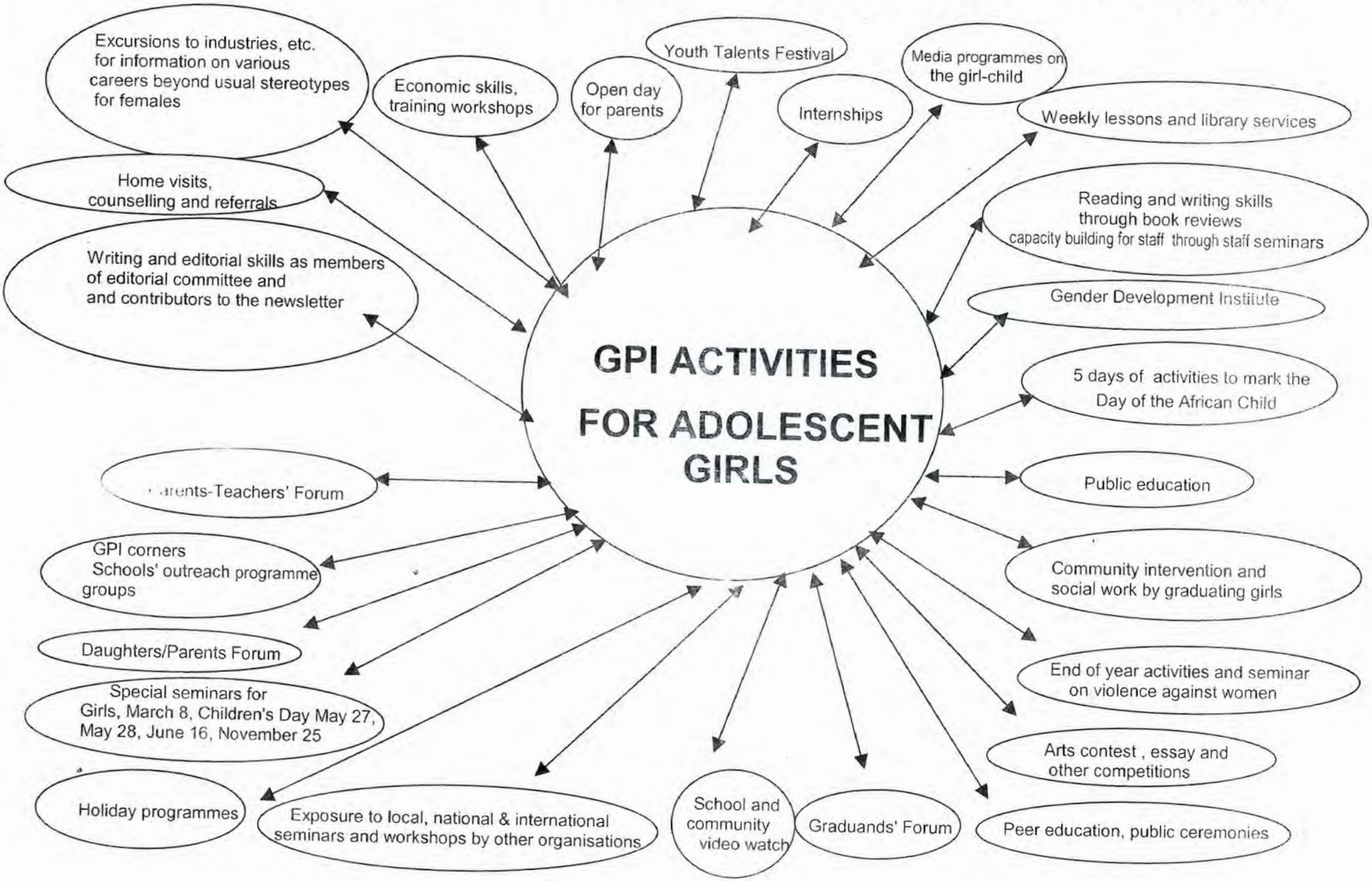
- **Support services** - assisting girls to solve personal health problems through counselling and referrals.

- **Sustainability, advocacy, networking** - responding to issues of sustainability through parents, teachers, health workers and service

providers and building political commitment through public education with the media and direct advocacy and interaction with policy makers and also networking and undertaking collaborative efforts with other youth- serving NGOs.

- **Safe space and supportive environment** - providing a safe space for recreation and learning through provision of video watch, educational games and library services for girls.

GPI INFORMATION, EDUCATION AND SERVICES FOR ADOLESCENT GIRLS



INTRODUCTION

Gender prejudices are embedded in language, expressions, culture, social values, songs and all aspects of life. Children are socialized into such sexist cultures. Therefore, GPI programmes are designed to break the sexist prejudices and assist girls to develop critical consciousness, overcome gender prejudices and to stand up for their rights.

GPI facilitators go through intensive training to acquire skills to be non-judgmental, good listeners, respectful. They learn to use non-sexist languages, e.g. humankind/people for mankind, spokesperson in place of spokesman, human resources in place of man power, etc.

They also learn to avoid such stereotypes which would see men as being superior to women. Examples are well chosen to avoid the culture of treating girls and women as dependent or subordinate beings by nature. Efforts are equally made to motivate and encourage girls' education and social participation. The girls are in turn, made to appreciate that there is no scientific basis for the differences in the daily tasks that males and females perform in the family and to appreciate how such gender discriminatory practices negatively affect activities like education, employment and hence social status of men and women, and how they place women as subjects to men.

GPI curriculum is thus, designed to empower girls to reclaim their courage to take actions to protect their rights through discussions about self-esteem, assertiveness, body-image and self-identity. Instead of telling adolescents only about the health risks and potential negative consequences associated with sex, adults need to provide young people with more balanced messages. Adolescents certainly need to receive clear, protective messages about sexual decision-making, because they need to hear affirming messages about healthy relationships and healthy sexuality.

"Sexuality is more than sex. It

touches on many aspects of life, including biology; gender roles, body-image and interpersonal relationships; thought; beliefs, values, attitudes and feelings; and sexual behaviours". (National Sexuality Education Curriculum for upper primary school, junior secondary school, senior secondary school and tertiary institutions in Nigeria - **(Nigerian Educational Research and Development Council, 2001).**

In their relationships, girls should learn to demand respect and be firm in protecting their bodily integrity. For this reason, they are made to appreciate why they should assert their rights as equal partners in a relationship to break the chain of male power in relationship. Emphasis is placed on male responsibility for their sexual behaviour, and mutual respect between partners.

Each lesson begins with the exploration of social concepts to bring out myths, misconceptions and gender prejudices. Discussions and sharing of personal experiences help to debrief participants by providing accurate and technical information to add value to the lesson learned. They are given opportunity for public speaking to break the gender prejudice that a female should be seen and not heard. Lessons and practices in leadership roles assist girls to overcome subservient tendencies and shyness and embolden them to assert their rights. The slogan here is: "What anyone is taught to do, the person can do it."

In each lesson, questions are raised to identify gender biases and how to deal with them. With respect to sexual health, emphasis is placed on rights to enable participants to realize that they have choices to make to protect their health. Discussions on the male and female reproductive systems - structure and functions as well as pregnancy and childbirth are presented to assist participants to understand why it is important to make the right choice about one's sexuality issues.

We utilize age-specific curriculum for each of the 3 levels in GPI, representing the 3 years in the programme. Girls are encouraged to share experiences and to debate; questions and discussions that follow are framed from a gender perspective. Video watch is also used as a tool to

generate discussions and draw lessons from a gender perspective. Activities such as youths talents festival, excursions, boys/girls forum, etc, are built in to break the gender prejudices inherent in careers, jobs and capabilities of female and male in society. Issues of violence against women are treated at all levels to assist girls' struggle against such gender-based pressures.

ROLE OF FACILITATORS

Since classroom-type of teaching or lecturing would not achieve the goals of the education, sexuality education, therefore, has to be provided through participatory methodologies. Participants are encouraged to learn from each other. Sexuality educators, or facilitators, therefore, require a variety of strategies, methodologies and resources to assist participants to acquire accurate knowledge and skills on sexuality, gender, health (sexual and reproductive) rights. Whatever strategy adopted must be sensitive to cultural norms.

The sexuality educator/ facilitator must first be comfortable with her/his sexuality and be fairly well educated in sexuality issues. A facilitator must be aware that her/ his values and attitudes may not always be the same as those of the participants and therefore should not force his/her views on participants, but provide accurate information and listen to their own views.

Some facilitating tools for comprehensive sexuality education include books, video films, posters, pamphlets, photographs, flipcharts, worksheets, markers, cardboards and colour printing papers.

TIPS ON FACILITATING SKILLS

In order to utilize this manual effectively, facilitators require the understanding of the basics of facilitating as different from teaching and need to be knowledgeable and comfortable with topics of adolescent sexuality, sexual and reproductive health and rights. Facilitators need to be aware that learning takes place by seeing, doing, experiencing and active participation and not just by listening.

Active participation involves: The use of effective questioning

techniques; acknowledging that every participant is a valuable resource and enabling participants to learn from and share with each other.

Facilitators also need to be aware that a conducive environment for learning should include:

- fun, laughter
- encouraging participants in the learning process
- mutual respect
- questions and answers
- warm, inviting and open environment
- *though facilitator is in control,* she/he should be willing to learn from participants
- exercises and games
- group cohesion.

TEACHING VERSUS FACILITATING

Teaching implies:

- Making participants accept what you present as a fact or principle without questioning
- Passing judgmental comments in response to incorrect answers
- Showing people how to do things, believing that they do not know how to do them
- Giving information on a subject without getting any from participants
- Making others learn from you only
- Giving knowledge without receiving in return.

Facilitating implies:

- Setting goals and objectives for the topic and allowing participants to show what they expect to learn.
- Assisting participants individually and collectively in their own learning experiences rather than teaching, lecturing or dictating out information.
- Being knowledgeable and familiar with the local situation and using relevant resource materials to effect learning.
- Being responsible for ensuring that the objectives of the lesson or training are achieved.
- Creating a relaxed, warm and comfortable atmosphere with free-flowing discussions.
- Avoiding judgements or comments during discussions.
- Avoiding ready prescriptions of ideas that will make all other ideas "wrong".
- Encouraging participants to explore alternative solutions that suit their experiences.

- Having ready for each topic, relevant up-to-date information.
- Giving individual participants, opportunity to be involved.
- Being sensitive to feelings, values and attitudes of participants.
- Being able to present lessons in a logical fashion.
- Using open-ended questions to encourage participants to freely communicate.
- Being able to accept participants' ideas, opinions and feelings without putting off or making value judgement.
- Allowing participants to do the talking.
- Using "I" messages (personal experiences) to encourage participants to share theirs.
- Being aware of non-verbal messages.
- Making sure that your body language shows that you are listening.
- Using various methods and exercises to sustain the interests of participants.
- Measuring that learning has taken place - i.e. evaluation.

BASIC STEPS IN FACILITATING

- Choose a topic, read about it. Prepare accurate/technical information from current scientific findings to add value to the lesson.
- Set simple, measurable, achievable, realistic and time-bound (SMART) objectives for the lesson.
- Know some social beliefs about the topic and get participants to supply other beliefs.
- Plan the activities to enable you to achieve the objectives.
- Use several techniques/methods to impart and obtain information on the topic.
- Engage the interest of the participants.
- Plan to finish within allocated time.
- Remember to check at the end if learning had taken place; i.e. evaluate the lesson.

NOTE:

Get the participants to set ground rules to create environment for learning, ensure mutual support and participation. Let the participants set their expectations before starting the lesson. In summary:

- Clear objectives

- Good planning
- Well presented with different techniques
- Well-timed and organised *agenda*
- Evaluation.

PROFILE OF A FACILITATOR

F - Flexible, Firm, Fascinating
A- Assertive, Alert, Accurate, Able
C- Confident, Communication skills, Clear thinking, Candid
I- Imaginative
L- Leader, Listener
I- Informed, Interested
T- Tactful, Talented
A- Active, Able to involve everyone
T- Thorough, Trusting
O- Organised, Objective, Observant, Open
R- Resourceful, Receptive, Respectful.

In addition, the facilitator has to be neutral, non-judgmental, knowledgeable, patient, sharp and professional.

METHODS

GPI methodologies for imparting sexuality education are varied. In the chapters that follow, methods are listed for each topic.

GPI facilitators use different methods to ensure students' participation, interest and learning.

- **Ice-breaker:** This is a warm-up *exercise to establish* group rapport. In GPI it starts with empowerment songs that girls have composed over the years. Ice-breakers or warm-up exercises, take different forms; from innovative and creative games to use of feeling-good cards with simple messages or questions that participant would read out, respond and comment on or react to.

Similar to ice-breaker is the use of "**Energizers.**" These are exercises used during lessons at any time when energy or attention is low.

Other activities include:

- **Role-play** to simulate situations and experiences familiar to the girls to generate discussions and draw lessons.
- **Use of cards** to check level of knowledge, review previous lessons and reinforce information.
- **Brainstorming** to generate ideas from the group.
- **Small group discussions** on

specific issues concerning the topic of the lesson. This is meant to create room for individual participation. The output would then enrich the lesson, build leadership and rapporteuring skills thereby raising the girls' self-esteem to see how much they know.

- **Visual aids:** Posters, diagrams and video watch are some of the visual aids used to assist the girls to think creatively and acquire analytical skills through discussions, based on what they perceive in the visual aids.
- **Assignment:** Different kinds of assignments are given for girls to learn to seek information and take responsibility of performing the task and reporting back.
- Individual work is given for each participant to write down her views on, and to demonstrate understanding of a subject so that the facilitator can assess the level of knowledge.
- **Matching exercise:** This could take different forms:
  - Two columns on a flipchart contains explanations or definitions, the other contains words or phrases and participants are made to match the numbers that go together.
  - Two or three columns can be drawn on a flipchart and participants are given cards with words or phrases or sentences to read and stick under the column each fits.
- **Reading:** Volunteers read out sections from a text book to give technical information or the facilitator could ask for volunteers to read from the flipchart or a text may be presented with missing words for a volunteer to read and fill in.
- **Writing:** On-the-spot tests can be given for participants to provide answers and exchange their work with their peers to grade each other. Participants can also present answers to questions and pin them up (stick-up) on the flipchart. This acts as an energiser as well.
- **Story lines or case studies:** To [illegible] problems for

comments and discussions.

- **Variations:** Designing working groups of twos, threes, etc, to enable all participants to be actively involved in the lesson.
- **Fish bowl:** This involves the actor-volunteers to stage a role-play or a skit and the others to observe the "actors." This is followed by comments and discussions.
- **Fish bones:** Fish skeleton is drawn on a flipchart and bones put on one side. On top of the side with bones is written, "HINDERS" and on top of the other side is written "HELPERS". One group writes on the bones, the things that hinder the solution of a problem and the other group writes on the plain side, what helps as well as the strengths to address the weaknesses in an action plan.
- **Myths and facts:** Statements are given and participants identify which is a myth and which is a fact and give reasons for their choices. This can take the form of "True or False"; "Agree, Disagree, Not sure" and physical movement to where the captions are pasted to indicate their choice. Volunteers in each group then state reasons for their choices.
- **Evaluation:** Each lesson is evaluated using different techniques to assess if learning has occurred.

Others do not have to use these particular methods but should feel free to choose the ones that would work best for her/his audience and culture.

IMPLEMENTING THE PROGRAMME

GPI conducts 3-hour sessions once a week throughout the year; beginning in September and ending in June. Girls progress through a 3-year curriculum, including Level 1, Level 2 and Level 3. Training sessions do not hold on Easter and during the two-week Christmas and New Year holiday period. Ideally, thirty girls in a group is recommended to enable the facilitator to effectively engage all participants. This also makes it easier for all participants to be involved. From our experience, it is more useful to have girls of about the same age in a group. Thus, 10 and 11-year-olds can be in one group, 12 and 13 in another group

and yet, 14 and 15 in a separate group, while 17 -19 can also be in one group. It is difficult to get girls of 10 years and above 15 years in a group to benefit maximally, given the difference in experiences and needs.

It is more useful to use practical and comical methods as well as story-telling and role-plays in presenting lessons to the younger girls of 10-14; and better to use personal experiences for older girls and to give appropriate responses to problems aired by them to generate interest for girls above 15 years. Their interest and needs differ and so should the methods of training. For both groups - younger and older adolescents, the use of "small group work" to enable them to participate and think of the contents of each lesson together, not only reassures them of their resourcefulness, but helps to build group solidarity. It is also empowering for them to know that they can collectively find solutions to problems they face, thereby giving them a sense of independence; an important element in growing up, empowered. The younger girls of 10-13 years would also need a break of about 20 minutes for games and outdoor exercises of their choice, during the 3-hour per week sessions. This helps to sustain their interest and concentration.

For both groups, relevant songs and energizers would help to maintain their interest, enthusiasm and concentration. For example, after a lesson on body-image, the song that they find useful is ***"I feel just right in the skin I wear, there's no one like me anywhere."*** This would make them to visualise and reinforce the lesson that they are each unique; a notion that helps to make them accept who they are, while also encouraging them to take actions to defend their rights and raise their self-esteem. When time constraints require fewer lessons, we suggest the following adaptations: 1-year programme - use the Level I manual; 1-week programme-use lessons #2, #3, #4, #5 and #6 in the Level 1 manual.

TIPS ON USING THE MANUAL

It is important to understand that beneficiaries must first go through the lessons on Knowing About GPI, Human Sexuality, Self-Esteem, Vision and Goal-Setting,

Violence Against Girls and Women, Adolescence, Values Clarification, Friendship and Love, Knowing-Me-Knowing-You, Feelings, Gender and Leadership Roles, Rights and Responsibilities. This means that lessons in Level 1 need to be covered as a pre-requisite and basis for treating the topics in Levels 2 or 3.

The Level 1 lessons are for all beginners; whatever the age at registration. There should not be assumptions that girls above age 14 do already have information regarding the Level 1 topics. It would be more productive to use the manual from Levels 1 through 2 to 3 for effective and sustained outcome. Each volume is however valuable as reference in organizing workshops and training for facilitators. In such cases, the facilitators must first go through facilitating skill training sessions. The elements for facilitator's training are presented in the text.

It is also important for young people in the programme to be encouraged to use the GPI lessons in their daily lives wherever they are; at home, in the school and in the society at large. This will help them internalize the lessons and to bring about the intended behavioural changes. This is why there is also need to build in a forum to learn and get the support of parents and teachers for the programme.

In whatever situation users of this text may find themselves, there would always be an environment of adultism, intolerance for social changes, confusion and skepticism arising from people's culture, norms and even religious values. It is therefore, important to understand that what GPI is offering here is an attempt to create an environment that would present a fundamental shift from silence about sexuality to openness and honesty in assisting young people to learn about their growing-up. Young people need to learn from adults about their physical, emotional and anatomical development. They also need to know that they will face resistance and conflicts in their relationships with family members, friends, teachers and others in their lives. However, these things have to happen in the short-run to create the environment for lasting healthy development and mutual respect towards gender and social justice.

In the final year, participants are required to carry out social work project, designed and implemented by them. They are also given opportunity to plan and conduct lessons to build their skills to share and expand the knowledge they have gained from the programme. The creation of the Alumnae Association is similarly directed at sustaining GPI experience in the lives of girls after graduating from the programme.

CONDUCTING A GPI LESSON

Each lesson needs to be conducted in a room, spacious enough to accommodate thirty participants comfortably with space for participants to have about 5-6 small group work involving everyone equally. Participants are also encouraged to create and act short drama on each topic as this helps to strengthen lessons learnt.

During the year, the evaluation of each participant is conducted and at the end of the year, there is assessment to enable the organisation to decide on who moves to the next level. Thus, participants get promoted yearly from Levels 1 to 2; 2 to 3, where they then graduate. For participants who do not meet the criterion for promotion, it is important not to lower their self-esteem. Thus, such participants are moved to the next group, but of the same level where they still repeat the lessons of that level to empower them to meet the requirements for promotion to the next level.

TYPICAL LESSON PLAN

Each lesson begins with empowering songs and energizers selected and conducted by the girls and led by a girl who would volunteer to chair the session. For each lesson, there is a volunteer chairperson and a volunteer rapporteur. The roles rotate at each lesson. The chairperson prepares the lesson plan and presents to the class for amendment and adoption. A typical lesson plan looks like this:

Date:
Group name:
Chairperson for the day:
Rapporteur for the day:
Facilitator(s):
Introductory session: Led by the chairperson for the day:

- Opening: songs
- Report of the last lesson: by previous rapporteur

- Corrections and comments on the report by participants
- Checking-in: This involves girls sharing experiences of how they applied previous lessons in their lives. This usually generates debates, discussions and comments.

Review of previous lesson (method depends on level and age of participants).

Lesson for the day by facilitator: Involving different methods, including energizers. The lesson plan consists of:

- **Goals** - This describes the intended learning that will occur during the specific lesson
- **Objectives** - This describes the specific skills to be gained through the lesson
- **Concepts/common beliefs** - They describe what the society holds to be true but which is not actually true. It may involve the facilitator asking participants to come up with what they have heard people say about a particular issue; which is believed or held to be true but which in actual fact is not true. Facilitator will also need to add to the output. This will serve as part of the wrong notions to be demystified during the session.
- **Methods** to be used for imparting the lesson - This describes the various activities to be used during the lesson
- **Opening** - This session is led by the chairperson of the day and it includes: opening songs; a report of the last lesson by the previous rapporteur; corrections and comments on the report by participants; checking-in: which involves girls recounting their experiences of how they used previous lessons. There will also be debates, discussions, lesson clues and goal-setting.
- **Announcements and assignments** - This time involves giving notice of activity to be held within the week, selecting group representatives for such activities or *giving* information on any pressing issue.

Lesson evaluation and self-reflections - This is when to give

either a take-home/action assignment or stem sentences to enable participants to say what they have gained from the lesson, and possibly comments on other areas not understood.

Self-reflection consists of getting individual girls to say one or two things that the lesson meant for them personally:

- What it is that each person learned that surprised her;
- Perhaps just saying or writing 5 words that would indicate what the lesson did for her.
- **Closing songs** - Here, participants sing empowering songs or songs relating to the session topic/issue, together with exercises, before closing for the session.

CRITERIA FOR PROMOTION

There are three levels. Level 1 consists of newly registered girls. Registration is once a year, in September, since the graduation for the 3rd level and hence final year, takes place between the end of July and the first week in August. On registration, questionnaires are administered to assess the level of information acquired, knowledge, attitudes, beliefs and other social tendencies of the girls. This provides the background data for measuring impact of the programme. Girls are assigned classes, based on their age, but all the classes in the first level use the same curriculum. Level of discourse and methods differ with age of participants.

Using the example of the South -South, Calabar centre, the three levels constituting the three years for the period of the programme for each set of girls, comprises altogether 8 classes. There are 3 classes in the first year (first level) namely: ***Shining Stars, Precious,*** and ***Silvers.*** There are 3 classes in the 2nd year, namely: ***Pearls, Alphas*** and ***Bosoms.*** There are two classes of the graduating level, in the programme - the ***Damsels*** and ***Seeders.***

Level 1 (First year) -Shining Stars
10-11 years - Precious
11-12 years - Silvers 15 and above

Level 2 (Second year) -Pearls
11 - 12 years - Alphas
13-14 years - Bosoms
15 and above

Level 3 (Third year) -Damsels

12-15 years -Seeders
16 and above

Shining Stars are promoted into **Pearls** in the second year, but if on evaluation at the end of the first year, some do not meet the criteria for promotion, in order not to lower their self-esteem, they would still be "promoted" into **Precious** where they continue with Level 1 curriculum for another year. **Precious** girls are promoted to **Alphas,** while **Silvers** are promoted to **Bosoms**. The 3rd year participants consist of those promoted from the 2nd level classes, who have met the promotion criteria. Those between 12-15 are in **Damsels,** while 16 years and above are in **Seeders.**

Promotion criteria

⇒ Regularity at lessons
⇒ Active participation
⇒ Demonstrating understanding of lessons taught
⇒ Changing attitudes and behaviour
⇒ Social intervention activities undertaken.

The class names: **Shining Stars, Precious, Silvers, Pearls, Alphas, Bosoms, Damsels and Seeders** represent what the girls chose for themselves for the philosophical underpinnings stated below. Hence, users of this manual are free to choose their class names as they deem fit.

1. **Shining Stars:** (Level 1) - These, as stated above, are mainly 10 and 11-year-old girls. They chose the name based on their conviction that they shine like stars in the midst of their peers. They stand out for their knowledge, assertiveness and boldness.

2. **Precious:** (Level 1)- These are the 11-12-year-old girls. Their name depicts the assertion that they are distinct and highly valuable gems that stand out at their age as assets in the struggle for gender equality.

3. **Damsels:** (Level 1) - These are girls aged 15 and above. The name literally means young unmarried, but distinguished young women because of their knowledge, skills, assertiveness and behaviour as different from

other girls of the same age who would lose their focus from lack of proper guidance.

4. **Silvers:** (Level 2) - These are 11-12-year-old girls. They see themselves as clear, level-headed, convinced and persuasive assets for women empowerment and gender equality.

5. **Pearls:** (Level 2) - Girls aged 13 and 14 years who see themselves as rare gems exhibiting clearly superior and diverse but quality knowledge and information and therefore of immense value for women empowerment.

6. **Alphas:** (Level 2) - Girls aged 15 and above literally the first among equals; the pivot of women empowerment; bold, assertive and knowledgeable about human sexuality, adolescent rights and responsibilities.

7. **Bosoms:** (Level 3) - Girls aged 12-15. They perceive themselves as distinct and cherished advocates and therefore the heart (bosoms) of gender equality.

8. **Seeders:** (Level 3) - Girls aged 16 and above. They see themselves as feminists in the making and therefore as the seeds for feminism and gender justice, activisim because they are already taking courageous actions to claim their rights.



CHAPTER ONE

KNOWING ABOUT GPI

GOAL:

To assist girls/participants to increase their knowledge of the organizational fundamentals and get them involved in working to achieve the organizational mission.

OBJECTIVES:

By the end of the session; participants would have been able to:

- Appreciate the activities of the organisation and the need for its existence
- Understand what GPI stands for
- Understand the conceptual framework and the basis under which the organisation carries out its intervention processes
- Appreciate the reasons why GPI's focus is on girls as its beneficiaries
- Debunk the wrong notions and misconceptions about the organisation
- It is also expected that by the end of this session, participants would have been fully informed to be involved towards the attainment of the mission of the organisation.

COMMON BELIEFS/CONCEPTS:

- GPI encourages girls to start early sexual activities;
- Oppose men in the society;
- It is a cult that is why it is non-religious and its services are free.

MATERIALS:

Flipcharts, board, markers, stick tapes, ball pens, pieces of paper, facilitator's resource on Knowing About GPI.

ACTIVITY/TIME:

This topic requires a duration of one hour, fifty minutes (i.e. to be taken in segments).

- Flipchart display / brainstorming (20 minutes)
- Matching exercise (20 minutes)
- Individual work/brainstorming (20 minutes).

PREPARATION:

Over the years, our experience with adolescent girls has revealed the level of ignorance, falsehood, misconceptions and misinformation about what GPI stands for. Staff, girls, parents of GPI girls, friends of GPI and other individuals who believe in what GPI does for the young girls have had personal confrontations and attacks in attempt to defend the organisation. Therefore, through this lesson we aim at breaking the myths and misconceptions about the organisation.

LESSON SEQUENCE

Opening

The chairperson of the day will begin with opening songs and call for the report of the last lesson by the previous rapporteur and corrections, comments on the report by participants are taken and checking-in is also entertained.

Song: Oh GPI you are a mother indeed/Made known to us so many things we never knew/We never knew we were so important/But you gave to us/ All we need to live/ A fulfilled life.

Energizers/ice - breakers

These are quick activities that can be used to introduce the topic, and manage the energy and attention of the group and to have fun. Select an energizer from the appendix or devise one.

Lesson topic

Segment 1

Activity 1:

Flipchart display / brainstorming

Ask the group to read out the title for the session on the flipchart. Lead the participants into a brainstorming session, using the questions listed below:

- What organisation do you know that deals with the problems of the child in your community?
- Which other projects or programmes address sexuality education?
- What type of organisation is

GPI?

List their responses on the flipchart. Process their answers and add value using technical information.

Activity 2:

Matching exercise

To highlight the intervention strategies adopted by GPI to achieve its objectives.

- Present the characteristics listed below on the flipchart or list them on small sheets of paper and give to each participant.
- Ask them to identify those that are peculiar to GPI.
- Ask them to give their reasons for the use of each strategy.
- Add value to the discussion as you process the responses.

Give technical information on:

a) Eating disorders among youths.
b) Youth leadership and empowerment.
c) Political campaigns.
d) Youth apprenticeship.
e) Human rights.
f) Workshops and seminars.
g) Skills development.
h) Goal achievement/excursions.
i) Health information and services.
j) Strategic planning.
k) Creative and critical thinking.
l) Research and survey.
m) Forest reservation and environment.
n) Credit scheme.
o) Adolescent-friendly health services.
p) Community mobilization and participation.
q) Information and education.
r) Disharmony in relationships.
s) Religious teachings.
t) Training.

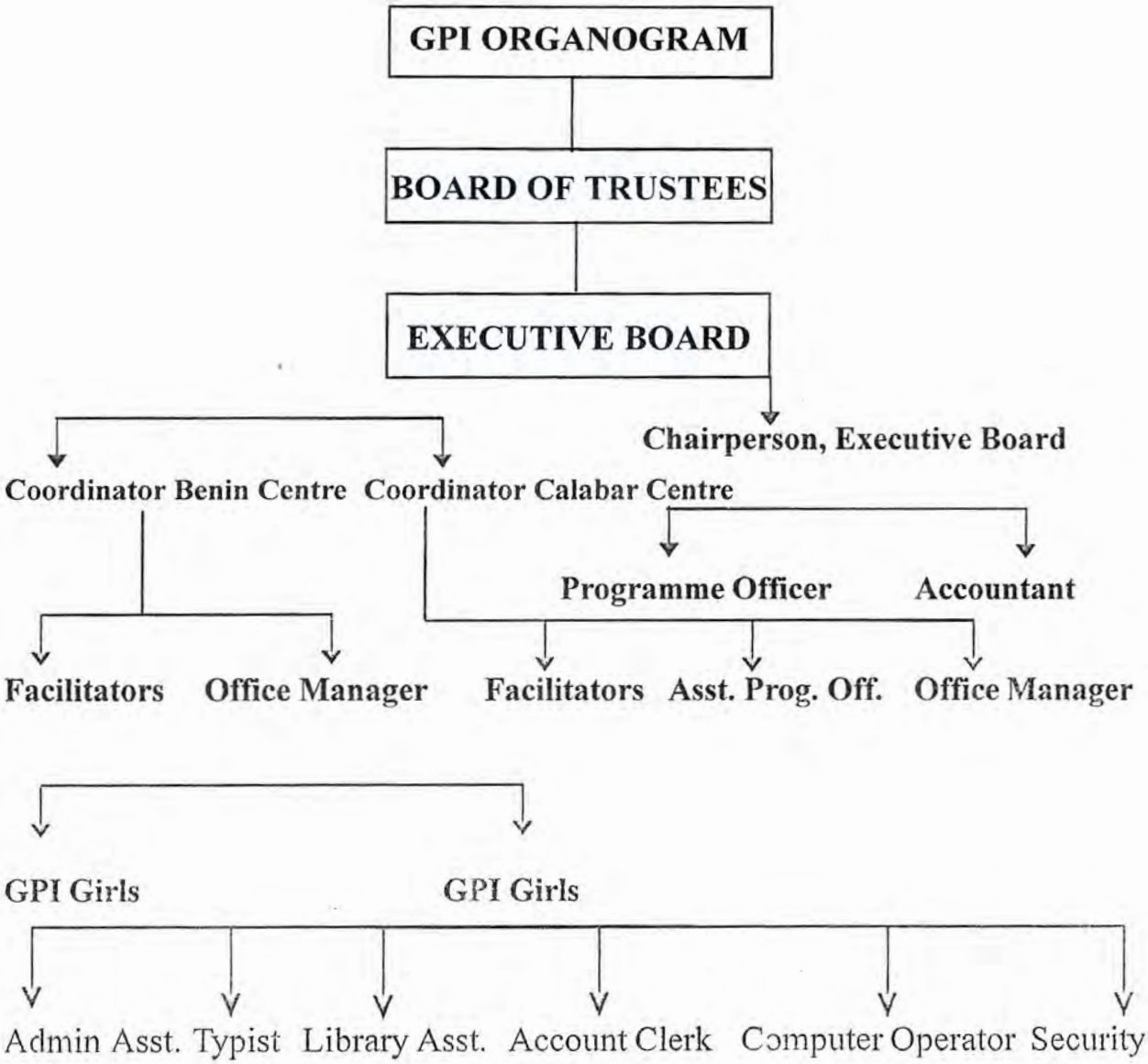
Activity 3:

Individual work/brainstorming

For the girls to recap on the organizational structure:

- Ask them to present a GPI organogram to show an order of authority.
- Let them indicate the responsibilities, roles and duties of each individual represented.
- Lead the girls to stick their diagrams on the flipchart or board.
- Go through the responses.
- Add value.

Technical information from Facilitator's resource: **GPI ORGANOGRAM**



Segment 11

Aim: This segment aims at assisting the girls to have more insights into why GPI focuses on girls only.

Activity 4:

Brainstorming

Every organisation has a focus. GPI is more concerned about girls and women rather than boys and men. Why?

- Girls to list the reasons while the facilitator notes them down on the flipchart
- Facilitator then provides technical information.

Activity 5:

Brainstorming

To know GPI's sources of funding

QUESTION: What are the sources of GPI's funding that you are familiar with?

Activity 6:

Individual writing exercise

This activity will differentiate between the direct services to the beneficiaries and the public.

Facilitator should ask questions in different ways in order to achieve the aim e.g:

- Have you participated in any activity so far?
- Does GPI provide services to the public?
- What are the services?
- At what cost does it do these?
- Rule a line to create two sections: A and B and label, 'services to the public' and 'services to the adolescent girls, respectively.
- Let the girls name each of the services.
- Girls to indicate on their paper the words, 'Free' or 'Not Free' on the services identified by them.
- Let them stick it on the flipchart or the board.
- Process the answers provided by them and give technical information.

Activity 7:

Brainstorming/general discussions, agree/disagree exercises

To know the achievements of GPI:

- Let the facilitator create two columns on the flipchart. Name the columns, "HURDLES" and "JOURNEY SO FAR"
- Ask the following questions: GPI has existed from 1994 till date; do you think that there have been any barriers, obstacles or problems in its attempt to achieve its set objectives and goals?
- What success stories about the organization do you know of?
- Ask them to list as you write on the flipchart.
- Repeat the 'women's decade song' and highlight the phrase, "women are longing to be free."
- Note the phrase by asking the following:
- From the responses given, do you agree or disagree that the young women who were "longing to be free" are free or not?

NOTE: This is to enable them to discuss the impact of GPI's interventions on the lives of young girls and in the long run to highlight the achievements of GPI.

- Provide factual information:

Self-Reflection/Evaluation

- Ask the participants to discuss what they have learnt during the session
- List responses on the flipchart
- Use their responses to review, re-inforce information and to clarify issues that may have been misconceived.

Closing

This is a time to engage in self - reflections, make announcements or sing a closing song.

TECHNICAL INFORMATION

What is GPI?

Girls' Power Initiative (GPI) is a non-governmental, not-for-profit-making and non-partisan organisation. It addresses adolescent sexuality and pays particular attention to the issues affecting the girl-child. It runs a non-formal three-year educational programme for young girls, aged 10-18 years. GPI is a gender-sensitive organisation that critically examines issues of consciousness of young adolescent girls to ensure positive changes and the abolition of discriminatory practices against women in Nigeria.

GPI strategies

GPI uses various strategies to reach the adolescent girls in its programme . These are:

a) Weekly sessions held at the two centres for members. The Calabar centre holds its meetings on Sundays between the hours of 3.00pm and 6.00pm.

b) The school outreach and holiday programmes are conducted for some secondary schools located in Calabar in Cross River State and Benin in Edo State, Uyo in Akwa Ibom State and in Delta State. This assists GPI to reach out to girls who are unable to attend the weekly lessons at the centres.

c) Skills training workshops are regularly organized for economic empowerment.

d) Excursions and tours to institutions and establishments to have a feel of professions and careers other than the gender-based stereotypes.

e) Counselling and referral services for young girls as well as other members of the public who may face gender violence and discrimination.

f) The library resource unit opens from Monday-Friday for public education on gender sensitive

issues of health, human rights, sexuality.

g) Production of a quarterly newsletter the GP *(Girls' Power)* for creating awareness and for keeping the girls and the public informed on adolescent concerns.

h) Research, documentation and publication in forms of books, manuals, pamphlets, leaflets; for increased awareness on issues affecting adolescents.

i) Community work/social action by graduating girls in which GPI mobilizes women in the rural communities for informed participation and decision-making on their sexual and reproductive rights.

j) Conduct of baseline surveys of issues affecting adolescent girls.

k) Development of age-specific curricula for sexuality education of adolescent girls.

l) Daughters'/Parents' Forum regularly held to aim at improving communication between parents and their daughters.

m) Parents/Guardian/Teachers/ Health Providers' Forum is also organised to sensitize them on adolescent issues.

n) Creating public awareness through media workshops and campaigns, involving the stakeholders at different levels in seminars and workshops.

o) Training courses and workshops for staff, NGOs, government parastatals, associations, community-based organizations and youths to help them become - gender-sensitive and critically conscious.

Monitoring and evaluation, done to assess the impact of the project at the end of every project year.

Why GPI focuses on girls

- Early sexual activity
- Early marriage
- Unsafe abortion
- Discrimination against girls and women
- Violence against girls and women, e.g. son-preference
- Exposure of young girls to dangerous health risks, including HIV/AIDS and other STDs (sexually transmitted diseases)
- Lack of adolescent-friendly health services
- Gender-biases and prejudices
- Stereotyped gender roles in the society

Sources of funding for GPI programmes

In order to successfully implement its

activities, GPI seeks and secures resources from private foundations, and international donors such as The Ford Foundation, The John D. and Catherine T. MacArthur and International Women's Health Coalition. Others are the Population Concern and Equality Now.

The resources provided range from financial, material and human.

Financial Resources - Grants are approved for the execution of specific activities and interventions on adolescents' sexuality and women empowerment for the future.

Material Resources - Some of these are books for the library, office accommodation, which houses the administrative block and the rooms which the programme beneficiaries receive their lessons, stationery and other items required to conduct skills training, educational activities and public enlightenment.

Human Resources - GPI also receives support to recruit and employ the administrative personnel and the project execution team members as well as other technical support staff to run its programme.

Services provided by GPI

The services provided by GPI to the public are:

* Library services
* Parents, teachers, guardians and health providers forum
* Public enlightenment seminars and workshops
* Publications
* Training
* Community intervention and social work
* Campaigns and advocacy through television, radio and sensitization walks
* Home visits and counselling
* Parents/daughters forum
* Commemoration of national and international events.

Achievements of GPI

- The number of girls has risen from 15 to about 3000 young girls.
- Six sets of young girls have graduated from GPI
- Community, national, government and international recognition.

REFERENCES

1. GPI News Bulletin.
2. *GPI at Five,* by Grace Osakue.



CHAPTER TWO

LIFE MANAGEMENT SKILLS

- CREATIVE OR LATERAL THINKING
- TIME AND STRESS MANAGEMENT
- PUBLIC SPEAKING SKILLS
- ADVOCACY AND NETWORKING SKILLS

GOAL:

Empower girls through life management skills that would give them the right to make informed decisions on issues affecting their lives.

CREATIVE OR LATERAL THINKING

OBJECTIVES:

- To learn about what creative thinking is;
- To learn to identify barriers to creative thinking and explore common ways of killing creative thinking;
- To differentiate between creative and logical thinking;
- Explore and learn ways to developing ability to think creatively.

CONCEPTS/COMMON BELIEFS:

Facilitator to help generate and list out some common wrong notions from participants by asking them what they hear people say about creative thinking.

Example of concepts: e.g.;

- That somebody who thinks creatively is not normal
- That creative thinking is inherited
- That girls cannot be creative
- That a woman can only think through the man
- That a young person, especially a girl that is creative has supernatural power or is a witch
- Creative thinkers are inspired by demons
- Thinking creatively causes madness
- That a person would be questioning what is real.

MATERIALS:

Flipchart, paper and markers; blackboard and chalk, diagram as well as facilitator's resource on creative or lateral thinking.

ACTIVITY/TIME:

- Brain teaser -(10 minutes).
- Warm - up exercise - (15 minutes).
- Group work - (30 minutes).
- Adding value - (50 minutes).
- Self-reflection - (15 minutes).

PREPARATION:

Creative thinking is something usually attributed to geniuses. Young people especially girls believe that it is not meant for them, and so do not bother knowing the actual meaning of it.

LESSON SEQUENCE

Opening

Start the session with a brain-teaser to prepare participants' minds for the topic. For example, paste a drawing on the board and ask participants to describe and identify.

Energisers/ice-breakers

Questions:

1. Divide 30 by half and add 10. What is the answer?
2. If you had one match stick and you entered a dark room where there was an oil lamp, oil heater and some wood, which will you light first?
3. A farmer has twelve goats, all but one died. How many goats does he then have?
4. In Ghana, July 4 is

Independence Day? In Nigeria, do we have a July 4?

5. If a doctor gave you three pills and told you to take one every half-hour, how long would they last?

Discussing correct or wrong answer will generate thought and information from participants.

Activity 1:

Brainstorming exercise

Ask participants to attempt definitions of creative thinking starting with: "To create means..... List answers on flipchart and process.

Add value on the definition of creative thinking

* **Creative thinking** is imaginative thinking. It produces new ideas, new ways of looking at things. It relates things or ideas that were previously not related.

Further clarify definition by discussing and comparing creative and logical thought processes.

Creative	**Logical**
• Considers ideas not easily seen	• Uses straight forward ideas
• Looks for what is different	• Looks for what is right
• Makes deliberate jumps	• One thing must follow directly from another
• Welcomes chance instructions	• Concentrates on relevance
• Explores the least likely	• Moves in the most likely directions
• Is deeply influenced by culture	• Not influenced by culture

Activity 2:

Group work

Constitute two groups to discuss and record on flipcharts their responses to the following questions:

Group 1:

What do you consider as barriers to creative thinking and what are your recommendations for breaking away from the barriers?

Group 2:

What are the things that can enhance the ability to develop creative thinking and how can it be developed?

Rapporteurs of each group to present report for further additions, comments by other participants.

Self -Reflection/Evaluation

Ask participants to present drawings or construct statements to illustrate their understanding of what creativity or creative thinking means. Present for comments.

Closing

Proceed from self-reflective activity to encourage participants to talk about their feelings on the session and new revelations that must have crossed their minds. This could also be a time to make announcements, exchange pleasantries or sing a song.

- Explain to the group that creative thinking is one of the life management skills to be taken in the series.

Action assignment

Ask participants to write an essay on how time can affect one's creative thinking. This should be presented before the next session. Or recount your experience during the lesson with a close friend.

TECHNICAL INFORMATION

(a) Barriers to creative thinking

- Following a pattern of past habit "This is the way we have always done it"
- Failure to think through old assumptions
- Low self-esteem and fright
- Being hard on yourself over certain issues (when there may be options)
- Lack of efforts in challenging the obvious
- Thinking in sequence (logically) instead of within context
- Following pressure to conform
- Evaluating and withdrawing too quickly
- Time factor
- Fear of failure

Common ways that kill creative thinking

- It won't work
- We are already doing fine
- It's impossible
- It won't solve the problem (without even trying)
- I've been trying before now

- It's very risky
- I am poor, I don't have money
- That thing is not practicable
- It will bring quarrels and disagreement
- I have not acquired a university education.

How to develop ability to thinking creatively

- Self-analysis to identify strengths and weaknesses
- Break from restrictions and negative conformity
- Opening the mind to new ideas
- Improving communication skills
- Reading *creative books*
- Being alert and aware of new things in your environment
- Being imaginative to create new images and ideas.
- Having self-confidence and being independent
- Delaying judgement until you have thoroughly explored the alternatives
- Thinking beyond your world.

Breaking aware from constraints on your ability to generate new ideas

- Identify the dominant ideas influencing your thinking
- Define your own boundaries by asking question - "are the constraints reasonable? What's the difference between the past experience and present situations?"
- Always ask for the possible options at that time
- Keep asking 'why" because answers are bound to change from time to time
- Be sure to discontinue and chart a new course
- Be led by the spirit of your imagination.

REFERENCES

1. GPI Training Manual (1st Edition) and Lessons Output
2. Akina Mama Wa Afrika, Training Manual of the African Women's Leadership Institute, Ghana, 1999.
3. *The 26% Youth Solution* - Wendy Schaetze Lesko; Activism 2000 Project and Emmanuel Tsourounis
4. *Girls and Young Women Inventing* - Frances A. Kernes, Ph.D and Suzanne W. Been, Ph.D.

TIME AND STRESS MANAGEMENT

LEARNING OBJECTIVES:

- To enable participants to explore and learn meaningful ways of using time
- To enable participants to appreciate what constitutes stress and learn how to deal positively with it
- To recognize time control as a key factor for stress management.

MATERIALS:

Flipcharts, papers and markers, blackboard and chalk, facilitator's resource on time and stress management.

ACTIVITY/TIME:

- Action - agenda for the lesson (5 minutes)
- Group brainstorming and discussions (20 minutes)
- Adding value and defining time management (20 minutes)
- Role - play by volunteers to clarify definition (20 minutes)
- Group work in pairs on tips for effective time management (30 minutes)
- Evaluation of action - agenda of the lesson (15 minutes)
- Case study on stress management - Mary's story (20 minutes)
- Writing exercise on defining stress, causes and types (15 minute
- Self - analysis test (15 minutes)
- Evaluation session(15 minutes).

PREPARATION:

Facilitator introduces the topic and explains that often times, wrong management

of time causes stress.

LESSON SEQUENCE

Opening

Start the session by entertaining report back from reporters on the last session, singing and making of announcement and taking down individual expectations for the day.

Energizers/ice-breakers

a) Present an action-agenda for the lesson and emphasise that participants adhere to time strictly during the lesson.

Sample of the action-agenda

10 - 10.10am - Welcoming and introduction of lesson topic

10.10 - 10.20am - Presentation of training objectives.

11.45am - 12pm - Wrap-up exercise.

Lesson topic

Activity 1:

Discussion

Present the following quotations for participants to comment and discuss with examples on issues of:

* "Time is now"
* "Time past is history"
* "Time waits for no one"
* "Time to come is only assumption"
* "Time is always available."

NOTE: The idea behind the exercises is to enable participants to explore the meaning of time themselves and learn to appreciate time management.

Activity 2:

Role-play

a) Role-play by volunteers to further draw home the meaning of effective time management: This is to be developed by groups of participants:

- A person who has a good load of activities, most of which are not relevant but of which the person can actually reject or postpone.
- A person who prioritizes and manages activities, very organised, because he sets time limits and gets activities through.
- The two role-players should be observed before discussions by participants.

Discussion guide

a) What were participants' observations in the two plays?

b) What lessons were learnt or useful?

although her mother did manage to hide and pay her school fees.

Guide quesitons

1. Identify the pressures on Mary's life
2. What were the positive or negative pressures?
3. Suggest ways that Mary could use to cope with the problems.

Activity 6:

Brainstorming

Ask participants to define stress and also put down the things they feel could cause stress. List the definitions and the causes or types of stress on flipchart.

Trainer should lead a discussion on the presentations to draw out commonalties in definition and issues that come out from the discussions in preparation for adding value. Commend participants on the output.

Activity 8:

Group work - responses to stress

- Constitute , at least 3 groups to draw out a rich output with variables from participants for better understanding.

  Groups will present their work for comments and discussions

E.g.: What are the signals of stress?

- How would they respond to stress?

Activity 9:

Wrap-up session

This will be a self-analysis test to enable participants to recognize their stress points for behavioural changes after the training.

Stress self-analysis test

The aim of the test is to individually evaluate one's outlook and overall stress level, knowing full well that stress comes from within.

Read the following statements carefully and score as follows:

- 1 = almost never feel that way
- 2 = occasionally feel that way
- 3 = frequently feel that way
- 4 = almost always feel that way

Statements

1. Things must be perfect
2. I must do it myself
3. I feel more isolated from my family or close friends
4. I feel that people should listen to me
5. My life is running
6. I must not fail
7. I cannot say no to new demands without feeling guilty

8. I need to generate excitement constantly to avoid boredom
9. I feel a lack of intimacy around me
10. I am unable to relax
11. I am unable to laugh at a joke about myself
12. I avoid speaking my mind
13. I feel under pressure to succeed all the time
14. I automatically express negative attitudes
15. I seem further behind at the end of the day than when I started
16. I forget deadlines, appointments and personal possessions
17. I am irritable and disappointed in the people around me
18. I get angry at myself and others, if I lose at sports or games
19. I consider myself exploited
20. I wake up early and cannot sleep
21. I feel restless
22. I feel dissatisfied with my personal life
23. I feel dissatisfied with my school life
24. I am not where I want to be in life
25. I avoid being alone
26. I have trouble waking up
27. I can't seem to get out of bed
28. I have trouble getting to sleep

Add up your marks

- If you scored 29 or less, you show less stress
- Totals of 30 to 58, show mild stress
- Totals of 59 to 87, show moderate stress
- Scores higher than 87, would mean that you may be under high stress.

Self-Reflection/Evaluation

- What surprises did you have when the session was going on?
- What were your feelings about the surprises?

TECHNICAL INFORMATION

Defining stress

One dictionary defines stress as strain or straining force. This strain can manifest in very many ways. Trainer will make reference to participants' output and add value with examples, such as being late for school; when friends no longer want me or changing my friends and when my parents have not paid my fees; when I need money to keep up with fashion, home chores or too many things to do, health problems that stop me from achieving my goals.

Stress is an integral aspect of our life. It is so much a part of life. In fact, we need stress to survive, to the extent

that we are stimulated to do better. Good stress is called **eustress**. Stress that runs us down is called **distress**.

Responses to stress

Emotional response

Mood swing, feelings to include anger, fear, depression and dejection.

Physiological response

Changes in the body e.g. acne, pimples, etc.

Behavioural response

Dealing and coping with stress, e.g. misplacement of anger, or general irritation with people not necessarily connected with reasons for the stress.

Unhealthy behavioural response

- **Aggression** - (most times intended to cause pain or harm to others)
- **Learned helplessness** - unavoidable, tolerated behaviour
- **Indulgence** - taking in excessive behaviour, e.g. eating disorder
- **Defence mechanisms** - unconscious reaction to self-protect from unpleasant emotions such as anxiety and guilt
- **Depressive disorder** - feelings of sadness, despair and lack of pleasure in leisure.

Physical disorders resulting from stress called psychosomatic illnesses include;

- **Stomach ulcers** - causes heartburn, abdominal pains and nausea.
- **Ulcerative colitis** - found in people with deep feeling of helplessness, diarrhoea and constipation - most times stress-related
- **Allergies** - stress breaks down the immune system of the body, mental illness, migraines, headaches, including tension headaches.

Other physical disorders like hypertension, chronic heart disease, stroke and cancers have also been found to be connected with stress although controversy exists.

Tips on managing stress

The following ways have been found useful:

1. Find your stress point - analyze your stress status to determine when you need a rest or diversion
2. Turn your stress down through diversion e.g. jogging, swimming, cleaning the car or arranging the

wardrobe, taking a walk, solving a puzzle, watching a movie, fantasizing or day-dreaming about something pleasant can help to ease tension. Do something you love.

3. Nutrition - some nutritionists agree that some food substances constitute stressers to people. Some foods contain vitamins that constitute stressers, e.g. refined sugar, coffee, highly processed foods, junk foods, e.g. meat pie, tinned foods can also deprive the body of certain vitamins.
4. Humour/laughter - these are sometimes referred to as natural tranquilizers and healers. They relax the body. Create fun for yourself. Try to find humour in every situation.
5. Get spiritual
6. Meditation - think about something very pleasant with concentration or, depending on your religious inclination, commune with the Almighty.
7. Don't dwell on the past, rather use the past as lesson for the future.
8. Write a letter you don't want to post to someone.
9. Get involved in social activism.
10. Get into the habit of writing poetry.

REFERENCES

1. GPI Lesson Curriculum
2. *Age Erasers for Women: What You Can Do to Look Younger and Feel Great,* edited by Patricia Fisher of Prevention Magazine Health Books.
3. Stress and Teen Women (Handbook, 1998) by Young Women's Project, Washington DC



PUBLIC SPEAKING SKILLS

OBJECTIVES:

Participants will:

- Define public speaking and what it entails
- Know the skills necessary for effective public speaking
- Model effective public speaking skills.

COMMON BELIEFS/CONCEPTS:

- That a women should be seen not heard
- That young people do not talk in front of adults

MATERIALS:

Flipchart, paper and markers, blackboard and chalk, facilitator's resource on public speaking.

ACTIVITIES/TIME:

- Introduction (10 minutes)
- Individual brainstorming exercise (10 minutes)
- Group work (30 minutes)
- Evaluation (15 minutes)

PREPARATION:

The facilitator will introduce the topic and emphasize that there is a difference between speaking and writing. While in writing, the grammatical aspect of it is very strong, in speaking, the way one uses the eyes, voice, hands and facial expressions are very important.

LESSON SEQUENCE

Opening

Start the session with a song from the appendix or ask participants for a new

song. This is also the session for announcements (if any). Also, ask participants about their hopes and fears for the session in public speaking skills and record them on flipchart.

This will be reviewed at the end of the session.

Energizers/ice - breakers

Volunteers to illustrate public speaking skills that they know of by speaking to other participants on any topic of their choice

The facilitator will lead a discussion to describe what they saw.

Lesson topic:

Activity 1:

Individual work

Ask participants to now explain in their own words what **public speaking skills** mean to them. Responses will be recorded. Process output and add value on the definition of public speaking skills.

Activity 2:

Group work - depending on the facilitator's choice, two groups of participants can discuss the following questions:

(i) What are the things that discourage people from speaking in the public? And what skills might be developed or needed to encourage such people? Comment on who should speak in public males,females, adults or youth, and why?

(ii) What are the things that encourage people to speak in public? What skills should such people have or develop? Add your comment on the category of people who should speak in public (males, females; adults or youths) and why?

The output of the two group work are expected to be almost the same, except that all group deliberations will generate more ideas. This will allow for adding value on the tips for effective public speaking and the modelling session.

Emphasise on gender issues and roles. Draw responses from participants and add value.

Add value to the output of the roup work with tips on veloping effective good public

speak skills.

Self -Reflection/Evaluation

Participants will share one or two things that surprised them during the session and say how they intend to deal with the surprise.

The evaluation session will assess the level of information and knowledge gained, and serve as reminders for lesson learnt.

ng

session with a music and

adio cassette/CD player

able.

and

ATION

aking

en

AC

- In
- Ind
- Grou
- Evalu

PREPAR

The facilitat

difference be

grammatical as

the eyes, voice, h

LESSON SEQUEN

Opening

Start the session with a

group

e almost

t all group

ll generate

will allow for

on the tips for

lic speaking and

ng session.

c on gender issues

s. Draw responses

participants and add

alue to the output of the

p work with tips on

eloping effective good public

Voice

How many times have you had to ask people to repeat something they just said because their speech was unclear or not loud enough? Perhaps you have been asked to speak more clearly or speak up. Have you ever been frustrated at a movie or during a play because you couldn't hear what the actors were saying or you could hear their voice but not understand the words?

A public speaker must learn to speak clearly- good speakers are loud *and clear because they are able to* control their breath and mouth when speaking. Practise taking in deep breaths and letting them out as you speak. You should find that you can speak with more volume and less effort, if you concentrate on deep breathing while you speak.

a good speaker, we must

a moderate speed. This

because when we

ht not be heard

talk slowly

e.

ows that words

ough to make a

ould you enjoy talking

with someone who stood the way he or she looked, never moved an inch? A good speaker uses gesture to liven up the speech. Good speakers don't just stand like statues with stiff expressionless face.

They **smile** and **look** at the audience and **gesture**.

Composure

A good speaker must be composed, calm and at ease. This is very important as it helps to hold the attention of the audience.

Creativity

A good speaker must be creative. He/ she must be able to hold attention of the audience : i.e. think of ways to make the talk interesting, e.g. how to introduce himself/herself would capture the attention for instance, asking a question or telling a short story or anecdote to support or help understanding. This helps to make the talk lively.

NB: Don't forget the skills you have learnt and using them to dazzle your audience with clear volume, gesture and eye contact. Excite them with a speech they won't forget.

Modelling public speaking skills - "Talk-Show" session. (30 minutes)

Facilitator will divide the group into sizeable numbers of say, 4 participants per group to allow all members to take part in the talk-show.

Each group could be encouraged to choose the topics or the facilitator presents own topics, for example;

- "Children having children" - *how the community sees it*
- "Adolescent (youths) should be beaten before they are corrected"
- "How I communicate with my parents"

A panel of discussants to moderate the session. Chairs should be arranged in rows or in semi-circle fashion with presenters facing their audience. Comments after each group presentation will be utilized to reinforce the information.

REFERENCES

1. *GPI Training Manual* (1st edition) 1999 and Lesson Output from Group Discussions
2. *Girls Speak Out: Finding Your True Self,* Andrea Johnson

OBJECTIVES:

- Ask participants to share their thought on what they would like to see happen

ADVOCACY AND NETWORKING SKILLS

during the session. Record on flipchart for review at the end of the session.

At the end of the session, the girls will:

- Know what advocacy and networking mean and explore the relationship between the two terms
- Learn to use the tools of advocacy and networking for change
- Learn to develop strategies for doing better advocacy and networking.

MATERIALS:

Flipchart, paper and markers, blackboard and chalk, facilitator's resource on advocacy and networking; a long rope of some yards in length

ACTIVITIES/TIME:

- Ice-breaker (10 minutes)
- Group work - case study (30 minutes)
- Adding value (20 minutes)
- Evaluation (15 minutes)

LESSON SEQUENCE

Opening

The facilitator welcomes participants and introduces the topic by asking them to say what they have already known about the two key terms: advocacy; networking.

Energizer/ice-breaker

Participants will constitute groups on their own using same first letter of

their first names as criterion.

For example:

Group (S), members could be Stella, Sheila, etc. Group (A), members could be Assam, Ama, Anne, etc.

- Ask participants, 2 per group, to discuss their experiences as follows:

Was the task of forming the group easy?

- What made it easy or difficult?
- What aspect of the task was done well or what could have been done better?

Encourage participants to discuss their feelings during the exercise.

Participants will maintain the groups so formed throughout the duration of the lesson.

Lesson topic

Activity 1:

Group work: Present "a case of GPI"

- Divide participants into comfortable groups, depending on the number; not more than 15 per group.
- Provide typed case study to each participant to facilitate the group discussions.

Guide for discussion:

1. Read and summarize to make sure all participants understand.
2. How can you define (i) advocacy (ii) networking?
3. Did the issues stand out regarding advocacy and networking?
4. What were the positive aspects of advocacy and networking?
5. What were negative aspects?
6. What could have been better and how?

A case of GPI

GPI is a feminist organisation, located at Calabar, capital of Cross River State of Nigeria. It is non-governmental, non-religious or not-for-profit organisation, focusing on education, leadership and other non-sexist life management skills and information on sexuality, sexual and reproductive health and right. GPI holds the view that adolescent girls, aged 10 -18 years should live healthy lives and achieve their full potentials. Young girls should also have life management skills and strive to overcome the risks of early sexual

activity, teenage pregnancy, sexually transmitted infections (STIs), HIV/ AIDS, unsafe abortion, rape and sexual exploitation. GPI's major activity is holding weekly meetings and (lesson) discussion with girls, once in a week.

At least, three rape cases are reported every week by GPI girls, resulting in a record of at least 12 rape cases, every week. This then deepened the passion of the coordinator and staff to seek ways of remedying the situation. Most of such cases are perpetrated against children and adolescent girls.

For instance, the coordinator of GPI wrote a protest letter to the Governor of Cross River State, complaining about the security risk the criminals were constituting to girls and women in Calabar. Upon this, the governor invited the coordinator for a discussion and consequent upon the discussion, the governor referred the case to the attorney-general of the state. A decision was then reached for both the GPI coordinator and the state attorney-general to present the case to the state Commissioner of Police. Two rape cases were to be investigated and charged to court.

In the interim, GPI went ahead to rehabilitate one of the rape victims and her family because of their level of economic helplessness. The organisation also contacted a human rights lawyer who himself is running a citizens human rights outfit in Calabar. But to the amazement of GPI, he asked for very high legal fees and even collected about 95% of the fees before filing the case. GPI bore the cost of everything, including the appearance fees. When there was enough evidence to show that he was rather "appearing for the defendant". by joining forces with them to intimidate and harass the victims, GPI withdrew the case from his firm of solicitors and handed over to another lawyer who now appears to be principled.

- Let participants present output from the group and add value by defining networking and advocacy.

Activity 2:

Group work

Divide participants into two groups to discuss the following:

Group (1) Networking

(i) What are the things that make up good networking?

(ii) What are the benefits of networking?

(iii) What are the things that contribute to good networking?

(iv) In what ways should young people network to derive benefits?

Group (2) Advocacy

(i) What really is advocacy and do you think advocacy is necessary?

(ii) In what ways or situations should one or a group advocate?

(iii) What can encourage advocacy for self, friends or peers, siblings, other family members and other groups of people? List them and give reason for your answer

(iv) Are there any links between networking and advocacy? How?

- There should be comments, additions and debates to bring out the essence of the lesson.

Activity 3:

Wrap-up exercise

■ A long rope is used to form a net among a circle of some participants, say ten (10), while other participants watch with attention to later comment on their observations.

A circle of 10 participants is formed. One person has one end of the rope to the left hand and throws it to the other at opposite end to do same. The process continues until a net is formed. The circle with the net will move from one area of the room to the others.

The exercise should take 10 minutes before comments are taken and the net disbanded.

It is expected that the nature and tips on networking and advocacy will be further highlighted and strengthened during the exercise with comments and discussion by participants.

Self-Reflection/Evaluation

1. Participants to mention three things that were useful during the lesson and why they were useful.
2. Participants to mention two things that were not useful at all and why they think so.

TECHNICAL INFORMATION

What is networking and advocacy?

Networking - is defined as individuals, a group of individuals or

organisations being willing to assist or work with one another on common issue(s). Literally, it means using people to get what you want done. Personal goals as well as group interest matter a lot in networking. It also involves seizing every opportunity to make progress with your work.

Advocacy then means action aimed at changing policy positions in programmes; pleading for, defending or recommending an idea to other people. It can also mean drawing attention to a cause for solution or bringing people to take action on what affects their lives.

Tips on networking

- Generally, networking is aimed at available connectivity and opportunities to achieve one's objective. The following tips can help us achieve this goal:
- Identifying people and/or organizations working towards same objectives like yours.
- Getting other people interested by discussing your ideas with them
- Being open to suggestions and diverse views on issues
- Networking interest must be backed up with giving time and resources for participation
- Being an active - player in decision-making
- Getting to know other members of the network and maintaining open communication is very necessary
- There should be free and continuous information flow
- Be sure to raise funds to sustain the network, as some can require expertise to run
- Articulate the value you can add to others in the network and also establish the value they will add to the achieving your objective.
- Be confident, package and present yourself in friendly and acceptable manner
- Don't burn bridges, always leave room for another discussion or meeting.

Where can you meet people to network?

Tips: Your neighbourhood; your area, friends; boys/girls, school, plays, sports, special interest clubs; e.g. boy's scouts/guides, GPI, etc, vacation sports, e.g. picnics, religious activities, parties, social clubs, etc.

Tips on advocacy

- Clearly identify the issue or problem
- Get others to support your cause

- Have good public speaking skills
- Let your advocacy message be understood
  Identify policy makers who will effect a change and who are sympathetic to the cause.
- Involve the media
- Have persuasive communication skills

Being emotionally mature, modest and moderate in language and being factual but friendly and sincere are some of the tips on effective persuasive communication.

REFERENCES

1. Girls' Power Initiative Lesson Output
2. *Playing with Fire : Creative Conflict Resolution for Young Adults*, by Fiona Macbeth & Fine
3. *The 26% Youth Solution* - Wendy Schaetzel Lesko, Activism 2000 Project & Emmanuel Tsourounis,11
4. *Life Management for Adolescents* - Girls' Power Initiative (GPI), Nigeria.



CHAPTER THREE

INFERTILITY

To enhance a better understanding of reproductive health and rights of adolescent girls and women.

OBJECTIVES:

At the end of the discussion, participants would have:

- Explored the meaning of infertility
- Discussed the types of infertility
- Discussed the causes of infertility in both male and female
- Discussed myths and facts about infertility.

CONCEPT/COMMON BELIEF:

- Infertility is a woman's problem.

MATERIALS:

Flipchart, paper and markers, blackboard and chalk, facilitator's resource on infertility.

ACTIVITY/TIME:

- Individual work - (20 minutes)
- Reviewing - (20 minutes)
- Discussion - (30 minutes)
- Small group work - (30 minutes)

PREPARATION:

It is always the wish of married couples to have children. But the truth is that one out of every ten couples would have trouble achieving pregnancy. Unfortunately, women are always blamed for not getting pregnant. This is

so because of ignorance where people are not aware that the man could also be the cause.

LESSON SEQUENCE

Opening

The chairperson of the day begins with opening songs and a report of the last lesson presented by the previous rapporteur; corrections and comments on the report by participants are taken and checking-in done.

Energisers/ice-breakers

Dictate an exercise to participants. Then present the same exercise on a flipchart and get them to cross-check with their copies, checking for spelling and punctuation errors.

Lesson topic

Activity 1:

Individual writing exercise

- Ask participants to write on what they understand by the term, infertility.
- Have volunteers to read out their ideas and stick them on the flipchart
- Process the various definitions and add value, using technical information on what infertility means.

Activity 2:

Review exercise:

- Ask participants to draw and label the parts of the male and female reproductive organs.
- Let them also state the function of each part in the process of achieving pregnancy.
- Add value where necessary to strengthen information.

Activity 3:

Small group discussions

Divide participants into small groups and give them the following to work on;

1. Name the types of infertility they have heard of, or are familiar with.
2. The perceived cause(s) of such infertility.

- Process their output after presentation and add value, using technical information on types of infertility

Self-Reflection/Evaluation

Ask participants to provide answers to the following:

- What is infertility?
- Name the types?
- Name 4 possible causes in men

and 4 in women.

Action assignment

- Note three things you still want to know about infertility.

Closing

Close session with a song such as We have a vision of a world of good health/One without AIDS and STIs free/Let's stop gender discrimination/Female circumcision/Unsafe abortion/So the world can live in harmony.

TECHNICAL INFORMATION

Definition of infertility

Infertility is the inability of a couple to achieve pregnancy after having regular, well-timed unprotected sexual intercourse for a period of one year. It is the malfunctioning of a man's or woman's reproductive system and is fairly common. It may be a temporary or permanent condition, depending on the cause and on available treatment. In 40% of the cases, male factors are responsible; in 40%, female factors are responsible; in 10% combined factors are responsible and 10%, are caused by other factors such as habits: drinking too much alcohol, smoking, tobacco, drugs, etc.

In females, infertility may take the form of repeated miscarriage or stillbirths. In such circumstances, the problem is not conception but inability to carry pregnancy to live birth. A woman's fertility begins to drop in her mid-to late 30s and declines significantly after the age of 40.

Types of infertility

There are two types of infertility:

1. Primary infertility: The inability of a couple to achieve pregnancy despite regular, well-timed, unprotected sexual intercourse for a period of one year.
2. Secondary infertility: The inability of a couple who have achieved pregnancy before, to do so again, despite frequent well-timed, unprotected sexual intercourse for a period of one year.

Causes of infertility in females

A woman may experience infertility because of the following:

1. **Mechanical barriers** that prevent the union of the sperm and ovum. Such barriers may be scarring in the tubes or around the ovaries. Scarring can result :
   i. from previous pelvic

inflammatory disease or pelvic surgery;

ii. from infection caused by certain intra-uterine devices;

iii. from an unsafe abortion;

iv. from an untreated sexually transmitted infection, e.g. gonorrhoea or chlamydia that can cause scarring or tubal blockage.

2. **Endometriosis:** This can cause scarring, tubal blockage and tamper with possible immune responses. Endometriosis can be an extremely painful disease. It occurs when one similar to the tissue that lines the inside of the uterus (endometrium) grows in other parts of the body, such tissue then forms growths, nodules, tumours or lesions. They are found commonly in the pelvic area, on the ovaries, in the lining of the pelvic cavity (peritoneum), on the fallopian tubes, etc. Endometrial growths respond to the hormones of the menstrual cycle, just like the lining of the uterus. They build up tissue every month, break down and cause bleeding, internal bleeding, inflammation, and formation of cysts and scarring.

3. **Endocrine problems**: This concerns an ovary that is not producing or releasing ripe eggs (i.e. no ovulation). This is a hormonal problem and can be found in women having less than 25 days menstrual cycle or more than 35 days menstrual cycle. Failure to ovulate regularly or irregular menstrual periods could be caused by a malfunctioning of the ovaries, pituitary, hypothalamus, thyroid or adrenal glands. Normally, several specific hormones are secreted at specific times in the normal menstrual cycle. If any of these is not produced or the quantity produced is not sufficient for its action, the whole cycle will be affected. Irregular ovulation in turn decreases the chances of conception. In addition, some women develop amenorrhoea, (absence of menstrual periods) following significant weight loss; strenuous exercise or period of high stress.

4. **Structural problems in the uterus or cervix** due to congenital problems (being born with such problems).

5. **Cervical mucus** that may be too thick or too acidic. This acts as a barrier to the normal movement of

the sperms up in the vagina, i.e. cervical hostility to the sperms.

6. **Immunological response**: The female, the partner or a blood donor may have sperm antibiotics that tend to immobilise sperms. Blood test can check this.
7. **Problems from operation in the vagina (FGM) womb, tubes or ovaries**. Also, illnesses such as diabetes, tuberculosis and even malaria can interfere with fertility. So also can environmental and industrial toxins affect fertility.

Causes of infertility in males

1. Problems of production and maturation of the sperms: This can be caused by:
    i. Mumps after puberty
    ii. Un-descended testicles
    iii. Chemical and environmental factors
    iv. Drugs
    v. Occupational hazards
    vi. Hot saunas and hot baths that can cause high temperatures in the scrotal sac-affecting sperm production
    vii. Varicocele (a varicose vein in the scrotum) can affect sperm production.
2. Problem with the movement (motility) of the sperms. This can be caused by:
    i. Chronic prostitis
    ii. Abnormally thick seminal fluid
    iii. Certain drugs used to treat emotional disorders, stomach ulcers and hypertension can also affect sperm production and motility.
3. Problems of transport: Resulting from scar tissue in the delicate passage ways through which the sperm travels. This may be caused by infections or untreated STDs.
4. Inability to deposit the sperms into the cervix. This can be caused by sexual dysfunction such as:
    i. impotence
    ii. premature ejaculation
    iii. structural problems in the penis
    iv. spinal cord injuries.
5. Other factors:
    - poor nutrition
    - general poor health
    - drugs (marijuana, cigarette-smoking and alcohol in excess can affect sperm quality).
6. Problems during sexual intercourse
    - penis does not get hard, no

erection

- penis gets hard but does not stay hard during sexual intercourse
- The man climaxes too quickly, before his penis is deep in the woman's vagina.

7. Illness such as diabetes, tuberculosis and malaria can hurt a man's fertility.
8. Sluggish and general poor sperm quality.

Other causes

1. Ignorance of how pregnancy occurs
2. Lack of knowledge of when the female egg is released (ovulation)
3. Infrequent intercourse
4. Increased age of the couple
5. Malnutrition
6. Injury to testes or ovary
7. Misuse of drugs
8. Anxiety
9. Lack of co-operation between couples.

Improving the chances of conception

The best time to have sexual or vaginal intercourse for a couple who are planning pregnancy is on the day or evening before ovulation. Pregnancy can occur if sperms were already in the fallopian tube when the ripe egg arrived from the ovary. Ovulation is the prime time for fertilization. It occurs in the mid-late morning usually 12-16 days before one's next menstrual period begins. Women tend to be most fertile in their early 20's from then on, fertility declines rather slowly until about 35. After 35, fertility decline becomes faster. It then becomes harder and harder to become pregnant in many people. One in every 7 couples would be infertile if the woman is 30-34 years old. One in every 5 would become infertile if she is 35-40 and one in every 4 might not achieve pregnancy, if she is 40-44. However, infertility can now be enhanced with fertility pills.

REFERENCES

1. *Male Infertility: Men Talking*, by Claire Mason, published by Routledge, 11 New Fetter Lane, London (1993).
2. *RTIs Among Women in the Third World,* a publication by IWHC.
3. *Book of Women's Health: Your Comprehensive Guide to Health*

and Well-Being by Anthony & Scally; published by William Morrow & Company Inc. New York (1999).

GOAL:

To create awareness and prepare the adolescent girls and others for the process of liberation from sexist role patterns, domination and oppression in the society.

OBJECTIVES:



CHAPTER FOUR

THEORY AND PRACTICE OF

By the end of the session, participants would have:

- Explored the concept and their understanding of feminism
- Examined definitions, stereotypes and social perception of feminism
- Reflected on the principles of feminism
- Discussed the basic theories of feminism and the notion of feminism being Western in origin
- Strategised on how to promote feminist principles in their workplace and in their communities.

CONCEPTS/COMMON BELIEFS:

- Feminism is a Western idea
- Feminists are men-haters

MATERIALS:

Flipchart, paper and markers, blackboard and chalk, technical information on theory and practice of feminism.

ACTIVITY/TIME:

- Exercise/handout on sexist language (15 minutes)
- Brainstorming - (15 minutes)
- Discussion points - (30 minutes)
- Questions and answers - (20 minutes)
- Group work/plenary - (20 minutes)

LESSONS SEQUENCE

Opening

Led by the chairperson of the day to open with songs and the report of the last lesson by the previous rapporteur so that corrections and comments on the report by participants are noted and checking-in is done debates, discussions and lesson clues; announcements and goal-setting also take place.

Song: GPI has given us authority and empowerment/To trample on gender stereotypes/And to overcome/All the powers of harmful tradition/Won't you overcome...

Energizers/ice-breakers

Dictate an exercise and then present the same exercise on a flipchart. Get participants to cross-check with their copies for spelling and punctuation errors.

Lesson topic

Activity 1:

Exercise on sexist language

The aim of this exercise is to pre-test participants' knowledge on gender issues.

Distribute handouts on sexist words and language such as:

1. The **salesgirl** has gone out
2. The **policeman** is on duty
3. Agriculture started when **mankind** learned how to grow food
4. We must train more skilled **manpower**
5. Who is the **chairman** of this occasion?
6. The **actress** is going to perform today
7. The **headmaster** and the **headmistress** are meeting
8. The **firemen** and **fire-women** put out the fire
9. Who is the **hostess** of this event?

Ask participants to fill in the sensitive gender equivalent of these words.

- Process the output and add value.

Activity 2:

Brainstorming exercise

Participants are to brainstorm on the qualities of leadership/good manager

- A good leader/manager is.....

Tabulate the response into columns like this:

Qualities of a Good Leader

List of Qualities

Women	**Men**

Discussion points

- Are men and women in equal leadership or management positions? Why? Why not
- Add value

Activity 3:

Individual writing exercise

- Each person writes down 5 words that would come to mind when FEMINISM is mentioned.

List responses on flipchart.

Activity 4:

Brainstorming exercise

- Ask participants what they have heard people say about FEMINISM? List responses on flipchart labelled - COMMON BELIEFS ON FEMINISM
- Add the output to the list of concepts

Activity 5:

Moment of reflection:

Ask participants to:

- Think about 1 or 2 decisions that concerned them in the last month
- Who took the decision?
- Did it yield positive outcome?
- Did it yield negative outcome?
- Did you learn any lesson(s)?

Request for 2 - 5 people to discuss their responses and add value.

Activity 6:

Question time

Ask participants the following questions:

- What do people require to achieve political power?

Tabulate the responses as follows:

General Requirements
Requirement for men
Requirement for women

- If women have these qualities why are they not in politics?
- Who has to first seek support or permission of partner, family members, etc?
- Process responses and add value.

Activity 7:

Group work/report back

- Break participants into 3 small groups
- Give each group the following tasks:

Group 1:

1. State, from your own experiences, the duties performed by (a) women (b) men in your communities and the state and geographical zone.
2. List the widowhood rites in your communities (a) for men (b) for women when their spouses die (indicate the communities).

Group 2:

1. How does your organisation address the issue of feminism?
2. What specific activities of your organisation address women's issues?
3. Discuss and list suggestions to correct any idea of opposition to feminism and how to popularize the messages to promote feminism in your communities.

Group 3:

Five minutes skit on bringing feminist messages to:

1. Group of traditional leaders
2. Group of religious leaders
3. Group of commercial taxi drivers.

Plenary session

After each group presentation, commend the presenter then encourage other participants to make contributions or comments.

Self-Reflection /Evaluation

- Participants to make affirmative statements indicating whether they are feminist or not:
- If yes, what type of feminist?

Example:

- I am a Feminist.....
- I am an African Feminist.....
- I am a Liberal Feminist.....

Closing

- Take an empowering song " All across the nation/All around the world"

Action assignment

Write down at least 2 ways you used the information on feminism and discuss later with the group.

TECHNICAL INFORMATION

Qualities of a good leader/manager

Self-motivated, flexible, open, resourceful, transparent, good coordinator, good listener, organised, motivator, etc.

Qualities of a good leader

List of Qualities	Women	Men

WHAT IS FEMINISM?

Oxford Advanced Learner's Dictionary defines feminism as:

(a) "Belief in the principle that women should have the same rights and opportunities as men."

(b) "The movement in support of this."

Feminism is therefore, an ideology of conscious advocacy and implementation of equality of women and men in social, economic, religious, educational and political spheres of life.

The definition of feminism could be Narrow or Broad for example:

Narrow:

i. Equating feminism with the notion associated with radical feminism of the early 1960s in the West. Such as wild naked white women who burnt their bras, frustrated, miserable spinsters, home - breakers and anti-African culture (as if there is a set of rules called so in each of the 54 countries that make up Africa, when in Nigeria for instance, cultures differ within a few kilometres apart).

ii. Seeing feminism only as an organized political movement.

Broad:

In its broad definition, feminism is defined as a variety of conceptions about relations between women and men in the society. The origins of these relations and how they may change fundamentally to bring about gender and social justice also constitute the concept. Thus, feminism is not just an idea. It is a political practice aimed at changing the world fundamentally and to transform (not reform) relations between women and men so that everyone can have a greater chance to fulfil her/his human potentials.

Feminism was used commonly in the 19th and early 20th centuries to signify agitation on issues concerning women. The term has now been

expanded to mean an awareness of women's oppression and exploitation within the family, in the workplace, in social, economic, political, educational opportunities and in the society at large. It also incorporates conscious action by women and men to change the situation. In this context therefore, feminism goes beyond movements for equality and emancipation, which agitate for equal rights and legal reforms to redress the prevailing discrimination against women. While such movements often create awareness and help advance the struggle for equality, they do not tackle the fundamental issues of women's oppression and exploitation within the family system nor do they even challenge the socio-economic and political class distinctions, poverty for majority and affluence for the few. The existing framework of male dominance and male-female power relations in which the subordination of women is located is therefore, left intact. This broad context clearly suggests that there is bound to be different definitions of feminism.

Is feminism western? Is it un-African?

This misconception could have come about because the voices of African women had been silenced over the ages and only those of white women had been heard because of their access to the technology of media and publishing, long before us. The reality is that feminist activism in Africa is as old as the continent itself. Since there has always been patriarchy in Africa, we have always therefore had different kinds of resistance to patriarchal oppression, exploitation and control.

- Volunteers to give, songs, proverbs, etc, from their rural communities by rural women, illustrating their resistance to patriarchy.

Africa has one of the oldest civilizations and therefore, one of the oldest patriarchies. There are also records to show that African women had had some access to power and leadership in various forms. Available literature also show that African women in such deeply patriarchal societies always found ways and means of resisting patriarchy. This was feminist activism. Indeed, colonization reduced the level of feminist activism with the introduction of the practice of "house wife" syndrome.

Nina Mba in her book, *Nigerian*

Women Mobilised, recorded the historical involvement of women in all sectors of the economy - production, distribution trade, commerce, etc. Colonial District Officers posted to Nigeria came with their wives who had no jobs and no knowledge of the culture, language or tradition of the African communities and so their movement became restricted to the house as "house wives" The African men who worked with the colonialists copied this when they got posted to different stations by the colonial administration. Such women who went with their husbands, were deprived of their land and other means of production and so, like their "Oyibo" counterparts, became "house wives."

By virtue of the colonial power, they superimposed this foreign culture of "house wife" syndrome on our communities. African women in responding to post-colonial era, returned to their past activism, and with greater numbers of educated ones with access to records of the culture of resistance of African women to patriarchy, *feminism in Africa has but undergone* a re-birth and is benefiting from modern technology of information to increase in visibility. Hence, what is foreign and un-African and therefore, subversive to African culture and tradition is the second class position of "house wife" syndrome while what is truly African is feminist activism. This got transported by the female partners of colonialists to the West.

Feminism aims at ending sexist oppression and to liberate men, women, girls and boys to participate equally as equal human beings with equal opportunities in social development. Feminism aims at social restructuring to transform male domination and female subjugation in the interest of humanity. Feminism is therefore, emancipation in character. Feminism is a critique of the pervasive male ideology that affects the lives, ideas, as well as the physical, emotional and socio-economic well being of women.

Basic principles of feminism

Key principles of feminism include:

- The right to equal opportunities
- The right to choose from an informed position and services to address the choice
- Solidarity and sisterhood
- Making the personal, political
- Anatomy of women and the

women's movement

- Bodily integrity and the right and freedom to exercise one's sexuality
- Women's rights as human rights
- Celebrating and recognizing women's intellectualism and achievements
- The right of women to productive resources
- The right of access to decision-making and leadership from family to all levels of interaction in society
- Right to quality and functional education and high quality of health
- Social respectability as a right.

Some theories of feminism

- Feminism is a broad term for a variety of conceptions of the relations between women and men in society.
- Feminists question and challenge the origins of oppressive gender relations and attempt to develop a variety of strategies that might change such relations for the better.

- Feminism pivots around the recognition of existing women's oppression and addresses the prevailing unjust and discriminatory gender relations.

- Feminism offers critique of male-dominated institutions, values and social practices that are oppressive and destructive.

- **Liberal feminism**: This goes as far back as the 18th century. Liberal feminists questioned the damaging and discriminatory practices against women, the dependency of women on men, the capabilities and capacities and rights of women and male demands for equal opportunities and equal participation in the managemnt of the societies. They sought women's liberation through legal reforms and through increase in women's participation in the political organs. They fought for greater participation of women in education and training.

Although liberal feminism has a long tradition of fighting for the rights and opportunities of women, it does not question the structural inequities prevailing in the societies. Liberal feminist theory does not deliberate on the relations between the sexes as specific power relations. It does not

also challenge non-feminist views of the inequalities between women and men. Thus liberal feminists focus on promoting change within the existing framework of society.

- **Radical feminism**: Emerged as a result of a break away of Marxist feminists who were frustrated due to their inability to apply social class in analysing gender oppression. Radical feminism locates women's oppression in the social institution of gender. They launched a wholesale onslaught against male-dominated society, and considered men as the enemy. Their demand is for radical transformation of the oppressive gender relations. From a radical feminist point of view, male supremacy rather than patriarchy is the most appropriate term to describe the social system where there is rigid gender division of labour.

Radical feminists challenge men's control and monopoly over the production and use of knowledge. They maintain that gender biases are perpetuated because of male dominance in media such as radio, television, newspapers, school curriculum, production of text books, journals, etc. The slogan of radical feminists is "The personal, is political" which challenges the public/private dichotomy. Radical feminism brought sexuality and reproduction into the political arena. The "personal is political" slogan empowers women to analyse their lives as part and parcel of common experiences in patriarchal society. It is the demand for women's empowerment that has caused radical feminists to meet with hostility particularly in Africa.

- **Socialist feminism**: Socialist feminism maintains that gender-based divisions were a set of social relations which have historically and in all known societies, been based on male-domination and female subordination. Socialist feminism also insists that gender-based divisions were distinct from class relations, in capitalist, non-capitalist and other societies but were, however, embedded in those social relations of reproduction such that they therefore served men in capitalism, feudalism, or any other social system.
- **Marxist feminism:** Marxist feminism brings class analysis into feminism. It uses Karl Marx's method of social analysis to produce knowledge of the wider context of women's oppression

through history. Marxist feminists see gender inequality as a consequence of capitalism. Marxist feminists attempt to apply dialectical materialism in analysing sources of gender oppression and locate women's oppression in social class, race and ethnicity. They challenge the attempt to isolate gender from social class. They consider capitalism, imperialism and sexism as inseparable.

In the debate among Marxist feminists, one view point sees women as a reserve labour force for capitalism. Women's general lower wage provides extra surplus to the capitalist employer. Women serve the interests of capitalism through the management of family consumption, hence the link between productive and reproductive activity at 3 levels - Structural (Political, Economic and Social); Community and Household levels.

The second view point is the relationship between household and the reproduction of labour. Women's labour/work at home, not valued or recognised in economic statistics and women's social reproductive function such as unpaid child-care, domestic work, care for the aged, etc, are vital for the economy. Thus Marxist feminism locates women's oppression in their inability to participate in the public sphere. But participation of women in the public sphere has not automatically led to their liberation, since they occupy the low paid jobs.

- **Black feminism**: This is rooted in the experiences of black women in the diaspora. This is because black women perceived exclusion from Western feminist theories based on: (1) ignored race (2) constructed only from white women's experiences as though they were the norm; and (3) whenever there were analyses of experiences of African women, they were portrayed as victims and their struggles and achievements were blocked.

- **African feminism**: This was posed and defined by Philomena Steady as a humanist ideology. She says it challenges racial, sexual, class and cultural dimensions of oppression to produce a more inclusive brand of feminism through which women are viewed first as human beings rather than as sexual beings. African feminism is an ideology which encompasses freedom from

oppression, based on the political, economic, social, cultural manifestations of racial, sexual and class biases. The problem of African feminism is that it marks the differences among African feminists.

Secondly, it does not stress enough the issue of gender differences in African societies. African feminism has to address impact of colonialism, imperialism, SAPs, globalisation, neo-colonialism, debt crises and food crises on women.

- **Post-modernist feminism**: This has very narrow and static perception of the development process. Underdevelopment and poverty are considered as a stage in the development process which had resulted from lack of necessary political, social and economic conditions for development to occur. Thus, oppression of women within the modernisation paradigm is considered as having resulted from backwardness and "primitiveness" of the African cultures and social values. Modernisation of the economy is thus considered as a necessary prerequisite for the liberation of women as it is supposed to lead to introduction of new values and social norms and ideas in favour of women's liberation.

The Goals, Values and Ideals of feminism remain the same across regions. That is liberating the society from dehumanization and the loss of fundamental human rights - even though women are separated by class, ethnicity, religion and other social situations. To be a feminist in any authentic sense of the term is to want for all people, female and male, liberation from sexist role patterns, domination and oppression.

REFERENCES

1. Beckers, S. (1997). *Incorporating Women's Empowerment in Studies of Reproductive Health.*
2. Batiliwala, S. (1993). *Empowerment of Women in South Asia: Concepts and Practices,* New Delhi: FAO - FFHC/AD.

3. Agarwal, B. (1994). *A Field of One's Own: Gender and Land Rights in South Asia,* Cambridge: Cambridge University Press.
4. GPI Gender Development Institute (2001) Fact Sheets.
5. Agarwal, (1997) "Bargaining and Gender Relations: Within and Beyond the Household" - Feminist Economies, 2 (I): 1-50
6. Apffel - Marglin, F. and S.L. Simon (1994) "Feminist Orientation and Development", in W. Harcourt (ed.), *Feminist Perspectives on Sustainable Development,* London: Zed Books.

GOAL:

- To help keep the reproductive system safe and healthy.

OBJECTIVES:

By the end of the session participants will be able to:

- Know the meaning of RTIs
- State the common types and



CHAPTER FIVE

REPRODUCTIVE TRACT INFECTIONS (RTIs)

their impact on health

- Develop skills to protect themselves from infections
- Break the myths about RTIs
- Understand women's vulnerability to RTIs.

COMMON BELIEFS/CONCEPTS:

- Reproductive tract infections (RTIs) are mainly diseases that affect women as a result of series of abortion done
- Youths are mostly affected as a result of adventure into certain forms of sexual activities
- Delay in sexual activities causes RTIs.

MATERIALS:

Markers, flipcharts/board, ball-point pens, papers, notepads, facilitator's guide, etc.

ACTIVITY/TIME :

- Matching exercise (45 minutes)
- Brainstorming (20 minutes)
- Discussion (30 minutes.)
- Small group work/discussion - (30 minutes).

PREPARATION:

Young people are not given information on how to keep their reproductive system

safe and healthy and when confronted with problems affecting them they would not seek proper medical attention because of the attitude of the society and the healthcare providers. They may therefore be inhibited, uncomfortable or embarrassed at times.

LESSON SEQUENCE

Opening

Start the session by welcoming the girls. Call for the presentation of minutes of the last meeting. Make announcement (if any), girls to set their individual goals for the day. You may use the song - "We have vision, of a world of good health, World without AIDS and STIs free," for the opening.

Energizers/ice-breakers

Energizers can be used to introduce the topic and manage the group energy and attention.

Lesson topic

Activity 1:

Matching exercise/identification parade

- Present the diagram of the reproductive systems and lead them to reflect on the parts and their functions. List the responses on the flipchart, process their answers and strengthen information where necessary.
- (Refer to diagrams of the male and female reproductive systems).

Activity 2:

Write and stick exercise/discussion

- Distribute sheets of paper and ask them to write down common types of RTIs known to them.
- Stick them up, process and add value.
- Let them discuss the local names of the infections identified.
- Probe for the reason for such names.
- Process and let your explanation be linked to the myths and falsehood about RTIs.

Activity 3:

Brainstorming/discussion

- Lead participants through a brainstorming session on what they understand by reproductive tract infection.
- Put down their responses on flipchart, process and provide facilitator's technical information.

Closing

This is the time to recap and make announcement (if any), give an action assignment, sing a song, etc.

Action assignment

- Give girls action assignment to report back at next meeting as follows:
- Write down names of RTIs you know; their causative agents, signs and symptoms in both men and women.

TECHNICAL INFORMATION

In some societies RTIs are dismissed with less attention and concern and this attitude is reflected in the descriptions or names attached to such infections. While some people feel that RTIs are the diseases of the young people, others believe they are those of women punished for evil deeds. In the Southern part of Nigeria and specifically, Akwa Ibom and Cross River states, a few of such names include:

(a) Udongo Mkparawa- meaning "the disease of the youth." This, according to them, simply implies that the young persons affected have come of age; it is a sign of growing up. Some people believe that the infection is common mainly among young males.

(b) Udongo Ikim - generally describes any infection that is accompanied by the difficulty in urination, itching, pains but not specific to any disease.

(c) Ikim - among the Efiks in Cross River and Akwa Ibom people too, means gonorrhoea, associated with males. It is mainly men who show conspicuous signs and this is why it is seen as men's ailments.

In some parts of Rivers State of Nigeria, infections associated with reproductive organs are generally called "ukouko." This indicates that it is a woman's sickness and that the gods are annoyed at the wrong doing by such women, especially infidelity.

RTIs are infections of the lower and upper reproductive tracts of both sexes. They are caused either by bacteria, virus, protozoa or poor hygienic conditions. Drugs or illnesses may also cause them. RTIs may be:

I. Sexually transmitted diseases
II. Infections acquired as a result of badly performed medical device
III. Infections that result from over growth of micro-organisms that inhabit the reproductive tract which are not normally

sexually transmitted.

Session 2:

LESSON SEQUENCE

Opening

- Start the session with appropriate songs and exercises. Listen to reporter read the minutes of last meeting.

Lesson topic

Activity 1:

Recap of action assignment/ discussion

- Ask girls to talk on the outcome of the action assignment given the last meeting.
- Put responses on flipchart.
- Review their output/ contribution and note if some of them identified RTIs and their specific causes, in both men and women.
- Lead them to discuss why the society has certain wrong assumption and the effect of this on women.
- Provide facilitator's resource on some common examples and give action assignment.

Activity 2:

Discussion

- Let the participants discuss the consequences of RTIs.
- Put responses/output on flipchart then process and give facilitator's guide on RTIs and their consequences.

TECHNICAL INFORMATION

a) **Gonorrhoea**: This may not be noticed early in women. There may be discharge from the vagina or penis.

- **Signs and symptoms in women**
  - Sore throat
  - Lower abdominal pains
  - Pains during sexual intercourse
  - Bleeding after sexual intercourse
  - Frequent and painful urination.
- **Signs and symptoms in men**
  - Pains when urinating
  - Drops of pus from penis
  - Sometimes feverish conditions
  - Difficulty in passing urine.

b) **Syphilis**: This is characterized by painless sores that may not be noticed by women.

Signs and symptoms in both sexes

- Painless sores on genitals
- Non-itchy rashes on body
- Fever
- Loss of appetite
- Loss of hair
- History of miscarriages and still birth in women.

c) **Genital herpes**: It is caused by a virus and is transmitted through direct skin contact, intercourse and kissing. Most infectious when sores are open.

Signs and symptoms in both sexes

- Itching around the vulva (women only)
- Painful sexual intercourse
- Discharge
- Blisters

d) **Chancroid:** This may occur as open ulcers in men while it may occur without symptoms in women.

e) **Genital warts**: These appear as growths on a part of the body and are caused by virus. Transmitted through sexual intercourse.

Signs and symptoms in both sexes

- Itching on the vagina (for women)
- Painless growths with rough surfaces
- In females the growths are found in the vulva, inside the vagina, around the anus.

f) **Chlamydia:** Caused by bacteria and is sexually transmitted. In most women, chlamydia produces no signs, and this may make it difficult to control and for treatment.

g) **Pelvic Inflammatory Disease (PID):** This refers to infections of the uterus, fallopian tubes and ovaries. PID can occur without significant pains but the common symptoms are abdominal pains and abnormal discharge from the vagina.

RTIs also include vaginal infections such as:

Bacterial vaginosis: It is a very common vaginal infection that can occur without symptoms or be accompanied by excessive vaginal discharge.

Candidiasis: This is also known as monohasis or thrush or cheesy disease. This is commonly observed

in pregnant women taking antibiotics. Other causes include body hormones, contraceptives, diabetes, stress, wearing tight clothing in warm weather.

Signs and symptoms

- Vaginal itching/irritation
- Vaginal discharge that looks like cheese or butter milk and smells like yeast
- Burning sensation during urination
- Redness of vagina and vulva.

Trichomoniasis: It is sexually transmitted. It can be spread by using wet towel of an infected person.
NOTE: Men may be carriers without symptoms.

Signs and symptoms in both sexes

- Vaginal discharge with offensive odour
- Vaginal itching
- Burning feelings in the vagina and especially when urinating
- Sores in the vagina.

Common tips on avoiding vaginal infections

- Keep the vulva clean, especially after the use of toilet
- Avoid the use of tight pants or do not wear pants at night
- Clean self carefully after using the toilet by wiping from front to the back
- Where you are in doubt of partner's sexual lifestyle, insist on the use of condom.

Reproductive Tract Infections and their Effects

Infections	Effects/Complications
Gonorrhoea	**Females**: Results in pelvic inflammatory disease ▪ Miscarriage or still birth ▪ Ectopic pregnancy ▪ Infertility ▪ Death if untreated ▪ HIV transmission becomes very easy **Babies:** Blindness **Males:** Pains in joints ▪ Sterility ▪ Death if untreated ▪ HIV transmission
Syphilis	**Females/Males**: Encourages HIV transmission, if untreated ▪ Repeated miscarriages in females ▪ Damage to the heart, brain, spinal cord, eyes ▪ Blindness ▪ Insanity, paralysis ▪ Death **Babies:** Still birth ▪ Low birth weight ▪ Pre-maturity ▪ Abnormalities of heart, bones and teeth
Chancroid	**Females/ Males:** Encourages HIV transmission
Genital herpes	**Females/Males:** Infertility ▪ PID in females ▪ HIV transmission

Reproductive Tract Infections and their Effects

Infections	Effects/Complications
Gonorrhoea	**Females**: Results in pelvic inflammatory disease ▪ Miscarriage or still birth ▪ Ectopic pregnancy ▪ Infertility ▪ Death if untreated ▪ HIV transmission becomes very easy **Babies:** Blindness **Males:** Pains in joints ▪ Sterility ▪ Death if untreated ▪ HIV transmission
Syphilis	**Females/Males**: Encourages HIV transmission, if untreated ▪ Repeated miscarriages in females ▪ Damage to the heart, brain, spinal cord, eyes ▪ Blindness ▪ Insanity, paralysis ▪ Death **Babies:** Still birth ▪ Low birth weight ▪ Pre-maturity ▪ Abnormalities of heart, bones and teeth
Chancroid	**Females/ Males:** Encourages HIV transmission
Genital herpes	**Females/Males:** Infertility ▪ PID in females ▪ HIV transmission

	Babies: Foetal death ▪ Low birth weight or pre-maturity ▪ Congenital infection of infants
Genital warts	**Females:** Increased risk of cervical cancer ▪ Bleeding ▪ Pelvic Inflammatory Disease (PID) ▪ Ectopic pregnancy ▪ Infertility ▪ Death **Infants:** Congenital infection
Chlamydia	**Females:** PID ▪ Encourages HIV transmission **Babies:** Foetal death ▪ Low birth weight ▪ Congenital infection
Pelvic Inflammatory Disease (PID)	**Females:** Infertility ▪ Ectopic pregnancy ▪ Chronic pelvic pains ▪ Recurrent infections ▪ Miscarriages or still birth **Babies:** May be born too soon or too small ▪ Low birth weight
Bacterial vaginosis	**Females:** PID **Babies:** Low birth weight ▪ Prematurity
Candidiasis	No known effects but minor discomforts.

Warm-up exercise

Song: "This little light of mine, I'm gonna let it shine."

Closing

- This allows time for recap.
- The girls can take an action assignment to discuss with a close friend, family members, etc, something they have learnt new. This should be discussed at next meeting.
- Make announcement (if any).

SESSION 3:

Opening

- Start the session with appropriate songs and exercise.
- Listen to the minutes of last meeting.

Lesson topic

Activity 1:

- Recap of action assignments
- Ask the girls to present the outcome of the action assignment given during last meeting. Put responses on flipchart. Process and add value where necessary.

Activity 2:

Small group discussion

Question: What factors do you know that contribute to women being mostly affected by RTIs?

- Record responses on flipchart
- Process and give technical information.

Activity 3:

Group work/discussion

Present the case study below to show how and why young people are exposed to RTIs:

Joyce is aged 16 and in her second year in the university. She is growing up with many changes in her body and in her life. She starts menstruating but uses toilet tissue to absorb her flow. She therefore, feels she needs to identify with a boyfriend. She also engages in all activities that her friends are involved in. Her religious teachings stress on abstinence from sexual intercourse so as not to sin. Media messages also reinforce abstinence in order to stay safe and healthy. Among her friends, she is the only girl without a sexual partner and is still a virgin. Boys from the school always pressurise her for sexual activity so that she could be "normal" and "human." She eventually gives in to unprotected sexual intercourse. The relationships quickly end. She is not satisfied sexually and she is advised by her peers to use alum. The

more boys meet her for friendship the readier she accepts beeause she does not want to hurt them. Her step-father stops supporting her education because Joyce refused to have sex with him. Joyce turns to 'sugar daddies' for money to meet her needs. Finally, she begins to experience pains in her lower abdomen and ignores them because according to her they could be related to menstrual discomforts.

Discussion points

- Identify the problems in the case study and give reasons for such problems.
- Why did Joyce accept all the men?
- What could have been the better step to take?
- What signals are indicated by the discomforts of the lower abdomen?

Activity 4:

Brainstorming

- Ask participants to suggest how young people can stay free from RTIs.
- Process answers and give technical information.

Self-Reflection/Evaluation

1. Ask participants to name those attitudes or behaviours they held before the topic on RTIs.
2. What attitude or behaviour has changed completely or what aspects do you still want to hold on to?

Closing

This a time to engage in self-reflection and make announcement (if any).

Action assignment

Ask girls to write on, "How I intend to utilise the information to enable me to stay safe and healthy."

Close session with an exercise on "One word to describe my feelings after the session."

TECHNICAL INFORMATION

Why women are vulnerable to RTIs

- Men's control of women's sexuality results from the belief in male supremacy
- In many communities males are allowed, or expected to indulge in sexual activities, even with prostitutes, while the young and unmarried females are expected to protect their virginity. In other areas, sexual exposure to a virgin is believed to offer a cure for

infections, while others see some women as being promiscuous and unclean. In addition, male involvement in sexual activities is seen as a sign of sexual potency

- Sexual behaviour of men is basically about they being allowed or expected to have multiple sexual partners, whereas the females are not
- Women's fear of social consequences resulting from refusing sex, reluctance to inform partners of diagnosis, inquiring about their partner's health status and sexual involvement
- Men's uncooperative attitude towards medical tests/or examination.

Young people and reproductive tract infections

Adolescents' sexual activity exists in many societies and most of them are non-consensual. They are exposed to violence and abuse at all stages of life and some of the problems often result in reproductive tract infections and their attendant effects.

- Some other contributing factors to adolescent vulnerability to RTIs include: sexual abuse and exploitation, incest, child prostitution, child sex trafficking, rape, partner abuse, harmful traditional practices
- Unintended pregnancies, physical injury
- Multiple short-term sexual relationships without the use of condoms
- Lack of adequate information
- No self-confidence
- Negative attitude of health service providers
- Requirements of parental, spousal or partner consent before treatment. Adolescent women have fewer protective antibodies than the older women and the immaturity of their cervix increases the likelihood of exposure to infection
- Lack of negotiating skills with partners about sexual decision
- Lack of access to contraception and reproductive health services
- Young people are generally not expected to discuss issues of reproductive health and sexuality
- Sexual violence and exploitation and abuse of power, making young people more at risk
- Peer pressure and influence

Preventive measures

- Visit a trained medical personnel for counselling, referral and treatment
- Use condom if you choose to have sex
- Take all drugs prescribed and use condom until treatment is completed (if you must have sex)
- Abstain from sex until treatment is completed
- Good personal hygiene is important
- Receive counselling from a qualified health worker to avoid future infections
- Inform sexual partner of the need to get examined and treated
- Avoid self-medication
- Say no to sex
- Avoid being under the influence of alcohol so that you can be in control all the time.

REFERENCES

1. *Reproductive Tract Infections for Women's Reproductive Health*, by Andrienne German: King Holms, Peter, Plot & Judith Wasserhert, published by Plenium Press, New York (1992).
2. *Male Infertility: Men Talking*, by Claire Mason published by Routledge 11 New Fetter Lane, London (1993).
3. *RTIs Among Women in the Third World*, a publication by IWHC.
4. *Book of Women's Health: Your Comprehensive Guide to Health and Well- Being* by Anthony Scally; published by William Morrow & Company Inc. New York (1999).
5. *Where Women Have No Doctor*, by A. August Burns; Ronne Lovich; Jane Maxwell & Katharne Shapiro, published by A. Hesperian Foundation Book, (1997).
6. *Challenging the Culture of Silence: Building Alliances to End Reproductive Tract Infections (RTIs)* by International Women's Health Coalition (IWHC).



CHAPTER SIX

UNDERSTANDING GENDER ISSUES

GOAL:

Assist the young girls to have a better understanding of gender issues and to be able to analyze existing inequalities in the society.

OBJECTIVES:

At the end of the discussion, participants would have:

- Explored personal experiences of gender issues in the society
- Explored the concept of gender and terms used in discussing gender issues
- Discussed and identified some gender biases in the society and in the family
- Explored the effects of gender biases on girls and boys and to assess their influence in educational programmes
- Strategize on how to overcome gender biases in the society.

COMMON BELIEFS/CONCEPTS:

- Women are weaker sex
- How could a woman do something like that?
- Women are inferior and men are superior and more active
- Why shouldn't the man beat his wife when she fails to cook his food on time?
- Women cannot do certain things in the society.

ACTIVITY/TIME:

- Brainstorming (20 minutes)
- Discussion (30 minutes.)
- Small group work/discussion - (30 minutes.)

PREPARATION:

Society expectations for male and female shape the kinds of behavioural patterns they develop.

LESSON SEQUENCE

Opening song

We don't need that old time tradition
We don't need that gender stereotype (twice)
It's not good enough for us.....

Energizers/Ice-breakers

Gender portrayals and sexism in everyday language

- Read out the words under Sexist Language below and ask the girls to provide non-Sexist Alternatives for each of the words.

Sexist Language		Non-Sexist Alternatives
- Mankind	——	People, humanity, humankind
- Spokesman	——	spokesperson
- Policeman	——	police officer
- The man in the street	——	ordinary people
- No man	____	no one, no person
- Saleslady/salesman	____	shop assistant
- Stewardess	____	flight attendant
- Landlord	____	Property owner

Activity 1:

Work roles:

- Ask participants to list the domestic activities they do at home, explaining who does what. See format below:

Work Roles

Tasks

The things you do at home	Who does what?		
	Females	Males	Both
- Cleaning the house/home			
- Making the beds			
- Preparing the meals			
- Washing plates and utensils			
- Washing clothes			
- Caring for children			
- Earning family income			
- Preparing land for planting			
- Planting crops			
- Cultivating crops			
- Harvesting crops			
- Fetching water			
- *Building houses*			
- Making/sewing clothes			
- Mending clothes			
- Shopping			
- Market			
- Fixing broken things			
- Grinding/pounding of food condiments			

Elaborate more on the exercise by asking participants the following questions:

- Do either females or males perform more of the daily tasks required in their family?
- How do these expectations affect issues of education and employment?
- Is there any reason why the girl, for example, should be exclusively responsible for any of the tasks?

Activity 2:

Brainstorming exercise

- Ask the participants to brainstorm on the key words, such as sex, gender, gender bias, gender equality, gender equity
- Process and add value.

Activity 3:

Group work

Some indicators of gender biases

- Break participants into 3 - 4 small groups. Give the following task:
- What are some of the important gender biases in our communities?
- Commend their effort, process the output and add value, using technical information.

Activity 4:

Brainstorming exercise

Social expectations

What kinds of behaviour/ characteristic would best describe girls, boys?

Characteristics	Girls	Boys

The expectation society holds about male and female, shapes the kind of behavioural patterns they develop.

Activity 5:

Brainstorming exercise

- Ask participants to fill in this open-ended question:

One effect of gender biases for girls and boys I think of is .....?

- Process the information and add value, using technical information on effects of gender biases about girls and boys.

Self-Reflection/Evaluation

Have girls respond to the following questions:

- What new lesson did you learn from the session?
- How does the lesson affect your attitude on the issue of gender?
- How can you now use the knowledge acquired from this session?

Closing

Exercise

- Ask participants to complete the following:

Sexism in Language	Alternative Non-Sexist Expressions
1. Man's search for knowledge has led him to improve scientific methodology	Human search for knowledge has led to the improvement of scientific …
2. The use of experiments in psychology presupposes the mechanistic nature of man	
3. Man's achievement	
4. An average man on the street	
5. Primitive man	
6. To man the office	
7. Manfully	
8. Wise man	
9. History of mankind	

Closing song

We have a vision.....

Let's stop gender discrimination.....

TECHNICAL INFORMATION

Definition of key words

Sex: The biological aspect of an individual that characterizes the person as male or female. Sex does not vary from culture to culture. A female is a female and a male is a male.

Gender: Gender describes the behaviour and roles played by males and females, based on social expectations. Gender roles change from culture to culture and with time and experiences within a culture.

Gender bias: Discriminatory attitudes, norms, practices, and policies, based on socially constructed beliefs about male and female roles. Such acts put females at a disadvantage and limit their ability to exercise their talents and the full range of their potentials and capabilities.

Gender equality: The application of the same standards of status, rights, respect and opportunities to everyone without any discrimination on the basis of sex.

Gender equity: The principle of fair and even treatment to ensure gender equality.

Many daily activities are designated

as the primary responsibility of either male of female; with women bearing a heavier burden with little time for recreation. Very few women participate in decision-making and in politics.

Recently women in paid employment have increased but they are concentrated in traditional sectors - secretaries, typists, teaching, nursing shopkeepers rather than in top management and decision-making positions.

Women are still the majority of voters and minority of those voted for. Women play a dominant role in agriculture, but fertilizer production, management and distribution are handled by men. Greater proportion of housework is still done by girls and women. Boys have greater freedom of movement and exploration than girls under the excuse of family reputation and protection. When a boy impregnates a girl, there is no dent on family reputation. In fact, often there is denial. When a girl becomes pregnant, the family reputation is invoked and parents would show different expectations of skills needed by the girls and boys for their future. So also their views on girls' and boys' education.

Effect of gender biases on girls and boys

- Less developed society as half its potentials are not tapped
- Girls with low self-esteem and little confidence in themselves, become easy victims of exploitation
- Girls would lack life management skills and therefore, low status
- Girls with no focused career ambitions
- Girls who depend on others for their sense of direction
- Females being denied information and skill development in areas which may be useful for their lives.
- Females left with less opportunity to learn, if more of their time is spent in house chores, caring for others.
- Females' aspirations and motivations may be reduced to seek leadership positions
- Girls likely to be tired and inattentive when they get to school because of household work burden
- Girls likely to perform poorly as they have less time to study.

REFERENCES

1. Agarwal, B. (1994). *A Field of One's Own: Gender and Lands Rights in South Asia*, Cambridge: Cambridge University Press.
2. Ali, IKA (1996). "Notes on Rethinking Masculinities: An Egyptian", in S. Zeidenstein and K. Moore (ed.), *Learning About Sexuality*, New York Population Council and International Women's Health Coalition, pp. 98 - 109.
3. GPI Lesson Output.



CHAPTER SEVEN

CONFLICT RESOLUTION

GOAL:

Assist the girls to develop basic skills in resolving conflicts.

OBJECTIVES:

That at the end of the lesson, participants will be able to:

- Identify conflict situations
- Explore the causes of conflicts and
- Learn basic skills in resolving them.

COMMON BELIEFS/CONCEPTS:

- Conflicts always bring long lasting unpleasant experiences to people in any given area
- They destabilize people and destroy lives and properties in any environment.

ACTIVITY/TIME:

- Flipchart/brainstorming (10 minutes).
- Write and stick exercise - (10 minutes).
- Large group work exercises - (60 minutes).
- Small group discussion - (50 minutes).

PREPARATION:

Young people in their daily interaction with each other, because of the complex environment they find themselves, are usually confronted with issues which they may not be able to handle and this would bring lots of negative consequences.

LESSON SEQUENCE

Opening

- Start the session by welcoming participants and call for report of the previous meeting to be read and some announcements can be made (if any). Individual goals (expectations) for the day are also set. Select a song from the appendix such as:
- Let there be love shared among us...

Energizers/ice-breakers

These can be used to create fun. Select an energizer from the appendix or use your own.

Activity 1:

Write and stick exercise

- The facilitator will present learning objectives. That at the end of the lesson, participants will be able to - identify conflict situations, explore the causes of conflict and learn basic skills in resolving them.

Warm-up exercise

- Ask participants to give a quick idea of their likes and dislikes. These should be written on pieces of paper without names and pasted on the flipchart/board. The facilitator should ensure the spontaneity of the exercise.

  The facilitator will read all the responses to all participants to draw out emerging issues and to also assess the feelings of the group. Can the emerging issues from participants' output be linked to the topic e.g. "I like people who discuss a lot" and "I like people that don't talk too much" etc. Were there situations who constituted dislikes for some people and vice versa?

Note: Discussions may generate links to areas of conflict.

Lesson topic

Activity 2:

Flipchart/brainstorming

The facilitator introduces the topic and asks participants for their expectations on the topic.

This will be done by individuals writing 3 expectations, but presenting only two (prioritized) for listing on the flipchart.

The output as would be summarized will be put away for review after the session.

Activity 3:

Group work/discussion

- Constitute groups by participants calling 1, 2, 3, etc.
- The facilitator will provide framework of conflict situations.

(i) Ama is 16 years old. She has formed the habit of borrowing her friends' notebooks to update hers, because she rarely attends classes.

(ii) Two university students decide to share cost and live in the same flat.

(iii) A married couple have been living together for 10 years until the brother of the man came to live with them to search for employment.

Discussion points

Participants to:

(1) Build a conflict scenario.

(2) Identify the emerging issues or the problems that would come out.

(3) What roles did the characters play in the emerging issues?

(4) What would you do if you were faced with a similar situation?

(5) What tips can you give to remedy the situation?

(6) Now define conflict and conflict resolution in general terms- what can you say they mean to you?

Plenary session

Group presentations

Each group will present its work for comments and discussions by other participants. The facilitator is also expected to use teachable moments to add value to the discussions.

Activity 4:

Small group work/discussion

Group work in pairs - using the following questions:

(1) What do you consider to be the cause of conflicts?

(2) How can conflicts be managed for positive results?

The output (presentation) will be recorded on flipchart and discussed in preparation for facilitator's information.

Self-Reflection/Evaluation

After the solution has been tried out, create time to reflect on how well the plan has worked, whether there is anything to change or carry out something new instead, and draw lessons as well.

Have girls complete the following open-ended questions:

(a) New thing(s) I have learnt about conflict resolution is .....

(b) My opinion(s) that has/(ve) changed about conflict are.....

(c) One thing I didn't like is ....

(d) One thing I still want to know about conflict resolution is .....

The facilitator will record all responses from volunteers on flipchart to enable her to assess whether learning has taken place and at what level.

Closing

Close the session with the song, "Let there be love".

TECHNICAL INFORMATION

Defining conflict

Conflicts are disagreements or problems that people have with one another, that usually lead to negative reactions and feelings. Sometimes differences in values, opinions or aims may lead to conflict. Conflicts are not necessarily destructive. It is necessary for people to face conflicts and learn how to deal with them.

Conflicts help to expose problems; an in-built mechanism to solve problems; if properly managed, they can be used as an opportunity for learning, for personal growth and for social change. Conflicts bring out creativity in people. Badly managed conflicts usually turn negative with bad effects. Conflicts sometimes bring out new ideas and strategies for moving forward.

Why do conflicts arise?

Sometimes conflicts arise as individuals try to protect their self-interest at the expense of others. When people pursue different goals and objectives a conflict can arise in such working conditions, be they cultural, religious differences or gender discrimination; they cause conflicts. Rumour-mongering is a strong reason for conflicts, lack of respect as well as exploitation, abuse and all forms of violence against women are equally strong elements that can cause conflicts. Ethnic oppression and marginalization of people and groups such as ethnic minorities, women and children are potential conflict issues and so also ineffective communication, feelings of being dictated to, wrong use and exercise of power; resistance to

change, failure to achieve a goal too, can cause conflicts.

Steps on how to resolve conflicts

1. **Stop and think:** Defuse anger. Assess whether you need a chance to cool off first before addressing the problem. Anger is such an intense feeling that must be defused before any reasonable judgement or negotiation can happen.

2. **Listen to your feelings**

This helps you to become aware of your own feelings as well as those of others by listening and reflecting on the feelings expressed. Once anger is defused and feelings respected, then you can settle down to problem -solving.

3. **Define or state the problem**

An important step in working through a conflict is a reflection on whether there were competing points of view. As if you insisted on being right without considering elements of other person's point of view. Such reflections will help in seeking meaningful resolution of the conflict. This involves defining or stating the problem. A term of concrete visible actions instead of underlying and less visible reasons. It means that all issues must be honestly brought out. Conflict resolution calls for openness and sincerity. Poor communication or inadequate communication can cause conflict.

4. **Think of possible solutions**

a. List down a range of possible solutions to the problem

b. Choose one that will take into account all the views expressed and is agreeable to everyone involved, as well as to restore a sense of understanding and acceptance

c. Look at the possible consequences of the solution

d. Plan the solution and implement as needed- this involves finding out what each of you needs to do to transform the problem or conflict into the solution agreed upon by the parties involved.

NOTE

When your efforts seem not to work the six guidelines are not offered as a recipe but as a guideline to keep in mind. Still, even the most skillful efforts to resolve some conflict non-violently may sometimes prove difficult.

In this respect, restating the problem

to see if all of you do see it in the same way will help you focus on your needs and also help you become more creative in your imagination for solutions.

Sometimes you will find that the problem is that each person in the conflict needs more information about what each person wants. It would be useful to agree to give yourselves time to think over and try new ideas toward resolution.

Ultimately respect for human rights in particular the right of women and girls, will reduce conflict situations, arising from issues that concern women. Respecting the right of marginalized persons, vulnerable individuals and ethnic minorities can help also reduce conflicts. Level-playing grounds, equality and equity between men and women and among persons can reduce conflicts

Benefits of conflict - Conflicts are essential part of change and creativity. They are a signal that problem exists. It constitutes a trouble-shooting avenue during the process of resolutions. Conflicts help in searching for the means to change a situation; the process of searching for ways to resolve conflict, may lead to innovation and change. Conflicts can make necessary change to be more acceptable.

Destructive aspects of conflict

These include strained relationship and distrust, waste of time, energy and other resources and they may constitute sabotage if expected goals are not achieved, and can do harm to competitive advantages.

Conclusion

Effective problem-solving resolves conflicts and opens up channels of discussion and cooperation. Conflicts are an inevitable ally of progress and change. What should be feared is the failure to manage conflict constructively.

REFERENCES

1. GPI Lessons Output (including girls' opinions).
2. FITC Consult Fact Sheets on Handling Conflict in Negotiation and Managing Hostility
3. "Playing with Fire (Creative Conflict Resolution for Young Adults)."
4. *Young People Creating Community Change* published by the W.K. Kellogs Foundation.



CHAPTER EIGHT

MENOPAUSE AND SEXUALITY IN LATER

GOAL:

To enable the girls to understand menopause and sexuality in later life as normal development and life passage in a woman's life.

OBJECTIVES:

At the end of the lesson, the girls will be able to:

- Understand the meaning of menopause and other aspects of sexuality in later life
- Understand menopause as part of female sexuality
- Explore the myths and prejudices about menopause and learn coping strategies for dealing with it in later life
- Prepare and look forward to vigorous, active and healthy menopausal period in their lives.

MATERIALS:

Flipchart, blackboard and chalk, paper, markers, facilitator's resource, pen and pencils.

ACTIVITY/TIME:

- Opening exercise - (5 minutes)
- Brainstorming - (20 minutes)
- Group work - (30 minutes)
- Adding value - (30 minutes)

LESSON SEQUENCE

Opening

Start the session by introducing the topic and a song, titled: "I feel just right in the skin I wear.....".

Energizers/ice-breakers

Opening exercise: "A beautiful woman"

- What does a beautiful woman look like?
- Draw and describe your ideal beautiful woman. Each participant will paste her drawing on the flip chart/board. Comments will be taken after presentation.

The output of the exercise will bring out the easily acceptable characteristics of a beautiful woman and the one they characterize as the "ugly." Lessons will be drawn on the realities of the developmental stages of womanhood.

Lesson topic

Activity 1:

Brainstorming:

- How would you describe menopause to someone? What words or statements would you use to describe it for another person to understand?
- List responses on flipchart.
- The exercise will help participants explore the meaning of menopause.

Activity 2:

Group work

- List out 5 slang names given to women in menopause.

Presentations will be followed by discussions and each participant will be expected to pick one slang name to discuss and comment on it.

The exercise will bring out the myths and gender prejudices that are associated with menopausal period in women. Participants will start to appreciate the factual information on what menopause is, by comparing slang words with their new understanding.

Self-Reflection/Evaluation

List out myths and realities about menopause on cards for participants to discuss in order to assess their level of information on the issue.

Present case studies - stories of women in their later life: experiences of such women which they have heard of, that remind them of some aspects of the lesson. Facilitator will

use teachable moments during narratives to add value to the lesson. General discusison by participants will also help facilitator to assess the level of information of participants after the lesson.

Closing

Exercise 1 - Each participant would take a partner and with a handshake, takes turn to say the following to each other; "My biological clock is ticking towards wisdom. I am still who I am," (Facilitator will write this boldly on flipchart for participants).

Closing song

"This little light of mine - - - -"

TECHNICAL INFORMATION

Different views about menopause

Some people, especially physicians see menopause as a purely medical problem that needs to be diagnosed and treated. Their argument is based on the fact that menopausal women are at increased risk of developing health problems. Therefore, the diagnosis is menopause, while the treatment is hormonal replacement therapy (HRT). Others object to this thought of "medicalization" of menopause. They believe that the view of the physicians perpetuate cultural perceptions of ageing in women as a time of decay that should be feared rather than something normal in the developmental process of a woman.

The good news is that the two acknowledge the risk of certain ailments after menopause and encourage various preventive measures.

Coming to terms with reality of menopause

Menopause marks the end of a woman's reproductive years and it could be frightening for some women since the society places great emphasis on youth, beauty and reproduction for women. Women, too, though no fault of theirs, have internalised the fact that their main role in the society is that of reproduction, therefore, the loss of the potentials to have children is hard for women to accept. They worry that their physical appearance will no more be the same - breasts sag, face wrinkles and waist becomes thicker. These are some of the early signs of the onset of menopause. Ageing especially for women in a youth-worshipping society makes some

women feel invisible and devalued. A woman may not feel old physically, but society would see her as such.

Understanding menopause

Literally speaking, menopause refers to a woman's last period. Technically, at this time, a woman must have stopped menstruating for at least one year. Most women reach menopause between 45 - 55 years of age. Studies have shown that at age 52, 80% of women no longer menstruate. The declining functioning or artificial removal of the ovaries would trigger off the physical changes of menopause. As a woman ages, so the ovaries age too, shrinking in size, stopping release of eggs with less production of oestrogen. The processes generally begin for a number of years before complete cessation of menstruation.

Physical changes include hot flashes, night sweat, sleep difficulties, vaginal dryness, skin changes, hair loss, mood swings, depression and weight gain. Menopausal women are also at risk of osteoporosis - the bones become fragile and brittle. Decrease in oestrogen also exposes the woman to the risk of heart attack and stroke. Androgens (also called male sex hormones) begin to play greater role in the woman's life. Bodily changes of menopausal women usually take a decade before it can be said that she has reached menopause. An understanding of these changes will help her to face its arrival with a healthy attitude.

Pre-mature and induced menopause

There are certain situations that do hasten the onset of menopause. About 1% of women reach menopause before they are 40 years of age.

Reasons include severe infections or tumours in the reproductive tract, damaged ovaries, exposure to radiation, chemotherapy and surgery that impairs blood flow to the ovaries and some cases of hysterectomy where ovaries are removed to prevent ovarian cancer.

Diagram - Menopause at a glance

Planning ahead

You cannot avoid menopause, but you can plan ahead.

1. **Exercise** - this places stress on bones, increasing their density and strength thereby protecting

one against loss of bone tissue in later life. Exercise also keeps cholesterol level down, offering protection against heart disease.

2. **Eat right** - get a nutritive intake that is low in saturated fat. Keep calories down
3. **Stop smoking** - this helps you cope better with menopause. Scientists say that nicotine is believed to be able to cause early onset of menopause.
4. **Keep an eye in pre-menstrual syndrome (PMS)**-keep records of symptoms and pay attention to changes. PMS may not worsen during menopause.
5. **Increase your calcium intake** - eat food rich in calcium - low fat milk or dairy products, fish, etc.
6. **Know your cholesterol levels** - consult your doctor for proper checking and maintenance.
7. **Talk to your mother** - some women follow the patterns of their mothers - so ask mom - how, what and when?

Coping with menopause- when it finally comes:

1. Get support - talk with other women, especially menopausal women and share experiences. This will help you stay supported, not isolated. Gather as much information as you can about menopause.
2. Find the right doctor - since most of the changes during menopause are physical, shop around for a competent and gender-sensitive doctor.
3. Choose a mentor - find a woman, 10-15 years older than you, who has been through menopause and whom you admire and respect. Spend time with her exploring with her. Find out what holds meaning in her life.
4. Stay lubricated - decrease in oestrogen with the coming of menopause causes vaginal dryness. The elasticity and size of the vagina would change. Walls become thinner and lose the ability to become moist. This makes sex painful or even undesirable. Some water-based lubricants are used to keep the vagina moist e.g. K-Y jelly, preplans and astroglide. Steer clear of oil-based lubricants such as petroleum jelly, because they

don't dissolve easily and therefore cause vaginal infections. Get yourself aroused before sexual intercourse.

5. Stay sexually active. Blood circulation in the vagina area helps to make it moist. For women without partners, masturbation helps promote circulation and moistness in the vagina.
6. Keep your body cool - some experts say, the decline in oestrogen would upset the body's internal thermometer. This, together with hot liquids and spicy foods would trigger hot flashes - ranging from a warm sensation to a hot one, which a woman flushes and sweats. Keeping the environment cool, dressing in simple clothes and drinking cool liquids help.

REFERENCES

1. GPI Lesson/Outputs
2. *The PDR Family Guide to Women's Health and Prescription Drugs,* published by Medical Economic Data, Montreal New Jersey
3. *Age Erasers for Women: What You Do to Look Younger and Feel Great* - edited by Patricia Fisher
4. Menopause: The Silent Passage for Gail Sheehy



CHAPTER NINE

LEGAL PROVISIONS/ POLICIES ON THE HEALTH RIGHTS OF GIRLS AND WOMEN

GOAL:

To assist the girls to have more indepth understanding of their rights as human beings and those legal instruments that protect their rights as girls and women.

OBJECTIVES:

By the end of the session participants will be able to:

- Identify what issues and areas each of these legal instruments address
- Understand that as human beings they have rights
- Appreciate why they must stand up for their rights.

COMMON BELIEFS/CONCEPTS:

- Children who talk about their rights are from "loose" homes and should be dealt with
- God first created man and one rib of the man was removed by God to form a woman, so women are half beings and therefore, are not equal with men.

MATERIALS:

Flipcharts, markers, masking stick tapes, ruled sheets, facilitator's resource on legal provisions and policies on the health rights of girls and women, pieces of paper, ball-point pens.

ACTIVITIES/TIME:

- Brainstorming/discussion (45 minutes).
- Statements on cards/discussion - (45 minutes).
- Report back action assignment/discussion (30 minutes.)
- Review exercise - (30 minutes).
- Technical information on legal provisions/policies on the health rights of girls and women (1 hour).

PREPARATION:

Child abuse is very common in Nigeria because of the belief that children have no rights. On the other hand, women's rights are also violated, abused, refused, ignored and even not recognised at all because they are defined by males in specific places at specific times and in particular context.

LESSON SEQUENCE

Opening

Start the session with report of last activities, a song, announcement or set individual goals (i.e. expectations) for the day.

Song: All Across the nations/All around the world/Women are longing to be free/No longer in the shadows/ forced to stay behind/But side-by-side in true equality...

Energizers/ice-breakers

These can be used to introduce the topic like the one listed below:
Exercise: Rain forest exercise, or you can use your own.

1ST SESSION

Lesson topic

Activity 1:

Brainstorming/discussion

- Ask the group or a volunteer to read out the title of the session on the flipchart.
- Ask participants why they think the lesson is important or necessary. List responses down on a flipchart.
- Ask participants what they hear people generally say about women's and girls' rights. Process the information and add value, using your concepts as presented above.
- Ask participants to brainstorm on why they think they have rules and regulations in their schools, clubs, churches,

organizations, communities, etc.

- Put down their responses on flipchart and add more information.

Introduction

In any given situation, place or organisation, because of the necessity for good human relationships, peace, stability and smooth running of things, there must be laws and regulations to guide everyone's conduct and to avoid violation of the rights of everyone and the misuse of privileges.

However, even when laws and regulations are put in place, women are most times excluded from protection by these laws in their places of work, families, villages, organizations, etc. Reason is that discrimination against women in our society is rooted in traditional beliefs and practices that regard the man as superior.

Discrimination takes place in the family as well as in the wider society. In families, it starts from early childhood where the girl-child is treated differently from the boy-child. She is made to acknowledge the role that places the boy-child above her, giving the boy-child preferences and privileges that are denied her, particularly in the area of education and even dietary requirements. That is why there is need for girls and women to know those legal instruments that protect their rights as human beings.

Activity 2:

Statements on cards/discussions

- Pass round cards to participants with statements for them to read and provide answers to
- Write down answers given to each statement and ask for comments at the end.

Some of the statements could be:

1. Mention your rights as a person
2. What do you understand by the term, "human rights?"
3. What is the convention on the rights of the child all about?
4. What do you understand by this acronym, ICPD, and what is it all about?
5. What issues does the Beijing Declaration address?
6. What does the acronym, CEDAW stand for? Mention an article there.
7. Mention those legal instruments you know which protect the rights of women.
8. The 1999 Nigerian Constitution chapter 4 addresses very

important issues, state the issues addressed.

Process each response and ask for comments. Make sure the cards go round every participant.

Closing

You can use this time to make announcements, or give an action assignment, explaining to the participants that the assignment will be processed at next meeting, while technical information on the legal provisions will be provided then, too.

Close the session with any exercise or song of your choice.

Action assignment

In the next class, write down traditional or cultural practices that women in your area go through or participate in and why? This will be discussed in the next meeting.

2ND SESSION

Opening

Start the session with appropriate song or exercise by a volunteer.

Lesson topic

Activity 1:

Report back of action assignment given at last meeting/discussion

- Ask volunteers to present what they have written
- List responses on a flipchart and process the information, then add value to reinforce the need for the topic to be treated.

Activity 2:

Review exercise

This is to recap what was done during the last meeting.

- Ask 5 volunteers to recap what was done at last meeting. Put down responses on flipchart, process and reinforce the information to strengthen their level of information absorption or make correction where necessary.

Self-Reflection/Evaluation

Have girls complete the following open-ended questions:

a) One thing I have learnt about legal protection which has been useful to me is.....because.....

b) One thing I did not like or consider useful is....because.....

c) One major human right instrument I remember is ..... and issues it addresses are.....

d) One thing I still want to know about legal provision is .....

Closing

This serves as the right moment to recap and plan for the next session.

TECHNICAL INFORMATION

The legal instruments that seek to protect the rights of girls and women are as follows:

1. Convention on the Rights of the Child
2. Convention on Elimination of all Forms of Discrimination Against Women - CEDAW
3. Beijing Declaration and the Platform for Action.
4. The 1999 Nigerian Constitution
5. International Convention on Population and Development - ICPD
6. Universal Declaration on Human Rights - UDHR

- Convention on the Rights of the Child with specific attention on the African Charter.
- The United Nations Convention on the Rights of the Child is the first international legal instrument which lays down guarantees for the protection of the child's human rights. This convention was adopted in Geneva on the 20th of November 1989, in order to improve the quality of the life of children worldwide, and enhance their dignity, protect their integrity and focus global attention on their physical, mental and spiritual development.
- Nigeria is a member of Organisation of African Unity - O.A.U, now African Union, AU.

Convention on the Rights of the Child with specific attention on the African Charter

Nigeria is a signatory to this convention. As a follow up to this, the Organisation of African Unity (O.A.U) at its heads of state summit in Addis Ababa, Ethiopia in 1990 adopted a charter on the rights of welfare of the African child. This was done taking into consideration the socio-cultural peculiarities of the African child. While the UN convention looks at the rights from the global view, the OAU charter looks at the rights from the African view. June 16 of every year has been declared as the "Day of the African

Child."

The basic principles of the children's rights are:

- Child's right to life, survival and development
- Entitled to a name, family and nationality
- Free to belong to any association or assembly according to the law i.e. a peaceful association that is for development and progress
- Right to expression of opinion
- Entitled to protection from any act that interferes with the child's privacy, honour and reputation
- Entitled to adequate rest and recreation
- Entitled to compulsory basic education and equal career and job opportunity
- Entitled to good health and protection from illness and proper medical attention for survival
- Protection from indecent and inhuman treatment through sexual exploitation drug/child abuse, torture, maltreatment and neglect
- Not to be discriminated against, irrespective of origin, birth, colour, sex, language, religion, political and social belief, status and disability.

Convention on the Elimination of all Forms of Discrimination Against Women-CEDAW

This is an international human rights document that establishes international standard of equality between women and men. This convention was adopted by the United Nations General Assembly on the 18th of December 1979 and became a binding treaty on September 3rd 1981. CEDAW defines discrimination against women as anything that can bring about unequal treatment between men and women while carrying out activities for their livelihood

Some of the issues addressed are as follows:

- Role of government - Article 2
- Sex roles and stereotypes or modification of cultural behaviour - Article 5
- Trafficking and prostitution of women - Article 6
- Political and public life - Article 7
- Equal rights in education - Article 10
- Employment of labour - Article 11
- Health care and family planning - Article 12

International Convention on Population and Development - ICPD

In September 1994 at Cairo, the international community reached an agreement and committed themselves to a programme of action, which places reproductive health and rights at the centre of the population and development agenda.

Nigeria is a signatory to this convention. The aims of implementation of this convention were:

- Eliminating all forms of discrimination against girls and women
- Ending all forms of harmful traditional practices (HTPs), including female genital mutilation (FGM)
- Ensuring quality care for victims of sexual abuse or violence
- Providing adolescents with appropriate sexual and reproductive health information and services.

The Beijing Declaration and the Platform for Action

Over the past 20 years, world conferences on women which held in Mexico City 1975, Copenhagen and Nairobi, 1985 brought important progress towards achieving equality between women and men.

The Platform for Action is a powerful agenda for the empowerment of women as it seeks to:

1. Promote and protect the full enjoyment of all human rights and the fundamental freedoms of all women throughout their life cycle.
2. It also calls for establishment of the principles of shared power and responsibilities between men and women at home, in the work places and in the wider national and international levels.

The platform considered twelve "critical areas of concern" to represent the main obstacles towards women's advancement and these are:

- Women and poverty
- Education and training of women and girls
- Girls/women and health
- Women and armed conflicts
- Violence against women
- Women and the economy
- Women in power and decision-making
- Institutional mechanisms for the advancement of women
- Human rights of women

- Women and the mass media
- Women and the environment
- The situation of the girl-child.

The Universal Declaration of Human Rights (UDHR)

The UN General Assembly adopted the declaration on December 10th, 1948 and proclaimed human rights as common standard of achievement for all people (women/girls, boys/men).

Human rights

These are generally accepted principles of fairness and justice or universal moral rights that belong equally to all people simply because they are human beings.

Human rights as described by UN in 1948 "are those rights which are inherent in our nature" without which we cannot function as human beings.

Human rights are universal and they apply to all persons without discrimination. Therefore respect for human rights is very important and need to be upheld at all times.

The 1999 Nigerian Constitution

The 1999 Nigerian Constitution has laws that govern and protect the human rights of its citizens. Chapter four (4) - Fundamental Human Rights. Section 35-Right to Liberty says: Any person who is unlawfully detained or arrested shall get an apology and compensation.

38- Freedom of Religion:

- Every person is entitled to freedom of thought, conscience and religion
- No pupil or student can be forced to take part in religious ceremony other than his/her own parents' or guardian's. Use this to explain why GPI is non-religious organisation.

Section 42-provides for non-discrimination and of equality between the sexes. Inform participants of the existence of the free legal aid services at the Calabar Federal Secretariat, 2nd Floor, left wing. This has been established to give free legal advice and assistance to the public. (The facilitator should use close examples e.g. the rape cases reported to GPI SS Calabar Centre).

REFERENCES

1. *Street Law : Human Rights and the Nigerian Legal System*, by Legal Research & Resource *Development Centre,* Lagos.
2. *Human Rights Made Easy,* by Tokunbo Ige.
3. The Beijing Declaration and Platform for Action, produced by The United Nations Development Fund for Women (UNFEM) and The United Nations Information Centre, Nigeria (UNIC).
4. Constitution of the Federal Republic of Nigeria, 1999, printed by Federal Government Press, Mobil Road, Apapa, Lagos.
5. The United Nations Convention and the OAU Charter on Rights of the Child, reproduced by UNICEF, Nigeria, with the United Nations Information Centre, Lagos.
6. *Rights of the Child*, by Legal Research & Resource Development Centre, Lagos, 1996.



CHAPTER TEN

ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

COMMITMENT TO ACTION

... Information and services should be made available to adolescents to help them understand their sexuality and protect themselves from unwanted pregnancies, sexually transmitted diseases and subsequent risk of infertility. This should be combined with the education of young men to respect women's self-determination and to share responsibility with women in matters of sexuality and reproduction.

- ICPD Programme of Action 7.41

GOAL:

To assist the girls to understand what sexual and reproductive health and rights entail and how they can remain healthy and overcome the risk of STIs/HIV/AIDS.

OBJECTIVES:

At the end of the session, participants will be able to:

- Explore the meaning of sexual health and reproductive health and rights
- Explore the components of sexual health, reproductive health, sexual and reproductive rights
- Explore the barriers to achieving sexual and reproductive health and rights and learn some tips on how to overcome the barriers.

CONCEPTS/COMMON BELIEFS:

- Reproductive health means ability to give birth to healthy babies
- A female should not discuss sexual matters
- Only commercial sex workers can talk about sexual health
- Sexual right means freedom to have sex and do abortion
- It is only married men and women who can talk about sexual and reproductive health and rights
- Adolescents have no sexual health concerns.

MATERIALS:

Flipchart, paper and markers, blackboard and chalk, technical information on adolescent sexual and reproductive health and rights.

ACTIVITY/TIME:

- Large group work/ discussions - (50 minutes).
- Small group work/Discussion - (30 minutes).
- Individual writing exercise - (15 minutes).
- Brainstorming - (15 minutes)
- Read and stick - (30 minutes)
- Individual reflection exercise - (15 minutes)

PREPARATION:

Information and services should be made available to adolescents to help them understand their sexuality and protect themselves from unwanted pregnancies, sexually transmitted diseases and subsequent risk of infertility. This should be combined with the education of young men to respect women's self-determination and to share responsibility with women in matters of sexuality and reproduction -ICPD Programme of Action 7.41.

Nigeria has more than 20% of its population between the ages of 10 and 19.

"In a survey of more than 5,500 urban youths, aged 12-24, 41% (44% of females and 37% of males) had experienced sexual intercourse. Of these, 82% of females and 72% of males had intercourse by age 19. About 60% of youths surveyed did not know that pregnancy was possible at first intercourse." (AHI Fact- Sheet on Adolescents in Nigeria).

LESSON SEQUENCE

Opening

Start each session by asking the rapporteur to read minutes of previous meeting, sing a song, make

announcements (if any) or set individual goals for the day.
Song: "Breast and Vulva/Knees and Toes/All belong to me. Or use your own song.

Energizers/ice-breakers

Energizers/ice-breakers are quick activities that can be used to introduce the topic and to have fun.

Lesson topic

Activity 1:

Case story/group work/discussion to introduce the topic.

Present a story line for discussion with guide. Constitute groups by the count of 1, 2, 3, etc, depending on the number of participants. Facilitator will explore group presentations with participants to highlight sexual and reproductive health issues.

Jane's Story

Jane was 14 years when she completed her junior secondary, level 3. She had her first menstruation (menarche) 4 months back. Jane has never had sex. Before the start of the next academic year when she would have moved to the senior secondary level 1, her father called her and her mum, to inform them that Jane would not be moving onto the next level. Following her father's retrenchment from work, with no regular monthly income, Jane had to stop schooling to enable her brother who was already in senior level to complete his education.

Jane would marry a man who has already declared interest in two weeks time. The bride price will help the family. She had no option but to comply with the instructions especially when the mother informed her that getting married was the ultimate achievement of any woman and that Jane should count herself lucky.

Jane had never had sex and so her first experience of sexual intercourse was hurtful, uncomfortable and very frightening. On the other hand, her husband, Dave was very aggressive in bed and would always look forward to having good sex with Jane when he retires home after the day's business. Meanwhile Jane did not work outside the home, apart from going out to fetch water and buy kerosene for cooking. Throughout the day, she would clean the house, wash the clothes, go to the market and prepare meals. Jane found it hard coping with all these. Dave would still insist on having sex in spite

of the fact that Jane felt sick with vomiting most of the time, which could be early signs of pregnancy. Jane confided in her mother and was encouraged to learn to cope because "that is the way things are in marriage."

Discussion guide

1. How does the situation affect Jane's health? Does she have any right?
2. How might this situation affect Jane in the future?
3. What are the general expectations about rights and women's health problems?
4. Who has more control over decisions in the relationship? Give reasons using Jane's story.

- At the end, the rapporteurs for the different groups will display their flipcharts and make their presentation to the general group.
- The facilitator processes outputs and add value on components of sexual and reproductive healthcare and rights by presenting technical information.

Activity 2:

Brainstorming

- Ask the group to read out the title of the session on the flipchart and put down their expectations or learning objectives for the session.
- Process at the end and add the facilitator's specific objectives for the topic.

Activity 3:

Small group work/discussion

- Participants will brainstorm in 4 groups to come up with the definition of sexual health.
- Output of the group work will be recorded on flipchart.
- Commonalties will be established in terms of words, statements and ideas used by different groups.

At the end, the facilitator will process the output and add value, using technical information on definition of sexual health.

Activity 4:

Discussion/individual writing exercise

- The facilitator will discuss components of sexual health to generate contributions by participants for further understanding.

Or

- The facilitator can ask participants to list what they consider as

components of sexual health and then add value.

- At the end, the facilitator will process the output from the participants and then add value on components of sexual health.

Activity 5:

Group work/discussion

- Share the girls into 3 groups using the count of 1, 2, 3.
- Each group to work as follows:

Group 1

1. What are the elements in our life experiences that you consider important and necessary components to realize sexual health? Whose responsibilities are these elements?
2. The (adolescents)
3. Others, please identify.

Group 2:

1. What kinds of belief system and practice can hinder the achievement of sexual health?
2. How can recognition of these beliefs and practices be used as opportunity to promote sexual health?

Group 3:

1. What constitutes abuse to one's sexual health?
2. How can one protect or stop one's sexual health from being violated?
3. What role can you play as an adolescent towards protecting your sexual health?

- Groups to present and discuss, while facilitator adds value as the case may be. This exercise will assist participants to explore and break down wrong social beliefs about sexual health and learn more about what can be done to achieve sexual health, including the role of men.

Activity 5:

Individual write and stick exercise

Sexual rights

(a) Individual work

- Ask participants to list 3 issues they know that constitute sexual rights
- Why is recognition of sexual rights important?
- Participants will read and stick this on flipchart.

- Process output and add value by providing technical information on what sexual rights are.

Evaluation/Self-Reflection

Individual work

1. I understand sexual health to mean.....
2. My sexual right can be violated if.....
3. What I can do to achieve my sexual health (2 things).

Closing

You can make any announcements and sing a song, etc.

Closing exercise: Turn to your neighbour on your right and affirm the following statement:
"Always protect your sexual health and rights."

- Facilitator informs participants that the next session will be on reproductive health and rights.

Action assignment

- Discuss with a close friend something you just learnt and heard.

TECHNICAL INFORMATION

Important content of sexual and reproductive health and rights

- Sexual health
- Reproductive health
- Sexual rights
- Reproductive rights
- Services that can help to address sexual and reproductive health problems:
  - Family planning information
  - Counselling services
  - Pre-natal, post-natal and delivery care
  - Healthcare for infants
  - Prevention and treatment of sexually transmitted diseases
  - Reproductive tract infections
  - Safe abortion (where it's legal) services and management of abortion related complications
  - Prevention and treatment of infertility
  - Information, education and counselling on human sexuality, reproductive health and parenthood
  - Diagnosis and treatment of reproductive system cancers and HIV/AIDS, including referrals where a good system is not in place.

At the end, the facilitator will inform the girls that the topic will be taken in two sessions, namely:

A) Sexual health and rights (2

hours)

B) Reproductive health and *rights (2 hours)* for clearer understanding and comprehension.

Sexual health defined

The World Health Organisation (WHO) defines sexual health as "the integration of the romantic, emotional, intellectual and social aspects of sexual beings in ways that are positively enriching and can enhance personality, commitment, love and respect."

Sexual health is a basic human right. It is responsible and satisfying sex, free from diseases, guilt, fear, shame and coercion.

- It is the ability of a man and woman to enjoy and express their sexual attraction free from the risk of STIs, unwanted pregnancy, coercion, violence, discrimination, injury, unnecessary pain or risk of death.
- It is having responsible and satisfying sex life and the capacity to reproduce when so desired and the freedom to decide if, when and how often to do so.
- It is the ability to enjoy one's sexuality and reproduction.
- Sexual health is nurtured by the right to information and the right to pleasure.

The *facilitator should explore for* further information on the value added.

Components of sexual health

- Contraception, birth control, family planning and safer sex practices.
- Risk reduction and refusal skills
- Abortion as a public health issue
- STIs, including HIV/AIDS
- Reproductive tract infections
- Cancers
- Self-examination
- Barriers to sexual health
- Myths, cultural hypocrisy, silence over issues of contraception, sex and sexuality
- Sexual repression, giving expressions of shame, guilt
- Social and gender prejudices
- Ignorance and fear of "spoiling the child"
- Violence, rape, sexual harassment
- Gender inequality.

What are sexual rights?

- The right not to be pressured into sexual activity
- The right to express your sexuality safely without the risks of

unwanted pregnancy, STIs or HIV/AIDS.

- The rights to sexual freedom - being free from sexual coercion, exploitation and abuse at any time and any situation in life.
- The right to sexual autonomy, sexual integrity and safety of the sexual body. Ability to make independent decisions about one's sexual life within one's context of social ethics and values. Control and enjoyment of one's sexuality, free from torture, mutilation and violence of any sort.
- The right to sexual privacy as long as they do not intrude on sexual rights of others.
- The right to sexual equality, regardless of sex, gender, age, race, social class, ethnicity, religion, disability, etc.
- The right to sexual pleasure and expressions, including emotional expression of communication, touch and love.
- The right to sexually associating freely i.e. the possibility to marry or not, to divorce, etc.
- The right to comprehensive sexuality education.
- **The right to make free and responsible reproductive choices** - the right to decide whether or not to have children, the number and spacing of children and the right to full access to means of fertility regulation to overcome unwanted pregnancy, thereby being free from unsafe abortion.

Why is recognition of sexual rights important?

- To protect girls and women against exploitative sexual relations and unwanted pregnancy
- Physical, sexual and psychological violence in the community, workplace, school etc, e.g. sexual abuse, sexual harassment, intimidation, rape, unsafe contraceptives and unsafe abortion
- Physical, sexual and psychological violence in the home, including marital rape, battering and incest
- Female, Genital Mutilation, STIs, including HIV/AIDS.

B) Reproductive health and rights

Activity 1:

Brainstorming

- Ask the participants to read out the title of the session on the flipchart and list out their expectations or learning objectives for the session.
- Process and at the end present the facilitator's specific objectives for the topic as follows:

Facilitator's objectives: At the end of session, participants will be able to:

- Explore the meaning and components of reproductive health
- Appreciate what constitutes reproductive rights and how reproductive health can become a reality.

Activity 2:

Individual writing exercise/group work

Defining reproductive health

- Participants will note down their own definition of reproductive health
- Facilitator to collect this after the exercise.

Activity 3:

Group work

- Groups will be constituted by the count of 1,2,3,4, etc. The groups will then elect a leader who will guide discussions to come up with one definition for the group. Group discussions (it is hoped) will facilitate the understanding of value to be added on the meaning of reproductive health and rights.
- All the groups will present and discuss while the facilitator will process all output, and add value on reproductive health using technical information.

Activity 4:

Brainstorming exercise

Girls to brainstorm on:

1. What are the components of reproductive healthcare?
2. What is required to achieve good reproductive health?

The facilitator puts down responses on a flipchart, processes and provides technical information on components of reproductive healthcare.

Activity 5:

Read and stick exercise

- Participants are encouraged to explore what constitutes reproductive rights using options given by the facilitator and to arrange under any of these columns:

TRUE	FALSE

At the end, the facilitator will process the output and add value on reproductive rights as human rights.

Activity 6:

Small group work/discussion

Girls to work in groups of 3 or 4 persons per group on the following:

1. How can reproductive health become a reality?
2. What is reproductive healthcare service?

At the end, the groups will present and discuss output while the facilitator processes and provides technical information on reproductive healthcare becoming a reality.

Activity 7:

Individual work: reflection exercise

- Participants will reflect for some minutes on why reproductive health, rights and care are important. This will be discussed in the group and output recorded on flipchart.
- The exercise will also assist participants to explore and gain knowledge on whose responsibility it is to ensure reproductive healthcare and rights of women.
- At the end, the facilitator will add value, using technical information on the importance of reproductive healthcare rights.

Self-Reflection/Evaluation

1. Ask participants whether there are any new things they have learnt in the session
2. Have they been reminded of something?
3. Have their attitudes and behaviours changed towards

certain issues? What issues? This should be a discussion session for all participants to learn.

Closing

Close the session with a song such as "Let there be love shared amongst us."

TECHNICAL INFORMATION

Reproductive health is a state of complete physical, mental, social well -being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe life and that they have the capacity to reproduce and the freedom to decide if, when and how often to do so. Implicit in this condition are the rights of men and women to be informed, to have access to safe, effective, affordable and acceptable methods of family planning of their choice for the regulation of fertility. The rights of access to appropriate healthcare services that will enable women to go safely through pregnancy and child-bearing and provide couples with the best chance of healthy baby.

The components of reproductive health care are:

- Pre and post-natal care, supervised delivery and post-partum care
- Prevention and treatment of infertility
- Sexual education, including counselling
- Information and education on the structures and functions of reproductive systems, including how pregnancy occurs, contraception, birth control, abortion, STIs, including HIV/ AIDS and other pregnancy related issues
- Emergency obstetric care.

The following are required to achieve reproductive health:

- Good basic health and nutrition information
- Protection from violence
- Reduction of occupational and other environmental hazards
- Budgetary allocation to address reproductive health issues.

Reproductive rights are part of human rights

Reproductive rights embrace certain human rights that are already recognised in national laws, international human rights documents and other consensus documents. These rights rest on the recognition of the basic rights of all couples and individuals to decide freely and responsibly, the number, spacing and timing of their children and to have information and means to do so, and the right to attain the highest standard of sexual and reproductive health.

- The right to make decisions concerning reproduction, free of discrimination, coercion and violence.
- Reproductive rights include the right of all individuals to control their own bodily integrity and to have sexual relationship that is consensus, free from violence and coercion and the right to enter into marriage with the free and full consent of both parties.

Reproductive rights are essential in order for women to be able to exercise their right to health. This includes the right to comprehensive, good quality reproductive health services that ensure privacy, confidentiality and free and fully informed choices.

How reproductive healthcare can become a reality:

By modifying existing health care programmes, including family planning to:

1. Expand services to address women's multiple reproductive and sexual health needs
2. Intensify staff training and supervision to promote good quality care rather than just figures and charts.
3. Design services to protect women's rights and foster their empowerment
4. Pay attention to the information and health needs of adolescents and menopausal women
5. Design programmes to encourage men to take responsibility over their sexual and reproductive behaviours.

Reproductive healthcare services comprise:

- Treating clients with respect and compassion
- Counselling about sexuality, contraception, abortion, infertility, infections and

diseases

- Education on gender issues
- Screening, diagnosis and treatment for reproductive tract infections, STIs and other gynaecological problems
- Prevention of infertility and providing follow-up care
- Choice of contraceptive methods with full information on side effects and attention to the individual safety
- Safe abortion and maintaining high standard of technical competence
- Pre-natal care, supervised delivery and post- partum care
- Services for mothers and infants
- Inspiring trust and confidence to encourage use of services.

Why reproductive healthcare rights are important

- To enable women to bear and raise healthy children, when they desire to do so
- To enable women to manage their own fertility safely and effectively by conceiving when they want and are psychologically prepared for the responsibility
- To enable women to carry wanted pregnancy to term
- To enable women to experience healthy, sexual life, free from infection, violence, fear, pains or death associated with reproduction and sexuality.

REFERENCES

1. Bene Madunagu's presentation on Sexual and Reproductive Health and Rights, during CIINSTRID/CMA Staff Training of 31 August 2001.
2. *Sexual and Reproductive Health Briefing Cards*, by Family Care International (1999).
3. Fact Sheets - Adolescents in Nigeria by Action Health Incorporated
4. GPI Lesson Output



CHAPTER ELEVEN

VIOLENCE AGAINST GIRLS AND WOMEN

COMMITMENT TO ACTION

Violence against women violates and impairs or nullifies the enjoyment by women of human rights and fundamental freedoms...Any harmful aspect of certain traditional, customary or modern practices that violate the rights of women should be prohibited and eliminated. Governments should take urgent action to combat and eliminate all forms of violence against women in public and private life, whether perpetrated or tolerated by the state or private persons.

- FWCW PLATFORM FOR ACTION, 224.

GOAL:

To achieve the elimination of gender-based violence.

OBJECTIVES:

By the end of session, participants would have:

- Learnt the meaning of violence against girls and women
- Learnt what gender-based violence is
- Come up with the types of violence against girls and women
- Learnt ways to eliminate violence against girls and women.

COMMON BELIEF/CONCEPT:

- Men are superior to women.

MATERIALS:

Flipcharts, markers, blackboard, chalk, facilitator's resource on violence against women and girls.

ACTIVITY/TIME:

- Brainstorming (30 minutes)
- Discussion (60 minutes)
- Write and stick exercise (20 minutes)
- Group work (40 minutes)

PREPARATION:

"In all societies, to a greater or lesser degree, women and girls are subjected to physical, sexual and psychological abuse that cuts across lines of income, class and culture... violence against women violates and impairs or nullifies the enjoyment by women of their human rights and fundamental freedoms". -Beijing Platform of Action, Paragraph 112.

Gender-based violence is a serious health problem for all girls and women, irrespective of age, class, ethnic origin, or geographical differences. Gender-based violence or violence against girls and women undermines self-confidence of girls and women, compromises their health, saps their energy for productive activities and therefore, deprives the society of their full participation in deveopment activities. The United Nations Funds for Women (UNIFEM) observed that "Women cannot lend their labour or creative ideas fully if they are burdened with the physical and psychological scars of abuse," (Carillo 1992).

The term, "gender-based violence" clearly shows that this comes from the deeply embedded social attitudes of male-female relations, beliefs and taboos against discussing so-called "private matters" in public. The interplay of social elements would tend to legitimize, obscure or deny the existence of violence against women, thereby perpetuating it. In our educational programmes, oral tradition through the authority of elders, the media, formal, community and state systems and the legal systems, they construct and define *standards of behaviour* for female and male. These standards are based on the biased system of son-preference and discrimination against girls and women. These socially constructed standards are then made to appear

natural and sacred and every child born learns such standards from an early age in the family, in school, from adults, from peers and from religious institutions. Media messages then re-inforce the prejudices and girls grow up into women, internalizing male dominance and violence as acceptable natural processes. Women in turn, unwittingly perpetuate this violence in their psyche by socializing their daughters and sons to accept male dominance and to acquiesce throughout life to male demands.

The fear of violence, including harassment, coupled with discrimination creates a permanent constraint on participation and social mobility of girls and women thereby depriving them of, and limiting their access to resources. Thus, it is believed that this is prevalent among the non-educated and educated, in rural and urban communities, among the lower class as well as in the upper class. This happens not just in the South-South zone of Nigeria, but nationally, sub-regionally, regionally and globally that men are superior to women, that male dominance is an unchangeable fact of life and that even as absurd as it is, men own women. Hence, violence against women is indeed the continuum of the belief system that grants men the right to control women's life, women's sexuality, women's behaviour and women's means of livelihood.

Existing social institutions like the family, religion and political systems assign women an unequal position in society vis-a-vis the men. Of great importance are the religious institutions which wield the greatest power in reinforcing existing practices that subordinate women.

Violence against girls and women is rooted in the unequal distribution of power and resources between men and women. It is also rooted in the unequal relationships between men and women, which perpetuates the devaluation of females placing them from birth in subordination to men. It is present in all communities and it affects all women of all ages, educational levels and socio-economic background.

Clearly, the first step in combating gender-based violence is an institutionalised challenge of

the way gender roles and power relations are articulated in society. This calls for research to establish the scope and evolution of the problem.

LESSON SEQUENCE

Opening

The chairperson of the day will start with opening songs; a report of the last lesson, corrections and comments on the report by participants are made; followed by checking-in; debates, discussions and lesson clues; announcements and goal-setting.

Song: GPI has given us authority and empowerment/To trample on gender stereotypes/And to overcome/All the powers of harmful tradition/Won't you overcome...

Energizers/ice-breakers

Dictate the exercise, then present the same on a flipchart. Get participants to cross-check with their copies, for spelling and punctuation errors.

Lesson topic

Activity 1:

Brainstorming exercise

Discussion points:

- What will you call the act of being beaten because you did not sweep your assigned portion of the house?
- If someone slaps you and throws a stone at you, what name will you call that act?
- If you have said No to a male friend in response to his asking you to be his friend and he continues to worry you, what would you call this?
- Is there one word that you can use to describe all these acts?
- Is it only girls and women who experience violence?
- Why then do we talk of violence against girls and women?
- What is gender-based violence?

Activity 2:

Write, read and stick exercise.

- Ask participants to list out what they understand by violence against women.

- Let each participant read and stick it on a flipchart/board. Process and add technical information on what violence against women is.

Activity 3:

Brainstorming exercise

- Ask participants to state their feelings if they think gender based violence is inevitable.
- At what age do girls and women experience gender-based violence?
- Process output and add value.

Activity 4:

Group work

- Divide participants into 3 groups and ask them to work on the different types of violence that are faced by women. They should also suggest ways and strategies to eliminate such violence.
- Process output at the end of their presentation and add technical information on types of violence.

Self-Reflection /Evaluation

- Facilitator to ask participants to come up with new lesson(s) they have learnt during the session.
- How has their attitude changed regarding the issue of violence against girls and women?

Closing

- End session with an appropriate song.

Song: All across the nation /All around the world/Women are longing to be free/No longer in the shadows/ Forced to stay behind/But side-by-side in true equality/ So sing a song for women/ Everywhere/Let it ring around the world and never never cease/So sing a song for women/ Everywhere/Equality development and rights.

Action assignment

Discuss with a friend what you have learnt for presentation in the next session.

TECHNICAL INFORMATION

What is violence against women?

Any human being, female or male, can be a victim of violence. However, girls and women suffer from the same kinds of violence as boys and men but there are other forms of violence that happen only mostly and specifically to girls and women because they are female.

In September 1992 the United Nations Commission on the status of women convened a special working group to draft a declaration on violence against women. This declaration, adopted by the United Nations General Assembly in the fall of 1993, offers for the first time an official UN definition of gender-based abuse.

According to Article 1 of the UN declaration, violence against women includes: "any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life."

Is gender-based violence inevitable?

No. Gender-based violence is not inevitable. "Cross-cultural research shows that, although violence against women is an integral part of virtually all cultures, there are societies in which gender-based abuse does not exist. Lon, et al (1994; Sanday1981; Levinson 1989)

Such societies stand as proof that social relation can be organised in a way that minimizes or eliminates violence against women (Lon et al 1994).

At what age do women experience gender-based violence?

Females experience gender-based violence throughout their life even before birth. In all our communities we are witnesses to pregnant women being battered. This act results in emotional and physical effects on the woman and can affect the unborn foetus. In other cultures, sex-selective abortion is done when it is found that the foetus is female. This has been recorded in India, China and Republic of Korea.

From birth, the girl-child suffers discrimination and female infanticide. The girl-infant child is harassed and abused for being female and therefore at infancy she suffers emotional and physical abuse, through differential in nutritional and health care needs. The girl-child is subjected to the violence of child marriage with

accompanying risks. In the year 2001 during a social activity carried out by GPI graduands in some LGAs in Cross River State, it was found out that 80% of teenage girls were either pregnant or have had a baby before they were 16 years. Seven junior secondary school girls aged 13-15 years old had pregnancy in one school. In one community, it was found out that 12 year-old-girls were already pregnant. The situation was traceable to non-existence of secondary schools for girls their age and to the presence of idle military men who had been stationed there as a result of the Nigeria/Cameroon crisis over Bakassi.

Female genital mutilation, another act of violence was almost 100% in the area. Uninformed Nigerian girl-children, irrespective of ethnic group, religion or class suffer sexual abuses by both strangers and family members. Newspapers in Nigeria often report cases of girl-child trafficking and prostitution. Family members refuse to talk about these acts and are prepared to sacrifice the health and life of their children at the altar of family name and social stigmatisation.

During the period of adolescence, which by WHO declaration, is between ages 9-19, not only do the girl-children suffer from discrimination, sexual abuse and female genital mutilation, the older adolescents experience violence in dating and courtship relationships. Acid burns have been documented in Nigerian dailies. In the face of deepening poverty, girls go through the violence of coerced sex, to meet their needs, from so-called "sugar daddies." Adolescent job-seekers on leaving school face sexual abuse to get jobs. Rape, including incestuous rape, sexual harassment, forced prostitution is on the increase as a result of poverty, as well as cultism and the failure of social service systems through structural adjustment policies and globalization.

In their reproductive age, women and young adults are abused sexually, physically and psychologically, by their male partners. Marital rape is not recognised in the Nigerian legal system. Elderly women too, are abused psychologically and tagged witches.

Types of violence

Some of the various types of violence prevalent in Nigeria, as in other parts of the world, can be identified as:

- Emotional and psychological abuse * Domestic violence
- Sexual harassment and assault * Rape
- Bride price * Some widowhood rites
- Child marriage/forced marriage * Trafficking
- Female Genital Mutilation * Forced prostitution
- Denial of quality education * Wife battering
- Violence from law enforcers * Wife inheritance
- Discriminatory employment opportunities * Murder
- Exclusion in property inheritance
- Excess workload (unpaid/ unrecognized household chores and family-care).

Domestic violence

Domestic violence occurs within the household and is the most widespread. Studies in 35 countries suggest that one-quarter to one-half or more of women have been physically abused by a current or former partner.

Domestic violence is also carried out mostly by male members of the family -fathers, uncles, husbands and other male relations against girls and women in the family. Domestic violence takes various forms such as beating, differential treatment of girls and boys, household burden on the girl-child, verbal abuse, incest, F.G.M, child/ forced marriage, marital rape, forced pregnancy, taboos that deny women good nutrition during pregnancy, e.g. a belief that pregnant women should not eat egg or meat because the baby will become a thief. Other ridiculous beliefs are that the woman should not eat banana because the baby will become dull, nor eat snail for the fear that the baby will salivate profusely. There are also the denial of rights e.g. right of choice of number of children the women wishes to have, right to own property, right to work and control her income, denial of quality education, etc.

Since domestic violence occurs in the private sphere, there is a culture of silence around it in our largely uninformed and illiterate communities, hence

figures and records are not common. However, from the 1979 Convention on the Elimination of All Forms of Discrimination Against Women, to the 1995 UN Fourth World Conference on Women, governments have increasingly called for an end to violence against women. Hence, evidence exists in many countries to show that domestic violence occurs in all parts of the world as shown in Table 1 below.

In Nigeria, fear of social stigmatisation would make battered women to deny the cause of injuries from domestic violence so as to protect the family name. Often times, they would claim they fell, and even the hospital personnel are not trained or equipped to discern the actual causes of such injuries.

TABLE 1: **Levels of Domestic Violence Against Women in Selected Countries - 1986/1997**

Country	Reported Abuse, Survey Date and Population Surveyed
Cambodia	16% of women report being physically abused by a spouse (1996, women aged 15-49)
Colombia	19% of women report being physically abused by their partners (1995 Demographic and Health Survey (DHS) of 6,097 women in a relationship, aged 15-49.
Egypt	35% of women report being beaten by their husbands during their marriage (1995 DHS of every-married women, aged 15-49)
India	30% of currently married men acknowledge physically abusing their wives (1996, 6,902 married men, aged 15-65 in five districts of Uttar Pradesh.
Uganda	41% of women report being beaten or physically harmed by a partner; 41% of men report beating a partner (1997 - women aged 20-44 and their partners in two districts).
United States	28% of women report at least one episode of physical violence from their partner (1986- married or co-habiting partners).

Source *- 1998 Women of Our World: Population Reference Bureau, Washington, USA.*

Emotional and psychological abuse

These are acts of violence that are not necessarily physical. They are acts that cannot normally be seen. When a woman is called a "he-goat" because she has not become pregnant even though the cause may be that of the partner - the emotional and psychological state of such a victim can only be imagined. Emotional and psychological violence can take different forms such as denigrating a woman by treating her as if she is a child, ignoring her, by refusing to give her affection or sexual satisfaction.

It also includes forcing a girl or woman (married or not) to have sex when she does not feel like it. It includes attempting to control a woman's relationships with the wider community - friends, colleagues or relatives. It includes verbal abuse of telling someone she is incompetent or worthless, or inferior. In some cases, husbands bring home girl-friends and humiliate the wife by making her entertain the intruder. Women who depend on their partners for economic needs get verbally abused when requesting for, or being given such alms. Even without the abuse, it is psychological a torture to be a perpetual beggar, even if one were capable of independent life.

Sexual harassment

Sexual harassment is an act of violence that occurs both in public and in private domains, but very notorious in the workplace and in schools. It also occurs in the home with domestic house helps, on the streets, in the market, at parties, in schools, and even in religious institutions: It is used by male teachers to determine the fate of female students, and by employers to refuse employment to female applicants or to deny promotion and even as an excuse to terminate appointments. Many women face job insecurity due to sexual harassment. It can take many forms from cat-calls to touching of breasts, or buttocks, sexist jokes and jeering among others.

Regardless of region or culture, 40-60 per cent of sexual abuse cases involve women younger than 16. In Barbados, Canada, the Netherlands, New Zealand, Norway and the USA, 27-34 percent of adult women surveyed said they had been sexually assaulted during childhood

and adolescence. Single women, divorced women and widows are often times subjected to scrutiny and harassment by neighbours, in-laws and landlords. They are constantly harassed and have their privacy invaded and questioned. Their rights of choice get violated. The dominant culture of men as decision-makers and women as obedient daughters, wives and mothers creates the persistent pre-condition for gender violence as in sexual harassment.

Rape

Rape is sexual intercourse that involves force, threat, blackmail, deceit or coercion, even where there is no penetration. Rape is sexual intercourse without free mutual consent between those involved. It is an aggressive expression of power by one person or persons over another person or persons, with the aim of compelling sexual intercourse. "Children who are regularly beaten and verbally abused end up feeling broken and worthless and cannot grow up with self-esteem and a strong sense of integrity about their body. Children who have not experienced respect for their feelings and thought will be ill-prepared to defend themselves against sexual abuse.

According to section 357 of the Criminal Code, if consent is obtained by threats or force of any kind, it is still considered to be rape. Section 282 of the Penal Code on the other hand, stipulates that there must be a threat of death or hurt before it is considered rape. In addition, it states that where consent is obtained through deceit as to the nature of the act or by impersonating the woman's husband, it is also rape. Section 282 (e) of the Penal Code also states that sexual intercourse with children under the age of puberty is rape.

Our recent experiences show that the rape of children and minors of ages 9-18 is on the increase. GPI receives reports almost on daily basis about rape of young persons.

On March 2, 2001, a young girl of 12 was raped by an old man of over 50 on her way from delivering a message sent by her mother to a debtor. On April 21, 2001, two minors aged 10 and 11 were lured into a cemetery and raped by an old man. On June 12, 2001 two sisters aged 12 and 16 were

threatened by a man with a dagger on their way from taking food to their aunt who was in hospital and forced into a cemetery at dagger point and raped. On June 8, 2001, a girl was tricked by a man selling second-hand clothes by dropping junk clothes into the girl's bag and following her down the road, dragged her back on the pretext that she had stolen the junks and used threat and intimidation to rape her. On June 21, a 15-year-old girl was raped in her uncle's house. All of these girls received treatment in hospitals in Calabar.

In the annual report of attacks on women in Nigeria - December 1999 to November 2000, Project Alert on violence against women, compiled a report edited by Josephine Effah-Chukwuma, and Bridget Osakue, revealing that there was a documentation of 19 cases of rape in Lagos involving young girls including a 6-year-old girl.

Trafficking

Trafficking as a form of violence against girls and women has many manifestations. These include transportation of girls and women to destinations that were not their choice for various trumped up reasons, including job opportunities, forced movement from one place to another without the consent of the female involved; procurement of girls and women under false/ pretentious designs of promise of assistance or forced/slave-like labour under exploitative conditions, This often involves vulnerable girls and women from very poor family background. "There are tricked and taken away for commercial sex work, forced domestic labour and other slave-like practices both within and outside the country." (Baobab for Women's Human Rights).

Osakue and Olateru - Olagbegi argue that: "Often times the victims may in fact consent to be transported to other places, but would not necessarily consent to forced prostitution or forced labour. In other cases, the victims may consent to being transported and to engage in prostitution. However, the bond arrangements which are slave-like in nature also nullify the consent hitherto obtained. Consequently, the issue of consent of the victim becomes immaterial

in a situation of exploitative forced labour and slave-like practices. Therefore consent should not be determinant factor in cases of trafficking in girls and women."

Reports from Nigerian newspapers also speak eloquently, primarily to the external forms of trafficking of Nigerian girls to Europe (Italy, Austria, etc) and even African countries such as Mali, Burkina Faso, Gabon, etc. However, most of the internal trafficking go unreported and are even treated as normal. Young girls and women are taken from poverty-stricken rural communities to urban centres. Many of them are children and are made to labour as nannies, house-helps, shop attendants and hawkers. We are witnesses to radio and television announcements of children hawkers on the street, who would not find their way back home. The lucky ones are then taken to the radio and TV centres to be assisted while the unlucky ones are defiled and left to their fate.

Forced prostitution

As defined in "Against Violence Against Women', by Baobab for Women's Human Rights, forced prostitution "is when women (including wives, daughters, female wards and house-girls) are forced into prostitution". Women are forced to use their bodies to get gains for their male relatives or for their bosses in many ways, e.g, giving sex in order to get jobs for their husbands, or to secure contracts for their employers."

Some widowhood rites

In many Nigerian cultures, when husbands die, wives are made to undergo humiliating widowhood rites, purportedly to prove their innocence "since no man dies if not killed by the wife" and also to ensure that an innocent wife is free from being haunted by the late husband's spirit. In parts of the South South, the water used in bathing the corpse is given to the wife to drink to prove her innocence. In many situations, the widow goes through a stressful period varying from six months to one year in black clothing and would not go to the market, church or any such public places, She wears her hair unkempt and would only cut the hair at the end of the mourning.

In some other cultures, as reported by Osakue, et al (1995)... "On the average, a widow is expected to sit on the floor, and will not bathe; she

wears the same clothes, eats with unwashed left hand throughout the mourning period which usually lasts between three to seven days. And on completion of the rites, she cries unescorted to a nearby bush at midnight to take her bath, using water from an earthenware pot placed there by the husband's relations; she returns from the bush naked without looking backwards and wears black, from that day for periods ranging from 3 months to one year."

In spite of the health and inhuman implications, this act still goes on in the name of tradition in many cultures.

Murder

We live in a society where mysticism has so engulfed us that educated and not so educated people, rural or urban dweller, those in high bourgeois class and those in the poor class, men and women have sold their intellectual capacities to mysticism to the extent of uncritical belief that some parts of the female body do possess the potency and supernatural power to cure AIDS; heal insanity; enrich people, etc. As absurd and unscientific as this is, girls and women are murdered almost daily to procure their body parts for various rituals. What a shame! What a waste! Effah-Chukwuma and Osakue (2000) record 34 murder cases of girls and women within a period of one year. Most of the cases were also reported in Nigerian dailies. Have their murderers been found?

Bride price

Bride price is a manifestation of violence against women. Traditionally, in most communities, wives are regarded as the property of their husbands because of the socio-cultural/traditional practice of bride price, since price is defined as money paid in exchange of commodity. Bride price appears to have been the root cause or basis of widowhood rites. Women's rights are human rights, so why should girls and women be sold as commodity? It would be more respectful if there was mutual exchange of gifts between families of the bride and the bridegroom. This will not give to the man, the weapon of "ownership" of the woman who then becomes subjected to dehumanisation as a result of price having been paid on

her. Bride price has been used to justify domestic violence and widowhood rites as well as female genital mutilation (FGM).

When a woman is divorced or widowed, if she remarries, some culture in the South-South requires that the new husband repays the bride price to the former husband or family of the former husband. This is comparable to women being taken as second hand clothing and this is very degrading.

The Nigerian legal system and violence against women

The Nigerian legal system comprises the Criminal Code applied in Southern Nigeria; Penal Code in Northern Nigeria, Sharia - Muslim laws and customary laws which vary from place to place in Nigeria. On the issue of violence against women, various customary laws tend to agree to a large extent.

Violence against girls and women violates Article 42(i) of the Nigerian 1999 Constitution which provides that "A citizen of Nigeria of a particular community, ethnic group, place of origin, sex, religion or political opinion shall not, by reason only that he/she is such a person - be discriminated against." Violence against women also violates the entire Chapter IV of the Nigerian Constitution, which addresses several fundamental human rights issues.

Furthermore, Nigeria is a signatory to many international treaties and conventions as well as other such international agreements that have called for action to eliminate violence against women and address underlying causes, and provide services for victims of violence. There is also the issue of raising public awareness on the consequences of violence against women and the need to end it. Such provisions include the Platform For Action (PFA) of the Fourth World Conference on Women (1995) paragraph 224; key actions for the further implementation of the ICPD Programme of Action, paragraph 42, 48, 50,52(g), 68; World Summit on Social Development and Programme of Action; Declaration commitments, 5(h) Programme of Action (POA) 15(k), 17(b), 28(g), 35(i), 39(d,e), 70, 71(d), 73(f), 79(a,b,k); ICPD Programme of Action principle 4, POA 4(e), 4.9, 4.10, 4.16(a), 4.22, 4.23, 6.9,7.35,7.39,7.40,10.18; World Conference on Human Rights,

declaration 18,27, Programme of Action 38,48,49; Declaration on the Elimination of Violence Against Women 1993; Convention on the Rights of the Child; 19.1,19.2, 24.3, 34,35,39; Convention on the Elimination of All Forms of Discrimination Against Women, 2(f), 5(a), 6 and General Recommendation No 19, 11th Session, 1992; the Universal Declaration of Human Rights (1948); The African Charter on Human and Peoples' Rights (1981); Nairobi Forward Looking Strategies (1985).

By being signatory, the Nigerian government has committed itself to changing any laws, practices or policies that do not fulfil the provisions expressed in those documents. This means that the Nigerian government has committed itself to changing all laws (statutory, customary or religious) practices and policies that discriminate against women or fail to protect women from violence.

Ways and strategies to eliminate violence against women and girls

Violence against women and girls originates essentially from cultural and traditional patterns and harmful practices, language, song lyrics, folk tales or religion, that perpetuate the lower status and the degrading servitude position accorded girls and women in the family, community, workplace and society at large. Violence against girls and women is made worse by social pressures, women's lack of access to legal information, aid or protection, intimidation, stigmatisation, the lack of laws that effectively and strictly prohibit violence against them, inadequate efforts in enforcing existing laws, lack of political will to implement agreements signed, absence of educational programmes to address violence at all levels, etc. Hence, only a holistic approach consisting of diverse measures of intervention should be applied to address the problem.

First of all, there is need for gender integration into all government policies, procedures and programmes for the promotion and protection of the rights of girls and women. Hence, there is need for a NATIONAL GENDER POLICY. A national gender policy will identify, concentrate and continue to support efforts aimed

at creating and improving awareness among policy makers, planners, implementers, development agents, parastatals, agencies, and the general public of the provisions of the Nigerian Constitution with regards to the equal status of women and men. The policy will provide conditions that will help in the implementation of the various agreements that are designed to protect girls and women against violence and discrimination. Such policy will promote open discussion of the issue towards sensitisation of the public and especially the menfolk to take responsibility for their behaviour and sexist practices. Such policy will address:

- men's involvement in stopping violence against women
- gender, poverty and rural development
- gender balance in education and training
- gender research and documentation
- gender and economic empowerment
- gender balance in power and decision-making
- gender and state institutions
- gender information, education and communication
- gender and legal affairs
- gender, sexual and reproductive health and rights
- gender and property ownership
- gender and ethics
- gender and curriculum at all levels
- gender and conflict resolution
- gender, tradition, culture and religion
- gender and the environment
- monitoring and evaluation.

Elimination of violence against women also requires new and stronger laws and enforcement mechanisms to prohibit and punish perpetrators. Actions need to be directed at the general public and victims. There is also need to enlighten the general public about violence against women. Victims need to be encouraged to talk about the violence they experience and there is need for accessible centres where victims can seek support and counselling. Girls and women in their different backgrounds of class, ethnic group or location need to have access to functional education and legal literacy. Men need to be

sensitised to see the need for culture changes, which already have begun to occur, except on issues that affect and violate the rights of girls and women. Religions and religious leaders would be sensitised too. There would be need to develop enlightenment procedures for people who deal with victims of violence against women (like the police, social workers, health workers and others). It is also very crucial to create local and national level systems to gather data on violence against girls and women in a consistent manner to guide programme and policy interventions.

Combating violence against women requires challenging the given culture of sexist roles of women and the power relations dictated by patriarchal norms to keep girls and women in subjugation. It is crucial enough to declare a decade of elimination of gender-based violence. Breaking the cycle of discrimination and gender-based violence requires concerted efforts and action across several sectors, including education, mass media, the legislative system, the judiciary and the health system. As Noeleen Heyzer, Executive Director, United Nations Development Fund for Women (UNIFEM) puts it: "Right now, violence against women is a universally devastating and often unpunished crime. It transcends all boundaries, and its exorbitant human and economic costs have yet to be calculated... [But] activism on violence against women is on the rise everywhere, with each small step adding to the collective power and momentum of the whole. Together, we are proving beyond doubt that with political will, resources and action, the end to violence against women is in sight."

REFERENCES

1. Carrillo, Roxana (1992) *Battered Dreams: Violence Against Women as an Obstacle to Development,* New York:

United Nations Fund for Women.

2. Osakue, G; Madunagu, B; Usman, H and Osagie, J (1995) *Voices: Findings of a Research into Reproductive Rights of Women in Nigeria,* IRRRAG, Nigeria.
3. Baobab - for Women's Human Rights (1999) Against Violence Against Women: Legal Literacy series 1. Baobab- for Women's Human Rights, Lagos - Nigeria.
4. Lori L Heise with Jacqualine Pitanguy and Adrienne Germain (1994) Violence Against Women: The Hidden Health Burden. World Bank Discussion papers No 255.
5. Economic and Social Council, Report of the Working Group on Violence Against Women, E/CN.GWG.2/1992/11.3, United Nations, Vienna, 1992.
6. Sanday, Peggy Reeves (1981). "Socio-cultural Context of Rape: A Cross-Cultural Study". *Journal of Social Sciences* 37(4): 5-27.
7. Levinson, David (1989). *Violence in Cross-Cultural Perspective.* Newbury Park: Sage Publishers.
8. Family Care International (1999): *Sexual and Reproductive Health Briefing Cards,* FCI, New York.
9. Panos Briefing No 35 (July 1999). Young Lives at Risk: Adolescents and Sexual Health. Panos, London.
10. UNDP Press Release (March 1999) "Violence Kills More Women in their Child-Bearing Years than Road Accidents and Malaria Combined". UNDP European Office, Geneva.
11. Rakesh Rajami (1998) "Child Sexual Abuse in Tanzania: Much Noise, Little Justice" Sexual Health Exchange (Royal Tropical Institute/SAFAIDS, Amsterdam), No 1 pp 13-14.
12. Effah-Chukwuma, J and Osakue, B (2000) "No Safe Haven," an annual report of Attacks on Women in Nigeria, December 1999 to November 2000. Project Alert on Violence Against Women, Lagos.
13. Osakue, G and Olateru-Olagbegi, B (1998) "Italios and Sponsors: A Crime of Trafficking in Women (the Nigerian case).
14. Heyzer, N (1993). Declaration on the Elimination of Violence Against Women.