

LIL^o inclusion

Looking **In** – Looking **Out**

FACILITATOR MANUAL



Hope - Respect - Voice

LILO Inclusion Facilitator Manual

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This is the training manual for *LILO Inclusion*, a Looking In Looking Out (LILO) workshop, developed by Positive Vibes (PV) in conjunction with Frontline AIDS

The curriculum is an adaptation of *LILO Connect* and has been developed through a consultation process with

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Cover photo: Ricardo Walters

Please note: As the approach used in this manual is process-oriented and therapeutic, it is strongly advised that facilitators are trained in LILO facilitation skills by Positive Vibes before working with these materials



Inside-Out: The Positive Vibes approach and theory of change

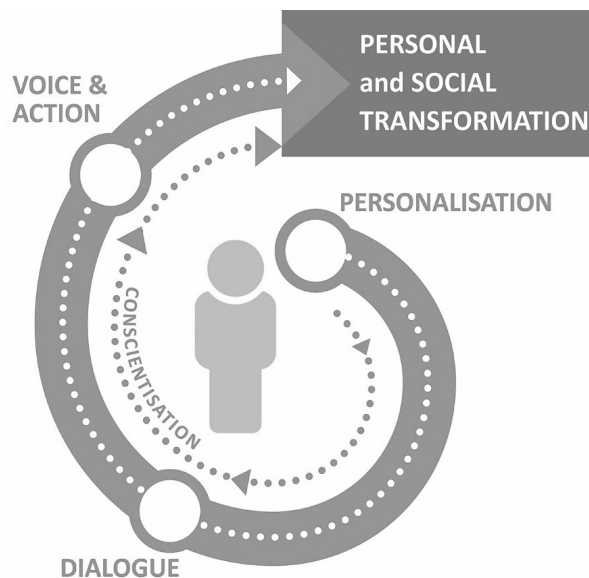
Positive Vibes is a solidarity organisation. In other words, we walk alongside emerging movements and organisations of marginalised and vulnerable people. This work is about accompaniment, facilitation, catalysing change and being a reflective partner.

We believe that people can:

- take charge of their own lives, voices, organisations, and movements;
- strengthen themselves to more effectively shape their own futures; and
- contribute towards the larger goals of social inclusion, social justice and equity.

At the same time, we aim to influence changes in the attitudes, ideas and practices of other intermediary organisations, service providers, gatekeepers, and policy makers – all with the aim of creating a more enabling environment for so-called “key populations” and other marginalised groups so that they can engage effectively and realise their rights.

Our **Inside-Out model** (at right) captures Positive Vibes’ basic theory of change. It is a cyclical process that begins with *personalisation*: “How does this issue (e.g., of exclusion/discrimination) connect to my experience? What does this mean for me and my life? What is my part in creating this reality?” Working with these kinds of questions in a variety of creative ways, and supported by a community of peers, strengthens self-esteem and self-efficacy – both for the people who we work in solidarity with, and for others with the power to facilitate or undermine the realisation of their rights.



Personalisation connects people intellectually and emotionally to their own realities and those of others – and begins the process of personal exploration and growth of personal agency that is needed to support wider relational and structural change. This in turn enables more effective engagement with others through open dialogue and enables changes in behaviour – in how

people use their voices and what actions they choose at personal and organisational levels. The actions people take, and the process of moving along the Inside-Out spiral through multiple iterations, leads to personal and social transformation.

Conscientisation is a consequence of the whole Inside-Out process: it is about being *for* myself (self-efficacy) and *for* others. To be conscientized means a change in perception, thinking and motivation; an understanding of one's own agency and how power works in one's context and society.

All Positive Vibes' methods (workshops, coaching programmes, curricula, etc.) are built on this core model, as is our approach to long-term accompaniment of partners.

Our experience shows that the immediate effects of this approach include, for example, better service uptake and health outcomes among men who have sex with men, transgender people, and people living with HIV – as a consequence of improved personal efficacy and a greater sense of community- and self-worth.

At other levels, this approach contributes to:

- strengthened sectors and movements;
- strengthened relationships between these sectors and allied organisations; and
- more effective advocacy.

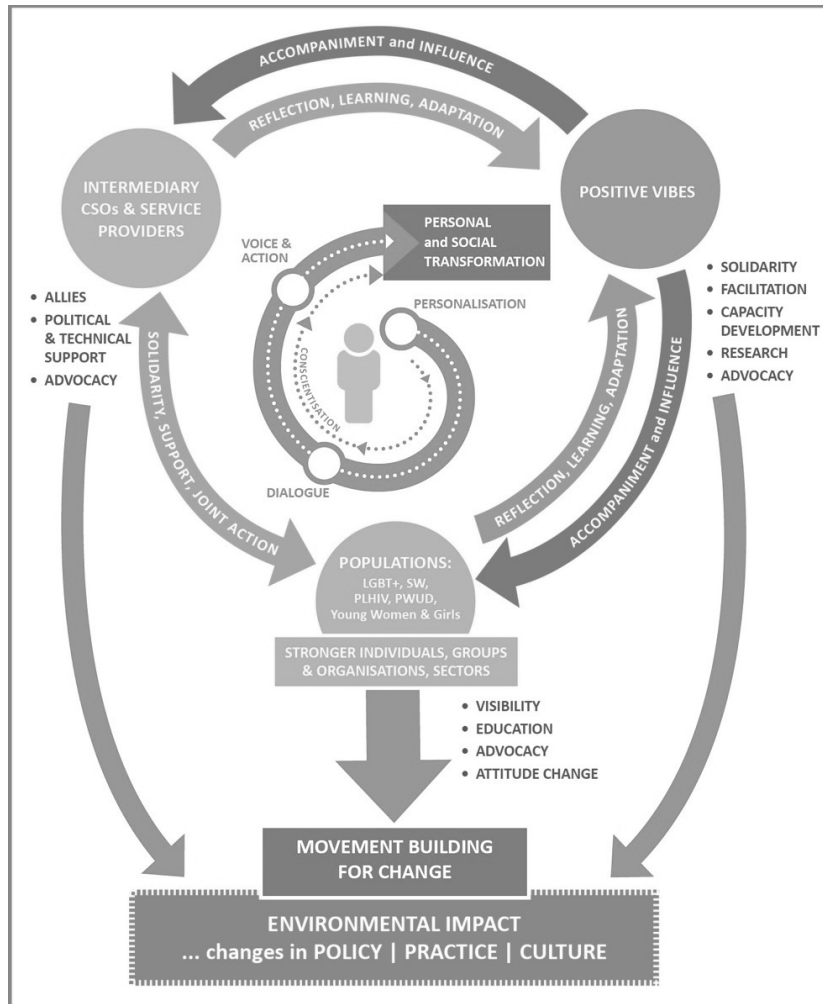


PV's programming framework

The diagram below is a graphic representation of the thinking that informs PV's programme design and practice. It includes:

- the key stakeholders: the people we work in solidarity with ("populations"), other intermediary and service provision agencies and ourselves;
- the kinds of roles stakeholders play in the course of our work together and the reciprocal relationships between them;
- the fact that the Inside-Out process is applied in all of our work and relationships; and
- some of the broad outcomes we aim to achieve along the way (i.e., contributing to attitudinal change, movement building and ultimately structural change/impact).

This provides a basic framework which we use to design specific projects and programmes.



Looking In Looking Out (LILO): The Positive Vibes methodologies

Positive Vibes has developed a suite of products designed for the individual, as well as a series of tools and curricula to support organisational development. Most of these are Looking In, Looking Out (LILO) methodologies, a series of participatory workshops which use personalisation approaches to deepen self-efficacy amongst key populations and achieve greater effectiveness of key populations-led organisations.

Workshops for the individual

HIV and Me

HIV and Me enables us to explore and assess the impact of HIV and AIDS on our lives. Originally developed in 2002 by renowned and innovative South African HIV and AIDS activist Peter Busse, the workshop has subsequently been revised and updated. Each revision has taken cognisance of the growing needs of PEOPLE LIVING WITH HIV, as well as the changed context and environment of HIV and AIDS, as treatment has improved and the “death sentence” of diagnosis has shifted towards positive health, dignity and prevention. Up-to-date information is provided on the stages of acceptance, safer sex, reproductive rights and safe conception, treatment and care, perinatal transmission and positive living.

LILO Identity

LILO Identity is a personalised approach to exploring gender identity and sexual orientation. The workshop aims to move individuals towards a positive LGBTI identity, a strong self-concept, and a high regard for themselves as LGBTI individuals. Participants are encouraged to integrate their LGBTI identity with their other qualities and roles – and to see themselves as complex, multifaceted human beings with many strengths and skills. Topics cover language, the emergent development process of exploring sexual orientation and gender identity, relationship skills, creating a circle of positive support, skills for coming out and understanding the impact of prejudice and discrimination.

LILO Connect

LILO Connect is designed to assist individuals to move towards more positive levels of attitude (support, admiration, appreciation and nurturance) to LGBTI people, sex

workers and people who use drugs, through identification and empathy. The process starts with participants exploring their values and where these come from, and how these inform our attitudes and judgements of others. Through the lived experience of individuals from the key population groups, empathy is created, and awareness shifts individuals towards more positive attitudes. The workshop is suitable for staff of organisations wishing to work with key populations, and also as an advocacy tool for working with staff of institutions such as the police, religious leaders and health workers that could better support these groups.

LILO Work

LILO Work starts with the telling of participant's own personal story of the circumstances that have led them to sex work. Their occupation as sex worker is contextualised within the wider understanding of a more layered, nuanced self. The thread of *sex work as work*, is pulled through into a session that looks at the daily "occupational hazards" of sex work and the need for safety mechanisms to be put in place to protect against violence, and to ensure sexual health. An awareness of the environment and the structures that should, but often do not, support sex workers is surfaced. The workshop focuses on what an individual can control to mitigate against these challenges. Individuals' dreams for a future are explored, business skills are shared, and the final sessions of the workshop are geared toward actions aimed at realising these dreams.

LILO Voice

LILO Voice is a three-day workshop curriculum to strengthen the confidence and competence of key populations groups to engage in influencing work with family, neighbourhood, and community. The material explores early socialisation, internalised and alternative narratives, human rights, power and privilege, agency and choice, and relational circles of influence. It exposes participants to skills for negotiating power and claiming agency and supports participants to develop strategies for close-to-home local advocacy.

LILO Peer Counselling

LILO Peer Counselling is a five-day course designed to train LGBTI individuals and allies to counsel their peers. Participants are selected based on their having the personal qualities identified by Carl Rogers as essential to good counselling – warmth, empathy, and respect. The approach is based on Carl Rogers' client-centred therapy and focuses on learning and practising skills using trainee counsellors' own stories first, and then the stories of others. Various methods are used for practise and feedback. The course requires practise beyond the initial training, with supervision, before a counsellor is certified. Only trained and experienced counsellors should facilitate this course.

Organisational Development Workshops and Tools

LILO Leaders

LILO Leaders is a one-on-one personal coaching and mentoring process based on Positive Psychology approaches. A coach supports an organisational leader or an emerging leader through a personal-formation and development process with applications to organisational leadership practice. The coaching programme is designed to be delivered over a period of five months, with a session conducted remotely by phone or on Skype every two weeks. Leaders who embark on the LILO Leader Coaching Programme are provided with a pack of materials with readings, video clips and activities which guide the process. In addition to a focus on the concepts that are embedded in the materials, coaches are encouraged to deal with the daily issues that emerge for the individuals they coach. Activities are provided for trying out in their lives and organisations between sessions.

LILO Fit for Purpose

Fit for Purpose is a methodology to support organisational development and institutional strengthening of Key Populations-led organisations. The process guides staff and stakeholders through an exploration of the minimum needs of organisations in order to be *fit for purpose*, and how to develop to maturity. Over a three-day participatory workshop, organisations reflect on their core identity and purpose, and on their unique organisational typology; they self-assess their capacity across 35 organisational competencies and plan strategically for progress on their organisational development priorities.

LILO Support Groups

Support Groups is designed to strengthen the organisational structures of support groups. The workshop encourages the introduction of more formalised processes to create greater accountability so that these groups can better serve their members, and move towards sustainability. At the same time, the curriculum is designed to build capacity in the individual – to strengthen their relationship and communication skills, to make them more conscious of their leadership skills, and to encourage them to use very simple record keeping in their own lives to improve, for example, personal financial management. It is also hoped that better knowledge of the organisational development skills focused on in this workshop will spill over into other groups participants belong to – a women's group at the church, the school board, the church choir, thus further strengthening community systems.

LILO Support Group Leaders

Support Group Leaders is a shortened version of *LILLO Support Groups* designed to get the buy-in of support group leaders ahead of the training of the group. Additionally, it includes some leadership training.

Methodologies at Positive Vibes are constantly reviewed and updated. New methodologies are developed in response to what our constituents need, and they are involved in co-creating the workshops.



Suggested workshop programme

This programme is a guideline that will help ensure the workshop is completed within the prescribed time. Experience has taught us that it is difficult to start on time each day. Please point out to participants that the programme is tight. If they are late, it will mean going later in the afternoon to complete sessions.

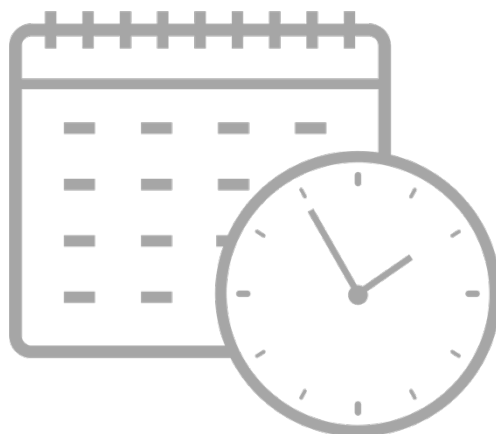
Facilitators may choose to extend or shorten the time of a session, depending on factors such as group dynamics (e.g., chatty participants), issues that might arise during a session (e.g., needing time to settle a heated debate), or logistics (e.g., a delay might be experienced due to a power outage at the venue). Use your intuition and sensitivity to the workshop process to determine the rigidity of the timing of each session. *Note: The suggested times in the manual are adapted here somewhat to fit in with the necessary breaks.*

This workshop is designed to run for three days, and this will make it possible to include ONE of the choice sessions. The choice sessions cover a number of different groups of people who are often marginalized. These include:

- LGBTI
- Sex workers
- People who use drugs
- People living with disability
- Ethnic minority groups
- Religious exclusion

If facilitators deem it necessary to include more than one of the choice sessions above based on the local context, the workshop will run into a fourth day. The second-choice session should run directly after the first-choice session on Day 3. The morning of Day 4 will be to finish off Sessions 7 & 8.

LILO Inclusion Workshop Programme		
Time	Topic	Facilitator
DAY 1		
08h30 – 10h45	Session 1: Looking Ahead	
10h45 – 11h00	Break	
11h00 – 13h00	Session 2: Looking In – Values and Attitudes	
13h00 – 14h00	Lunch	
14h00 – 16h30	Session 3: Looking out – Marginalising and Mattering	
DAY 2		
08h30 – 10h45	Session 4: Looking in: How my gender has impacted on me	
10h45 – 11h00	Break	
12h00 – 12h45	Session 4: Looking in: How my gender has impacted on me	
12h45 – 13h45	Lunch	
13h45 – 16h30	Session 5: Gender and Power	
DAY 3		
08h30 – 10h45	Choice Session	
10h45 – 11h00	Break	
11h00 – 11h45	Choice Session	
11h45 – 13h00	Session 7 Standing in the shoes of others	
13h00 – 14h00	Lunch	
14h00 – 14h30	Session 7: Standing in the shoes of others	
14h30 – 16h30	Session 8: Looking Forward	



Materials List

Flipcharts

Markers

Prestik/blue tack

Name labels

Post-it notes

Basket/box for guardian angel

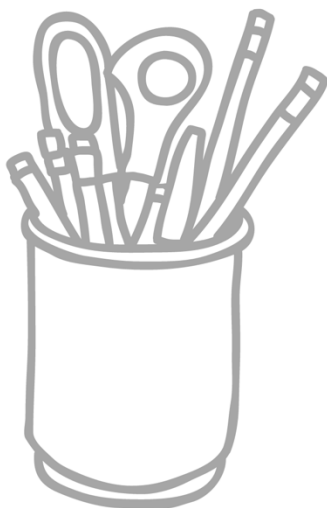
Art materials – markers, pastels, crayons

A4 paper

Coloured card

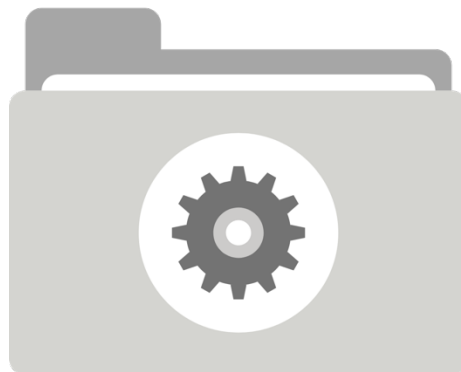
Masking tape

Journal and pen for each participant



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“The belief that one’s own view of reality is the only reality is the most damaging of all delusions”.
Paul Watzlawick

Session 1: Looking Ahead



Time
2 hours 20 minutes

Session Plan

1. Registration and welcome
(20 minutes)
2. Diversity welcome
(10 minutes)
3. Introductions
(20 minutes)
4. Group norms and guidelines
(15 minutes)
5. Expectations
(15 minutes)
6. Programme overview
(15 minutes)
7. Setting up support systems
(20 minutes)
8. Early messages
(20 minutes)
9. Closure
(5 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- understand the course structure;
- articulate two of the agreed course guidelines;
- know more about at least two or three other participants;
- give one or two realistic expectations of the workshop;
- identify at least one early message they received about gender.
- take on the responsibility of being a secret Guardian Angel to someone in the group for the duration of the workshop.

Materials

Flipchart and markers, prestik, registration form and attendance register, name labels, post-it notes, basket or box for Guardian Angel activity.

Preparation

1. Get to the venue an hour before the workshop is due to start to set up. Place the chairs in a semi-circle so that participants can see each other and feel emotionally connected, without the barrier of tables.
2. Print out the *LILO Inclusion* registration form and attendance register (see the LILO MEL forms at the back of this manual).
3. Prepare 4 flipcharts with the following headings:
 - Diversity welcome
 - Group norms and guidelines
 - Expectations
 - Support systems

1. Registration and welcome

(20 minutes)

Greet each participant as they enter the room. Ask participants to complete the registration form and attendance register. Provide a name tag or label for them to write their own name with a black marker. First names should be used. If opportunity allows, pronounce each participant's name to ensure correctness. Ensure that each participant has a seat.

Once all participants have arrived, proceed with a formal welcome. If several participants seem to be running late, explain to the group that a few extra minutes will be granted for all participants to be present. Facilitators can then introduce themselves in a warm and sincere manner and highlight the aim and importance of the training. Then ask participants to introduce themselves and to mention the organisation they represent.

Aim of the workshop

LILO Inclusion aims to assist participants in exploring how their personal ideas, values and attitudes develop around various topics and people. They make the link between this and their prejudices and the actions they may or may not take that could discriminate against or marginalise others. In particular, they do a deep dive into understanding marginalisation and social exclusion using a gender lens. Depending on local context, the facilitators will then choose sessions that touch on other groups that are typically marginalised in many communities - LGBTI, sex workers, people who use drugs, people with disability, ethnicity and religious difference. The aim of the workshop ultimately is to build better understanding and empathy at a cognitive and emotional level as the basis for these communities experiencing better support.

2. Diversity welcome

(10 minutes)

A nice way to welcome and acknowledge the diversity in the room is what is known as a "diversity welcome" – the idea is to welcome everyone in a way that includes, acknowledges, and shows respect to the important differences that exist. Draw a huge red heart on a flipchart and add each "difference" that is named in the room.

Get the group on their feet and in a circle. Ask each participant to give their name first, then some of the diversity they represent. So they might say "I am Tuli and I am a mother from South Africa". All South Africans and mothers can then join Tuli in the middle. The group then says "Welcome Tuli and all South Africans and mothers".

The following diversity, and far more, can be celebrated...

young people, older people, people of all ages...

single people, married people, people who are dating...

your families and people who supported you to be here...

people who speak English, Xhosa, Oshiwambo, isiZulu, Swahili

French, Damara Nama, Tswana (use local relevant languages)...

- People of different ethnic groups in the room.



people who are from...(name the different regions represented in the room)...

women, men, intersex, transgendered and gender non-conforming people, intersex people, sex workers, people who use drugs,...

Gay, lesbian, bisexual, heterosexual people etc...

People from different religions in the world

other suggestions from the group...



It is fantastic to see the diversity in the room and we welcome it all!

3. Introductions

(20 minutes)

Ask participants to choose one item that they are wearing or that they carried with them into the room that they think symbolises something positive about who they are. The item should be something that they like or are proud to own.

Then ask each person to introduce themselves to the group by giving their name again, the pronoun by which they would like to be called during the workshop, and showing the item they picked and what they think it says about them. Facilitators should model this exercise for the group first. Keep asking each participant what the item says about them.

NOTE TO FACILITATOR

Point out that when working with an LGBTI people it is extremely important to check out what pronoun people wish to be called by as there may well be transgender people in the room.

4. Group norms and guidelines

(15 minutes)



We are here to begin the Looking In, Looking Out (LILO) workshop and we want this to be a safe place to give and receive support. What guidelines and agreements can we put in place to make sure we all create a space that is:

- *safe;*
- *respectful;*
- *supportive;*
- *confidential;*
- *a place in which to grow.*

What guidelines can we put in place to make sure we create this kind of environment?

Capture responses on a flipchart. You could use the following suggested group agreements to supplement the agreements the group comes up with:

Be honest and forthcoming.

Maintain confidentiality. What gets said here stays here. Do not share specific comments made by other group members outside of this group.

Participate actively but know that it is okay to pass if you ever feel uncomfortable.

Use “I” language. Speak for yourself only.

Make this a safe place. Be respectful of others in order that they will reciprocate and be respectful of you.

No judgements or put downs. Give the respect you expect to get.

Hold each other accountable as members of this group. Give feedback in caring ways.

Be humble. Be willing to accept feedback. Be willing to grow.

Do not make assumptions. There are many different experiences and backgrounds in the group.

Be open and ready to learn about each person.

Have fun!

Explain that it is normal for some people to be naturally quiet and for others to be more outspoken. Let the group know that you will be striving to get everyone actively involved during the sessions.

NOTE TO FACILITATOR

A participant may ask if they can start and finish the workshop every day in prayer. This needs to be handled carefully. In an environment where the majority are of one faith, and where the group is in agreement, this may be an accepted daily ritual. However, if there is some hesitation on behalf of some participants, this can be a good starting point to demonstrate diversity. Those of us from a dominant religious belief or membership assume that others would want to participate in such a ritual. If some participants feel uncomfortable, members of the group who wish to pray should be encouraged to do so, together, before or after the workshop each day. An alternative is that the group has a moment of silence at the start and end of the day, which participants can use for a spiritual practice that they are comfortable engaging in – prayer, meditation, etc.

5. Expectations

(15 minutes)

Give each participant two post-it notes to write down 1) an expectation that they might have of the workshop for themselves PROFESSIONALLY and 2) an expectation they have for themselves personally. Write “Expectations” on a flipchart and encourage each participant to read their expectation out loud and then stick their post-it on the flipchart. Listen carefully for expectations that are unrealistic and unlikely to be met during the workshop. Gently point this out to participants and move the expectation to the side.

Stick the flipchart up in the room and revisit it at the end of the workshop, pointing out to participants which expectations have been met.

6. Programme overview

(15 minutes)

Tell participants you want to give them an overview of the programme. This overview needs to be adapted to the contents of a particular workshop.



- *There will be some introductions and “getting to know you” exercises.*
- *We will look at our values, where these come from and how they form our attitudes.*
- *We will consider how values and attitudes impact on the way we see people.*
- *We will look at the impact of **discrimination** and **marginalisation** on people.*
- *We will spend a whole day looking at gender and the impact our gender has had on us.*
- *We will learn some of the correct non- discriminatory words to use when talking about the diverse populations covered in this workshop.*
- *We will clarify some of the widely held, but mostly incorrect myths and assumptions around these groups and how they are often experience micro invalidations.*
- *We will explore what this information has to do with us personally and our work, how it may or may not inform our programmes or the way we engage with diversity in the world, and what we plan to do with the information we now have.*

7. Journals

(5 minutes)

Distribute journals and pens and encourage participants to write about their experiences. They Can also write notes, do the exercises that are given to them etc.

8. Setting up support systems

(20 minutes)

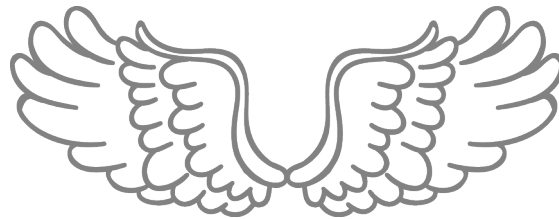


We would like to set up a supportive community for the next few days. During the workshop, we will touch on quite personal issues and some of these may have been a source of hurt and pain for you. Sometimes these feelings may resurface for you, making it difficult to concentrate and continue with the workshop.

Talking partners: Tell participants that you would like them each to have a “talking partner” to whom they can chat during breaks or after the workshop. Perhaps they could choose someone with whom they feel comfortable, or whom they respect.

Counsellors: In addition, there may be some trained counsellors in the room. Ask them to raise their hands and ask if you could offer their services to the group.

Facilitators as counsellors: Point out that the facilitators also provide counselling support to anyone who needs it. They can offer referral advice to participants who might need on-going or in-depth counselling.



SECRET GUARDIAN ANGELS

Ask participants to write their name on a post-it note and fold it in four. Place the names in a box (or hat or basket) and then ask participants to each draw a name. If someone draws their own name, put it back into the box and ask the person to draw another name. Participants should keep the name they drew a secret as they are going to be a secret Guardian Angel to this person throughout the workshop – emotionally supporting and encouraging the person daily. This could be in the form of tiny gifts like chocolate, a message via other participants, anonymous notes ... Guardian Angels can use the box (or hat or basket) as a “post box” – facilitators should check the post-box often and “deliver” post.

Everyone’s Guardian Angel will be revealed at the end of the workshop.

9. Activity > Early messages

(20 minutes)

Divide the group in half. Ask one half to form a small circle in the middle of the room. They should face outwards. The other group should form an outside circle around the inside circle and stand facing someone in the inside circle. Each person will now have a “communication partner”.

Say to the group:



I will ask a series of questions and “communication partners” will each take turns answering them.

Then I will give you instructions to move on to a new “communication partner”.

Check the circles and make sure everyone has a communication partner. Conduct the activity using this process:

Partners greet each other in a way that feels comfortable – wave, handshake, high fives – and introduce themselves.

Choose the appropriate “early message” questions from the table below, depending on which of the key populations you are planning to cover in the workshop. Persons in the inside circle answer first. Use a watch or timer and give them 1 minute to answer.

The outside circle answers the same question for 1 minute.

Ask partners to say goodbye to each other.

Ask the inside_circle to move one person to their right. Observe to make sure the entire group shifts over one person to the right. Have new communication partners greet each other and introduce themselves.

Ask the second question. This time the outside circle will answer first and let them answer for 1 minute. Have the inside circle answer the same question for 1 minute.

Partners then say good bye.

This time the outside circle should move one person to their right. Have new partners greet each other.

The inside circle will answer first. Continue in this fashion, alternating the procedure for the 3rd and 4th questions. When you finish the last questions, have participants take their seats.

The trick to managing the MECHANICS of this lies in that whichever circle is moving (the inside or outside one) they both move in the SAME direction.

Questions

1. *As a child, what messages were you given about being a boy or girl?*
2. *Has there been a time when your gender was a disadvantage?*
3. *Can you think of a time when your gender has been an advantage?*
4. *If you were to raise a child (and perhaps many of you already are), what messages would you want them to grow up hearing about gender? Would you give a different message from the one you received?*

Invite the group back to the plenary and use the following questions to process the early messages questions.



Group processing questions

Take a moment to think about the feelings that came up for you in this exercise.

1. *What did you notice about the kinds of messages we received about gender as we grew up? What impact do these messages have on us as we grow older?*
2. *What was the most difficult question to answer? Why?*
3. *Was there anything that interested you that emerged from this exercise?*

10. Closure

(5 minutes)



In this session, we have successfully:

- *created a safe framework of understanding for the workshop;*
- *been given information about the course structure;*
- *gotten to know each other a little better;*
- *shared our expectations with the group;*
- *explored some of the early messages we received about gender; and*
- *been given the responsibility of being a secret “Guardian Angel” to someone for the duration of the workshop.*

Check whether there are still any outstanding questions about the workshop.

“Judgements prevent us from seeing the good that lies beyond.”

Wayne Dyer

Session 2: Looking In – Values and Attitudes



Time
2 hours

Session Plan

1. Values
(10 minutes)
2. Activity: Values ranking
(40 minutes)
3. Attitudes discussion
(15 minutes)
4. Activity: Crocodile River
(50 minutes)
5. Conclusion – Who is okay?
(5 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- identify and rank personal values;
- explore and justify where our personal values come from;
- prioritise personal values and look at them in relation to the larger group;
- see how values underpin our attitudes;
- see the link between these and our prejudice.

Materials

Flipchart and markers, prestik.

Handouts

Handout: Values (for each participant)

Handout: Crocodile River (5 copies)

Preparation

My health and ability to protect myself against HIV/AIDS/Re-infection	My wealth and money	My home, clothes, and material possessions
My country, homeland and political freedom	My sexual orientation and gender identity	My religious freedom, the right to worship as I please
My faith in God	My reputation and popularity	My friends and close relationships
My school life or career, job and future job opportunities	My self-esteem and sense of self-worth	My family, parents, grandparents, brothers, sisters, children, wife, husband, caregivers and people I live with

1. Values

(10 minutes)



We are going to start with the “Looking In” part of the workshop and will explore some of our personal values and where these come from.

Let’s start by giving an example of something that is an important value for you. What do you value?

(Examples: my relationship with God, my family, my education, etc.)

What is a value?

Let participants brainstorm. It can include the following:

Something important.

Something valuable or precious or worth a lot.

Something we believe in (not a thing).

Part of our lifestyle.

A guiding light or star, a moral compass.



Where do our personal values come from?

Again, participants can come up with their own list, which could include:

Family

Friends

School

Church

Our culture

The media/popular culture



Mostly values are good things – they guide the way we run our lives. They give us a moral compass for making decisions and taking action.

But, when could values be negative?

Let participants answer this. Examples could include:

When we don’t think about them and just adapt values from others. We must think about our values critically.

When we use them to create an “Us and Them” situation.

When we exclude others or use them to judge others.

NOTE TO FACILITATOR: More information on values

Values can change over time as we are exposed to new ideas and new experiences. We might think they are absolutely fixed, but big and momentous experiences can shift or highlight values differently for us. For example, marriage or the birth of a child might focus us on different values. Things that didn't seem important before, suddenly take on greater significance.

Sometimes context impacts on how we express our values. So when I am with my pastor and Bible Study Group, I may claim I have a particular set of values, but when I am having a drink in the bar with my friends I might claim other values! When I am safe to declare my HIV status or my gay sexual orientation I might happily disclose this, but in another situation I will say other things.

What we are referring to here are our PERSONAL and individual values. There are also aspects that are valued by a community or culture – social values or even organisational values.



Why are we talking about values?

Let participants offer their ideas. These could include:

Knowing our values is one way of knowing ourselves better. So often our values become part of us without us really looking at them and thinking about them.

We need to acknowledge our values and beliefs; we need to know why we think as we do.

2. Activity > Values ranking

(40 minutes)

Before this exercise, post the 12 different values signs/posters around the room. Give participants the handout with the 12 values for them to rank.



On our handout there is a list of 12 values. These are some commonly shared values, but they will not cover all your personal values. What I would like you to do is to rank these values. Number 1 should be the most important thing to you. Number 12 should be the least important. You have 5 minutes to rank your values.

RANK 1-12	VALUES
	My health and ability to protect myself against HIV/AIDS/Re-infection
	My wealth and money
	My home, clothes and material possessions
	My country, homeland and political freedom
	My sexual orientation and gender identity
	My religious freedom, the right to worship as I please
	My school life or career, job and future job opportunities

	My reputation and popularity
	My friends and close relationships
	My family, parents, grandparents, brothers, sisters, children, wife, husband, caregivers and people I live with
	My self-esteem and sense of self-worth
	My faith in God



I've placed signs with each of these 12 values on them around the room. I would like all of you to gather beside the sign that has the value that is least important to you. So, go stand by the sign that has your number 12 value written on it.

Make some comments about the most or least popular values. Then ask each group:



Why did you select this as your least important value?

If the group is large there won't be time to get a reason from each participant, but at least get a couple of reasons from each group. For instance, if there are many people at one value just get three or four reasons. There isn't time to get each individual's reason.

Ask those in large groups:

What does it feel like to be in a popular group?

Ask those who are alone by their value:

What does it feel like to be alone, or in an unpopular group?



Given the popularity or un-popularity of certain values do any of you want to change your mind? If so, where do you want to move and why?

Now I would like all of you to move to the value that is most important to you. Go stand by your number one value.

Again, make some comment about the most and least popular values. Then ask each group:



Why did you select this as your most important value?

In larger groups you may want to get more than one answer in order to make the point that people value the same thing for different reasons.

Ask those in large groups:

What does it feel like to be in a popular group? What was it like finding you shared this value with so many people? Does it surprise you?

Ask those who are alone:

What does it feel like to be by yourself with your most important value? What was it like finding you are alone in valuing this thing? Does it surprise you?

You can have participants take their seats at this point.



Group processing questions

1. *Did anything happen today that made you re-think your values?*
2. *Did you discover anything that surprised you about your values?*
3. *How do you feel about someone who values something you don't think is valuable?*
4. *Do you think there will anything helpful about knowing and justifying your personal values?*
5. *Are there values that are typically more important for women or for men?*
6. *Do you view anybody in the group differently as a result of knowing what they value the most and least? If so, how?*

Important points to make:

Point out that values give us common understanding with people. We are often drawn to those who share similar values with us. Our values are the basis on which we make moral judgements about ourselves and situations and about others.

3. Attitudes discussion

(15 minutes)



What are attitudes?

Let participants respond. Key points include:

- The opinions and feelings you have about something/someone. This often then translates into a behaviour.
- ATTITUDE = OPINION + FEELINGS which results in BEHAVIOUR.
- Attitudes reflect our values and perception of life.
- Attitude reflects both our approach to life and how we believe we should live our lives.
- Attitudes influence our behaviour and how we respond to people and approach situations in our lives.

NOTE TO FACILITATOR: More information on attitude formation

Psychologists define attitudes as a learned tendency to evaluate things in a certain way. This can include evaluations of people, issues, objects or events. Such evaluations are often positive or negative, but they can also be uncertain at times. For example, you might have mixed feelings about a person or issue.

Researchers also suggest that there are several different components that make up attitudes.

1. **An EMOTIONAL COMPONENT:** How the object, person, issue or event makes you feel.
2. **A COGNITIVE COMPONENT:** Your thoughts and beliefs about the subject.
3. **A BEHAVIOURAL COMPONENT:** How the attitude influences your behaviour.

Attitudes can also be explicit and implicit. Explicit attitudes are those that we are consciously aware of and that clearly influence our behaviours and beliefs. Implicit attitudes are unconscious, but still have an effect on our beliefs and behaviours.

How Do Attitudes Form?

Attitudes start with our value systems and then form directly as a result of experience. They may emerge due to direct personal experience, or they may result from observation. Social roles and social norms can have a strong influence on attitudes. Social roles relate to how people are expected to behave in a particular role or context. Social norms involve society's rules for what behaviours are considered appropriate.



How does our attitude relate to our values?

What is the relationship between values and attitudes?

Let participants think about this and offer some responses.

Values are often shown by our attitudes. For instance, we may value having one partner and may therefore be rude or distant when interacting with someone who has multiple partners.



What happens when we say we value one thing and then act in a different way?

- *Can you think of any examples where you have heard someone say they value one thing and then behave in a different way?*
- *Can you think of a time in your life where you have done this?*

*What about when someone says they value something but hold themselves to a different standard than other people? For instance, if we tell others to use a condom when having sex, but we don't do that ourselves? Or we complain about stigma against those of us who are HIV positive but we then stigmatise and discriminate against LGBTI. We call this a **double standard**; we have two standards or values, one for ourselves and a different one for others.*

4. Activity > Crocodile River

(50 minutes)

The story and ranking

(10 minutes)



We are going to read a story together. It is a fairy story, rather like a child's story, and it has all the necessary love, hate, betrayal, revenge, and violence that every good story needs!

Crocodile River

Once upon a time there was a woman named **Maria** who was in love with a woman named Albertina. Albertina lived on the shore of a great river. Maria lived on the opposite side of the river. The river that separated the lovers was full of crocodiles.

Maria wanted to cross the river to be with Albertina, but the bridge had been washed away. So, she asked Sam, who owned a boat, to take her across the river. Sam said, "I would be glad to help but you must have sex with me first as payment." Sam was known to be HIV positive. She refused to have sex with Sam and went to a friend named Ivan to explain her problem. But, Ivan said "I am sorry for you Maria, but I really don't want to be involved in this difficult situation."

Maria then felt that the only option she had was to accept Sam's terms. So, Maria slept with Sam and he took her across the river in his boat. Sam delivered Maria safely to the other side of the river where Albertina was waiting for her. Maria told Albertina of how she had finally negotiated her way across the river. When Albertina heard that Maria had slept with Sam in order to get across the river, she said, "You have betrayed me and put me at risk of HIV infection. You must leave. I never want to see you again." Maria was very upset. She went to her friend Slug who felt compassion for her. After hearing her whole story, Slug found Albertina and beat her up. This made Maria feel much happier.

I would like each of you to rank the five characters in the story according to how much you liked them. 1 = the person you liked the most; 5= the person you liked the least.

1. _____
2. _____
3. _____
4. _____
5. _____

Small group discussion (20 minutes)



Now I would like you to break up into small groups (these can be counted off). In your groups I want you to share how you have ranked the characters in the story.

Then, you must discuss the rankings and come up with a group consensus (agreement) on a ranking for the five characters in "Crocodile River".

You will have 20 minutes to do this.

Larger group processing conclusion

(20 minutes)



Group processing questions

1. *How did you come up with a consensus/agreement in your small groups?*
2. *What values did you use to rank the characters?*
3. *Sometimes people say they value one thing, like family, but their actions show otherwise, like they value money or work more.*
4. *What did we learn about values and attitudes from this exercise? Let participants come up with their ideas.*

Key points to make:

Our values impact on how we feel about people.

Our values can be extremely different and this often makes it difficult for a group to agree; they can be the sources of conflict in any group.

There are lessons to be learnt around compromise from this exercise when working with others whose values are different to yours.

How we behaved in these groups also somewhat reflects our values. Did we listen, did we have to have our own way, were we able to compromise or not?

5. Conclusion: Who is okay?

(5 minutes)

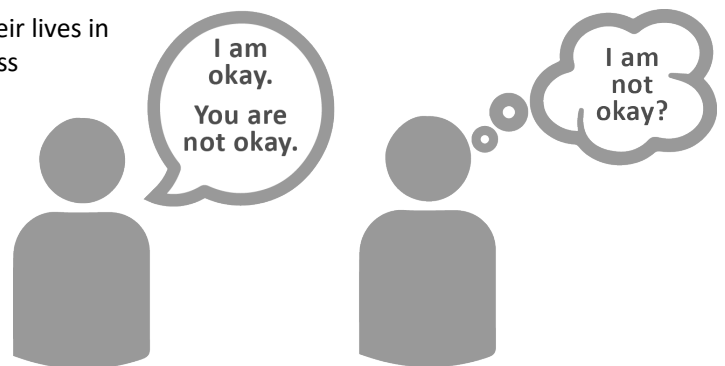
From this exercise, it is possible to see how our values underpin our attitudes towards people and the choices they make and the lifestyles they live. It is what makes us embracing of some people because they fit with our values, but it makes us **prejudiced** against others whose lives are different to our own.

The word **prejudice** comes from the idea that we “pre-judge” someone before we know them as people, based on our values and attitudes.

If people do things differently to us, if they live their lives in different ways, we tend to judge them as being less moral, less right, or misguided and confused.

Generally, we consider ourselves to be “okay” and others who do not share the same values to be “not okay”.

The facilitator could draw this graphic to demonstrate how we see others.



“You never really understand a person until you consider things from his point of view, until you climb into his skin and walk around in it.”

Wayne Harper Lee, *To Kill a Mockingbird*

Session 3: Looking Out – Marginalising and Mattering



Time
2 hours 40 minutes

Session Plan

1. Discussion and definitions
(20 minutes)
2. Marginalizing and Mattering
(50 minutes)
3. Activity: The things people say
(60 minutes)
4. Group work: the impact of
marginalization
(30 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- articulate the “degrees” of prejudicial action that people take – hate crimes, discrimination and marginalisation.
- Understand the subtlety and insidious nature of marginalisation.
- Articulate the impact it has on individuals (including internalising the messages people receive from others).

Materials

Flipchart and markers, prestik.

Handouts

Marginalizing and Mattering Sheet

Preparation

1. Prepare a flipchart with 4 columns and the following headings

STORY	CUE	FEELNGS	ACTION
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Write out enough cards with labels for each person of the people that are relevant for the group. For example:

PEOPLE LIVING WITH HIV	MEN WHO HAVE SEX WITH MEN	SEX WORKERS	PEOPLE WHO USE DRUGS
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2. Write up the same headings on flipchart – one heading per flipchart. You will need these for *Activity 3: The things people say*. You will need to decide what “labels” would be useful for the particular group you are working with.

PEOPLE LIVING WITH HIV	MEN WHO HAVE SEX WITH MEN	SEX WORKERS	PEOPLE WHO USE DRUGS
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1. Discussion and definitions

(20 minutes)

*The earlier session helped us to understand how the values we grow up with and hold dear lead to the attitudes and the prejudices we have about people and issues. This session is about the fact that these beliefs consciously and unconsciously direct the way we **behave** towards people.*

Write up the following words on the flipchart:

- Hate crimes/violence
- Discrimination
- Marginalisation

Ask the group what their understanding of these words is. They are all behaviours we engage in when we have negative attitudes towards others.

Below are some definitions:



What is a hate crime?

A hate crime is:

A prejudice motivated crime which occurs when a perpetrator targets a victim because of their membership of a particular social group or race.
Usually violent.



What is discrimination?

Discrimination is:

The unjust or prejudicial behaviour or actions towards an individual or group on the basis of sex/race/social class/sexual orientation.

Unfairly treating a person or group differently from other people or groups.



What is marginalisation?

Marginalisation is:

The process whereby someone is pushed to the edge of a group and given less importance. This is a social phenomenon to exclude a minority group who is disapproved of. Their needs or desires are ignored, and they are diminished as people in the process. This mostly happens in quite subtle ways.



Point out to the group that there are degrees of prejudicial behaviour, but we should not be fooled by marginalisation – it is not gentle discrimination! Although it is subtle, it can be very insidious, and powerfully felt because it is beneath the surface, hard to put your finger on sometimes, difficult to call someone out on, but you intuitively FEEL it! And experiencing a lot of it over time does lasting damage to a person.

NOTE TO FACILITATOR

Don't get too "hung up" or stuck on the definitions. It is important that participants come up with a definition that is "good enough" for these terms in their own words.

2. Marginalizing and Mattering

(50 minutes)

Distribute the 2 Marginalizing and Mattering sheets to each person. Explain that we will be thinking about a time that we were marginalized or excluded and times that we mattered.

Show them the headings on each sheet:

- Cues – what in the interaction let you know you were valued or not valued?
- Feelings – how did you feel as a result of this interaction?
- Actions – what were your behaviours or actions that occurred as a result of this interaction.

It might be useful to give them examples of this:

For marginalization:

- Cue: Standing waiting to be served in a shop. The shop attendant appears to see right through you and serves the older, white woman who has come in after you. A sense of being invisible.
- Feelings: Invisible, angry, irritated.
- Actions – Put down my purchase and stormed out of the shop and then travel far out of my way to find another shop selling the same thing.

For mattering:

- Cue: A new teacher looks me in the eye, asks me questions and listens carefully to the answers.
- Feelings: I felt seen and understood, confident and capable.
- Actions: I am able to participate more in class and tackle the work with confidence. My performance in Maths increases.

Explain that throughout the workshop we will ask participants to pause, close their eyes and think back to a particular experience. Try to be in that moment for a short time, using your mind's eye.



Close your eyes for a moment and think of a time in your life when you felt you did not matter; when who you were or what you did was not valued. It might have been earlier in your formative years, and it might be recently. It might have been because of the way you looked, dressed, acted, who you loved, who you identified with, your age, your profession, your views, your health, your education, or lack thereof, your culture, your gender.

Now as you hold that experience in your head, fill out the sheet describing the cues – how you knew that you did not matter, the feelings you had and the actions you took because of the experience.

Give the group 5 minutes to do this.



Now, close your eyes for a moment and think of a time in your life when you felt you DID matter; when who you were or what you did was valued. Again, it might have been earlier in your formative years, and it might be right now.

Now as you hold that experience in your head, fill out the sheet describing the cues – how you knew that you DID matter, the feelings you had and the actions you took because of the experience.

Give the group 5 minutes to do this.



Pair work

Ask participants to share their stories with a partner. Give them 10 minutes to do this (5 minutes each).

Ask a few participants to share their stories and experiences and on 2 flipchart pages write up 3 or 4 stories (fill the page) headings of cue, feelings, and actions. You may need to prompt participants to dig a bit deeper on what cues are.



Group processing questions

Use the following questions to engage in a conversation about the cues, feeling and actions we take when we have experiences of both mattering and marginalization.

1. *Any reflections from this activity?*
2. *We have talked about your experiences of being marginalised. Can you think of times when you might have marginalised others? Sometimes even without thinking about it.*
3. *How has your gender impacted on your experience of being marginalised or marginalising others?*

NOTE TO FACILITATOR

It would be important for the final discussion here to touch on some of these issues:

Mattering is about belonging and feeling you are of some significance to another person. All of us need to feel like we matter.

Marginalization can be so subtle. Sometimes it is as simple as patronizing someone (apparently being kind or helpful, but betraying feelings of superiority; condescending; looking down on) in our attempts NOT to discriminate. Examples are rubbing the head of a person in a wheelchair. Or asking a black person to explain why black people are so angry. Or speaking loudly, slowly and in a pronounced way to someone with a different accent to your own as though they were deaf or stupid!

For people who experience a lot of marginalization, there are daily put downs and micro invalidations (daily sexism) that exclude, negate, nullify their thoughts feelings and experiential realities every day. These experiences undermine and alienate.

It is likely that most of us have intentionally and unintentionally patronized someone in this way at some stage in our lives. Awareness of this is the first step to doing things differently.

3. Activity > The things people say

(60 minutes)

Ahead of the workshop, facilitators should choose 5 from the following groups of most marginalised people. The decision should be based on contextual relevancy related to the country and the work of the organisations whose staff are involved with the workshop.

Most marginalised groups could include:

- Men who have Sex with Men or LGBTI people
- Sex Workers
- People who use Drugs

- People living with Disability
- Women and adolescent girls
- Ethnicity
- Particular religious groups (identify which is contextually relevant)
- A particular race
- People living with HIV

NOTE TO FACILITATOR

This exercise helps participants verbalise the stigma towards different types of people. The language used can be very strong, so it needs to be carefully facilitated. In this exercise participants can express their own stigmatising labels for other groups under the cover of attributing them to “the people”.

So, while some of the words are those commonly used by the community, some are the words actually used by participants themselves. In doing this exercise we should make it clear that we are using these words not to insult people but to show how these stigmatising words hurt. In debriefing this exercise, it is important to focus on how participants really feel about these names rather than focusing on the words themselves.

Remember that the real learning comes in the debriefing.

Steps

1. Going around the circle, allocate roles to each person – People Living with HIV, Sex workers, Men who have Sex with Men, People Who Use Drugs. They should be given a name tag with their “label” printed on it. They should pin the name labels to their chests.
2. Ask each group to go to their flipchart station.
3. Ask each group to write on the flipchart all the things people say about those in that group. They should write English words as well as their local language words.
4. After two minutes, shout “Change” and ask groups to rotate and add points to the next sheet.
5. Continue until the groups have contributed to all six flipcharts and end up back at their original list.
6. Now ask them to have a discussion in their groups about the following two questions:
Where do these ideas come from?
What values are they rooted in?
7. Bring everyone together into the circle. Ask one person from each group to take turns standing in the middle of the circle and reading out the names on their flipchart, starting with “I am a sex worker (or other group), and this is what you say about me.”

8. After all the lists have been read out, ask the following group processing questions:



Group processing questions

1. *How do we feel about these names?*
2. *How did it feel to wear a label like this?*
3. *What is the impact of them being written as acronyms (abbreviations)?*
4. *Why do we use such hurtful language?*
5. *All of these can be linked back to the places where our values originate. What are the common places for this?*

Some examples of “things people say”:

SEX WORKERS

Whores, bitches, promiscuous. Sinners, immoral, irresponsible. Sex maniacs. Serial killers, Women without shame. Enjoy sex too much. Too lazy to do real work. Money crazy. Husband grabbers, HIV carriers. Eating without having to work. Sell your bottom to feed your mouth. Make money by lying down. Poor – need money.

MEN WHO HAVE SEX WITH MEN

Immoral. Sinners, Unnatural, abnormal. Misfits, insane. Need therapy. They fear women. HIV carriers. Sex Maniacs. Sex organs don’t function. Should not get married. Should not be allowed to adopt children. Should be segregated. Like money.

PEOPLE WHO USE DRUGS

Weak people who are addicted. Criminals. Will steal from you. Will do anything to feed their addiction. Don’t care about others. Have HIV. Are promiscuous. Are irresponsible. Could change if they wanted to.

3.2 Summary

We are socialised or conditioned to judge other people. We judge them based on assumptions about their behaviour.

Sex is a taboo – it is regarded as something shameful that we should not talk about. So people who are perceived to have lots of sex are assumed to be shameful.

People Living with HIV, sex workers and Men who have Sex with Men are all labelled as sexually immoral and called promiscuous, sinner, irresponsible, AIDS carriers. In some ways one gets the feeling when people do end up with HIV, people feel they “get what they deserve” because they have “broken” some of society’s unwritten rules about sexuality.

People who use Drugs are often assumed to be weak, criminal, family destroyers.

Layers of stigma – people are often affected by stigma (being a woman, a sex worker, Men who have Sex with Men) before they are living with HIV, or get the label of HIV positive.

These labels show that when we stigmatise we stop dealing with people as human beings – we forget their humanity (by using mocking or belittling words) and this gives us a feeling of superiority over them.

These labels are based on generalisations that have no validity – we just assume that “other people” are dirty or lazy, promiscuous, etc.

We attribute characteristics to a group and everyone who belongs to that group.

There are some gender assumptions that we make too – that sex workers are always women (we may think men would never degrade themselves in this way). And women who are sex workers are judged for not being “pure” or “Madonna-like”. On the other hand we might assume people who use drugs are mostly men – because the life is so rough. So gender plays into the stereotypes we have and also increases our judgement.

Very important. One of the things that we do is that, even though we may have experienced stigma for one thing (for our HIV status), we STILL STIGMATISE OTHERS. So, we may have experienced the very real pain of stigma and discrimination for our HIV status and yet we go ahead and stigmatise and discriminate against other groups like Men who have Sex with Men or Sex Workers.

We create “Us and Them” thinking. We “other” people who aren’t the same as us. There are “normal” people and there are “others” who do not confirm to our norms.

Instead what we can do is empathise with people – put ourselves in their shoes, understand their world, feel what it is like to be in their world, even for a moment.

4. Group Work > The impact of marginalisation

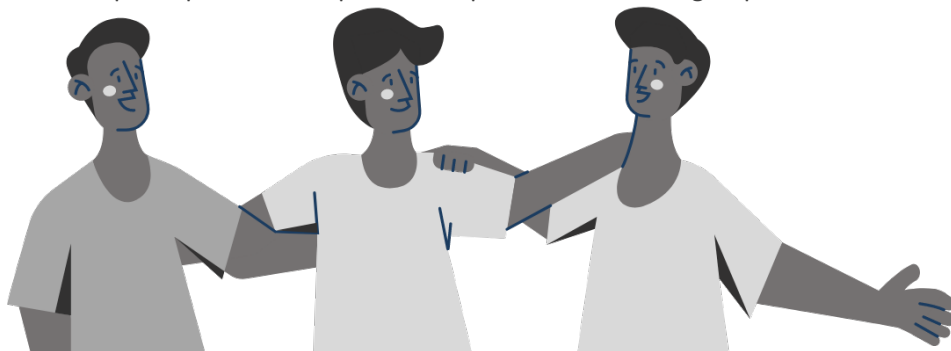
(40 minutes)

Divide participants into groups of 3 or 4 people and give them a flipchart paper and a marker. Ask them to discuss the following questions and record their answers on the flipchart. Divide up the list of most marginalised people and give 2 or 3 to each group to think about. Give them 15 minutes to do this.

- Where do these ideas come from? What values underpin them?
- What is the impact of marginalisation on this group? Consider how they might feel and behave as a result of this.
- Safeguarding is something we are all very concerned with. Why do vulnerable/marginalized groups like this particularly need safeguarding?
- Why is it that often when people from these groups report a safeguarding issue, they are not listened to?

Ask the groups to paste their flipcharts around the room.

Walk with the participants from flipchart to flipchart as the small groups share their thoughts.



Return to plenary.



Group processing questions

1. *As we consider the impact of marginalization on so many people, how do we feel?*
2. *Does anyone have any thoughts they would like to share at this stage?*
3. *What is the impact of marginalization you as a man or a woman in this group?*
4. *What might be important to consider with safeguarding and this particular group.*

NOTE TO FACILITATOR

Communities and minority groups who experience extensive marginalisation because of who they are or what they do, often experience enormous damage to their self-esteem, confidence and their health. The damage occurs from repeated and regular, brief, every day exchanges that send denigrating messages to individuals. These are subtle, often automatic, verbal and non-verbal micro invalidations. These seep into who people are and how they are in the world. In addition to the impact on self-esteem, marginalised groups often experience mental health issues, substance use and addiction, relationship challenges and trouble getting and holding down work. We sometimes call this minority stress.

“A person is a person because he recognizes others as persons.”
Archbishop Desmond Tutu

Session 4: Looking in - how my gender has impacted on me



Time
3 hours

Session Plan

1. Introduction: Sex and Gender
(20 minutes)
2. My experiences of being a man or a woman
(60 minutes)
3. Looking at our attitudes (
(50 minutes)
4. Gender Fishbowl
(60 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- Distinguish between the terms, “sex” and “gender”.
- Articulate some of their most pivotal life moments that impacted on their development as women or men.
- Unpack some of their attitudes towards gender issues in relation to their values.
- Voice their particular experiences of being a woman or a man.
- Have understood more about the experiences of the other sex.

Materials

Flipchart and markers, prestik, art materials

Preparation

Place the following signs on the walls around the room:

- STRONGLY AGREE
- AGREE
- DISAGREE
- STRONGLY DISAGREE

1. Introduction: Sex and Gender

(20 minutes)

In the next couple of sessions, we will be exploring the concept of gender from a personal perspective and eventually gender in the broader context, and particularly how it relates to marginalization.

It is useful to throw up the two words sex and gender, so that we have a common understanding of them. Historically they have been used interchangeably but more recently they have taken on a particular meaning.

- *What is SEX? – these are the multiple biological characteristics that make us a man or a woman. For some people their biological sexual characteristics are unclear – they are known as intersex. What is GENDER? – gender is all our sexual characteristics together with the “social construct” (idea that has been created and accepted by the people in society) of what it means to be a man or a woman and the roles they play. Society has some strong ideas on this, and these are often imposed on boys and girls from early childhood (ask for examples of this). Gender can also refer to our GENDER IDENTITY – our concept of ourselves as a man or woman. For some people the sex they were assigned at birth because of their sexual characteristics doesn’t match with their gender identity. We refer to these people as transgender or gender non-conforming.*

NOTE TO FACILITATOR: Including transgender and intersex

Although mentioning the terms transgender and intersex may seem irrelevant as a start to this conversation, it is important because it shifts away from talking of sex and gender as binaries.

2. My experience of being a man or a woman

(1 hour)

This is an Art Activity about Defining Moments.

In this exercise participants will be drawing their life story with **emphasis on defining moments that reinforced their gender** in negative and positive ways. As facilitator, you might like to lead the way by sharing your own story. The deeper you are prepared to go on this will set the tone for how deeply the group will go. Be sure NOT to spend too much time on your own story though!

Ask participants to take a piece of A4 paper and some art materials. They should spend some time reflecting on the key experiences they have had over their lifetime that have **shaped who they are as a woman or as a man**. They can do this in the form of a lifeline with negative experiences below the line and positive experiences above the line or in any other way that makes sense to them. It would be important that they touch on:

Childhood experiences
Adolescence
Adulthood.

They are welcome to draw or write about their experiences.

Give the group 15 minutes to complete this exercise.



Pair work

Ask participants to spend 10 – 15 minutes sharing these defining moments with a partner. Although there may not be equal numbers of men or women in the room, try to set up mixed pairs as much as possible.



Group Processing Questions (20 minutes)

- *Would anyone like to share an experience with the group that was pivotal for them in their development as a man or woman from childhood/adolescence/adulthood?*
- *Was there anything interesting that emerged for you from this exercise?*
- *How do you feel about being a man or a woman in your life right now? Have you always felt that way?*

3. Looking at our Attitudes

(50 minutes)

Before the activity begins place the four signs around the room:

- STRONGLY AGREE
- STRONGLY DISAGREE
- AGREE
- DISAGREE

Decide on 7 or 8 of the statements below that seem relevant to the group.

Explain to participants that this activity is designed to give them a general understanding of their own and each other's values and attitudes about gender. Everyone has a right to his or her own opinion, and everyone's opinion should be respected.

Explain that you will be reading a few statements that they may or may not agree with. When you read a statement out, they should think about their attitude, then move to stand under the sign that reflects their attitude.

Read aloud the first statement you have chosen. Ask participants to stand near the sign that says what they think about the statements. After they have moved, ask one or two participants from different signs to explain why they are standing there. Ask why they feel this way about this statement.

Some participants may say they don't know whether they agree or disagree and don't want to stand beside any of the signs. Ask these participants to say more about their reactions to the statement. Then encourage them to choose a sign. If they still can't do this, allow them to stand in the middle of the room as the "don't know" group. In the debriefing you might enquire more about what had made them feel so conflicted and whether their ideas had shifted in any way after the discussion.

After a few participants have talked about their attitudes toward the statement, ask if anyone wants to change their mind and move to another sign.

If all the participants agree about any of the statements, play the role of devil's advocate by walking over to the opposite side of the room and asking, "Why would someone be standing on this side of the room?" (To surface the kind of values someone might have that would put them in that position).

Statements

- It is easier to be a man than a woman.
- A man is more of a "man" if he has many sexual partners.
- Sex is more important to men than to women.
- It is okay for a man to have sex outside of a relationship, if his partner does not know about it.
- A woman who carries a condom in her purse is "easy".
- Men are more intelligent than women.
- Women who wear revealing clothes are asking to be raped.
- Homosexuality is natural and normal.
- It's a woman's responsibility to take care of contraception.
- Safe abortion should be available to all women who choose not to go through with an unwanted pregnancy.
- Women are too emotionally unstable to take on leadership roles.
- It's okay for a woman to earn more than her partner.
- For a man to cry in front of his family or other men, is to show weakness.
- If a family has limited finances, it is best they educate their sons before their daughters.
- It's okay for a man to hit a woman and make her obey.
- It is better to stay in a relationship than be alone.
- If a child is sick, the woman should stay at home with the child.



Group Processing Questions

What statements did you have strong opinions about? Why?

*How did it feel to have an opinion that was different to the rest of the group?
Did anyone feel their attitude shifted in any way after hearing other people's opinion?*

What important values underpin some of these opinions?

Finish off by saying:

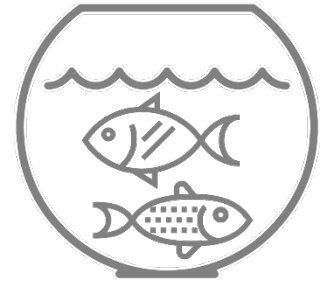


Everyone has their own attitudes about gender, and it is important to keep thinking about these and to challenge our own personal values and beliefs about gender throughout this workshop and beyond. Often our attitudes may conflict with those expressed by others. It is important to respect other people's attitudes about gender, but also to challenge them if their attitudes and values can be harmful to them and others.

5. Gender Fishbowl

(60 minutes)

This activity only works with a mixed group. Divide the group into men and women. If there were transgender people, intersex or gender non-conforming people who are “out” and part of the workshop, ask if they would like to join one of these two groups or whether they would prefer to be in a group on their own.



The important thing about this activity is that it be done in a quiet, gentle atmosphere. Questions should be gently probing, not invasive. Only those who wish to respond should do so. The tone is more of a conversation rather than a discussion or debate. The group listening should be reminded to be quiet and listen intently.

One tip we have learnt from this activity is let the men speak first, rather than give them the last word! When the women’s group goes last, insist that the men really listen to them.

Questions for the Fishbowl activity:



What is it like every day to be a man/woman in (your country)?

What is the one thing you would like men to know about being a woman?

Steps

1. Divide the participants into men and women. Ask the men to sit in a circle in the middle of the room and the other groups to sit around the outside of the circle, facing in.
2. Begin a discussion by asking the men the questions listed above. The women’s job is to observe and listen to what is being said. They are not allowed to speak.
3. After 30 minutes, close the discussion and have the groups switch places. Lead a discussion with the second group, while the other group listens. Use the same questions. Do the same for the third group if you have one.
4. Discuss the activity after both groups have taken a turn.



Group processing questions

- *What surprised you about this activity?*
- *How did it feel to talk about these things with others listening?*
- *What did you learn?*

“This is a man’s world, but it ain’t nothing without a woman or a girl.”
James Brown, singer, song writer

Session 5: Looking out: Gender and Power



Time
2 hours 45 minutes

Session Plan

1. What women are up against
(45 minutes)
2. Where the power lies
(45 minutes)
3. Considering the impact on men
(45 minutes)
4. Discussion: Safe-guarding women and girls
(30 minutes)

Learning outcomes

On completion of this session, participants should be able to:

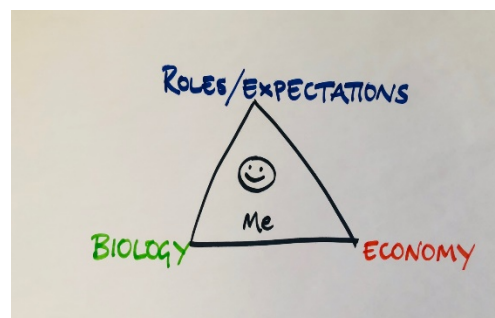
- Articulate what the challenges women face in terms of roles and responsibilities, the economy and their physical make up.
- Identify where power lies and the impact this has.
- Understand that harmful gender norms have a negative impact on men.
- Identify the characteristics of a healthy relationship.
- Consider how women and girls are marginalized.

Materials

Flipchart and markers, prestik,

Preparation

1. Prepare the following flipchart



2. Prepare 2 flipcharts with the outline of a person



1. What women are up against

(45 minutes)

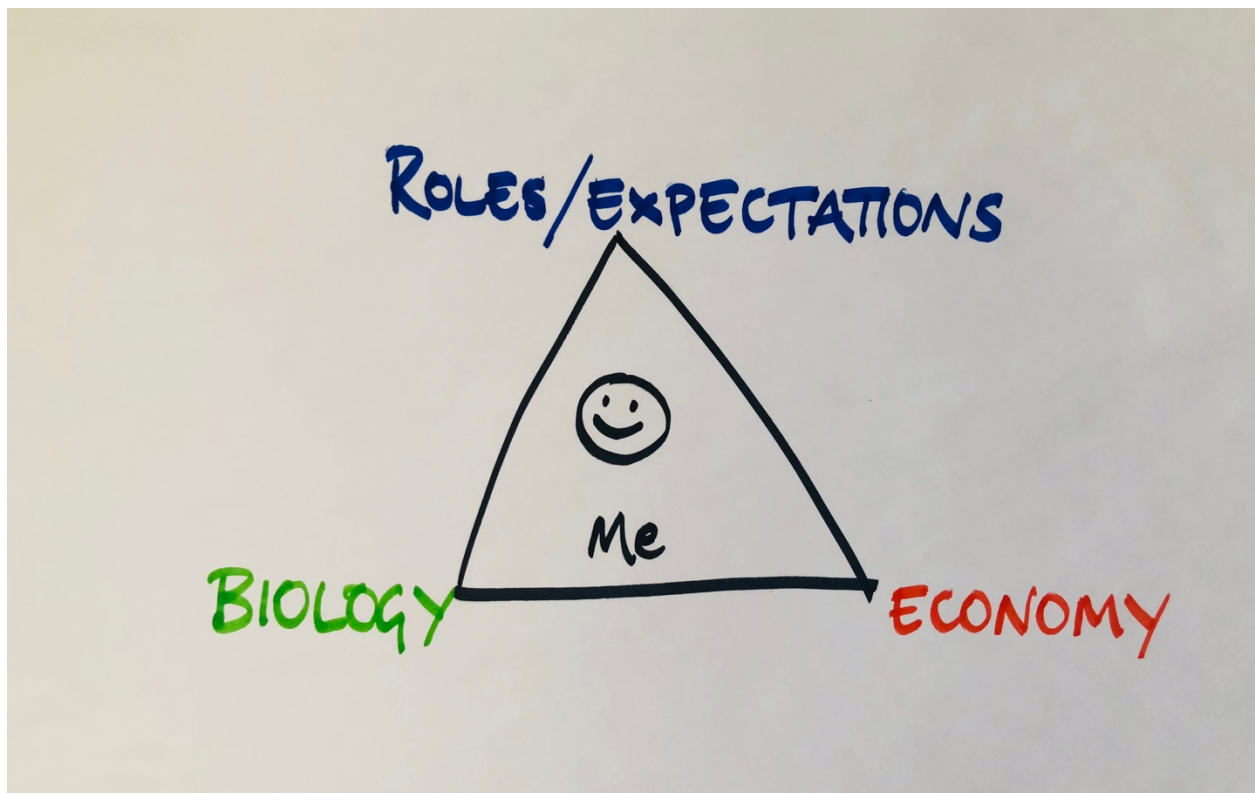


In the last session we started to hear from women about some of the particular challenges they face. Some of these challenges lie in women's biology but many are related to some of the harmful gender norms and the roles and expectations of women that exist in our society and our communities. At the start of this session, we are going to look deeper into this.

What are some of the things that are challenging for women?

Listen to group's responses, and record some of them on the flipchart.

Put up the triangle flipchart



This picture shows three areas in which women experience challenges because of their gender. There are so many layers that impact them, and it is important for us to be able to recognise them.

Activity: Mapping the challenges of being a woman

(30 minutes)

STEP 1: Start by unpacking the Roles and Expectations area



What are some of the roles that women are expected to play?

Prompts (if necessary)

- Think about some of the different roles that are expected of women in different spaces
- What are the expected roles of women in the home?
- How are women expected to behave in the bedroom?
- How are women expected to behave in public?
- (Caretakers, mothers, cleaning, cooking, be soft, be gentle, be quiet, get married, become a mother, be submissive in the bedroom, be monogamous)

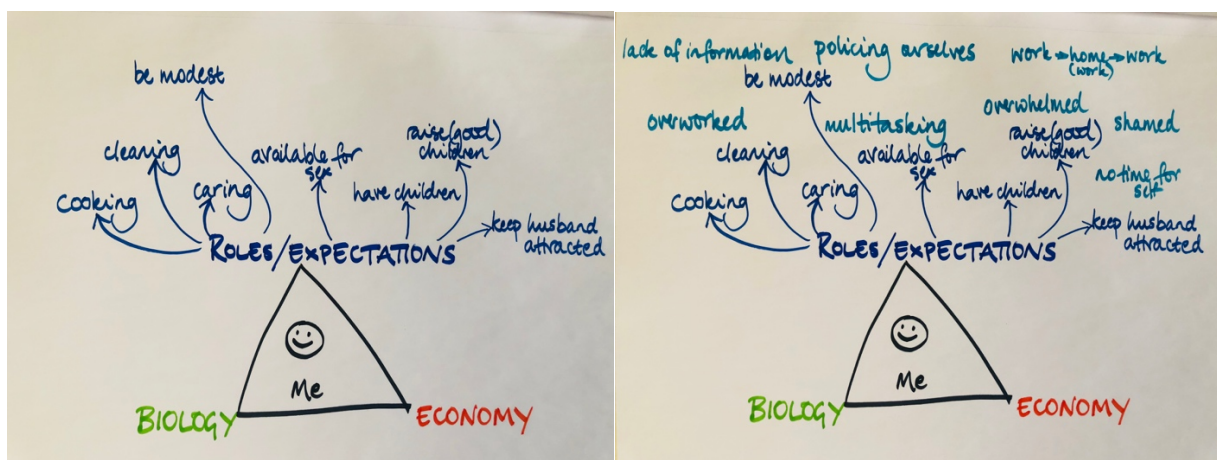
Record participants' responses in the space above the 'roles and expectations' area and link them to the area by drawing connecting lines.

Once participants have spent some time unpacking roles and expectations ask:



What does this mean for women? What impact do these roles and expectations have on them? (If they try to take on other roles they are seen as threatening men, little space for expression of different roles, can be trapped at home with children, less autonomy).

Record participants' responses in the space above their previous responses as a new set of "branches" (see example of the diagram as a reference)



NOTE TO FACILITATOR: More information on gender norms

Gender norms are experienced differently according to class, ethnicity, race, gender identity, sexual orientation, religion and ability. They are also influenced by three areas: **social/cultural**; **economical/political**; **biological/physical**.

These gender norms manifest as:

- **masculinity** or being a 'real' man is associated with decision making power, breadwinning (paid labour) and political power in the public sphere. The negative effects of this also means not being given permission to be emotional or caring.
- **femininity** or the notion of being a 'real' woman is associated with the private sphere/home and unpaid labour. 'Real' women are expected to behave in certain ways in the public sphere, including dress, appearance and behaviour.

The **social/cultural area** includes the types of expectations that society holds through cultural and traditional gender norms. This includes the cultural and traditional pressure to be a 'proper' woman, and to perform in various roles as a wife, mother, daughter, sister in relation to others, including taking on the 'burden of care' through unpaid emotional and physical labour.

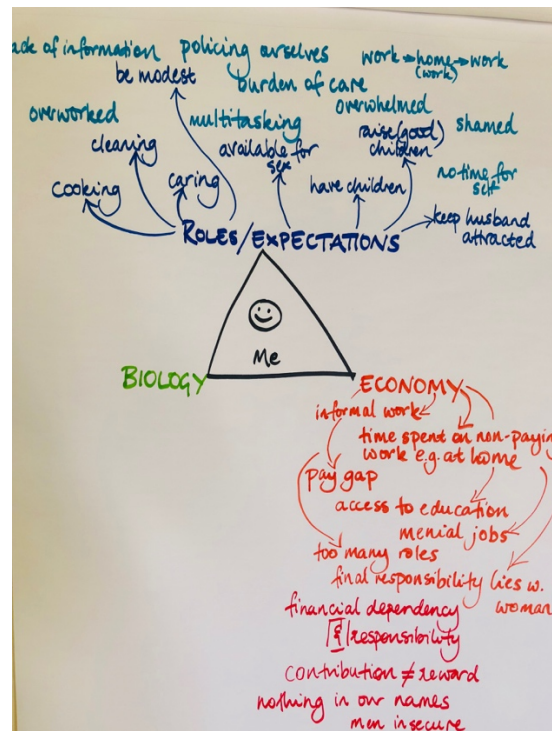
STEP 2: Next, move to unpacking the Economy area



How does the economy impact women?

Can you think of particular disadvantages?

(Majority of women work in informal economy, men as breadwinners, reliance on male partners for survival, lack of agency (confidence), men expected to manage money, limits of education, glass ceiling)



NOTE TO FACILITATOR

The **economy** area includes thinking through the ways gender norms are reinforced by larger structures such as the economy and politics.

This means:

- lots of women's work is informal labour, emotional and physical caretaking is unpaid or un-recognized as real labour. The 'burden of care' is dis-empowering women.
- women must work against notions of femininity and masculinity in order to be leaders in the public sphere, including in their paid jobs.
- women must carry the weight of behaving a certain way in the public sphere.

The **biology** area includes thinking through the ways in which women's biology often puts them at a disadvantage. Additionally, there are some assumptions about women based on the socially constructed idea that women are "the weaker sex". Women give birth, and it is assumed they will carry the burden of caring for children. In fact, this role can be equally shared by women and men.

STEP 3: Finally, move to the Biology area

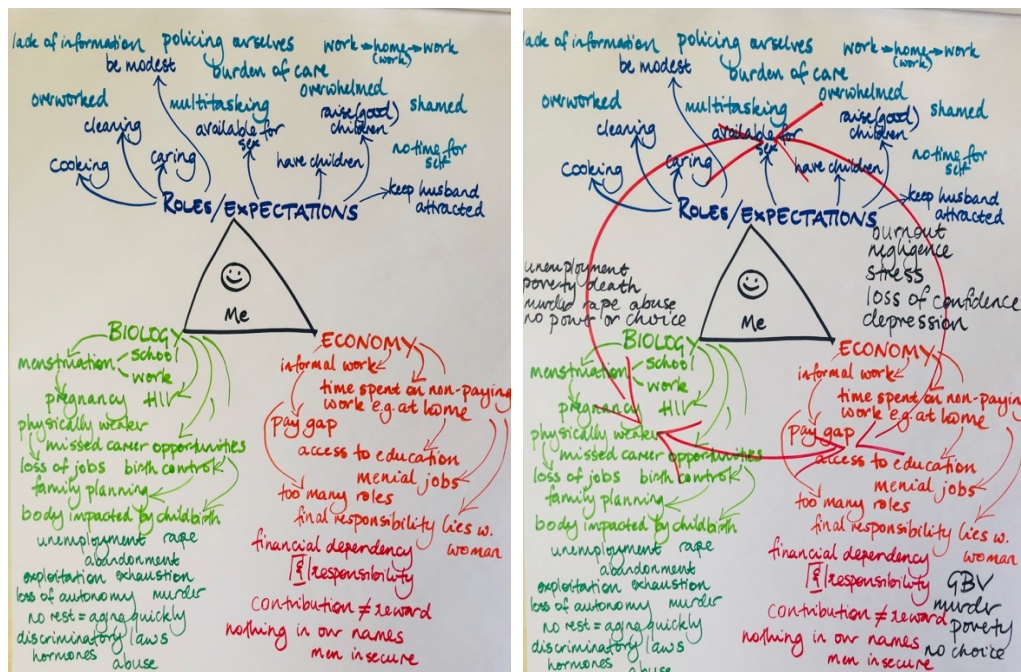


What are some of the biological or physical things about being female that can hold women back?

(Physically weaker, menstruation, childbearing, vulnerable to HIV)

What challenges can this give women?

(Vulnerable to rape and violence, workplaces not geared towards childcare, managing pain and hormones; bodies take a battering from pregnancy and birth; as the "birthing" parent, have to return to work while breast feeding and caring for small children)





Group processing questions

1. *How does this make you feel as women in the room?*
2. *How does this make you feel as men?*
3. *Is there anything that surprised you?*
4. *This is a triangle, but there might be more points to that shape than these 3 things we have mentioned. Can anyone come up with any other issue(s) that women face? These could be education, roles in the family etc*

2. Where the power lies

(45 minutes)

NOTE TO FACILITATOR

A dialogue is a fun and easy way to engage participants on complex topics. The dialogue will be acted out by you and your co-facilitator – don't be afraid to let loose, you can spend time fleshing out your character and giving them a real voice.

Things like the accents of the characters can have a big impact on the power relations expressed in the dialogue and can highlight even more layers of power, rank, 'class' and privilege.

Only distribute the dialogue to participants once you have performed the scenario; we want participants fully engaged when observing the dialogue.

Lena and Jonas

The following conversation takes place between a woman called Lena and her manager, a man named Jonas. Lena wants to apply for the new managerial position that is opening up and she goes to Jonas to get an application form.

Lena: *Good morning sir, how are you today?*

Jonas: *Lena. Did you come in on time this morning?*

Lena: *Yes sir, I did. (Hesitates...) I just wanted to speak to you about the new managerial position that is opening up...I really want to apply.*

Jonas (sounding sceptical): *Oh ho! You want to be a manager?*

Lena: *Yes, I am here to collect an application form.*

Jonas: *Hmmmm. Lena, a pretty woman like yourself can be doing so many things. But you want to be a manager? Let me help you, I have a lot of experience in these things. (smiles)*

Lena: *Thank you for the offer sir, but I am just here for the application.*

Jonas: *Oho, you think you know how this works? What are you going to give me in return for handing you the application form?*

Lena: *Sir?*

Jonas: *Maybe a back massage...*

Lena: *Jonas. I am here for an application form. I just want the form.*

Jonas: *You want to do things the hard way? Fine, here is your form, but don't think your application will be successful. After all, I am the one that assigns the positions. Now Lena, you have a good day eh?*

Lena walks away feeling stunned. She has heard rumours of what was expected of women to move up in the ranks...but she never expected this...and now she fears that her job is in jeopardy. She folds the application form and puts it in her pocket. Tomorrow she will decide whether she will even bother to apply.

Group work (15 minutes): Divide participants into groups of 4 or 5 and ask them to use the following questions written up on the flipchart for a discussion about the power they saw being exerted in this scenario (this is not a comprehension; they do not need to answer each question one by one!).

- What is going on here?
- Where does the power lie in this exchange?
- At which points does Jonas's power come from rank, and at what points can we see his power coming from his gender?
- What boundaries is Jonas breaking?
- How is Lena trying to maintain her boundaries?

Bring groups back into plenary, asking each group to answer one question. Once a group has responded to the question, open the floor for other groups to add anything that might have been missed.

3. Considering the impact on men

(45 minutes)



What kind of power do men have?

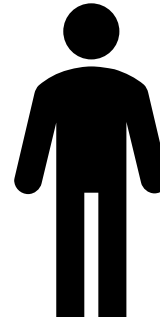
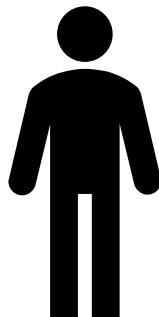
(Examples: Physically stronger, expected to lead and be in charge, often brought up to lead, economic power, male-designed and dominated systems)

What roles could men play in supporting women break traditional gender norms?

(Examples: Create space for women to take up leadership roles, advocate on behalf of women when with other men, support women in their roles as decision-makers)



When we were exploring the triangle, we looked at many of the challenges women face in a complex system that is not designed for us. However, this same system has a huge impact on men and not all of it positive.



NOTE TO FACILITATOR: more information on Toxic Masculinity

When something is toxic it has a notable negative impact. So, when we talk about toxic masculinity, we are talking about expectations placed on men and boys that can restrict their behaviour to being unemotional (except for 'acceptable' male emotions such as anger), sexually aggressive and violent. Men who are seen to be emotional or gentle can be ridiculed, which drives these expectations deeper. This has a negative impact on both men and women.

According to Tim Winton; "Toxic masculinity is a burden to men. I'm not for a moment suggesting men and women suffer equally from misogyny, because that's clearly and fundamentally not true. And nobody needs to hear me mansplaining on the subject of the patriarchy. But I think we forget or simply don't notice the ways in which men, too, are shackled by misogyny. It narrows their lives. Distorts them. And that sort of damage radiates; it travels, just as trauma is embedded and travels and metastasizes in families. [Colonialism] should have taught us that. Misogyny, like racism, is one of the great engines of intergenerational trauma."

Activity:

- Prepare two flipcharts with the outline of a person.
- Split participants into two groups and give each of them a flipchart and some markers.
- Ask them to give the person the physical qualities of a man – they have 5 minutes.
- Next, ask them to write a list on the left side of the flipchart, of how men are expected to behave and the roles they are expected to play in society – they have 10 minutes for this.
- Finally, on the right side of the flipchart, ask participants to make a list of how men are expected to behave in the bedroom – they have 5 minutes.
- Get each group to present their responses and show their drawings.



Group Processing Questions

1. *What impact does all of this have on men?*
2. *How can women support men challenge traditional gender roles and expectations?*



Patriarchal systems (dominated by men) often force men to take on roles with which they are not always comfortable. We want to encourage them to see the benefits of women taking on wider roles at home and at work. To engage them, it is useful to practice listening and empathy – when people feel heard and understood, they are much more likely to listen in return.

4. Discussion: Safeguarding of Women and Girls

(30 minutes)



These sessions on Gender makes us realise that women and girls are often vulnerable because of the gender norms in our society. They are physically not as strong as men, and men often hold the power in the relationship. We mentioned safeguarding earlier.

- *What kind of safeguarding situations arise for women and girls?*
- *Why are they unlikely to report an incident?*
- *How can we ensure safeguarding for the women and girls in our programmes?*

“Language is not innocent. A person’s choice of language is a moral, political and theological act with personal and social implications and repercussions.”

Steve de Gruchy, *Aliens in the Household of God*

Optional Session: Looking Out – understanding more about LGBTI people



Time
3 hours

Session Plan

1. Introduction
(5 minutes)
2. Activity: LGBTI and A and Q and H and O
(15 minutes)
3. Unpacking the Boxes
(70 minutes)
4. Myths and misconceptions about being LGBTI
(30 minutes)
5. Heterosexual privilege
(40 Minutes)
6. Emergence – a developmental model
(40 Minutes)
7. Summing up
(5 minutes)

Learning outcomes

On completion of this session, participants should be able to:

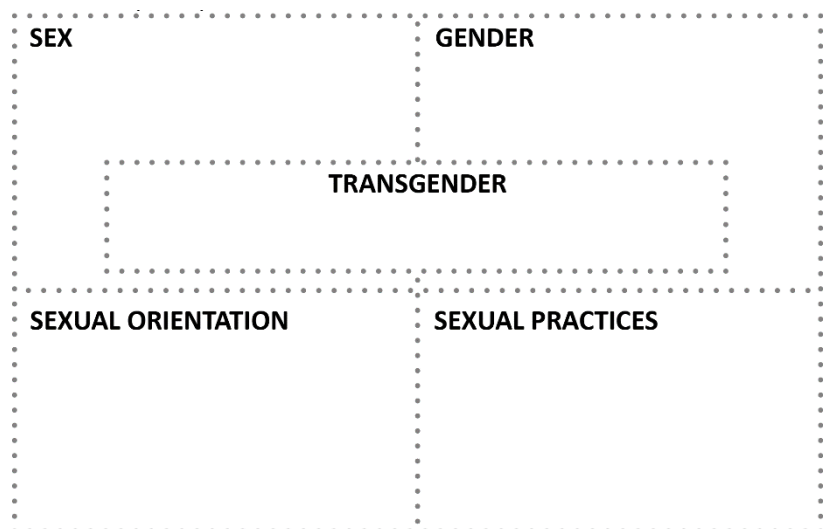
- unpack and name what the acronym LGBTI stands for;
- identify the discriminatory words used for gender identity and sexual orientation;
- understand the definitions of sex, gender, sexual orientation and sexual practices and how they differ from one another;
- share their own knowledge of human sexuality;
- accurately use the terminology accepted by LGBTI people.
- understand what the term “heterosexual privilege” means;
- through case studies, experience empathy for those who grow up LGBTI;
- name the stages of the Emergence Model;
- articulate some of the challenges of “coming out”;
- be aware of the advantages of heterosexual privilege.

Materials

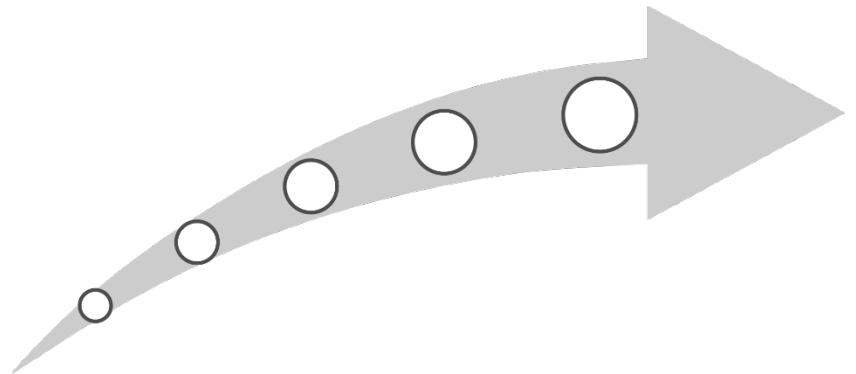
Flipchart and markers, prestik, plain A4 paper.

Preparation

1. Prepare a flipchart with the following graphic for *Step 3*:



On a flipchart, draw up the Emergence Model “arrow”, leaving off the names of the stages. You will add these as you work through



1. Introduction

(5 minutes)

Explain that we are now moving into understanding more about LGBTI.

Explain that MEN WHO HAVE SEX WITH MEN is a public health term that includes a lot of different people. This is not usually a term that brings people together – we do not have MEN WHO HAVE SEX WITH MEN organisations generally. So, if we want to work with MEN WHO HAVE SEX WITH MEN, we need to work with groups that have formed under the banner of LGBTI. Some organisations only include two or three of these groups – they may be LGBT without the I or they may just be the T (transgender).

Write up the words “**Language is not innocent**” on a flipchart. Ask the group what this means. Once you have some answers to this, explain that some of the language we use is loaded; it has particular meaning for particular people and it can be hurtful or stigmatising.



In order to talk about gender identity and sexual orientation with authority and with sensitivity, we have to be able to unpack many of the words and concepts that are commonly used. We need to recognise which words are unacceptable and hurtful, and learn to use those words that are accurate and will result in a common understanding. This session will help us do this.

2. Activity: LGBTI and A and Q and H and O?

(15 minutes)



Let's start by talking about the acronym LGBTI and all the extra letters you might have heard that are being added onto this acronym.

Let's break down the letters and see if we can get an agreement on what they all mean:

L = lesbian: preferred term for a female homosexual.

G = gay: a socio-political term to describe a homosexual man, although the term can be used to refer to both male and female homosexuals and the homosexual community at large.

B = bisexual: a person who has sexual and emotional relationships with, or feelings towards, both men and women, though not necessarily at the same time.

T = transgender: a person whose sense of personal identity and gender does not correspond with their birth sex. A person who challenges society's views of gender as fixed, unchanging and linked to biological sex.

I = intersex: a person born with chromosomes, external genitalia or an internal reproductive system that is not medically considered standard for either male or female.

A = asexual: a person who does not experience sexual attraction or an interest in engaging in sex. “**A**” has recently been added to the LGBTI acronym.

Q = questioning or queer: individuals who may affiliate with the community and are questioning some aspect of their gender or sexuality; *“Q” is also used to include those who identify as queer.*

H = heterosexual: an individual who has relationships and sex with the opposite sex. Some have said that to be fair **“H”** should also be added to the LGBTI acronym.

(Ask the group what they think about this. You might get comments that this is fair, but others may say that this acronym should be the domain of all those who do not fit the heterosexual norm, those who are so regularly “othered”, because so much in society is stacked in favour of the heterosexual norm. Neither answer is wrong.)

O = others: anyone else who has not claimed one of the above words to describe themselves.

3. Unpacking the boxes

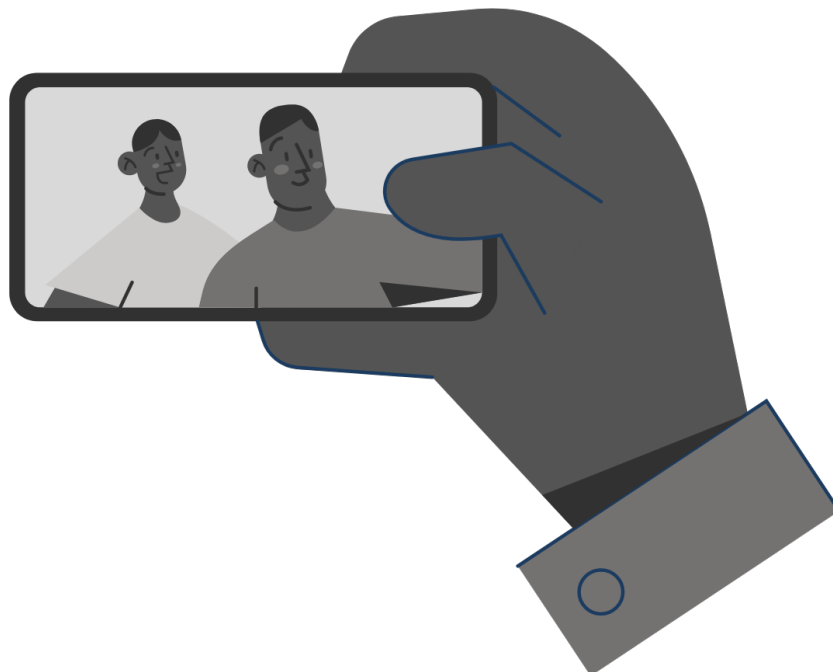
(70 minutes)

This exercise aims to build on what participants already know about the four different components of human sexuality to be able to link sex, gender, sexual orientation, and sexual practices. The facilitator should draw from what participants have written on the posters.

A very important thing to say upfront is that the quadrants model is merely a framework to help us simplify and understand the complexity of these issues. It is not carved in stone, and not everyone will feel that they fit neatly into the boxes: things also change for people over a lifetime – there is fluidity. It is not possible to force everyone, in every situation, to fit into the “boxes”. For this reason, we have chosen to make the walls of the quadrants permeable (the dotted line)

You could also mention that we will look at some of the “binaries” that are associated with describing gender and sexuality.

Ask the group if they know what a binary is.





A binary shows something as having two parts – either masculine or feminine, gay, or heterosexual.

Using binaries can help us to simplify and organise the world and they are very much a part of our culture. The trouble is that they can make something that is a little complex, or a “grey area” appear too simple, and they are therefore not always an accurate description. So, we will use some binaries today, but we also need to be aware this. Part of this workshop is to show how deeply imbedded these are in our culture, and yet how limited they really are to describe human sexuality and attraction.

3.1 Sex as a biological concept

(15 minutes)

Using the poster you’ve prepared with the quadrants (boxes), begin by discussing the term “SEX”. In this context, it is a biological concept.



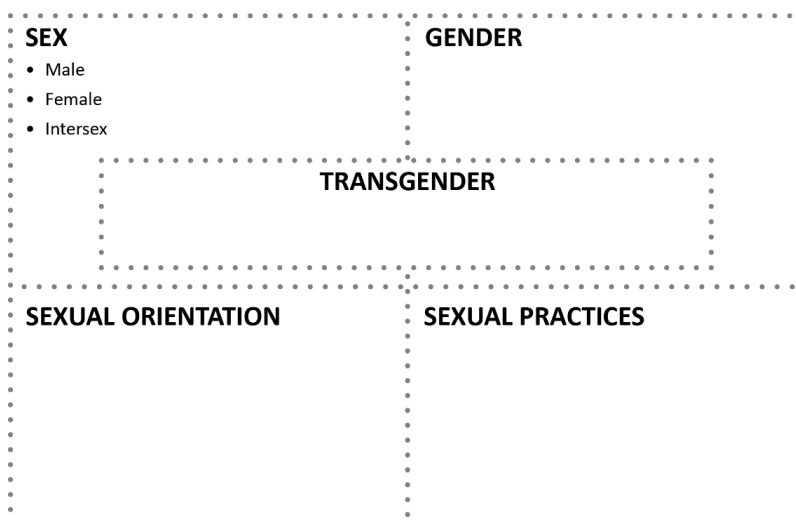
When I say the word “sex” what comes to mind?

Allow the group to give their take on what the word means to them. Most will answer that it is something that happens between the sheets, some might give the correct answer. When a participant mentions “male” or “female”, write these down in the first box, one below the other.



How do you know what sex somebody is? Look in the pants – male has penis, female has vagina. Biological sex is about what’s in the pants, as well as the hormonal and genetic make-up which indicates a person as being biologically male or biologically female.

Ask the group if they know of any other biological sex. Write “Intersex” in the first box.





Intersex people used to be called “hermaphrodite”, but it is an offensive term, biologically incorrect and one we should not use. In some cases, the genitals are not clear at birth; in some cases individuals discover much later in life that they are intersex.

There are very many different ways intersex can manifest. (You might respectfully refer to a well-known South African athlete, Caster Semenya, who, according to media reports, has a vagina and internal testes.) Testes produce the male hormone, testosterone, resulting in male features. Another example is that of the case of a woman who wanted to have a baby in her late 20s and found that she did not have a uterus, another type of intersex.

Many years ago (and sometimes even today) when a baby was born intersex, the doctor would urge the parents to actually choose the sex of their baby. The genitals would then be surgically modified to fit into the chosen sex. Cases were reported where the choice of the sex of the baby was that of a boy and where, later in life, at about puberty, the boy would develop breasts and other female secondary sexual characteristics. These days, most parents are referred to endocrinologists. A choice is not made immediately, and the child is allowed to grow up without any “corrective” surgery and is encouraged to make his or her own choice in terms of sex and gender identity.

Having an intersex child can be very traumatic for parents. According to Intersex SA, one in 500 babies in Africa is born intersex. It is a very sensitive issue and parents should be referred to the correct health care providers for assistance with various challenges.

Intersexuality challenges the idea that there are only two sexes; but who knows, there may be even more than just male, female and intersex.

Another way of seeing sex is on a continuum with male on one side, and female on the other.



Please note that this line is a continuum and people fall somewhere on it – not just in the named places the diagram above shows. Intersex would fall somewhere in between male and female. An intersex person can fall more towards the female end of the spectrum, or more towards the male end. And even males and females themselves can fall more towards intersex than at the far ends of this spectrum.

Check with the group that they understand all information shared so far.

3.2 Gender

(15 minutes)

Tell the group that you are moving on now to the box that has “GENDER” written in it.



If sex is male, female and intersex, what is gender?

Most people express confusion between the terms “sex” and “gender”. Sex is a biological concept; gender is an identity. Some aspects of gender are social constructs.

Each of us has a gender identity. If our biological body matches the gender we identify with, we are known as cisgender. Many who identify trans from their earliest years (as young as 2-years-old) identify with the gender other than the biological sex they are born with.



We also mentioned that gender can be a construct. A construct is something that is put together by society, where meaning is placed on what it is to be male or female beyond what is biological.

An example of this is that boys are not born liking the colour blue, and girls are not born preferring pink! They are socialised towards this by the media, family, friends, etc.



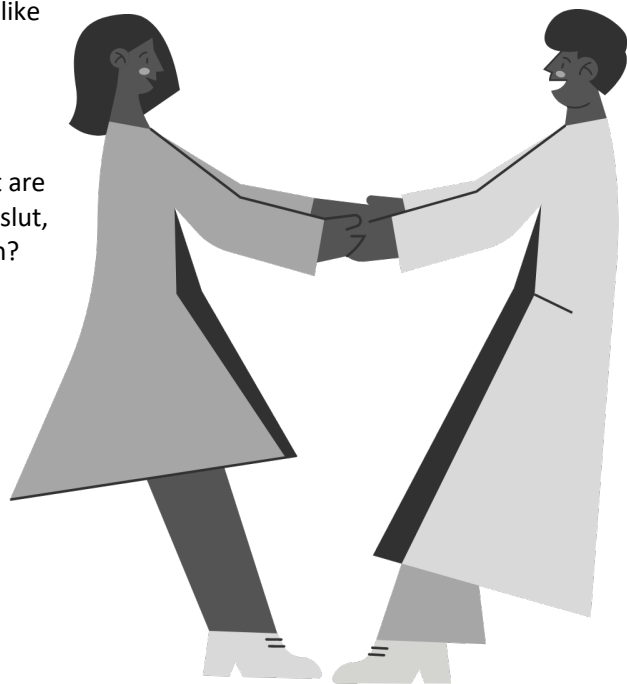
What are some of the social expectations for men and for women?
(You could write these up on a flipchart with two headings: Men and Women)

What is the impact of these social expectations for men’s and women’s health, intimate relationships, relationships with children?

Some behaviour is perceived to be masculine, like drinking too much, and is accepted by society, even if it hurts the person or damages relationships. If a woman portrays masculine behaviour, like drinking too much, or being dynamic, decisive or showing leadership, what are the perceptions of that woman? That she is a slut, that she is a bitch? That she wants to be a man?

The facilitator should use other examples the group is comfortable with, for example:

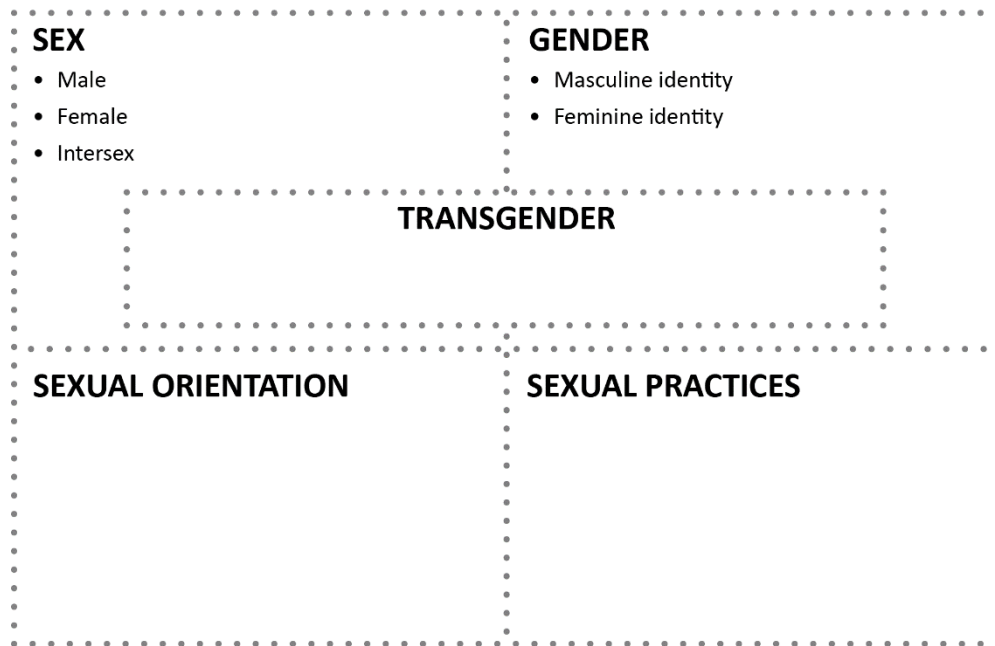
- Female jobs, male jobs.
- What men and women should wear.
- Masculine = tough, hard, driven; feminine = soft and caring.
- Baby boys dressed in blue; girls dressed in pink.



The following terms should be identified and written up in the “GENDER” box:

Masculine identity

Feminine identity



The irony is that for a human being to be whole, they need both masculine and feminine characteristics. A man must be in touch with his feminine side and a woman with her masculine side; our masculine and feminine should be in balance in the self. When there is no balance, it may cause power imbalances which can lead to different forms of abuse, of the self, or of a partner.

Perhaps a way of seeing gender would be on a continuum like this (draw on a flipchart):

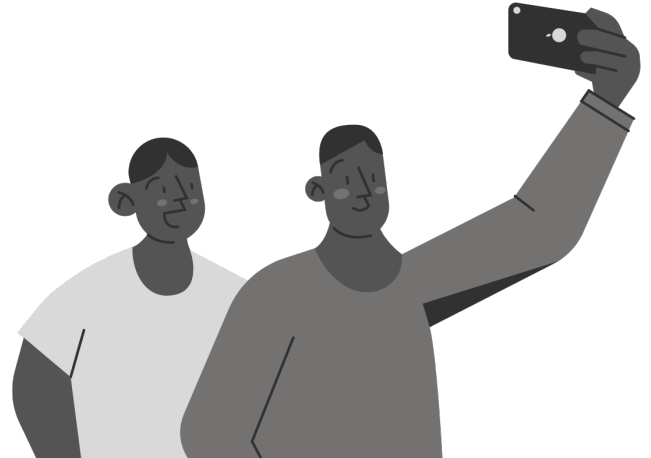


Very few people only show masculine or feminine traits, but some people are more masculine, with a few feminine characteristics, or the other way round. Androgyny is an interesting word. In the past it has been used to describe someone who presents themselves in ways that are neither totally masculine nor totally feminine – think about Michael Jackson. However, there is a new way of using this word psychologically. An androgynous person can show both feminine and masculine traits and ideally, there is an evolutionary growth towards a person who has both feminine and masculine traits and can use them appropriately and to their best advantage. So, they could use their more socially constructed “feminine” traits of sensitivity and empathy to listen and understand the distress their partner is experiencing, and then they can access their more aggressive, traditionally considered “masculine” characteristics when needing to defend themselves or others.

Think about where you fit on this spectrum.

Participants could come up and place their mark on the continuum. Another way of demonstrating this well (but takes time) is to use some tape to make a long line on the floor. Write up the words “masculine”, “feminine”, etc., on A4 paper and stick these down on the ends of the tape. Ask people to make a judgement about where they fit in here and ask them to go and stand on the continuum where they would like to place themselves. Then they can see where they are in relation to their friends and neighbours!

Make sure that no participant tells another where to stand – this is something only we can decide for ourselves.



3.3 Transgender

(20 minutes)

Say you are moving on now to the box that has “TRANSGENDER” written in it.

Ask who can explain what “transgender” means. Warn people that this is a highly complex area, and that it is important to tread lightly and listen carefully to those in the room who are transgendered.



Transgender relates to a person whose sense of personal identity and gender do not correspond with their birth sex. They challenge society’s view of gender as fixed, unmoving and linked to one’s biological sex. A transgender person’s gender identity is mostly different to how they biologically present.

We sometimes use the term “trans” to encompass others who “cross over” in some ways – cross dressers, incorrectly assigned intersex people, transsexuals, and those who defy what society tells them is appropriate for their gender.

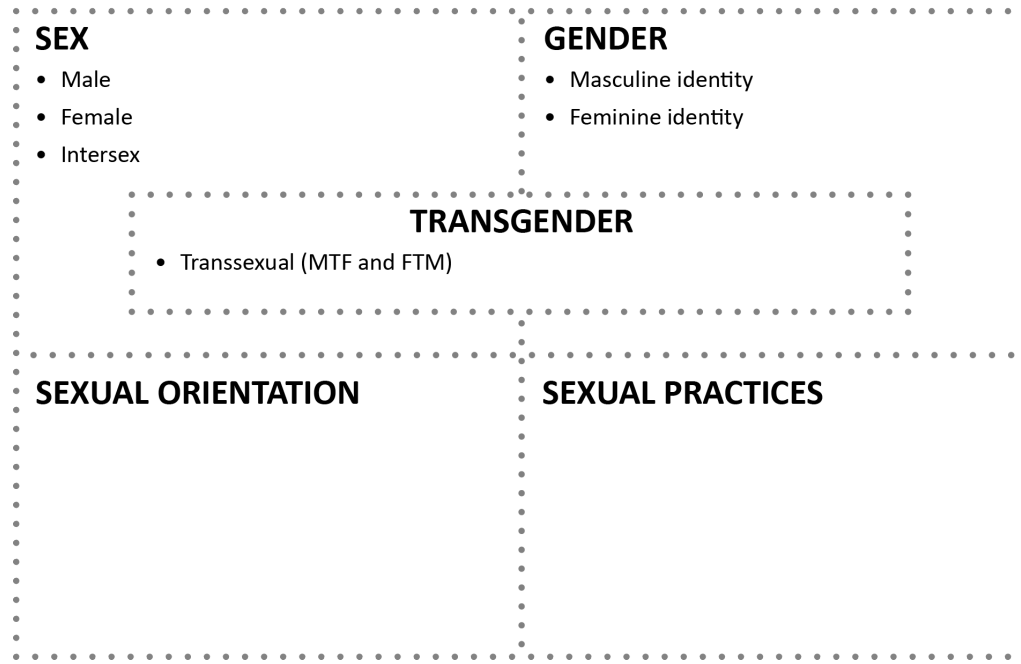
It is worth mentioning some of the other people who fall under the heading of “trans” – i.e. they “cross over” in some way.

Ask participants if they know the meanings of “transsexual” and “transvestite”:

Transsexuals are people who transition, or are in the process of transitioning, from one sex to another. They are usually in the process of seeking or undergoing some form of medical treatment to bring their body and gender identity into closer alignment. Not all transgender people undergo reassignment surgery. For example, a child is born, there is a penis, and there is the assumption that he is a boy. When brought up, the person follows a masculine gender role, but feels uncomfortable with the self as a man, and feels more comfortable in a feminine role, and being a woman. ***She*** feels trapped in her own body. ***Remember to always use the correct pronoun when referring to transgender people. The correct pronoun is for the sex they are transitioning to.***

Transvestites are cross-dressers and in most cases are men who have the need, for various reasons, to wear female clothes, underwear, make up, etc. It is not related to who they are attracted to. Most of the time, transvestites are heterosexual. Some gay men will wear women’s clothes and are commonly known as **drag queens**

Transgender has *nothing to do with sexual orientation*. It is because of the myth that gay men want to be women that even heterosexual transvestites themselves sometimes question their own sexual orientation, even though they are well aware of whom they are attracted to sexually.



NOTE TO FACILITATOR

It is important that participants understand that gender identity and sexual orientation are not the same, although they share similar experiences of prejudice and discrimination. Gender identity is about how someone feels about themselves in relation to being a man or a woman, not who they love or are attracted to.

Gender identity refers to how someone feels about themselves in the world as a woman or as a man: a person's sense of themselves as man or woman. While most people's gender identity matches their biological sex, this is not always the case. For instance, someone may be born biologically male, yet has a female gender identity.

Continue by explaining the complexity of transgenderism, where people feel they cannot identify with their sex organs. Some will try to change their bodies through hormones and/or sex change operations or gender reassignment surgery. Not all **transsexuals** are the same. A transsexual can be of any sexual orientation. For example: a man, married to a woman, feels disconnected from his body's biological sex and has surgery to become a woman but remains married to the same woman. This has impact on their sexual orientation – a lesbian woman trapped in a man's body.

It sounds very complicated, but the important thing to focus on is what gender a transsexual person identifies with.

We use the terms **MTF** (male-to-female) and **FTM** (female-to-male) to indicate which way someone is transitioning. Transitioning usually starts with basic physical changes – breast binding, clothing, make-up and hair, voice, etc.

Pangender is a non-binary gender defined as including all genders and not being exclusively man or woman. The prefix pan is Greek and means “all”. Pangender is a kind of third gender.

Genderqueer relates to a person who does not subscribe to conventional gender distinctions but identifies with neither, both, or a combination of male and female genders.

Cisgender people are those whose gender identity matches their sex at birth – i.e., a cisman is a person who is born male and presents himself as masculine; a ciswoman is a person who is born female and presents herself as feminine. Cisgender is a term that has been in use since the 1990s and has a more positive connotation than “normal” or “non-transgender”.

3.4 Sexual orientation

(15 minutes)

Ask participants:



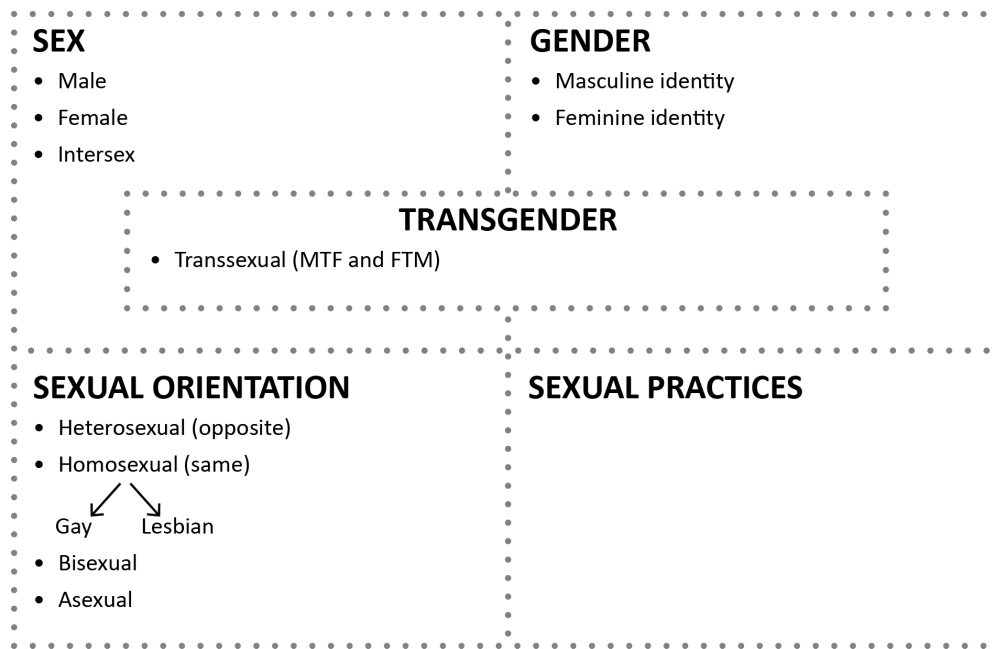
- *What do you think sexual orientation is?*
- *Do you have a sexual orientation?*
- *Do all people have a sexual orientation?*
- *What are the different sexual orientations?*

Sexual orientation is about attraction and feelings. Attraction has many levels – we can be attracted to someone sexually, physically, intellectually, emotionally, and spiritually. Thus, it is not just about sex!

Everyone has a sexual orientation. It is unclear what determines a person’s sexual orientation. Often the question is asked “Where does homosexuality come from?” The answer – the same place as other sexual orientations! The question is often asked because homosexuality and bisexuality are seen as different, or an illness, which they are not. It is because people do not understand the full scope of human sexuality. It is because of all the limited information available. It is because of the shame that used to be connected to homosexuality. It is because of **heterosexism** and **homoprejudice**.

Write up the following terms in the box labelled “SEXUAL ORIENTATION”:

Heterosexual
Homosexual – gay and lesbian
Bisexual
Asexual



Heterosexual (straight) people are attracted to the opposite sex: a man attracted to women or a woman attracted to men. This attraction is sexual, emotional, intellectual, physical, and spiritual.

Homosexuals are attracted to the same sex: a man attracted to men and a woman attracted to women. Again, this is attraction on all levels. *Check that the group understands what the words **gay** and **lesbian** mean.*

Bisexuals are attracted to people of both (“bi” meaning two) sexes on all the levels of attraction – sexual, emotional, intellectual, physical, and spiritual. Bisexuals are often misjudged and stereotyped as those with multiple concurrent partnerships or people who “can’t choose”. This could be the case for some, but for most bisexual individuals this is derogatory. (Note: people of all sexual orientations can have multiple partners.)

Asexual people are not sexually attracted to either men or women and do not have a desire to engage in sexual activity with a partner. Asexuality is a sexual orientation and differs from celibacy, which is a choice to abstain from sex. Some asexual people have a desire to form intimate but nonsexual romantic relationships with a same- or opposite-sex partner and will date and seek long-term partnerships.

Homosexuality was classified as a mental illness in the American Diagnostic and Statistical Manual of Mental Disorders until it was removed in 1973. Even after 40 years some professionals and people still look for a cause of homosexuality, like they would do with sickness. Latest figures show 4-5% of men identify as gay and 2-3 % of women identify as lesbian but realistically this is very hard to determine, particularly if you think of all the places in between that someone might fall.

Sexual orientation is not a choice. Usually, participants want to talk about the “nature vs nurture” debate. Unfortunately, there is no clear answer. Discuss an example of what happens in life:

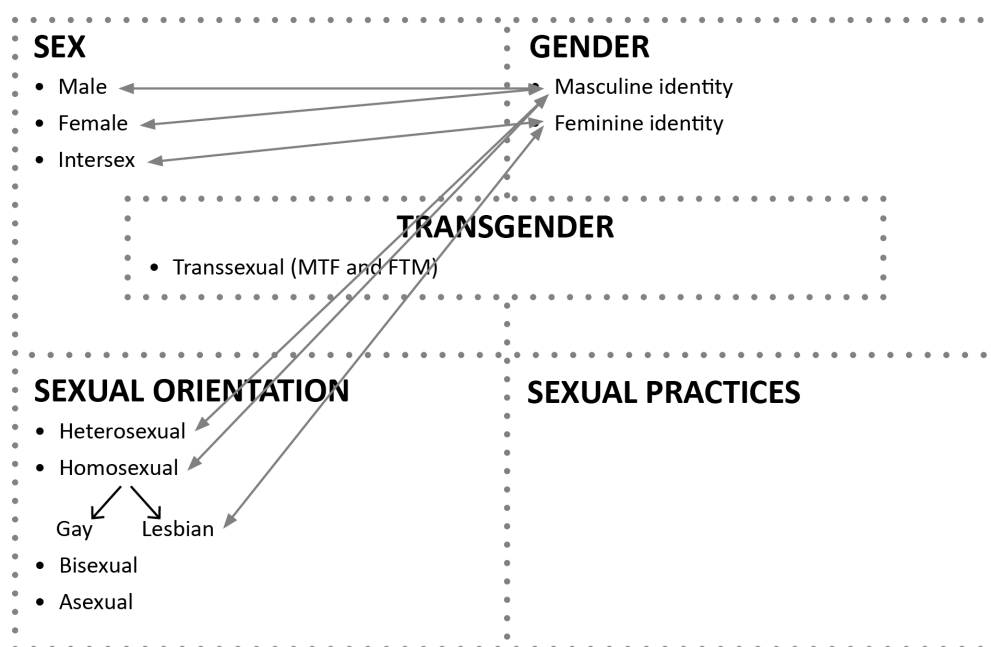


A child is born with a penis; society teaches the baby to be masculine and have relationships with the opposite sex. Society assumes he must be straight. Another assumption: if you are female, you must be feminine, and therefore straight.

It does not always work like that. For example, some males who have extremely masculine features can be gay and there are other men who are more feminine, but not gay. Behaviour does not determine a person's sexual orientation. There are males with feminine characteristics who are straight; there are females who have masculine characteristics, who are straight.

Sex sometimes informs gender, gender identity and sexual orientation, but not always.

At this stage, start to make (draw) links on the flipchart (see below) by using examples of different people in terms of sex, gender, and sexual orientation. You can use yourself as an example, or with their permission, a participant or two.



*How do you know what a person's sexual orientation is? You will only know if that person discloses it to you. **Never assume.** If you don't know, ask. Don't ask to intrude.*

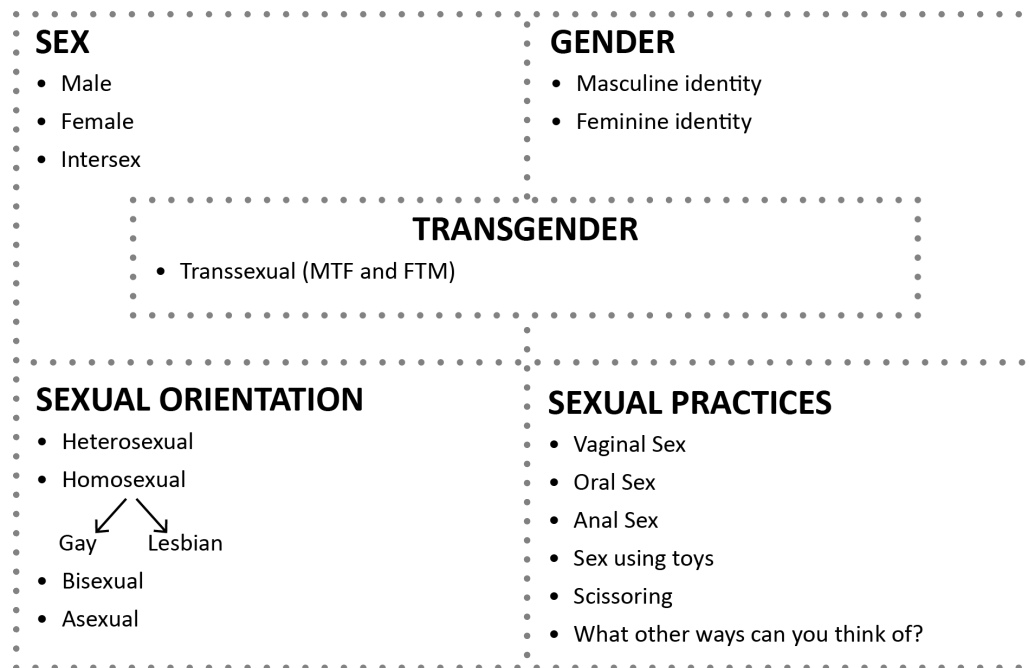
The world (or most people in it!) assumes that everybody is heterosexual. We say that the world operates from the "heterosexual norm".

3.5 Sexual practices

(10 minutes)



Let's list some of the sexual practices that we know. Sexual practices reflect sexual pleasure, and how we want to give and receive pleasure.



All of the sexual practices listed are seen as “sex”. For many years sex was only seen as penetration of the vagina by the penis.

People have sex for different reasons. Men have sex with men for many reasons, but they could still be identified as heterosexual. Men who have Sex with Men or Women who have Sex with Women can have any sexual orientation.

Discuss with the group the issue of guilt and shame associated with certain sexual practices, such as the “anal taboo”. Because of this, some people take part in hidden and risky sexual activities. A heterosexual man might feel too shy to ask his wife or girlfriend to engage in anal sex, and so might try to find the sexual satisfaction he needs somewhere else, often putting himself and his male and female partner(s) at risk. Originally, anal sex was seen as a gay sexual practice. We are often aware of heterosexual men and women who include anal sex in their sexual repertoire.

An important thing to remember is that most of the sexual practices mentioned on the chart carry risk for sexually transmitted diseases, including HIV.



Who we have sex with is not so important; how safely we have sex with others is important.

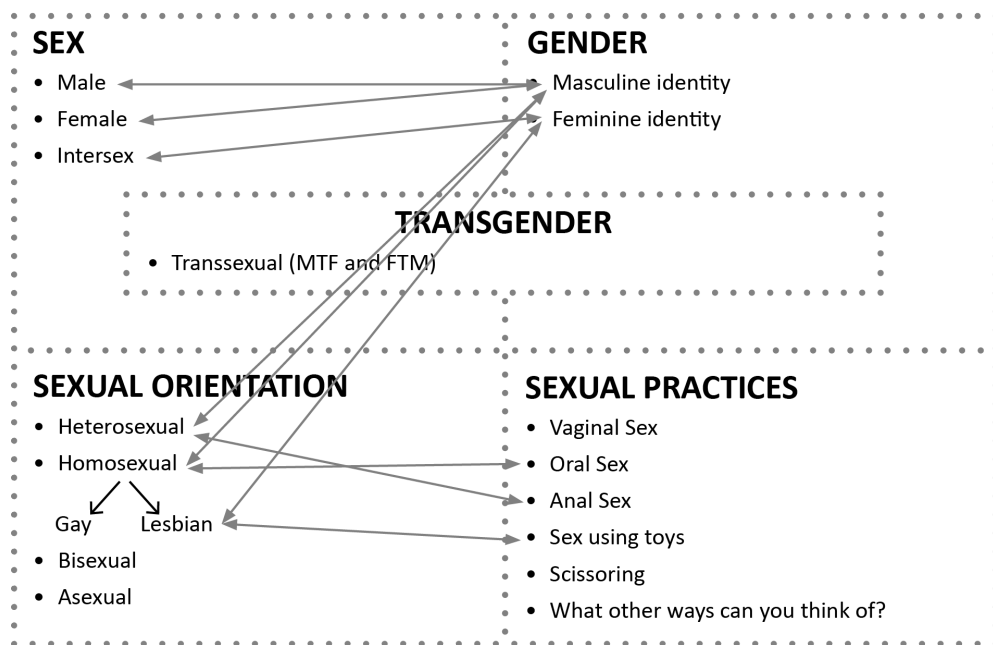
3.6 Linking up

(10 minutes)

Link up more options on your flipchart with coloured markers. Give the following (slightly confusing) examples to illustrate that many possibilities and permutations exist. Point out that it is not for us to judge the way someone defines their own gender identity and sexual orientation.

Examples:

- A male who is masculine and heterosexual, is married to a heterosexual woman, likes anal sex. From time to time he looks for this with young men. Is he fooling himself? Is he really gay, but afraid to come out? The answer to this is that there are many heterosexual men who fall into this category because of the “anal taboo”.
- A male who is feminine, identifies as a transwoman. She is lesbian and anal sex is one of the ways she likes to give and receive sexual pleasure. Although many people who identify as transgender are heterosexual, others are also homosexual.



Activity > Where do I fit in?

Suggest to participants that they spend a few minutes identifying where they see themselves in terms of this paradigm. Remember, not everyone fits neatly into these boxes, and no one else has the right to force anyone into a clear cut identity box!

In closing:



Our language is too limited to fully describe human sexuality, gender identity and sexual expression. Over time the way we define ourselves may change. This is a complex issue. The “boxes” model is simply a framework to help make this complex issue easier to understand, but remember that it is also quite limited. We want to aim to use language that is accurate, where we understand the meaning, and that is

free of prejudice and discrimination. And this is important when we talk about the key population of sex workers too.

The following scenario can be given as a puzzle to participants to work out over tea or lunch after this session:

Jack was born biologically male. However, he identified feminine. Although sexual reassignment surgery was not available to him, he was able to shift to living the life of a woman and became Jacky. Jacky was homosexual and fell in love with Mary and they have been together for nearly 2 years. What sexual orientation does Mary have then?

The answer: *We need to ask Mary!*



SEX

- Male
- Female
- Intersex (old term was hermaphrodite)
 - endocrinologists determine what sex someone is, based on hormone balances

Male \longleftrightarrow Intersex \longleftrightarrow Female

GENDER

- Masculine identity
- Feminine identity
- Also Androgenous
- Gender Queer/Pangender – embracing both genders
- Note: Cisgender – people whose gender matches their sex
- Gender identity – the way someone feels about themselves as a man or as a woman in the world

TRANSGENDER

- Transsexual (male-to-female and female-to-male)
- Intersex – when the physical sex is ambiguous and a decision is made at birth that does not fit with the person's gender identity, that person might have to transition to the other sex at a later stage

SEXUAL ORIENTATION

(who we are attracted to)

- Heterosexual (opposite)
- Homosexual (same)
 - ↙
 - ↘
 - Gay Lesbian
- Bisexual (both)
- Asexual (none)

NEVER assume that you know someone's sexual identity unless they tell you.

SEXUAL PRACTICES

(how we like to give and receive pleasure)

- Vaginal Sex
- Oral Sex
- Anal Sex
- Sex using toys
- Scissoring
- What other ways can you think of?

Sexual practices DO NOT determine someone's sexual orientation. A person's enjoyment of anal sex does not make them gay, and not ALL gay people engage in anal sex!

Anal taboo – is how some people see the anal area as "dirty".

4. Myths and misconceptions about being LGBTI

(30 minutes)

Use the printed “myth” cards and put them up one at a time and discuss what the truth is. There is little time provided for this discussion so try to avoid hot debate!

<i>Some of the commonly held myths about being LGBTI. Listen for them emerging in the workshop and try to counter them with a more realistic, balanced view as provided by the “truth” column.</i>		
	MYTH	TRUTH
1	Lesbian and gay people can be identified by the way they look and act.	They are as varied in their dress, mannerisms and lifestyles as are heterosexuals. Although some conform to the stereotypes, there are many who are not in any way identifiable. In addition many heterosexuals are mistaken as gay because of a so called “butch” or “gay” look.
2	Being lesbian, gay, bisexual or transgender is a mental illness. They should see a doctor or a psychologist or a traditional healer to be “fixed”.	There was a time that homosexuality was considered an illness, but since 1973 people have understood that it was not
3	Being gay, lesbian, bisexual, transgender is a choice. People should just choose not to engage in it.	None of these sexual orientations are a choice – who any of us are attracted to is not a choice.
4	Homosexuality is not part of our culture. It came to Africa with the colonialists. People also learn it from American TV shows.	Homosexuality has been part of many cultures since the earliest times, including documentation of various cultures throughout the African continent. People are most likely to have learnt to be homophobic from the Colonialists than about how to be gay. Being lesbian or gay has nothing to do with being African. Research also proves that homosexuality exists in all species – animals and insects too!
5	Gay people brought HIV to this world	Many of the first publicised cases of HIV came out of gay communities in the USA and this gave people the idea that it is a “gay disease”. Gay men are very vulnerable to HIV infection due to some sexual practices, and this is why it first came to people’s attention in this community. However, HIV infects and affects everyone regardless of race, culture, sex, sexual orientation, socio economic status, etc.

6	All gay people do, or want to, sexually abuse children.	Child abuse is deviant and criminal behaviour which is not restricted to any specific group of people. Studies have shown that the “average” child sex offender is a heterosexual male who is known to the child. Sexual abuse has nothing to do with being gay.
7	Gay men wish to be women. Lesbian women wish to be men.	This is not true. A Transsexual identity is about someone who feels their biological sex does not match who they are inside (their gender identity).
8	Homosexuals should not be allowed to have children because they will make them gay.	Research has shown that children of lesbian and gay parents are NO MORE likely to become gay or lesbian than children of homosexual parents. Some children in non-traditional families may experience some social prejudice, but many children are not growing up in a nuclear two parent family any more.
9	Gayness is “catchy”. Being with gay people and sharing spaces with them will make you gay too.	You cannot be influenced to be gay. If you are gay, and not confident to show it or act on it, being with others might give you the courage to do so. But no one can persuade you to be gay unless you are genuinely attracted to people of the same sex.
10	Lesbian women can be “converted” to being heterosexual if they just had a good male lover (like me)!	Again it is not about persuading and influencing anyone – it is about who you are attracted to in every sense. The violent act of so called “corrective” rape is performed from the position of this attitude.



We have covered so much information:

What has been important new information for you?

Any thoughts or feelings you have at this moment?

We are now going to look a bit deeper into the lives of LGBTI people

“Boxes” Framework (with annotated notes)

The following version of the “boxes” framework can be used by facilitators as a summary (or as “notes” for presenting this section *without having to refer to the manual step by step*).

SEX

- Male
- Female
- Intersex (old term was hermaphrodite)
– endocrinologists determine what sex someone is, based on hormone balances

Male \longleftrightarrow Intersex \longleftrightarrow Female

GENDER

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(how we like to give and receive pleasure)

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- Scissoring
- What other ways can you think of?

Sexual practices DO NOT determine someone’s sexual orientation. A person’s enjoyment of anal sex does not make them gay, and not ALL gay people engage in anal sex!

Anal taboo – is how some people see the anal area as “dirty”.

5. Heterosexual privilege

(40 minutes)

When we grow up heterosexual, we take many things for granted and we assume that others have the same experience. We assume that when we are ready, we can tell others about our relationships and that we will gain public recognition and support. We assume we can live with a partner and do this openly. We don't expect to have to lie too much about our lives and our relationships. We assume we can go anywhere with our partners and express affection without fear of being harassed, beaten, raped or killed because of our sexuality. We expect to be able to use public toilets without creating a huge crisis and risk our lives. We call this heterosexual privilege, something that each of us takes completely for granted.



I would like to read you the stories of two 18-year-olds – Aino and Miriam.

Aino's story

Aino has grown up in a loving and caring family. She has been longing for a relationship of her own and finally a very handsome soccer player in her school has noticed her. He has been sending notes in class and her friends have been encouraging her to meet him after school. She feels ready for a relationship, and thanks to her Biology teacher and school counsellor, she knows about sex and she knows how to keep herself safe. She also knows her mother will be happy as the boy comes from a good family and she feels very excited. Aino has her first "date" after school and they go to a cafe around the corner where they have a cold drink together. Sitting next to her handsome date, Aino feels proud when her friends walk by and giggle and her brother looks surprised as he walks past. Her date leans over and takes her hand for a while and tells her he has always admired her from afar and he hopes she will become his girlfriend.

When she reaches home her mother asks where she has been. Her brother jumps in and tells what he saw, teasing Aino about the school soccer star. Her mother teases her too, in a nice way, but they decide not to tell her father yet, as he might not approve. Later Aino hears her mother quietly telling her aunt on the phone about the exciting news and she feels welcomed into the world of women. Valentine's Day is just around the corner and Aino dreams about the surprise she has planned for her new boyfriend.

Miriam's story

Miriam grows up in a loving and caring family. There are few girls in her immediate family, with lots of boy cousins and Miriam always preferred wearing shorts and playing soccer with the boys. When she turns 13 her mother takes her aside and tells her it is time to put aside the soccer and the shorts and start being a "real girl". She has bought her a new dress. Miriam reluctantly puts it on and at that moment there starts a real hatred of dresses and skirts. At school she is always called a "tomboy" and is teased a lot for her interest in boys' sport. At break she longingly watches the boys playing soccer while she hangs around on the edge of a group of girls who do not fit in.

Throughout high school she has intense friendship with one or two girls and she starts realising she is romantically attracted to them. When she turns 18 she falls in love with a very popular girl in her English class. She lies awake and thinks about her all the time and yet there is a frightened lump in her stomach at the

same time. She knows it is wrong. She can picture her parent's reaction, how the girls and boys at school would respond if they knew and the idea of her pastor or grandfather knowing brings fear instantly. She knows she could never have this relationship. In fact she wouldn't even know what to do in such a relationship – she has never seen two women together before.

She knows she can never tell anyone about her attraction. Her mother keeps asking when she will meet a nice boy. Her brothers tease her for NOT having a boyfriend. She can think of nothing else than the punishment God would bring on her if she acted on her deepest desires.

Two eighteen-year olds and yet such a different story!



Group processing questions

1. What do you notice that is different about the two girl's first relationships?

Aino has knowledge of relationships and sex; she gains approval for her relationship choice; the adult women conspire to support her; she is gently teased in a good way; she can in small ways publicly acknowledge her first relationship; she feels proud and excited.

Miriam on the other hand is confused and anxious. She feels like an outcast and feels the need to hide her emotions and attraction. She has no role models. She has been teased for years about the way she presents herself. She cannot even begin to be true to herself.

2. What emotions do the girls experience?

Aino – pleased, proud, excited, in love, anticipatory, well equipped with knowledge, supported.

Miriam – confused, anxious, fearful, feels an outcast, misunderstood, unhappy, ignorant, alone.

What do you imagine had happened in Aino's and Miriam's life to prepare them for this first relationship?

Divide participants into groups of 3 or 4. They should spend 10 minutes discussing and recording a list of things that we completely take for granted in relationships that are not possible for those who identify LGBTI.

Write "Heterosexual privilege" on the top of a flipchart. When they return to the plenary group, go from group to group getting ideas and record these on the flipchart.

Below are some suggestions for the facilitator:

Public recognition and support for an intimate relationship (e.g. receiving cards and phone calls celebrating your commitments to another person).

Having role models of your gender and sexual orientation.

Living openly with your partner.

Learning about romance and relationships from books, movies and television.

Expressing pain when a relationship ends from death or separation, and having other people notice and support you.

Having positive media images of people with whom you can identify.

Receiving social acceptance by neighbours, colleagues, and good friends.
Not having to lie or hide about women/men in social activities.
Going wherever you wish and knowing you will not be harassed, beaten, raped or killed because of your sexuality.
Not worrying about being mistreated by the police or victimised by the criminal justice system because of your sexuality or gender identity.
Expressing affection in most social situations and not expecting hostile or violent reactions from others.
Raise, adopt and teach children without people believing that you will molest them or force them into your sexuality.
Belonging to the religious denomination of your choice and know that your sexuality will not be denounced by its religious leaders.
Easily finding a neighbourhood in which residents will accept how you have made up your household.
Acting, dressing or talking as you choose without it being a reflection on people of your sexuality.

Point out that this list is what exclusion or marginalization looks like. Encourage the group to sit with this for a moment.

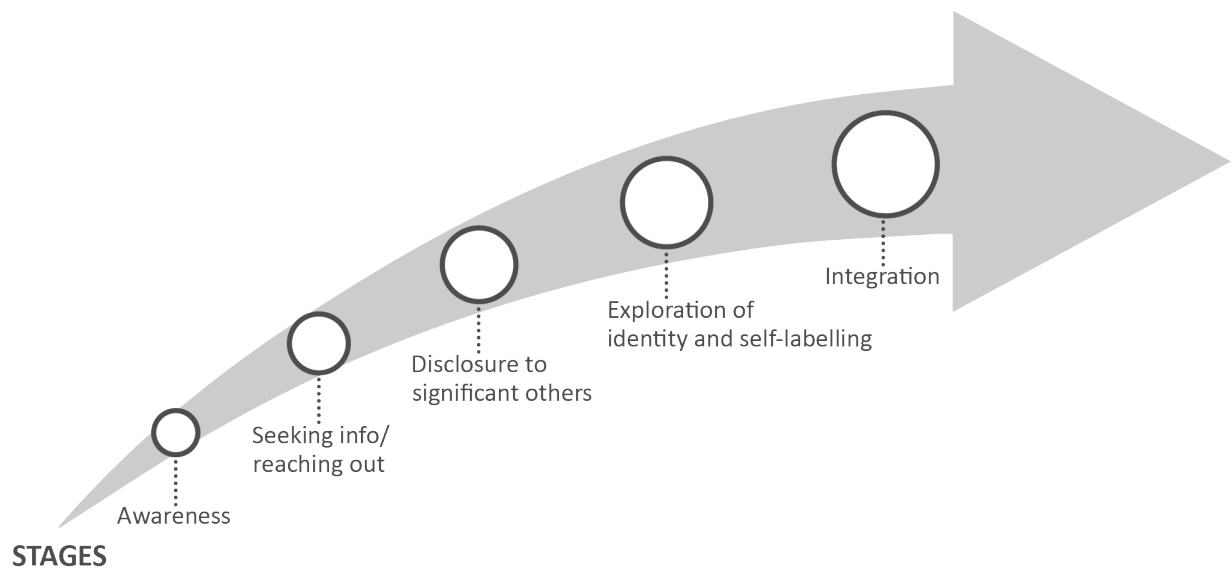
6. Emergence – a Developmental Model

(15 minutes)

The process of developing a gender identity and sexual orientation is a normal process that everyone experiences, but for those who do not fit the heterosexual norm, the process is complicated by cultural expectations that are at odds with their core sense of self. The following model can be useful for those who are coming to terms with their own difference and are moving from an experience of denial and self-hatred to one of self-respect and gender congruence and also useful for those of us who would like to come alongside them and assist or work with them.

These stages are not meant to label people or be prescriptive about the identity process. Many people manage to negotiate these stages without professional assistance. It is important to know that the stages are not linear (and for this reason they are not labelled step 1 to 6) but quite convoluted sometimes (you can go backwards and forwards at different times). For example, one might disclose or come out to some people quite early in the process, but to others, only later. You may never disclose to particular significant others.

Take the participants through the following stages, drawing them up on the flipchart as you go. What could be useful is to just describe the stages, and then come back and ask participants for suggestions of what might help an individual in each stage.



This model is adapted from “Transgender Emergence – a developmental model” from the *Safe Zones@Wits Training Manual* published by the University of the Witwatersrand.

Stages of emergence:

Awareness

In this stage a person begins to be aware that they feel different from others and that this might be related to gender identity or sexual orientation. People in this stage are often in great distress. They may initially deny their own identity while at the same time they experience their first love interest. So it can be a confusing, distressing and stressful time.

- *How can you help?*
Having a supportive person alongside them who listens and remains non-judgemental can help.

Seeking information and reaching out

In this stage a person may seek to gain education and support about sexual orientation or gender variation. They may read books and magazines and pamphlets. They may try to contact LGBTI organisations. They will watch movies and TV programmes portraying LGBTI relationships and talk to others. Sometimes it is difficult to get the right information and the information someone gets may make them doubt who they are. An example of this might be someone confiding in a pastor who tells them that this behaviour is an “abomination before God”.

- *How can you help?*
Access to accurate information can assist people through this stage.

Disclosure to significant others

This involves disclosing gender difference or sexual orientation to significant others: spouse, partner, family members, parents and friends. Again this can be a difficult time, which can be made worse by a negative response.

- *How can you help?*

Individuals may benefit from assistance with preparing for coming out to others. They should consider how safe it might be for them to come out with a particular person or in a particular situation (like the workplace). They could practise this with a supportive friend before approaching others whose response they are uncertain of.

Exploration (internal and external) of identity and self-labelling

This stage may involve the exploration of various gender identities or sexual preferences. Knowing others who are open to various possible gender identities and sexual expressions is useful. This may involve exploring options for transition regarding identity, presentation and body modification (transgender) or a tentative expression of an alternative sexual orientation (for example: I thought I was gay, but now I realise I am also attracted to women, perhaps I am bisexual?). This is often a very dangerous phase for people as they can be experimental with relationships and/or abuse alcohol/drugs so that they reduce their inhibitions.

- *How can you help?*

It is hugely helpful to have an ally or allies who remain open to the process, and encourage the external expression of this exploration. However, they also need to be reminded about not putting themselves at risk. Information is therefore important – for example: how to have safer gay sex, etc.

Integration

The person is able to integrate and synthesise gender identity and sexual orientation with other aspects of identity and personal preference. They know who they are in addition to being LGBTI. They engage less in risk taking activities.

- *How can you help?*

On-going access to resources, information and the LGBTI community will support individuals in the quest towards integration. This stage of the process can take place for the rest of one's life. However, at some stage, one could dip back into exploration as other aspects of their orientation come to the fore – for example: bisexuality, etc.

This model is useful for those who identify LGBTI, but it is not only them who go through such a process – this model could describe any of us learning something about ourselves which we then have to accept and share with others - for example discovering that you are HIV+.



Group processing question

- *Any thoughts you have on this?*

One of the most dangerous places on this diagram (model) is the exploration phase. In many ways, this is like a late adolescence (teenage years) for people who are LGBTI because so many of them lost their adolescence because they were confused, uncertain and afraid to act on what they knew about themselves, like Miriam. When they eventually accept their identity, and come out to a few people, they start exploring relationships, much like we do in adolescence, but often without the controls of parents and communities (because they are older by the time this happens). It can be a dangerous experimental time of multiple relationships and not maintaining sexual safety. They most need our support at this time, rather than our judgement.

7. Summing up

(5 minutes)



There are many things we take for granted out of heterosexual privilege. It is good to think more consciously about what this means for ourselves and for others.

There are questions we have and it is good to ask them. However, we also need to be sensitive in what we ask those who identify LGBTI.

It is clear that there are many steps in the process of someone accepting their gender identity or sexual orientation, and it is good that we are supportive to them along the way. No one can tell another when, or with whom, they should come out, but we can support others through the process when they have made the decision.



Attending this workshop is only the start of your journey towards understanding LGBTI better.

“When people ask me who I am, I tell them that I am many things – a mother, sister, daughter, friend, woman activist and so much more. Yes, I am a sex worker, but that is not who I am, it is just what I do.”

Daughtie Akoth, *African Sexualities*

Optional Session: Looking Out – Everybody Knows a Sex Worker!



Time
3 hours 10 minutes

Session Plan

1. Introduction
(5 minutes)
2. Activity: Drawing a picture
(15 minutes)
3. The language of sex work
(15 minutes)
4. Knee-to-knee conversation
(30 minutes)
5. Activity: 20 questions
(60 minutes)
6. Role plays: What I think, feel and do
(60 minutes)
7. Conclusion
(5 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- unpack what their earliest memories and impressions were of sex workers;
- know that sex workers are widely varied in terms of sex and gender, education, age, economic status;
- understand where their own and other people’s prejudice stems from;
- cultivate a deeper understanding of the challenges faced by sex workers;
- stand in the shoes of a sex worker and build empathy;
- consider how they would think, feel and act in situations where sex workers are being discriminated against;
- advocate, at whatever level feels manageable, for a more humane, compassionate treatment of sex workers.

Materials

Flipchart and markers, prestik, plain A4 paper, art materials.

Handouts

Handout Session 6: Sex worker statements

Preparation

1. Ensure that participants have a pen and piece of paper ready for each participant to write down their responses to *Activity 5: 20 questions*.
2. Prepare a flipchart with the following questions:

- *How did it make you feel?*
- *How much choice did you feel you had as a sex worker?*
- *What were some of the challenges you faced as a sex worker?*
- *What are some of the things you might do to cope with this kind of work?*

1. Introduction

(5 minutes)

Explain to participants that group that is mostly marginalised and is therefore a very vulnerable group, is sex workers. They are particularly vulnerable to HIV and other sexually transmitted infections, but also to poverty, violence and abuse.



In this session, we are going to consider who sex workers are and think about some of the issues around sex work. Our starting point is, however, what we know, individually and collectively in the room, about sex workers and what attitudes we have towards them.

2. Activity > Drawing a picture

(15 minutes)



Close your eyes for a moment and exercise your imagination. When I say the words “sex worker”, what do you see?

Let the picture come spontaneously. Try not to analyse what you see too much, but think about sex, gender, age, ethnic or cultural background, race, clothing and general appearance.

Is the person a woman or a man?

What age?

Ethnic, cultural background, race?

What clothes are they wearing and how is their general appearance?

Now ask participants to draw what they have just visualised – allow time for creative expression. Make sure that participants have enough paper and coloured pencils, pens, crayons, etc. to be able to express freely. These can be passed around the room in a rotation so that everyone can enjoy each other’s art work and notice any of the patterns that emerge.

Discuss what emerges. Note that mostly we immediately assume sex workers are women. Ask why this is. Also discuss why sex workers are so discriminated against (consider gender norms and heteronormativity).

3. The language of sex work

(15 minutes)



*Sex work also has some discriminatory language attached to it. Can you think of a few of the derogatory, unpleasant words that are used for sex workers?
Prostitutes, hookers, slags, etc.*

The accepted term for “prostitutes” is “sex workers”, a non-judgemental term that focuses on the working conditions under which sexual services are sold. Sex workers include consenting female, male

and transgender adults and young people over the age of 18. Clients of sex workers may be called men/women/people who buy sex.

Transactional sex is where gifts, goods, favours or services are exchanged for sex. This may be situated in the form of a “relationship” which exists over time and where there is no pre-determined rate.

Commercial sex is the exchange of money or goods for sexual services.

Children under the age of 16 are considered to be victims of commercial sexual exploitation, unless otherwise determined (USAID definition). Teenagers 16–18 who sell sex are often referred to as “young people who sell sex”.

A new word is used for “pimps” – those who sometimes manage and benefit from the “sale” of sex. Perhaps you can think of other derogatory words that are used to describe pimps? “Pimps” are now sometimes referred to as “managers”. Programmes that have worked with sex workers around the world have discovered that managers can be a key to helping keep sex workers safe and healthy. Again this new term for them is neutral and removes the tones of judgement from the slang previously used.

4. Knee-to-knee conversation

(30 minutes)



Now choose a partner – someone you haven’t yet had a conversation with on this workshop. You are going to have a conversation with this person about what you have drawn and when you are talking, they should practise active listening skills – eye contact, minimum responses, head nodding, etc.

Explain to participants that the conversation will be guided by the questions you ask, and each person will be asked to talk on each issue.



- *Before the term “sex workers” what did you call these people, and where did you first hear these words?*
- *Under what circumstances did you first become aware of people “selling” sex? How did you feel about that? How do you still feel about sex as a commodity (i.e. something you can sell)*
- *Have you ever been called over/propositioned by a sex worker? What happened? What was your response/reaction?*
- *When you have talked about sex workers to others in casual conversation, what have you said?*
- *How do you feel about people who buy sex?*

Ask the partner pairs to join the main group.



Group processing questions

- *What is the story I tell myself about who sex workers are and why they do what they do?*
- *Who are sex workers then? (Are of any sex, class, race, age, migrant/local.)*
- *Do they have a particular appearance? Huge range of appearance – some dressed up to advertise and allure, others just like you and me, high end sex workers very glamorous, etc.*

- *Why do they mostly go into this work?*
- *Was there anything that surprised you about your own attitudes as you spoke to your partner about sex as a commodity and how you see those who buy it?*

5. 20 Questions

(60 minutes)



Everyone should spread out a bit and find a quiet place to sit. You will need a pen and paper at a later stage of the exercise, so have that ready

In this exercise, we are going to get a little deeper into the day-to-day lives of sex workers, the different layers of stigma and discrimination they may be experiencing and some of the factors that lead men and women into sex work. We are going to start by hearing a story - a true experience of a sex worker.

*My name is Meide and I am a sex worker. I live in Sonderwater...it's in Katutura township. Sonderwater means "without water" and there is no water there. I have to walk to the *shebeen to buy water every day for my kids. I have two kids and I don't know what my life would be without them. Dama is 3 and Robert is 7 years old. Robert started his grade 1 this year and I am so proud. It is difficult to find school fees but he must have a better life than me. I want him and Dama to live in a big house one day with me.*

My father died when I was very young and my mother had to give me away so I went to live with my aunt and uncle. They didn't want to send me to school and they kept me at home cleaning and taking care of their kids. I wanted a chance to go to school so I ran away from them.

It was very scary living on the street but I made some few dollars selling sweets and cigarettes by the side of the road. It wasn't enough for my school fees though and I got kicked out. That was when I met an uncle at the shebeen. He said if I took care of him he would give me money so I went with him. He drove far out of town to the bush and when he stopped he told me to have sex with him. I did everything he told me to do. Afterwards I asked for my money and he hit me. "Are you crazy? You think I must pay for sex?" After that he raped me twice and then he left me in the bush. I had to walk home and it took me three hours. Nine months later I gave birth to Robert and my dreams of school were finished.

*At first I didn't want to do sex work because of what happened when I was 15. But when I went to the clinic I found out that me and Robert were HIV positive. I had to buy formula and pay for trips to the clinic and find a *kambashu to live in. I had no choice. I even tried to find a job as a cleaning lady but they wanted people with a Grade 10 certificate.*

Sex work can be very dangerous. I normally charge N\$40.00 (USD3.00) for sex. Many of my clients say they will pay me double or even triple for sex without a condom. If I don't have food in my house what can I do? I have to say yes. There are also those who drive us out of town and leave us there just like Robert's father. Once a client drove away with my clothes and I had to use a plastic bag I found in the bush to cover my breasts as I walked home. I felt very ashamed. And the police. I am very afraid of them; they beat us and take our condoms. Sometimes they even arrest us and demand sex for us to be released. But there are good things too. I have two best friends who work with me and we keep each other safe. And sometimes I get a really nice client who will buy me clothes or food for the house.

Sex work is very hard but it is work. It puts food on my table and pays for my kids to go to school. The people in the community don't respect me but they also don't help me so I don't care what they think. I used to drink

a lot because it gave me confidence to do my work. But now I have stopped. I am proud of my work and I am very hopeful for my future. One day my kids will be educated and they can buy that big house. Maybe I can even help those other girls like me, or the elderly people in my community. For me life has been tough, but for my kids it will be better.

**A shebeen is an informal bar often found in townships and rural areas in Namibia.*

**A kambashu is a tin shack which many Namibians live in both in townships and in rural areas.*

Feel free to substitute the above terms for the terms that are local in your city to add authenticity to the story.

Now ask participants to spend just a couple of minutes thinking about some of the details that stood out for them in Meide's story. They might like to write this down.



Now, we are going to play a game of 20 questions and during this exercise, I would like you to think carefully about each answer you give and try to make them as realistic as possible. You can write down your answers on the piece of paper in front of you. I would like you to close your eyes for a second and imagine that you are a sex worker in an environment you may know a little about. I would like you to take a moment to give yourself a name. Is it your own name? Or will you give yourself a new name?

This person will probably not be us as we are right now, with perhaps an education and even a job, but under different circumstances. If we had been born into a different life, this could be any of us. You need to use your imagination to create this person.

NOTE TO FACILITATOR

These questions need to be read very slowly. In some cases, you are asking participants to add up costs, etc., and this will take time. Be aware that some questions will need more time than others.

1. *What is your level of education?*
2. *How many children do you have?*
3. *Imagine yourself in your home. Who else is there? What kind of place is it? Where is it?*
4. *How much are your basic costs each month? Food, rent, school fees?*
5. *Have you tried to find other work?*
6. *Why couldn't you find work?*
7. *What made you turn to sex work?*
8. *How did you feel after your first customer?*
9. *Is this work easy or hard for you?*
10. *What do you do to cope with the kind of work that you do?*
11. *Where do you work?*
12. *Is your work dangerous?*
13. *How open about your work are you with family and friends?*
14. *What are the laws regarding sex work in your country?*
15. *How do you feel about the police? Do the police make you feel safe?*
16. *How do you protect yourself from dangerous clients?*

17. *Do you feel that you are at high risk of contracting HIV?*
18. *What do you do when clients offer you more money for sex without a condom?*
19. *How much do you charge mostly?*
20. *How much do you want to earn each month from your sex work business? How much will you have to work to earn that? How many clients would you need to have in each month to cover your basic costs?*

Tell participants to break into pairs and take some time to tell each other about the character and scenario they have created. Use the questions written up on the flipchart to guide your discussion.



Pair work

1. *How did it make you feel?*
2. *How much choice did you feel you had as a sex worker?*
3. *What were some of the challenges you faced as a sex worker?*
4. *What are some of the things you might do to cope with this kind of work?*
5. *Give each person 3 minutes to tell their partner about the character they have created.*

Now move into plenary and allow participants to discuss how it felt to take part in the exercise.



Group processing questions

1. *How easy did you find it to imagine the life of your character?*
2. *Did anything surprise you about the answers you wrote down?*
3. *Do you feel that this work is easy or hard?*
4. *Should sex work be illegal? What about buying sex?*
5. *Why do you feel it is so easy for us to judge sex workers?*

6. Role plays – what I think, feel and do

(60 minutes)



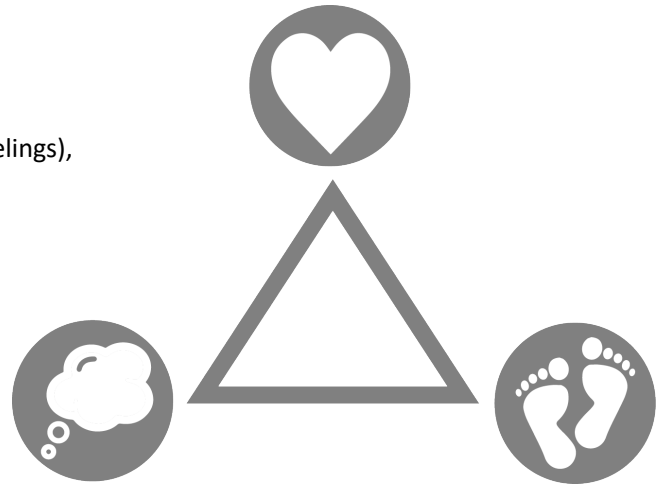
We are going to do an exercise that challenges us about how we respond to situations involving sex workers. We are going to do some role plays – you can refer to these in your handout.

Distribute the *Role play scenarios*.



In every situation we have feelings about what is happening, and logical thoughts, and then these prompt us towards certain behaviours.

Draw this diagram on a flipchart – a triangle with a heart (feelings), a thought bubble (thoughts), and two feet (behaviour).



Explain that you will divide participants into groups to conduct role plays on a particular scenario. Before they plan the scenario they should read it and consider:

What do you feel about the situation?

What would you think in the situation?

What would you do about it?



You have 15–20 minutes to think this through, and then 5 minutes to do your role play.

Your 19 year old niece has gone to study in the city. You know she is short of cash, but don't feel in a position to help out. Then your sister calls to say she has come home and is pregnant. She has confessed to her mother that she has no idea who the father is as she has been working as a sex worker to pay for books and clothes and food. She hasn't yet tested for HIV. Your sister asks you to come and help tell her father.

Role play this situation.

Your children keep talking about the slutty ladies who are hanging out at the corner of your road.

Role play the situation and how you resolve it with the children.

Your colleagues talk jokingly and derogatorily about a transgender woman who is a sex worker. She gets her condoms from your organisation. You hear them laughing even before she leaves the office on one occasion.

Role play the situation and how you respond to it.

When you are taking a family member to the emergency room at the hospital you witness a nurse scolding a sex worker who has come in because of a violent attack. She tells her to clean herself up, that she is "dirty" and it is no wonder men want to beat her up.

Role play this situation and how you respond.

A male sex worker reports to your organisation that he is being harassed and threatened by the police. Last time they arrested him they locked him up and then demanded sex to release him.

Role play the situation where you advise him what to do.

Debriefing

Debrief each situation, remembering to refer to people's thoughts, feelings and behaviour. Ask the group if there were other ways of handling the situation.

At the end of the role plays ask the following questions:



Group processing questions

- 1. What struck you as being one of the most difficult things about being a sex worker?*
- 1. Why is this?*
- 2. What situation challenged you the most personally? Why?*
- 3. What stops us from getting involved in situations like this?*

7. Conclusion

(5 minutes)

Each of us as a human being is complex, and each of us wears many identities: mother, dancer, activist, lover, brother, sister, friend, child, etc. It is the same with sex workers. Sex work is hard work, but it is work. It is work that puts food on the table and pays for children to go to school. It is work that does not define the person doing it.



From these exercises it is possible for us to stand in the shoes of a sex worker and hopefully understand some of the complexities, difficulties and dangers faced by sex workers on a daily basis.

We do not have to agree with how people live their lives in order to empathise, but it is important to try to understand.

*“The opposite of addiction is not sobriety;
the opposite of addiction is connection.”*

Johann Hari

Optional Session: Looking out - How Do We Cope? (PEOPLE WHO USE DRUGS)



Time

3 hours 10 minutes

Session Plan

1. Introduction and language
(30 minutes)
2. What substances do we use, and
what activities do we engage in
compulsively?
(30 minutes)
3. Activity: Mind mapping our
experiences
(50 minutes)
4. Common ideas and
misconceptions about
people who use drugs
(45 minutes)
5. What is harm reduction?
(15 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- use non-discriminatory terminology when speaking about PEOPLE WHO USE DRUGS;
- identify the various types of substances we use to take away pain;
- map their own experience with addiction and people who use drugs;
- build empathy for people who use drugs.
- identify common myths and misconceptions about people who use drugs;
- understand the basis for the harm reduction approach

Materials

Flipchart and markers, prestik, plain A4 paper, coloured card, coloured pens/pencils/markers/crayons/pastels (anything suitable to draw in colour with).

Preparation

1. Prepare a flipchart with the following questions for Activity 3: *Mind mapping our experiences*.

- Write about your own problematic relationship with a substance or activity.
- Who have you known who struggles with an addiction?
- How do you feel about people who use drugs and where did these attitudes come from?

2. Print the three posters with icons for *Activity 1.1: Facebook time*.



3. Print out the 18 statement cards (*see over the page*). You will need for the *Facebook Time!* activity in section 1.

My friend's brother uses drugs – what a stupid choice	I wish my friend would have the discipline to stop using drugs	I can't understand why my friend is addicted – she comes from such a happy home
I've unfriended my stoner friend – who wants to be friends with a criminal	My mom takes her prescription meds every day – under doctors' orders – so don't go telling me she has a problem!	When will people realise that rehab is the ONLY way to get clean
Keep strong, my friend, don't let your relapse derail your road to recovery!	My colleague is amazing – manages to work with a hangover and no one notices the quick visits to the pub at lunch time	I'm standing with my friend and learning all I can about addiction. He needs my friendship through good and bad days
Time to practice tough love and refuse to be part of his life	Coffee, coffee, coffee – can't get through the day without my coffee?	Relax people, weed is habit forming and not addictive
Using a drug does not mean you have an addiction or a problematic relationship with drugs	Saw an old school friend – heard that she was into the illegal stuff – no ways!	She was smartly dressed and drove a Mercedes
You're either clean or on drugs!	I'm not going anywhere near that drug user, I don't want to get AIDS	I have severe back pain and so I'm grateful for my daily over the counter pain meds

1. Introduction and language

(30 minutes)

Explain to participants that a group of people who are often overlooked and vulnerable is the group of people who use drugs. In this session, we are going to share what we know about this group and think about challenges they face and issues that are particularly significant for them.



We need to first consider some of the non-prejudicial language that should be used in the world of people who use drugs. What role does language play in breaking stigma and discrimination?

(Using non-judgmental language helps us see the person and not the problem; it's a way to destigmatise that anyone can use – it doesn't cost us anything and it builds connections and empathy.)

For this reason, it is vital that we be aware of our language and choice of words.

Tell participants that we'll start by identifying some of the words that show prejudice. On a flipchart, write "Derogatory terms" at the top of one column, and "non-prejudicial words" at the top of a second column.

Ask participants to give you some of the words that are used that might be considered problematic – labels that feed into a negative space. Write these words in the "derogatory" column (*junkie; druggie; stoner; dope head; addict; etc.*). Encourage participants to think about the slang words that are used in their community.

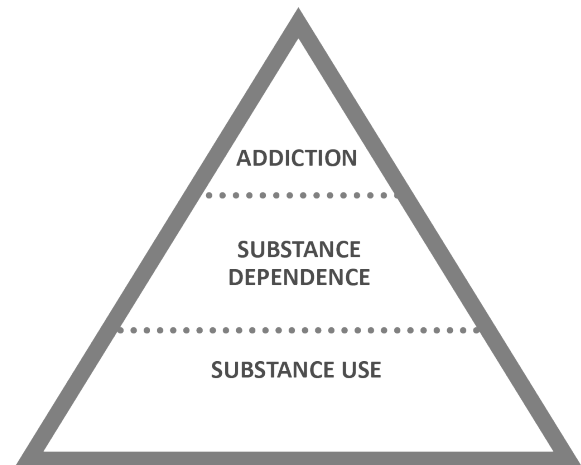
Then ask participants to suggest words or terms that are dignified, humane and respectful (*saying "person who uses drugs" rather than the label "addict" or any of the other disrespectful labels*) and write these up in the "non-prejudicial terms" column.

Tell participants that there are a few important phrases we should know that indicate different levels of usage and addiction.

The first is **substance use**. Some people use drugs (like dagga) and many of us use a wide range of other substances without too many negative outcomes. In the next exercise, we will consider what some of these are. Sometimes they are habitual, for example a cup of coffee to start the day.

Substance dependence suggests that the person needs the substance regularly or repeatedly, and this may impact quite heavily on their lives. Stopping use is often difficult and results in withdrawal symptoms.

Addiction is the habitual and compulsive surrender to a substance or an activity. This can include food, alcohol, sex and shopping. Drug addiction is a chronic, often relapsing brain disease that causes compulsive drug seeking and use, despite harmful consequences to the drug addict and those around them. Drug addiction is a brain disease because the abuse of drugs leads to changes in the structure and function of the brain.



Substance use disorder is an official psychological term used to describe addiction to psychoactive drugs. **People who use drugs** or **people who inject drugs** are the official terms recommended when we speak about PEOPLE in the Harm Reduction Approach.

Some people don't like the term addiction and prefer to use the broader term "having a problematic relationship with a substance or activity."

The language of addiction and people who use drugs continues to evolve and change as we learn more about this medical condition. The phrase "*Maria is in recovery*" which implies that Maria is reducing substances to a safer level, is a helpful way to talk about someone who is moving towards dealing with their problematic relationship with a substance.



What are some ways to keep up to date with the latest information?

(add your name to the mailing list of organisations in your area who target PEOPLE WHO USE DRUGS; attend workshops – such as this one!; read blogs; be attentive to how people use terminology; etc.)

2. What substances do we use and what activities do we engage in compulsively?

(20 minutes)



Let's name some of the substances we use and some of the activities we engage in compulsively.

Write participant's responses up on a flipchart. They should include at least the following:

- alcohol;
- cigarettes;
- food;
- pornography;

caffeine;
heroin;
ecstasy;
weed/cannabis;
prescription medication;
sugar;
cocaine;
sleeping tablets;
sex;
shopping;
gaming;
social media.



Why do we do these things?

Sometimes they are habitual (a glass of wine at the end of the day) and sometimes they can help us to cope (again, a glass of wine every evening, a shopping spree after a bad week, many cigarettes when under stress).

When you see these up on the wall, is there anything you have a problematic relationship with?

When does a habit become an addiction?

3. Mind mapping our experiences

(50 minutes)

Step 1: Facilitator to model first

(10 minutes)



We are now going to explore our personal experience and attitude towards problematic substance use and people who use drugs. The technique we will use is mind mapping, a powerful tool that helps us unlock what is happening in our heads and our hearts. To begin with I am going to create my own mind map and this will give you an opportunity to see how this technique works.

Facilitator to model drawing a mind map and explain the process (see a simplified example in the facilitator notes on Mind Maps). Use personal experience, feelings, show your history and attitude and learning. Try and link it in with HIV. The facilitator notes will help and guide you in the process.

Step 2: Participants draw their own mind map alone

(15 minutes)

Hand out to each participant:

- A4 paper.
- Colour crayons; markers; felt tip pens; pencil crayons; pastels (anything suitable and colourful for writing and drawing).

Put up the flipchart you prepared with the list of guiding questions:

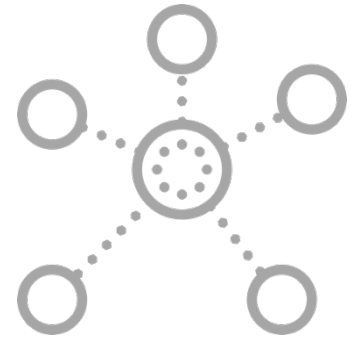
- Write about your own problematic relationship with a substance or activity.
- Who have you known who struggles with an addiction?
- How do you feel about people who use drugs and where did these attitudes come from?



You are now going to have the opportunity to create your own mind maps. We have some guiding questions to help you through this process. Use them only if you find them helpful.

It is important to start with the personal – ME. And brainstorm your experiences and then move onto who you have known and the broader environment around you. Explore the linkages between personal experience and what you have been told or what you know.

Give participants 15 minutes to draw their mind map. Tell them that afterwards they will have the opportunity to share their mind map in small groups.



Step 3: Sharing our mind map (10 minutes)

After 15 minutes, tell participants that if they have not fully completed their mind map, they are welcome to finish it off during the break, or this evening.

Ask participants to get into pairs and give them 5 minutes or so to talk through their mind map. This is a great chance to practice listening skills!

Step 4: Plenary (15 minutes)

Invite participants to join the main group again.



Group processing questions

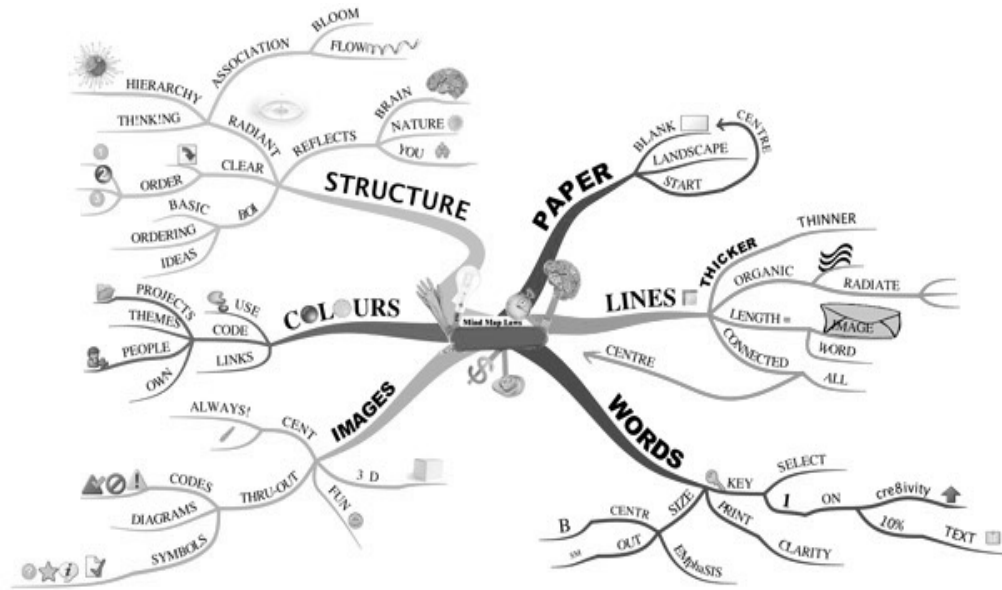
1. What stood out for you?

4. What new things surfaced for you in your own story?

What did you learn from hearing other people's stories?

It seems that we are often afraid of drugs and alcohol. What is it that we are afraid of?

FACILITATOR NOTES: Mind mapping

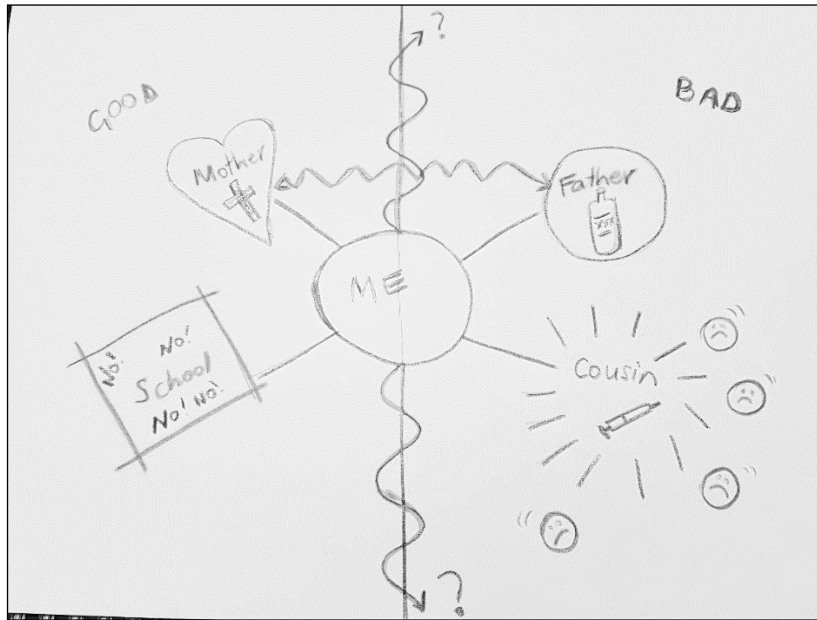


Learning how to do a mind map is a great skill for a facilitator to have. Mind maps are visually powerful and can unlock creativity and help us learn. They can be used to make study notes; plan a project; brainstorm a problem; prepare for presentations; anything that needs to be structured, analysed or understood. The following information will help you learn this skill. There is even a free course on mind maps available on <https://imindmap.com/how-to-mind-map/> if you would like to learn more about this valuable and useful technique.

1. Use ONE KEY WORD PER LINE. Why **Because single key words give your Mind Map more power and flexibility.**
2. Use IMAGES throughout. Why **Because each image, like the central image, is also worth a thousand words.** So if you have only 10 images in your Mind Map, it's already the equal of 10,000 words of notes!

Reference: <http://www.tonybuzan.com/about/mind-mapping/>

You will be required to model this mind mapping technique to participants. Here is a very simplified example of how to use this technique in relation to our topic



I began with me at the centre and explored my relationship with substance abuse and people who use drugs. The two main people in my life growing up were my mother and father. My father was an alcoholic. I did not realise this for a long time but I saw that he and my mother did not have an easy relationship – it was very up and down and caused great stress to me. I decided that alcohol is BAD. My mother was strong in her faith and judged people who did not “show discipline” and she shunned anyone who drank too much or who took drugs. She was the GOOD person in my family.

At school, we were given talks and had to watch videos on drug abuse. They were frightening videos and all I remember was the words NO – no to drugs, no to sex, no to alcohol. This meant that I was terrified that one drink or one experiment with smoking or taking drugs would lead me to a terrible and BAD place.

Our family was very ashamed of one of my cousins who “lost the way” and became a heroin addict – shooting into the veins. My aunt and uncle and my other cousins said it was like having a bomb going off in the family – where everyone is hurt and affected. My aunt and uncle got divorced because of the stress of having an addicted child and they were always fighting about what to do with my cousin. We stopped visiting the family

– I think my mum was worried that I might get drugs from my cousin.

Drawing this mind map made me realise that I have divided my map into two parts – the GOOD and the BAD. The squiggly lines going up and down the dividing lines is me struggling between GOOD and BAD. I realise that

I have believed a lot of lies about my father and my cousin because of my own prejudice. Life cannot be divided into GOOD and BAD – none of us is perfect and all of us want to be treated with dignity.

4. Common ideas and misconceptions about people who use drugs

(45 minutes)



*Now that we have delved into our own experiences and have a better idea of our feelings around substance abuse and people who use drugs, let's unpack some common ideas and preconceptions about **PEOPLE WHO USE DRUGS**.*

Start by introducing the Johann Hari quote. Ask what people think this means. Introduce this section talking about his TED talk and the ideas that emerge from that.



Johann Hari is a journalist who grew up with many loved ones who struggled with addiction. He wrote the book "Chasing the Scream". He also has an excellent TED talk that everyone should watch if they can. Here is the link:
[www.ted.com/talks/johann_hari_everything_you_think_you_know_about_addiction_is_w
rong](http://www.ted.com/talks/johann_hari_everything_you_think_you_know_about_addiction_is_wrong)

His talk is entitled "*Everything you think you know about addiction is wrong*". For instance, in the past we believed that if someone tried an opioid substance like heroin once or twice, they would be addicted. Hari points out that the Vietnam war proved this theory wrong. Many American troops used heroin to cope with the significant stresses experienced in that war. There was a growing concern that they would return to America after the war and continue to be addicted. What happened, was that they returned and most of them were able to stop using. Once they were back in safe, happy home environments they were able to give up heroin.

He also mentions some experiments conducted on rats. A rat was put in a cage and given a water feeder and a feeder with heroin in it. Very soon the rat found the heroin and consumed it greedily until it overdosed. Another researcher pointed out that a single rat in a small and empty cage was not a very happy environment for a rat. The experiment was taken further with a cage that was "rat heaven". Lots of rats were in the cage, there were activities and rats could run around and interact with each other. They could have sex and babies and get exercise. The rats did not touch the heroin.

Ask the group what they think this might mean.



Hari finishes by telling us that what people who are battling an addiction need, is to be told "We love you. You are not alone".

Any thoughts on this?

Activity > Facebook time!

(45 minutes)

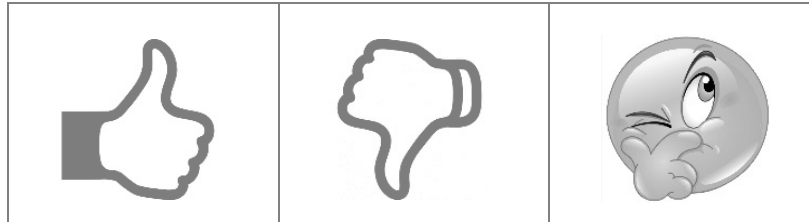
Place the emoticon posters you prepared on the wall in three places around the room with enough space below and in between each emoticon so that participants can post cards under each poster.



We live in a time of social media where fake news and real news can be very confusing. I want you to now imagine that you are on Facebook and checking out

what's happening. A friend has posted a comment and you decide to react to the comment in one of three ways.

Point to each emoticon as you explain:



Thumbs up (yes, I agree).

Thumbs down (no that does not seem right).

The questioning emoticon (I can't decide – is this true or false? I'm not sure if I agree or not).

Place the prepared cards and some prestik on the front table and invite participants to come to the table.



Each take one card – it will have a comment posted by your “friend”. I want you to read the comment and imagine how you would react using one of the three responses. Think about the words used and the ideas shared.

Then go to that poster and place your card under the emoticon that matches your reaction.

Discuss in plenary. Note that it's more important to have a discussion than to be prescriptive about facts; engage in some of the language used and notice if it's derogatory. Go to each “comment” card and ask:



Group processing questions

1. Do you agree with where this comment has been placed?

If yes, why?

If no, why do you think this should be moved?

“Comments” cards:

My friend's brother uses drugs – what a stupid choice.

Initially it might be a choice but after a while it becomes an addiction and the changes in the brain from repeated use of the substance make it very difficult to stop using the substance.

I wish my friend would have the discipline to stop using drugs.

The body needs the substance to feel normal; the body's craving for the substance will overrule the person's ability to control the craving; addiction means that the friend will carry on using drugs, no matter the consequences.



I can't understand why my friend is addicted – she comes from such a happy home.

Drug use is seen in all walks of life; a happy home does not mean that you won't have a need to cope with pain; we don't always know what people have to deal with – a home can look happy from the outside.

I've unfriended my stoner friend – who wants to be friends with a criminal?

Addiction is something that impacts everyone and does not make the user a criminal.

My mom takes her prescription meds every day – under doctors' orders – so don't go telling me she has a problem!

Some prescription medications have potential for misuse and addiction, e.g. certain sleeping pills.

When will people realise that rehab is the ONLY way to get clean.

Research has shown that a long term holistic harm reduction approach is better than a one off spell in rehab. Rehab may be a part of a long term strategy to recovery. Remember "clean" suggests that the opposite is "dirty" so rather say "...only way to stop using drugs".

Keep strong, my friend, don't let your relapse derail your road to recovery!

Relapse is a normal part of recovery; it can be a useful time to make some changes in the strategy for recovery.

My colleague is amazing – manages to work with a hangover and no one notices the quick visits to the pub at lunch time.

One can have a problematic relationship with substance and continue to work; being able to work does not mean that the person does not have a problem or addiction.

I'm standing with my friend and learning all I can about addiction. He needs my friendship through good and bad days.

You can't force someone to seek help or start a journey to recovery, but standing with the person can help them feel supported when they do make a decision about recovery.

Time to practice tough love and refuse to be part of his life.

Staying connected helps the PEOPLE WHO USE DRUGS feel supported; healthy boundaries are good; becoming knowledgeable about addiction will help.

Coffee, coffee, coffee – can't get through the day without my coffee!

We all have our ways of coping with the pain of everyday life, and caffeine addiction is one way.

Relax people, weed is habit forming and not addictive.

Using weed habitually raises the risk of addiction.

Using a drug does not mean you have an addiction or a problematic relationship with drugs.

True – there are other signs that point to addiction such as losing a job; unsuccessful attempts to stop, etc.

Saw an old school friend – heard that she was into the illegal stuff – no ways! She was smartly dressed and drove a Mercedes.

Substance abuse and addiction is seen in all groups of people – no matter gender, sexual orientation, race, ethnicity, employment or economic status.

You're either clean or on drugs!

Recovery is a journey and not as simple as one or the other; better to say “not using drugs” or “using drugs”.

I'm not going anywhere near that drug user, I don't want to get AIDS.

People who Inject Drugs are more susceptible to HIV infection – shared needles; struggle to access health care – but being a person who uses drugs does not mean you are living with HIV.

I have severe back pain and so I'm grateful for my daily over the counter pain meds.

We can become addicted to over the counter medication.



Group processing questions

1. *What have we learned about people who use drugs?*

(They come from all walks of life, can lead to addiction which is a disease.)

5. *Why do you think women who use drugs are often judged differently and treated differently than men? (Gender stereotypes that suggest that women should be “better behaved” than men and therefore are judged more harshly when they do put a foot out of line).*

6. *What is it that you would want to say to a person who uses drugs? (Empathetic response – I am here for you; I see your pain.)*

5. What is harm reduction

(15 minutes)



We've explored our own attitudes and learnt something about the perceptions and misperceptions about People who Use Drugs, and we've discussed the ways in which we use drugs. Let us now look at the options available to people who use drugs, should treatment be sought out.

What help or treatment options do People Who Use Drugs have?

Rehabilitation; incarceration for illegal drug use.

What do these interventions look like?

Aimed to break down the person and begin to build them up again; confrontational; intensive treatment; focus on abstinence; taking away individual choice; punitive; tough; repressive; removing the person from their community.

How successful are these interventions?

Less than a quarter of people admitted to rehab continue to abstain over a 5-year period; have not reduced use of drugs.

The term “harm reduction” gives a clue about this approach to treatment. What do you understand by the term “harm reduction”?

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use, for both the individual who uses drugs and for the broader community.

Service providers attempt to take the services to places where people who use drugs congregate through outreach (mobile clinics; peer educators and outreach workers). Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs. See facilitator notes for deeper discussion.



- *What are some of the activities usually included in a harm reduction strategy? (see text box for ideas)*
- *What are the attitudes of a harm reduction approach?*

It is a humane approach which recognises that even though you use drugs, you are still a valued person and offering non-judgemental and respectful support. Often services go to the places where people who use drugs are. Whenever possible, including People Who Use Drugs in the work, consulting them; “nothing for us, without us”. Doesn’t tell people they must give up using drugs. People are ready for this in their own time. Instead, encourage them to come down a notch in the hierarchy of risk with regard to the drugs they use – so rather smoke weed/dagga or cigarettes than inject, etc. Keep connection going as best you can. Also, set clear boundaries around supplying money and tolerating behaviour that is not okay (stealing, etc.). Say “we care about you”. It is empowering of people who use drugs and recognises the past trauma and the intersectionality of issues of poverty, gender, race, sexual orientation and gender identity and how these impact on people’s choices.

FACILITATOR NOTES: Harm Reduction

Harm Reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

Harm Reduction incorporates a spectrum of strategies from safer use, to managed use, to abstinence to meet people who use drugs “where they’re at,” addressing conditions of use along with the use itself. Because harm reduction demands that interventions and policies designed to serve drug users reflect specific individual and community needs, there is no universal definition of or formula for implementing harm reduction.

The following principles central to Harm Reduction practice:

- Accepts, for better and or worse, that licit and illicit drug use is part of our world and chooses to work to minimise its harmful effects rather than simply ignore or condemn them.
- Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviours from severe abuse to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others.
- Establishes quality of individual and community life and well-being – not necessarily cessation of all drug use – as the criteria for successful interventions and policies.
- Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.
- Ensures that drug users and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.
- Affirms drugs users themselves as the primary agents of reducing the harms of their drug use, and seeks to empower users to share information and support each other in strategies which meet their actual conditions of use.
- Recognises that the realities of poverty, class, racism, social isolation, past trauma, gender discrimination and other social inequalities affect both people’s vulnerability to and capacity for effectively dealing with drug-related harm.
- Does not attempt to minimize or ignore the real and tragic harm and danger associated with licit and illicit drug use.

Source: *The Harm Reduction Coalition* (www.harmreduction.org)

As we have come to the end of this session for understanding PEOPLE WHO USE DRUGS better, what has been an important new insight for you?

“My disability exists not because I use a wheelchair, but because the broader environment isn't accessible.” Stella Young

Optional Session: Looking out: the Dis-enabling World



Time
3 hours

Session Plan

1. Introduction: What is a disability?
(15 minutes)
2. The disability spectrum and exclusion
(60 minutes)
3. Why do people discriminate?
(45 minutes)
4. Drawing Activity: My experience
(40 minutes)
5. The Bigger Picture
(20 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- Understand the non-prejudicial language used when talking about disability.
- Identify a wide range of impairments and say how these exclude people from aspects of life.
- Articulate why some of the common myths and stereotypes we understand about people living with disability are not correct.
- Describe how they might enable close friends and family living with a disability to be better included.
- Appreciate that lack of accessibility sometimes denies people living with a disability their unalienable human rights that everyone has.

Materials

Flipchart and markers, prestik, art materials, A4 paper

Preparation

1. Prepare 4 posters with the following headings:
 - Physical Impairment
 - Sensory Impairment
 - Cognitive Impairment
 - Mental Health Impairment
2. Cut up the “Myth” A5 cards and the same number of blank A5 cards.

1. Introduction: What is a disability?

(15 minutes)



In this session we are going to consider the lives of people living with disability, the challenges they experience with social exclusion and how we might engage with them in ways that are more inclusive; in ways that let them know that they matter.

Here are two important words to start the process:

Write up **IMPAIRMENT** and **DISABILITY** on the flipchart.

Ask the group if they know the difference between these two words.

Explain that an **IMPAIRMENT** is the word used to describe what makes an individual different from others.

DISABILITY, on the other hand is used to describe the affect or impact that an impairment has on an individual's ability to participate in society.



An incredible thought is that if we were able to remove all the barriers to participating and engaging with the world, people would have impairments, but they would NOT be disabled.

Write up the following on the flipchart:

IMPAIRMENT + BARRIER = DISABILITY

IMPAIRMENT + ACCESSIBLE ENVIRONMENT = INCLUSION



In terms of non-prejudiced language, we talk about people living with disability or people with disability, emphasizing that they are PEOPLE first. It is better to avoid acronyms as these also de-personalise.

2. The disability spectrum and exclusion

(60 minutes)

Brainstorm

(20 minutes)



There are many kinds of impairment and these fall into 4 categories:
Physical (like missing a limb, organ or having a system that doesn't work very well)
Sensory (where one of the senses like sight or hearing is impaired)
Cognitive (intellectual challenges)
Mental health (a range of conditions that affect your mood, thinking and behaviour like Depression).

Take a look around the room. There are 4 posters already on the wall with these four different kinds of impairment written, and two columns. Each group should brainstorm as many different kinds of impairment they can think of under that

category. In the column next door, they should identify what challenges that group would face in terms of participation in all aspects of life. You should consider things like social and family life, education, access to health services, employment etc. Also think about the impact of gender on disability. Is it different for a woman living with a disability than for a man? Are there particular impacts – for instance forced sterilization of a woman living with disability.

Divide participants into four groups.

Give 20 minutes for the brainstorm

Group Presentations

(20 minutes)

Each group should have 5 minutes to present back to the rest of the group using their poster.

Plenary Discussion

(20 minutes)



Group processing questions

Point out to the group that it is quite difficult sometimes to work out what might be a disability. Some of these are visible and obvious (like physical or sensory disability) and some can be more hidden, like mental health. The degree of an impairment also impacts on how excluded one is. There are issues like short term and long-term impairment too. So, one might have debilitating Depression for some years, and then, with the help of counselling and medication, find that it is under control for decades. Some people are born with an impairment; for others it comes through accident, illness later in life or aging.

The other challenge is that people many times do not self-identify as having an impairment or disability.

- 1. What do you think might stop people identifying for themselves or for others, that they have a disability?*
- 2. What is the impact of not realizing this, or denying that they are struggling with a disability?*
- 3. What do you think the impact is of being excluded from all these activities – almost from life itself?*

3. Why do people discriminate?

(45 minutes)

Explain that discrimination is often based on mistaken ideas and stereotypes that one group holds about another. This exercise helps to unpack what some of these are.

- Distribute three A5 myth cards to each of the groups they used in the previous activity.

- They should discuss the myths and consider the questions below. Write these on the flipchart. Give 15 minutes for this discussion.

In their groups they should discuss these questions:

- What is the underlying reason for this view? (e.g., fears, cultural and religious attitudes, ignorance).
- How does this view impact on how people with disability are regarded and treated by their families, and their communities?

Then distribute three blank A5 cards and ask them to write up what the “truth” is.

Put the headings “Myths” and “Truth” on the wall and gather the participants around. Invite participants to read out each myth together with the truth and put up alongside each other on the wall. Give 15 minutes for this.

Once they are all up on the wall, ask the group if there are any of these they would like to discuss, or add to.

Choose a few myths and ask,



Where does this particular myth come from?

What is damaging about that myth?

Are there any other myths our community has about people living with disability?

NOTE TO FACILITATOR

The following table includes some commonly held myths and truths about people with disability, but there are likely to be very local and specific ones which might surface. These would be worth discussing with the group.

MYTHS	THE TRUTH
People living with disability cannot be self-sufficient. They are excessively dependent.	<i>With the right equipment and support most people can live very self-sufficient lives.</i>
People living with disability are to be pitied.	<i>People living with disability can lead full and productive lives and do not wish for pity.</i>
People living with disability are cursed and disability is a punishment for evil.	<i>A wide range of sound medical reasons determine that some people live with disability.</i>
People living with disability are bitter because of their fate.	<i>Many people are deeply resilient and accepting. They are positive and wish to live happy lives. They are proud of the special skills they have developed to compensate for the impairment they have.</i>
People living with disability are better off at home	<i>We all need to be out in the world to socialize and take part in community life. They wish to be engaged in meaningful work to support themselves.</i>

People living with disability cannot work.	<i>There are some jobs that would be difficult to do with a disability, but often with the right devices or modifications and support, people are able to hold down a wide range of jobs.</i>
People living with disability cannot have a family/cannot be good parents.	<i>Many people living with disability find loving and warm relationships and with support are able to have children and raise them as well (and maybe sometimes better than) many who are not living with a disability.</i>
People living with disability are asexual.	<i>Many are able to have rich and happy sex lives. Sometimes it is our idea about what sex is that needs to change - sex can be as varied as the people who have it!</i>
People living with disability need to be cured and “fixed” by medical professionals	<i>Many see their disabilities as part of themselves and they compensate or find ways of living with the disability.</i>
People living with disability need special educational programmes	<i>Many integrate very successfully into the average school programme, particularly if schools are open to providing access. Everyone benefits from the diversity.</i>
People living with intellectual disabilities are naïve, like children, and cannot make any decisions for themselves.	<i>They can make good decisions for themselves when given a chance.</i>
People living with mental health disabilities are dangerous/a threat/violent.	<i>Most are not a threat to anyone else.</i>

4. Drawing Activity: My experience

(40 minutes)

Drawing a portrait

(15 minutes)



Now that we know the spectrum of disabilities, you might have a better sense of those around you who are living with a disability. We would like you to think of someone who is close to you who is living with a disability. They may be family or a friend, neighbour, or someone in the community. They may be self-identified, or not.

To kick start this exercise, the facilitator should share their own pre-prepared portrait of a family member or friend.



Spend a few minutes drawing a portrait of them in your diary. You may use the art materials supplied. Don't worry about doing a fancy or artistic portrait – this exercise is not about that!



Then:

On the left side of the portrait, name all the skills, abilities, and strengths that person has.

On the right side, name the things that they are excluded from.

Underneath the portrait, name the ways in which they could be better included in society.

Consider also what you might do to ensure they were better included.



Pair Work (10 minutes)

In pairs they should each share their portrait with another person and then swap around. Give 5 minutes each.

Group Processing

(15 minutes)



Group processing questions

1. *What reflections did you have while you were doing this exercise?*
2. *What did you notice about the skills you were able to identify in this person?*
3. *What are some of the things we can do to make the people around us more included?*

5. Bigger Picture

(20 minutes)

Read the following true story to the group and use the questions for a discussion afterwards. It is important to leave the group with a bigger human rights picture as well as the focus on what they can do at a local and micro level in their homes, families, communities, and workplace.

A short Story

When John was eight, he had a bad bout of German Measles which left him with great trouble walking. He really battled to walk the long distance to school and sometimes he fell over. He also developed epilepsy, which meant that he often had seizures. These happened when he was at school, and this was frightening for him and for everyone else. It was hard for him to concentrate in class, and no one would sit next to him. Together with his parents, the decision was made that he would stop going to school in the latter part of his primary school years.

It was hard being at home and he and his mother wondered what his future would hold. He helped out in his mother's vegetable garden as much as he could, and his legs grew stronger.

When he was nineteen a new NGO started in his area. He was able to access medication for the epilepsy and he got onto a training programme and learnt to repair shoes. Soon John was earning a decent income repairing all the shoes in his community. His special touch was that he also made sure they were clean and polished before he handed them back to his clients. He used some of his profit to buy seed and worked hard to expand the family garden so that they could sell vegetables to others. An adaptation on an old bicycle enabled him to gain mobility and move around. His businesses were flourishing. He was soon supporting 10 people in his family compound. His mother was so proud of all he had achieved.



Group processing questions

1. *What basic human rights were denied John as a child?*
2. *What was the impact of this?*
3. *How did the relatively small interventions of an NGO change his life?*



*Often people living with a disability are denied the human rights they are entitled to as much as we all are. Many of their rights are denied every day because of lack of **ACCESSIBILITY** of the services and the aspects of life that we all take for granted like education, employment, health etc. It is important that we do what we can towards better inclusion of people living with a disability in daily life, but also important that we keep our eye on the bigger picture, on the battles that are being fought at an international and government level by activists and human rights organisations.*



“It is time for parents to teach young people early on that in diversity there is beauty and there is strength.”
Maya Angelou

Optional Session: Looking out: - the story of our ethnicity



Time
3 hours

Session Plan

10. Telling the story of our country
(75 minutes)
11. The impact on family
(60 minutes)
12. Thinking about the future
(45 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- Appreciate the historical and contextual story of ethnicity in their country.
- Understand that there can be many different perspectives on this.
- See where their own family fits into the broader history and the impact on them personally.
- Describe what the circle of concern and the circle of influence are.
- Realise that working within their circle of influence can expand their influence.
- Consider what they can do within their circle of influence to address ethnic divide in their country.

Materials

Flipchart and markers, prestik, masking tape, selection of different coloured markers

Preparation

4. Join three flipchart pages together with masking tape (landscape orientation) before the session starts. Spread these on the floor or on the wall.

NOTE TO FACILITATOR

This exercise is designed to help a community unpack the story of their country that has led to ethnic divide. It is possible, of course, that there are multiple stories, depending one's perspective. It would be important that these multiple stories are reflected by the facilitator on the "map" that is drawn up. These could become separate threads of the story. Avoid getting into any dispute around which stories are and aren't valid. Assure the group that different perspectives are welcome

Prior to the start of this session, the facilitator should have joined three flipchart pages (landscape) with masking tape and laid them out on the floor or hung them on an open wall.

1. Telling the story of our country/community

(75 minutes)

Set up

(10 minutes)



Start off by saying:

In this session we are going to consider some of the things that have led to the ethnic divide we experience in our country. We are going to start by together telling the story of how we got to this particular point in history. We are going to record some of the important moments and events that have brought about ethnic divide.

There are a few things to consider:

- *As with most histories, we may not all agree on how all aspects of that history unfolded. There will be room here for different perspectives and as facilitator I will do my best to record these different threads.*
- *If you don't agree with a perspective, you are welcome to say that there is another perspective, and to share it with the group. This will be recorded.*
- *It would be important that we keep to all the ground rules we set for the group at the start of the workshop – particularly remembering our commitment to respecting others and to being non-judgemental of different perspectives.*

Process Steps

(45 minutes)

Show the group the timeline you have drawn up.

- Ask them when would be good time to start (how many years ago)? Then divide the time into three and explain that you are looking for 3 narrators that will take on the responsibility for telling the story in the 3 "epochs" (an epoch is a particular time in history). Agree with the group who the 3 narrators will be, and who will start the history.
- The task of each narrator is to tell the story of our country in a way that touches on the significant events/moments in history that have brought about ethnic divide (write this up on the flipchart).
- Begin the story telling process. Each narrator will have 15 minutes to cover their "epoch". Be strict with them on keeping them to the time. If others wish to contribute, add in, offer different perspectives, allow this. The idea is to keep the conversation going with as many people's contributions as possible.
- Record the historical events on the timeline.
- Once it is complete, invite the group to stand back and admire the story as it has emerged.

Larger group processing discussion (20 minutes)



Now that we have collectively heard the story of our country:

4. *How do you feel?*
5. *Are there any perspectives that might have been left out?*
6. *Are there anything new you have heard as we have shared this story?*

2. Impact on family

(60 minutes)

Individual reflection

(15 minutes)

Spend about 15 minutes reflecting on your own story as a single thread that has woven through the greater history of our country.

Consider these questions:

- How has the bigger narrative contributed to your own family history?
- Are there gains and losses that you have experienced as a family?
- How has this impacted on you now?

Sharing in triads

(30 minutes)



Triad work (10 minutes)

Divide the group into small groups of three. Try to make these as diverse as possible.

Give each person 10 minutes to tell how the greater narrative has impacted on their family and on them.

Including our family history in the narrative

(15 minutes)

Give each participant a different coloured marker.

Give them time to go and add their family (write up some of the family names) onto the timeline. They can write it once, or more than once as they consider the impact of the different epochs on their family.

Plenary Discussion (15 minutes)



Group processing questions

- *What was it like to share your family story?*
- *What was it like to hear the story of others? Were there other perspectives?*
- *Any thoughts or feelings that emerge as you look at the history session now, including the history of your family?*

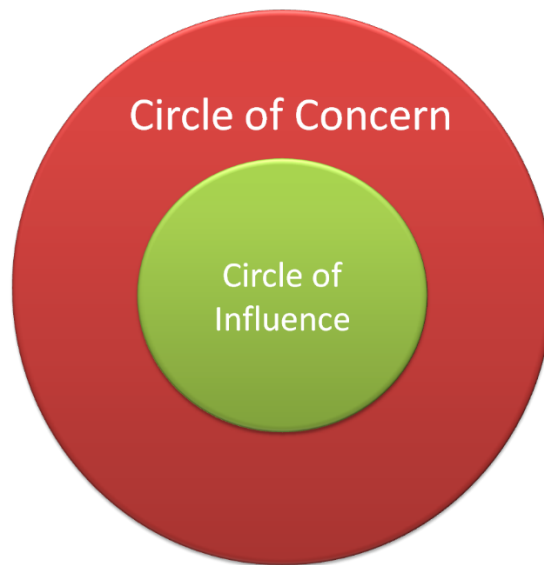
3. Thinking about the future (45 minutes)

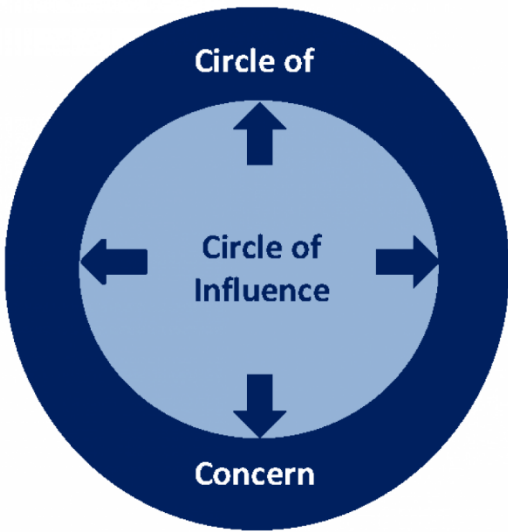
Facilitator Input (10 minutes)



Sometimes we get locked into the negative force of our countries' history. What has happened in the past seems to cloud everything in the present and the future looks bleak. No matter where we stand, whatever perspective we have, whether we are the marginaliser or the marginalized, all of us have some control over what happens in the future. We don't have control over others behaviour, but we have control over ourselves – our thoughts, our attitudes, and our behaviour. What happens if we just focus in on the place we have control?

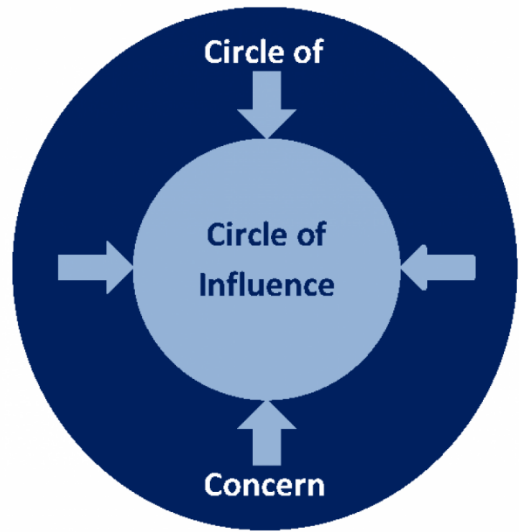
Draw up the following circles:





Proactive Focus

Positive energy enlarges Circle of Influence



Reactive Focus

Negative energy reduces Circle of Influence



Stephen Covey introduced the world to the concept of circles of concern and circles of influence. He said that there are many things we worry about – things we are concerned about. Where will our money come from? Who will take care of our children if we were to die? Is there really a God? Is our country a disaster? When will we have world peace?

- *What do you imagine happens to us if we focus on these big things we have very little control over? We feel demoralized, paralysed, depressed, anxious, helpless.*

Our negative energy often reduces our circle of influence.

What Covey encourages us to do is to focus instead on the things we have influence over. The small things we can do, the people we have around us who can change, our thoughts, our own behaviour.

Miraculously, when we change our focus, through our positive energy we are able to INCREASE our circle of influence. It's like magic! (Illustrate this on the circle)

Activity: Group Work

(20 minutes)

Divide participants into groups of 5. The group should brainstorm what they can do within their circles of influence when it comes to ethnic marginalization in their country. Give 10 minutes for this exercise.

Ask each group to feedback for 5 minutes. After the first group has reported back, subsequent groups should not repeat what the first group has said, they should only add new ideas to the list. These can be captured on a flipchart.



Group processing questions

(15 minutes)

1. *Are there any final thoughts about ethnicity in our country?*
2. *How do you feel about this?*
3. *Is there anything you feel compelled to do yourself?*
4. *If you think about your children, or the next generation to come, what would you want for them?*

“We are all children of God. Why do people raise their hands against their brothers and sisters simply because they call God by another name?”
Gandhi

Optional Session: Looking out - judgement by Faith



Time
3 hours

Session Plan

1. Introduction
(15 minutes)
2. Reflection: Where do I stand?
(45 minutes)
3. Brainstorm: Exploring further
(45 minutes)
4. Impact and Inclusion
(45 minutes)
5. What the “Great Faiths” tell us
(30 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- Understand their own faith journey.
- Identify where they stand now with regard to their personal faith.
- Consider how people’s faith is often used to make judgement of others because of their behaviour or beliefs.
- Identify who is often judged.
- Identify the themes or areas that often draw judgement.
- Know what the impact of exclusion is.
- Know what acts of inclusion might be.
- Identify common affirming themes in sacred texts.

Materials

Flipchart and markers, prestik,

Preparation

1. Prepare a poster with the following questions:
 - What was I raised to believe?
 - What has the impact been of culture, family and education on my beliefs?
 - Have I ever been judged or excluded because of my faith?
 - How has this shifted over time? Where am I right now?
2. Prepare a poster with the following questions:
 - Write a list of some of the people have most been excluded by religious faiths and identify what they are often judged for.
 - What does this exclusion look like?
 - What is the impact on those people?
3. Have the **scenarios** ready to distribute as well as the **sacred texts**.

1. Introduction

(15 minutes)



In this session we are going to take a look at Faith and its impact on how we see others and sometimes judge them. We will most likely be using a few words to discuss some of this and it would be useful to think about what they mean.

- *What does the word RELIGION mean?*

(The belief and worship of a superhuman controlling power, especially a personal God or gods. It can also refer to a particular system of faith (like being Christian, or Anglican or Buddhist, Muslim, Hindu etc). Sometimes we refer to this as organized religion.)

- *If someone doesn't believe in the existence of God, how do we refer to them?*

(Often as ATHEIST in their belief. An AGNOSTIC person usually says they don't know if there is a God or not.)

- *What about the word SPIRITUALITY? What does it mean?*

(It is a broad concept with room for many perspectives. In general, it includes a sense of connection to something bigger than ourselves, and it typically involves a search for meaning in life. It is considered a universal human experience that touches us all. People who don't believe in God can still be deeply spiritual.)

2. Reflection: where do I stand?

(45 minutes)



Our values session at the start of this workshop had us considering how important to us our relationship with God is, and we had an interesting discussion on this. Perhaps you even surprised yourself about where this landed in the ranking session? This exercise will enable us to reflect on our own personal journey with our faith.

Self-Reflection

(10 minutes)



Spend 5 – 10 minutes on your own reflecting about your religious or spiritual journey. Some of the following questions might help you:

- *What was I raised to believe?*
- *What has the impact been of culture, family, and education on my beliefs?*
- *Have I ever been judged or excluded because of my faith?*
- *How has this shifted over time? Where am I right now?*

You may wish to write notes or draw this journey in your journal.



Pair work (10 minutes)

Find a partner – perhaps someone you have not worked with before – and share with each other your faith journeys. You have 10 minutes to do this (5 minutes each).



Group processing questions

(20 minutes)

- 1. Were there any reflections that emerged for you in this exercise?*
- 2. What has attracted you to the place you are right now with regards to your beliefs?*
- 3. Has anyone been excluded for their faith or lack of faith? How did that look and how did it feel?*
- 4. How has your faith impacted on the attitudes you have towards others?*

Summarize

(5 minutes)



In many ways, religion has been used a lot to judge people and to discriminate against them. This judging and discriminating happens towards people:

- Because of whom they are (identity – for example being gay), what they do (for example being a sex worker) and because of their behaviour (for example having sex when they are not married; falling pregnant or becoming infected with HIV).*
- Who BELIEVE differently – are of another faith (for example Christians judging Muslims or Muslims judging Buddhists)? Sometimes even in the same faith people judge others for the denomination they belong to (like Catholic or Evangelical) or for how strict or orthodox or liberal they might be.*

Sometimes it feels like there is a LOT of judging that comes from people of Faith and not very much loving kindness!

- Why is it that judgement that comes from faith, can be particularly challenging and damaging for those who are being judged?*

3. Brainstorm: Exploring further

(45 minutes)

Group Work (15 minutes)

Participants should organize themselves into groups of about five. It would be useful to have a mix of individuals who have different faiths, or no faith at all, or who are questioning etc. Each group should reflect the religious diversity in the room as much as possible. Allow them to do this for themselves as even the exercise of doing this will be interesting and revealing for them.

Within their group they should brainstorm the following:

- Write a list of some of the people have most been excluded by religious faiths and identify what they are often judged for. For example, what is it that LGBTI people are often judged for by the different faiths? Also remember to include people of different religions themselves.
- What does this exclusion look like?
- What is the impact on those people?



Group discussion

(30 minutes)

Each group should report back on their discussion to the larger group. As a facilitator look for any themes or central ideas that might emerge. For instance, there is often a theme around sexuality. Many religions preach sex within the “sanctity” of marriage and with someone of the opposite sex. Anything else is judged – so LGBT people, sex workers, PEOPLE LIVING WITH HIV, girls who fall pregnant before they are married etc.

4. Impact and Inclusion

(45 minutes)



Group Work

(15 minutes)

Distribute the following scenarios and ask the same groups to:

1. *Consider the impact of exclusion on the individual in the scenario. Think about feelings as well as behaviour that happen as a result of the feelings.*
2. *Identify what INCLUSION or MATTERING from the others around that person might have looked like.*

Fatou, who lost her husband when she was young and has three children to feed, is a sex worker. She is also a Muslim whose faith is important to her and wears a hijab. When she goes for her regular check up at the local clinic the nurses just ignore her. She has to wait all day to get attention and when she does, they preach at her about being a disgrace to her religion. She daren't set foot in her mosque.

David is Jewish in a village where there are few Jewish people. He wears a yarmulke when he goes to the synagogue. The boys from his school stand in groups on the corner watching him and shouting horrible things. They say he looks stupid with his “cap” on and that he will not go to heaven because he doesn't believe in Jesus. They say all Jews are thieves.

Jennephar's father is an Evangelical pastor. She has always loved church with all the singing and exciting things that happen and believed that one day she too could be a pastor. In her late teenage years, she discovered she was attracted to woman. In her mind, her God would not judge her for this as he was a kind and loving God. The pastor (her father) and the church thought otherwise. They said there was a great demon from the sea in her. She was called in and demons were cast out. As she lay on the ground in front of the congregation church leaders kicked and beat her to release the demon. Now they won't allow her to read in church or sing in the choir.

Fatimah is Muslim in a Catholic school for mostly Christian girls. No one wants to sit next to her. She sits alone at lunch time. The nuns never ask her opinion in class. It is as though she were invisible. After months of trying to fit in, a discussion in the history class about the violence of Muslim extremists in an

incident in France, ends with the whole class looking at her as if she were somehow to blame. She begs her parents to be able to leave school. They are happy to allow this because she is a girl.

Andy has a strong Christian faith but lives in a secular society and in the NGO where he works, he may not express his religious views. He knows his colleagues think he will judge them, but in truth, he holds firmly to some of the best biblical principles about loving his neighbour as he loves himself and this is what drives his work. He stops wearing his cross at work or having anything on him that reveals his faith. He feels anxious about joining conversations about controversial issues. In fact, he feels judged before he has even said anything. This important aspect of his life is unable to be spoken about in the long hours at work.



Group Discussion

(25 minutes)

Ask each of the groups to report back on their scenario and discuss with the wider group. The discussion for each scenario should take no longer than 5 minutes.

5. What the “Great Faiths” tell us

(30 minutes)

Distribute the quotes/verses from the sacred texts to a few participants. Explain that these come from some of what is known as the “Great Faiths” – those that are ancient and have a big following. Not all the faiths are represented here though.

Ask them to come up to the flipchart stand, read the quote and stick it to the flipchart. Once they are all up, ask anyone if they can identify where any of these come from. Write up the source under each one.



What do you notice about these quotes?

There are many of these affirming, positive scriptures from the faiths we belong to. We are challenged, every day to live out our faith or our beliefs in ways that include and let people know that they matter.

Affirming spiritual texts

"There is neither Jew nor Greek, there is neither slave nor free, there is no male or female, for you are all one in Christ Jesus."

The Bible, Gal 3:5&6 (Christian)

"Never hate each other; never be jealous of each other; never think ill of each other. Always remain brothers unto each other, oh servants of Allah"

The Quran (Muslim)

"Whoever destroys a soul, it is considered as if he destroyed an entire world."

The Torah (Jewish)

"What is offensive when done to you, so not do it to your neighbour."

Hillel the Elder (Jewish)

"Surrender your self-interest. Love others as much as you love yourself. Then you can be entrusted with all things under heaven."

Lao Tzu (Taoism)

"If thine eyes be turned towards mercy, forsake the things that profit thee and cleave unto that which will profit mankind. And if thine eyes be turned towards justice, choose though for thy neighbour which thou choosest for thyself."

Tablets of Baha'ullah (Bahai)

"Hurt not others in ways that you yourself would find hurtful".

Udana-Varga (Buddhist)

"All things whatsoever you should wish that men do to you, do you even so to them."

The Bible Mat 7:12 (Christian)

"Aham brahmasmi – I am God. The universe is an expression or manifestation of God and as such everything in the universe is God. So, one should have love for all, as a reflection of oneself."

The Vedas (Hindu)

*“I think we all have empathy.
We may not have enough courage to display it.”*

Maya Angelou

Session 7: Looking out - standing in the Shoes of Others



Time

1 hour 55 minutes (with optional 20-minute activity incl.)

Session Plan

1. Understanding empathy (15 minutes)
2. Activity: What is listening? (30 minutes)
3. Active listening (15 minutes)
4. Activity: Listening circles (30 minutes)
5. Optional activity: Listening in our work (20 minutes)
6. Summary (5 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- articulate the three aspects of empathy;
- be more conscious of reading other's emotions accurately;
- use active listening skills to be more empathetic in relationships generally, and towards marginalised groups in particular.

Materials

Flipchart and markers, prestik, plain A4 paper,

Preparation

Prepare a flipchart with the following for Step 3: Active listening.

THE FOUR COMPONENTS OF ACTIVE LISTENING

- Use supportive body language, (e.g. make eye contact, lean forward, look interested).
- Encourage the speaker to keep talking (e.g. nod, make listening noises, do not interrupt). Ask questions to seek clarification. Listen with your eyes and ears (e.g. check out body language, tone of voice).
- Check in/Reflect – tell the person what you heard (paraphrase) to see if it is correct. “It sounds like you are saying....”
- Show empathy (imagine how you would feel in that situation, and make a supportive comment to express your empathy. “I imagine that must feel scary.”)

1. Levels of attitude

(30 minutes)

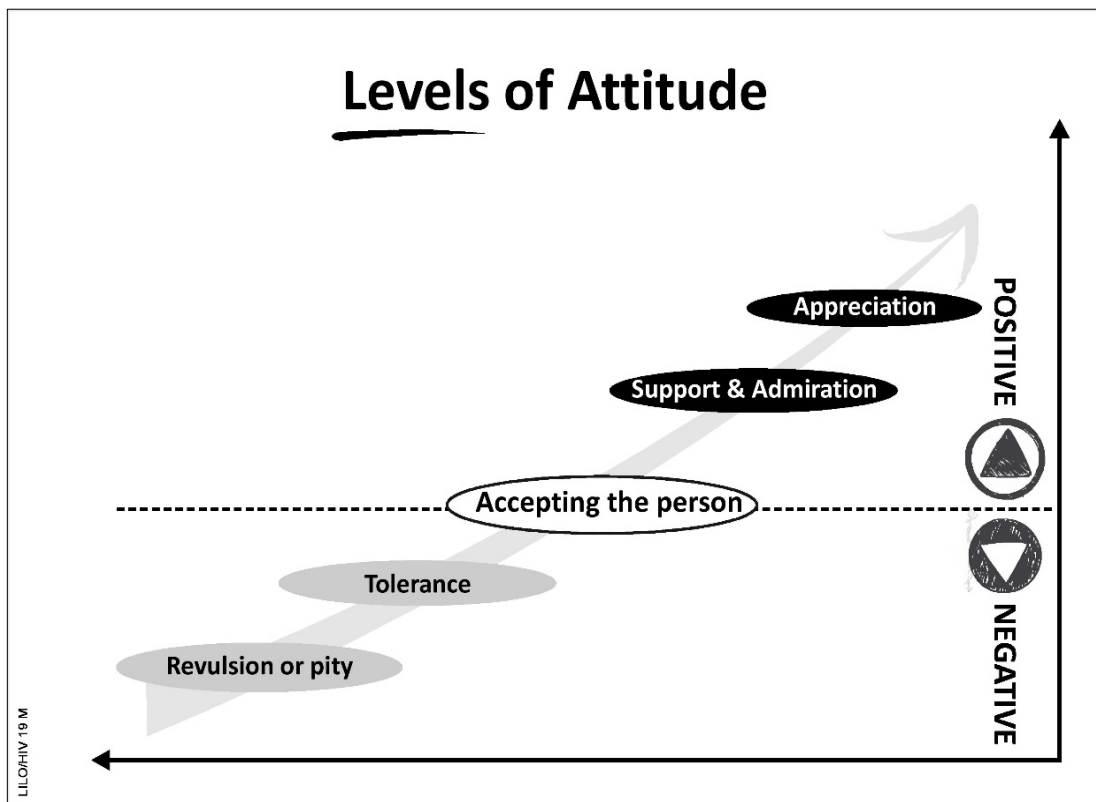


I wonder how your attitude towards the marginalised group we considered and learnt more about in the last session has shifted and changed over the years and perhaps even in the course of this workshop? There is a useful graph that has been developed to show the different levels of people's attitude and how it changes over time.

Let's try to understand what each of the levels means.

Work through the levels explaining what each phase means using the table that follows on the next page.

Note: It is NOT necessary to write up the table on a flipchart. Talk through the diagram below giving the explanations in the following table about what each phase is about:



PHASE	DESCRIPTION
Repulsion/pity	LGBTI is seen as a “crime against nature”. LGBTI people are sick, crazy, immoral, sinful, wicked and anything is justified to change them (prison, hospitalization, counselling, electric shock therapy). Heterosexuality is much better, the right way to go, but these poor people should be pitied – felt sorry for.
Tolerance	Homosexuality is a phase of adolescent development, and these people will “grow out of it”. They are not as mature as heterosexuals and should be protected like children. They should not be given positions of responsibility or authority.
Accepting the person	“You are not gay to me; you are a person” – so often liking the person but not quite able to deal with their gayness. “What you do is your own business – just don’t flaunt it!” Denies social and legal realities. Ignores the pain of invisibility and stress of the closet behaviour.
Support & admiration	Such people may be uncomfortable themselves, but they are aware of the climate and the irrational unfairness of it. Acknowledges that being LGBTI in our society takes strength. Such people are willing to try and look at themselves and work on their own homo/bi/trans-phobic attitudes.
Appreciation	Value the diversity of people and see LGBTI people as a valid part of that diversity. Are willing to combat homophobia in themselves and in others and be LGBTI advocates.

Refer back to the earlier session where the group made a list of those who are most marginalised. Point out that a person might be in a completely different place on the levels graph for different groups. Encourage the group to play with this a bit. Where are they most prejudiced? Just knowing this puts us on the first step towards wanting to understand more.

Finish off by asking people to see where they are on this model and to consider what the next step might be for them. Ask:



What would it take to shift you to the next level of attitude?

2. Understanding empathy

(15 minutes)

NOTE TO FACILITATOR

You can draw the Empathy Model below on a flipchart, or you can prepare the triangle and boxes on coloured paper before the session and put these up as you present the model.



In the next few activities, we are going to look at some skills for understanding others better and communicating with them that they matter. The first skill is empathy. Maya Angelou is right when she says we all have the capacity for empathy – it is what makes us human (hold up the quote). But sometimes we are afraid to use it. When we have done role plays or looked at case studies in this workshop, we have asked you to use empathy to stand in the shoes of others. Empathy involves three dimensions.

Draw a triangle on the flipchart.

The first dimension involves an attempt to take the perspective of another person – the viewpoint. This means you have to put aside judgement and your opinions to understand where another is coming from.

PERSPECTIVE
another's viewpoint



66

Draw a 66/99 on an A4 piece of paper. Put it on the floor. Ask for two volunteers to stand on either side of it. Ask them what they can see (one can see 66; the other 99). Ask them to persuade the other to change their mind about what they can see. Explain that this demonstrates perspective – and it is often difficult to accept what others can see. However, if we move and join them on the other side, then we can see what they see.

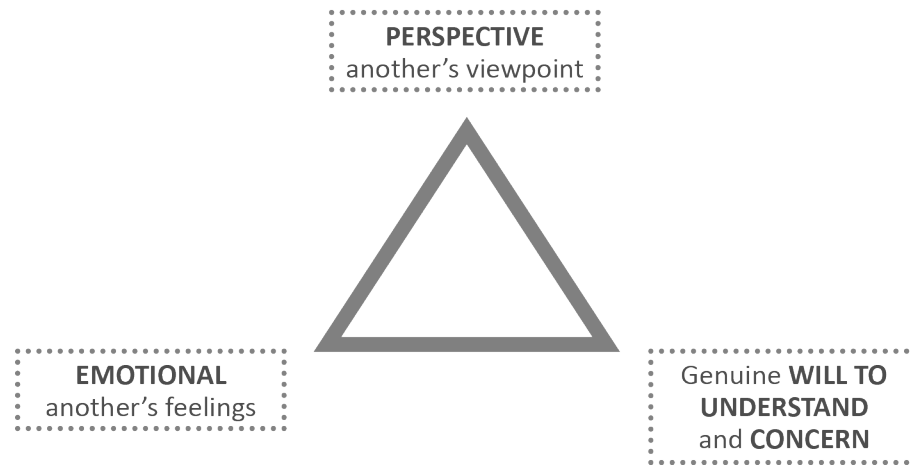
Empathy also has an emotional part to it that helps us get closer to experiencing others' feelings – joy, sadness, fear, etc.

PERSPECTIVE
another's viewpoint



EMOTIONAL
another's feelings

Finally, empathy has a dimension of genuine will to understand and a concern for the welfare of the other person.



The final important point is that empathy makes it possible to understand another person's motives and situation without having to always agree with them. *Total* empathy is almost impossible to achieve. Completely understanding how another feels is too difficult a task for humans with different backgrounds and limited communication skills.



In order to have empathy with someone, we need to be able to listen – properly! In the next exercise we are going to learn some listening skills.

3. Activity > What is listening?

(30 minutes)



If we would like to develop our empathy skills, we need to learn to listen well.

This is a three-part listening exercise. In pairs, ask participants to do the following:

Talk about some of their greatest personal achievements for 2 minutes. Their partner should not listen, and show that they are not listening. Reverse this so the other partner also has the opportunity. Ask:

What was it like to NOT be listened to?

What was it like to NOT listen?

They can continue with the stories while one partner listens, but may not speak. Reverse roles. Ask:

What was it like to do this?

The third round of listening gives permission to show they are listening in any way, including talking. Reverse the roles. Ask:

What have you learnt about all the things that make up good listening from these exercises?

NOTE TO FACILITATOR: Communication

Professor Albert Mehrabian did research on communication about attitudes and feelings. He found that the majority of what people understood from our communication is through our body language and the tone of voice:

- Only 7% of communication (what people receive) involves actual words.
- 55% is visual – body language, facial expressions, eye contact.
- 38% is vocal – pitch, speed, volume, tone of voice.

4. Active listening

(15 minutes)

Ask the group to brainstorm the qualities of a good or effective listener. Explain that listening in a style that makes the speaker feel understood and supported is called active listening. Using the flipchart you have already prepared, review the four key components of active listening:

THE FOUR COMPONENTS OF ACTIVE LISTENING

- Use supportive body language, (e.g. make eye contact, lean forward, look interested).
- Encourage the speaker to keep talking (e.g. nod, make listening noises, do not interrupt). Ask questions to seek clarification. Listen with your eyes and ears (e.g. check out body language, tone of voice).
- Check in/Reflect (tell the person what you heard (paraphrase) to see if it is correct. *“It sounds like you are saying...”*)
- Show empathy (imagine how you would feel in that situation, and make a supportive comment to express your empathy. *“I imagine that must feel scary.”*)

5. Activity > Listening circles

(30 minutes)



To practise active listening we are going to use a format that we used at the start of the workshop. I will count you off in 1s and 2s. All the 1s are to make a small circle in the middle facing out. 2s should then face inside the circle and line up with another person.

I am going to give you a series of instructions for conversations and we will change partners as we go along.

Describe a situation you have felt deeply about. Spend a minute or two thinking about this and getting ready to share it with your partner.

Partner 1 from the inside circle should share first about the experience. Partner 2 should use as many of the active listening skills as possible.

Now reverse this with your partner. They should share about the event that made them proud, while you listen actively.

The inside circle should now take two steps to the right. Greet your new partner.

Spend a minute thinking about an incident that was a difficult situation for you recently.

The partner from the outside circle should start by talking about the experience. The partner on the inside again should use active listening.

Now swap roles. The partner on the inside should talk and the outside partner should listen and show they are listening in every way possible.

The outside partner should take one step to the right.

Discuss with your partner what it felt like to be listened to.



Group processing questions

1. *What is it like to be deeply listened to?*
5. *How did you know your partner was listening?*
6. *What stops us from listening well to people?*

We don't have time.

We are too absorbed with our own life and experiences.

We don't want to hear what they have to say.

We have already made judgements about them.

7. *We can all learn to be better listeners. What do you imagine being a good listener would do for you?*

It would improve your relationships.

Would make you feel better about yourself.

8. *How does active listening link back to empathy?*

It is the first step towards putting yourself in someone's shoes.

5. Listening in our work (optional)

(20 minutes)

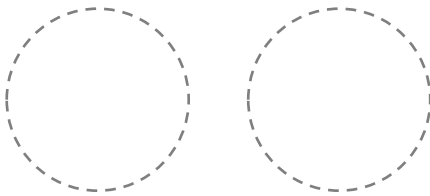
If it feels right, the following description of the importance of establishing real contact with our constituents, each other, and individuals we hope to work with, can be helpful. If you are pressed for time, it may be too much. It should take no more than 10–15 minutes to describe this concept, however.



For us as development workers, active listening is particularly important because so much of our work is about supporting change. Listening actively is a way of coming into contact with another person or group or organisation – an important starting point to supporting change in that person or system.

The three diagrams below depict the kinds of contact that can be made between two systems; and a system could be a person, or an institution, or a group, etc. The middle diagram is a picture of effective contact – the kind that can result when we listen actively.

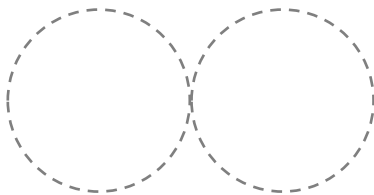
No contact



Where there is NO CONTACT, there is no real meeting. This happens when we do not have the skills or don't expend the energy to really connect with the other, or when the other is simply unwilling to meet us. In a development context, the classic example is of a project working with a community and providing the wrong outputs: if there is no match between what is offered and what is needed contact does not result and

nothing happens. To be specific, this might happen in a project offering sewing skills to sex workers in an attempt to encourage them to give up sex work... What is offered does not meet the target group's needs and no contact (and no change) results. The same thing can happen in a personal conversation with a friend: if they do not feel you are listening, hearing them and interested in what they are saying, they are likely to disengage and your opportunity to help is lost – no contact made; nothing changes.

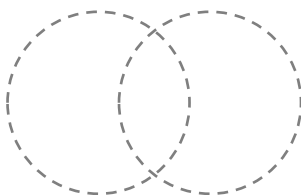
Contact



Active listening is an excellent example of CONTACT; as are projects that speak directly to the experience of a given target group – for example, a project for sex workers that gets condoms into places where sex workers work (bars, clubs, etc.). Technically, contact is about two systems (people/groups/etc.) meeting at their boundaries – seeing each other, appreciating each other (which is

not the same as liking, though that may be present too) and connecting to each other while each remaining responsible for themselves and their own needs. This is the best condition for mutual influence and generating change in behaviour in both parties.

Merging



MERGING happens when the boundaries are crossed and the two systems intermingle. There is no longer a difference between you and me, between your problems and my problems. In the development context, the classic example is the creation of dependency by overstepping one's boundaries and doing too much for the target group (i.e. doing things they could and should be doing for themselves). In

personal interactions, slipping into sympathy is unhelpful: I take on your problems and worries and make them my own – so to this extent we merge. But this does not enable you to better resolve your problem, it takes over your responsibility to work with your own areas of concern.

3. Summary

(5 minutes)



We learnt that empathy is made up of three different aspects represented by the triangle.

- *Understanding someone's perspective.*
- *Understanding their feelings.*
- *Having the will, or enough concern, to put yourself in their shoes.*

We then learnt some skills – identifying and naming some feelings experienced by others and active listening skills. We all need to quite consciously practise these often if we want to become good listeners. The rewards for our relationships will be enormous if we are truly committed to this.

“I become willing to create space in myself to invite the other in, and I open myself to the possibility of being changed by the presence of the other.”

Sr Mary Lacey

Session 8: Looking Forward



Time

1 hour 45 minutes

Session Plan

1. Winding down
(5 minutes)
2. Workshop recap and guided visualisation
(25 minutes)
3. Activity: Personal reflection and action
(20 minutes)
4. Expectations and feedback
(20 minutes)
5. Inspiration
(5 minutes)
6. Revealing the secret Guardian Angels
(5 minutes)
7. LILO workshop feedback and reflections
(10 minutes)
8. Closure: Diversity goodbye
(15 minutes)

Learning outcomes

On completion of this session, participants should be able to:

- recap what has been covered in the workshop;
- articulate what they have found personally challenging during this workshop;
- identify what changes they would like to integrate into their lives.

Materials

Flipchart and markers, prestik.

Handouts

May all who enter as guests, leave as friends

LILO GESI: Workshop evaluation form

1. Winding down

(5 minutes)



It is that time in the workshop when we move towards winding down. It is a moment to look back at the new ideas you have learnt, at some illuminations you might have had about your experiences, and perhaps some of the surprises you might have had.

It is also the time in this workshop when we start looking forward, to the future, to what we want to do with what we have learnt in this workshop. What do we want to take forward with us? What changes do we want to make in our own lives? What help do we need? What help can we give others?

2. Workshop recap and guided visualisation

(25 minutes)



VISUALISATION: WORKSHOP RECAP

Today our workshop recap will take the form of a guided visualisation. So, I want you to find a comfortable and relatively private space for yourself anywhere in the room. Sit in an upright but not too formal way. Close your eyes and become aware of your breathing – going in and out. Relax your body starting with your toes...your feet and ankles, your legs...thighs...hip area, stomach...chest...shoulders...neck face...top of your head, etc.

Now I will quietly read some phrases and words that will bring back some of the topics we have covered and the experiences you have had over the last few days. Remember each one. Think about how you felt when we were dealing with that topic. Remember (or recall) the thoughts you had. Think about the new ideas and concepts you might have thought about or learnt this week. Think about how this might have changed things for you. Think about any of the changes you might want to make in the future Try to use all your senses - hear, see, taste, feel and smell the memories and images as they come into your head...

- We started by talking about our childhood and some of the ideas we had about being a boy or a girl...
- We talked about some of our deepest held values – the things that are most important to us that we will fight to keep.
- We understood where these values come from – our families, our culture, church.
- We thought about how these informed our attitudes and the way we judge people and situations. That they are useful for us, but at the same time can be damaging when we use them as a way to judge others.
- We remembered experiences of feeling excluded ourselves, and those incredible moments when someone showed us we were important.
- We talked about the hierarchy of discrimination – from violent hate crimes to overt discrimination and the subtleties of marginalisation.
- Mattering is something we all need to experience in our lives. We need to let people, particularly those most marginalised, know that they matter.
- We considered the impact of prejudice on people who are marginalised – internalised stigma, low self-esteem, mental health issues and people unable to live a life true to themselves.
- We think of the discriminatory words we might have used to talk about others...

- We talked about the importance of using the right words.
- We thought about the impact our gender has had on us.
- We considered the many challenges women face...but that men do not walk away free from the harmful gender norms that leak through our society.
- We considered a group of people who are commonly marginalised in our society. We learnt a few more things about them and we listened with our hearts to some of the experiences they have.
- We practiced listening better to one another...
- We learnt what empathy means and how we can practice this in our own lives in all our relationships.

Now, for just a moment hold, in your head, a picture of a person you know who is regularly marginalised because of who they are. Let us bless them with this meditation (*you can read this twice or more times.*)

May you feel safe.
May you feel happy.
May you feel healthy.
May you live with ease.

Slowly become aware of the room around you, the sounds that you can hear (traffic sounds, the air conditioner) people coughing or shuffling around you. Bring yourself gently back into the room and when you are ready, open your eyes.

3. Activity > Personal reflection and action

(20 minutes)



Without having a discussion with anyone else, and with your thoughts still clearly in your head, move quietly to a space where you can reflect and write.

They should write about:

what they have thought – THINK
what they have felt – FEEL
what they wish to act on – DO.

In terms of action, they should consider what they might like to do at the following levels:

The personal and individual level – “*what I am going to do in terms of my personal life*”.
The family/friendship level – “*what I am going to do with regards to my family*”.
The community level – “*what I am going to do within my community*”.

4. Expectations and feedback

(20 minutes)

Spend a few minutes going through expectations from Session 1 and whether they have been met.

Then do a check out asking each participant to complete one of the following sentences:

What surprised me the most about myself on this workshop is...

or

The thing that I have learnt about myself on this workshop is...

5. Inspiration

(5 minutes)

Distribute: *May all who enter as guests, leave as friends* to participants and read out the inspirational piece. Say that this is about INCLUSION in the most personal sense. They should take it away and put it up somewhere prominently to remind themselves of some of the messages learnt in this workshop.

“May all who enter as guests leave as friends”

by *Sister Marilyn Lacey*

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One way of measuring whether our love is genuine is to examine how far we've extended the boundaries that determine whom we are willing to be in relationship with. When these borders reach out as far as they can go, there will be no one left outside, no one cursed. There will be no more strangers. Everyone will be welcome.

Reflect for a minute on what it feels like to be welcomed. The word means, simply, “come and be well” in my presence. It’s a fundamental human experience, and a very crucial one. When I am welcomed, I feel good. I can be myself. I relax and feel unself-conscious, energized, happy. On the other hand, when I am not welcomed, I doubt myself, turn inward, shrivel up. I feel excluded, not accepted, and not acceptable. This is painful. If it happens often enough, I will question my own self-worth.

Hospitality means creating welcoming space for the other. Henri J. Nouwen notes that the Dutch word for hospitality, “*gastvrijheid*”, means “the freedom of the guest”. It entails creating not just physical room but emotional spaciousness where the stranger can enter and be himself or herself, where the stranger can become ally instead of threat, friend instead of enemy.

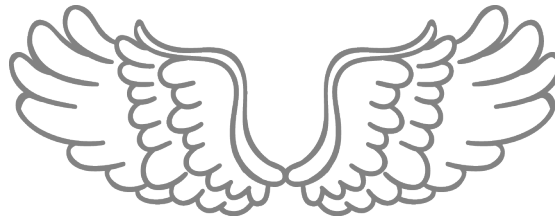
[...] That precious experience — when contemplated, cherished, and celebrated — enables me in turn to welcome others: I begin to be less fearful of the other; I start to see the stranger as gift. I become willing to create space in myself to invite the other in, and I open myself to the possibility of being changed by the presence of the other.

I invite the reader to sit with any of the wonderful hospitality stories found in the traditions of all the great religions. Mull them over; ask God for insight into them. Then ask for courage to take small steps in expanding your own circle of hospitality. These might be as tentative as smiling at the stranger in line with you at the grocery store, as deliberate as hosting a get-together for all the strangers in your apartment building, or as dramatic as volunteering to foster an unaccompanied refugee child in your own home. It might not cost you much, or it might mean going out on a limb: Can you imagine yourself during a family dinner speaking up to your brother-in-law in defence of the undocumented, pointing out that, really, everyone is kin to us, and everyone has a human right to live where they can support their own family.

This article originally appeared on Awakin.org, a website about deepening our self-awareness, in a community of kindred spirits. By changing ourselves, we change the world. Marilyn Lacey, RSM, is the founder and executive director of Mercy Beyond Borders, a non-profit organisation which partners with displaced women and children overseas to alleviate their extreme poverty. Sr. Lacey is a California native, and has been a Sister of Mercy since 1966. This piece is excerpted from her book “This Flowing Toward Me: A Story of God Arriving in Strangers”.

6. Revealing the secret Guardian Angels

(5 minutes)



SECRET GUARDIAN ANGELS

Take time to go around the room, letting people guess who their Guardian Angel is, finally letting those who had no idea know who was “guarding” them.

7. LILO workshop feedback and reflections

(10 minutes)

Distribute the *LILO Connect: Workshop evaluation form* and ask participants to fill them in honestly. They can put their names on the forms, or it could be anonymous. Collect the forms once everyone has completed them.

8. Closure: Diversity goodbye

(15 minutes)

Paste up the flipchart page you used to record all the people present in the room in your “Diversity Welcome” in Session 1.

Now get everyone to stand in a big circle and as you call out each diversity group on the page, get those people who identify with that group to step into the middle. After you have called out each name, the group should shout “Goodbye”.

Once they are a mixed group in the middle of the room, encourage them to spend a few minutes saying individual goodbyes to one another.



Handouts

Print outs that will be given to participants during the sessions.

Values

“Judgements prevent us from seeing the good that lies beyond.”

Wayne Dyer

Rank the values listed below: 1 should be the most important thing, what you would never give up; 12 should be the least important, the one you would give up first.

RANK 1-12	VALUES
	My health and ability to protect myself against HIV/AIDS/Re-infection
	My wealth and money
	My home, clothes and material possessions
	My country, homeland and political freedom
	My sexual orientation and gender identity
	My religious freedom, the right to worship as I please
	My school life or career, job and future job opportunities
	My reputation and popularity
	My friends and close relationships
	My family, parents, grandparents, brothers, sisters, children, wife, husband, caregivers and people I live with
	My self-esteem, sense of self-worth and importance (my mental health)
	My faith in God

Crocodile River

*Once upon a time there was a woman named **Maria** who was in love with a woman named Albertina. Albertina lived on the shore of a great river. Maria lived on the opposite side of the river. The river that separated the lovers was full of crocodiles.*

Maria wanted to cross the river to be with Albertina, but the bridge had been washed away. So, she asked Sam, who owned a boat, to take her across the river. Sam said, "I would be glad to help but you must have sex with me first as payment." Sam was known to be HIV positive. She refused to have sex with Sam and went to a friend named Ivan to explain her problem. But, Ivan said "I am sorry for you Maria, but I really don't want to be involved in this difficult situation."

Maria then felt that the only option she had was to accept Sam's terms. So, Maria slept with Sam and he took her across the river in his boat. Sam delivered Maria safely to the other side of the river where Albertina was waiting for her.

Maria told Albertina of how she had finally negotiated her way across the river. When Albertina heard that Maria had slept with Sam in order to get across the river, she said, "You have betrayed me and put me at risk of HIV infection. You must leave. I never want to see you again."

Maria was very upset. She went to her friend Slug who felt compassion for her. After hearing her whole story, Slug found Albertina and beat her up. This made Maria feel much happier.

Rank the five characters in the story (Maria, Albertina, Sam, Ivan and Slug) according to how much you liked them.

One (1.) would be the person you liked the most and five (5.) the person whom you liked the least.
1 = the person you liked the most; 5= the person you liked the least.

1. _____
2. _____
3. _____
4. _____
5. _____

Handout: SESSION 3 (print for each participant)

Marginalizing and Mattering

STEP 1: Marginalizing

CUE What in the interaction let you know you were valued or not valued?	
FEELINGS How did you feel as a result of this interaction?	
ACTION What behaviour or action did you take because of this interaction?	

STEP 2: Mattering

CUE What in the interaction let you know you were valued or not valued?	
FEELINGS How did you feel as a result of this interaction?	
ACTION What behaviour or action did you take because of this interaction?	

Session on Sex Workers – print 1 copy only and cut up role play scenarios

Your 19 year old niece has gone to study in the city. You know she is short of cash, but don't feel in a position to help out. Then your sister calls to say she has come home and is pregnant. She has confessed to her mother that she has no idea who the father is as she has been working as a sex worker to pay for books and clothes and food. She hasn't yet tested for HIV. Your sister asks you to come and help tell her father.

Role play this situation.

Your children keep talking about the slutty ladies who are hanging out at the corner of your road.

Role play the situation and how you resolve it with the children.

Your colleagues talk jokingly and derogatorily about a transgender woman who is a sex worker. She gets her condoms from your organisation. You hear them laughing even before she leaves the office on one occasion.

Role play the situation and how you respond to it.

When you are taking a family member to the emergency room at the hospital you witness a nurse scolding a sex worker who has come in because of a violent attack. She tells her to clean herself up, that she is "dirty" and it is no wonder men want to beat her up.

Role play this situation and how you respond.

A woman reports to your organisation that she is being harassed and threatened by the police. They lock her up and then demand sex to release her.

Role play the situation where you advise her what to do.

Session on Religious Exclusion – print one copy and cut out each scenario

Fatou, who lost her husband when she was young and has three children to feed, is a sex worker. She is also a Muslim whose faith is important to her and wears a hijab. When she goes for her regular check up at the local clinic the nurses just ignore her. She has to wait all day to get attention and when she does, they preach at her about being a disgrace to her religion. She daren't set foot in her mosque.

David is Jewish in a village where there are few Jewish people. He wears a yarmulke when he goes to the synagogue. The boys from his school stand in groups on the corner watching him and shouting horrible things. They say he looks stupid with his "cap" on and that he will not go to heaven because he doesn't believe in Jesus. They say all Jews are thieves.

Jennephar's father is an Evangelical pastor. She has always loved church with all the singing and exciting things that happen and believed that one day she too could be a pastor. In her late teenage years, she discovered she was attracted to woman. In her mind, her God would not judge her for this as he was a kind and loving God. The pastor (her father) and the church thought otherwise. They said there was a great demon from the sea in her. She was called in and demons were cast out. As she lay on the ground in front of the congregation church leaders kicked and beat her to release the demon. Now they won't allow her to read in church or sing in the choir.

Fatimah is Muslim in a Catholic school for mostly Christian girls. No one wants to sit next to her. She sits alone at lunch time. The nuns never ask her opinion in class. It is as though she were invisible. After months of trying to fit in, a discussion in the history class about the violence of Muslim extremists in an incident in France, ends with the whole class looking at her as if she were somehow to blame. She begs her parents to be able to leave school. They are happy to allow this because she is a girl.

Andy has a strong Christian faith but lives in a secular society and in the NGO where he works, he may not express his religious views. He knows his colleagues think he will judge them, but in truth, he holds firmly to some of the best biblical principles about loving his neighbour as he loves himself and this is what drives his work. He stops wearing his cross at work or having anything on him that reveals his faith. He feels anxious about joining conversations about controversial issues. In fact, he feels judged before he has even said anything. This important aspect of his life is unable to be spoken about in the long hours at work.

Affirming spiritual texts Session Religious Exclusion – print one copy and cut out each text.

“There is neither Jew nor Greek, there is neither slave nor free, there is no male or female, for you are all one in Christ Jesus.”

“Never hate each other; never be jealous of each other; never think ill of each other. Always remain brothers unto each other, oh servants of Allah”

“Whoever destroys a soul, it is considered as if he destroyed an entire world.”

“What is offensive when done to you, so not do it to your neighbor.”

“Surrender your self-interest. Love others as much as you love yourself. Then you can be entrusted with all things under heaven.”

“If thine eyes be turned towards mercy, forsake the things that profit thee and cleave unto that which will profit mankind. And if thine eyes be turned towards justice, choose though for they neighbor which thou choosest for thyself.”

“Hurt not others in ways that you yourself would find hurtful”.

“All things whatsoever you should wish that men do to you, do you even so to them.”

“Aham brahmasmi – I am God. The universe is an expression or manifestation of God and as such everything in the universe is God. So, one should have love for all, as a reflection of oneself.”

Handout: Last Session – print for each participant.

May all who enter leave as friends

One way of measuring whether our love is genuine is to examine how far we've extended the boundaries that determine whom we are willing to be in relationship with. When these borders reach out as far as they can go, there will be no one left outside, no one cursed. There will be no more strangers. Everyone will be welcome.

Reflect for a minute on what it feels like to be welcomed. The word means, simply, “come and be well” in my presence. It’s a fundamental human experience, and a very crucial one. When I am welcomed, I feel good. I can be myself. I relax and feel unself-conscious, energized, happy. On the other hand, when I am not welcomed, I doubt myself, turn inward, shrivel up. I feel excluded, not accepted, and not acceptable. This is painful. If it happens often enough, I will question my own self-worth.

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Posters and Cards

Print outs that the facilitator will use during the workshop.
Only one copy of each poster/card is required.

“The belief that one’s own view of reality is the only reality, is the most dangerous of all delusions.”

Paul Watzlawick

*“Judgements prevent
us from seeing the
good that lies
beyond.”*

Wayne Dyer

“You never really understand a person until you consider things from his point of view, until you climb into his skin and walk around in it.”

Wayne Harper Lee, *To Kill a Mockingbird*

*“A person is a person
because he recognizes
others as persons.”*

Archbishop Desmond Tutu

*“This is a man’s
world, but it ain’t
nothing without a
woman or a girl.”*

James Brown, singer, song writer

“Language is not innocent. A person’s choice of language is a moral, political and theological act with personal and social implications and repercussions.”

Steve de Gruchy, *Aliens in the Household of God*

“When people ask me who I am, I tell them that I am many things – a mother, sister, daughter, friend, woman activist and so much more. Yes, I am a sex worker, but that is not who I am, it is just what I do.”

Daughtie Akoth, *African Sexualities*

*“The opposite of
addiction is not
sobriety;
the opposite of
addiction is
connection.”*

Johann Hari

*“My disability exists
not because I use a
wheelchair, but
because the broader
environment isn't
accessible.” Stella
Young*

*“It is time for parents
to teach young people
early on that in
diversity there is
beauty and there is
strength.”*

Maya Angelou

*“We are all children
of God. Why do people
raise their hands
against their brothers
and sisters simply
because they call God
by another name?”
Ghandi*

*“I think we all have
empathy. We may not
have enough courage
to display it.”*

Maya Angelou

*“I become willing to
create space in myself
to invite the other in,
and I open myself to
the possibility of
being changed by the
presence of the other.”*

Sr Mary Lacey

My health and ability to protect myself against HIV/AIDS/ re-infection

My wealth and money

My home, clothes and material possessions

My country, homeland and political freedom

My sexual orientation

**My religious
freedom, the
right to worship
as I please**

My school life or career, job and future job opportunities

My reputation and popularity

My friends and close relationships

My gender identity

**My family,
parents,
grandparents,
brothers, sisters,
children, wife,
husband,
caregivers and
people I live with**

My self-esteem and sense of self-worth

My faith in God

**It is easier to be
a man than a
woman.**

**A man is more
of a “man” if he
has many sexual
partners.**

**Sex is more
important to
men than to
women.**

It is okay for a man to have sex outside of a relationship, if his partner does not know about it.

**A woman who
carries a
condom in her
purse is “easy”.**

**Men are more
intelligent than
women.**

**Women who
wear revealing
clothes are
asking to be
raped.**

**Homosexuality
is natural and
normal.**

**It's a woman's
responsibility to
take care of
contraception.**

**Safe abortion
should be
available to all
women who
choose not to go
through with an
unwanted
pregnancy.**

**Women are too
emotionally
unstable to take
on leadership
roles.**

**It's okay for a
woman to earn
more than her
partner.**

**For a man to cry
in front of his
family or other
men, is to show
weakness.**

**If a family has
limited finances,
it is best they
educate their
sons before
their daughters.**

**It's okay for a
man to hit a
woman and
make her obey.**

**It is better to
stay in a
relationship
than be alone.**

**If a child is sick,
the woman
should stay at
home with the
child.**

Lesbian and gay people can be identified by the way they look and act.

Being lesbian, gay, bisexual or transgender is a mental illness. They should see a doctor or a psychologist or a traditional healer to be “fixed”.

Being gay, lesbian, bisexual, transgender is a choice. People should just choose not to engage in it.

Homosexuality is not part of our culture. It came to Africa with the colonialists. People also learn it from American TV shows.

Gay people brought HIV to this world

All gay people do, or want to, sexually abuse children.

Gay men wish to be women.
Lesbian women wish to be
men.

Homosexuals should not be
allowed to have children
because they will make them
gay.

Gayness is “catchy”. Being with gay people and sharing spaces with them will make you gay too.

Lesbian women can be “converted” to being heterosexual if they just had a good male lover (like me)!







“My friend’s
brother uses
drugs – what a
stupid choice.”

“I wish my friend
would have the
discipline to stop
using drugs.”

“I can’t
understand
why my friend is
addicted – she
comes from such
a happy home.”

“I’ve unfriended
my stoner friend
– Who wants to
be friends with
a criminal?”

“My mom takes
her prescription
meds every day
– under doctors’
orders – so don’t
go telling me she
has a problem!”

“When will
people realise
that rehab is
the ONLY way
to get clean?”

“Keep strong,
my friend, don’t
let your relapse
derail your road
to recovery!”

“My colleague is amazing – manages to work with a hangover and no one notices the quick visits to the pub at lunch time.”

“I’m standing with
my friend and
learning all I can
about addiction.
He needs my
friendship through
good and bad days.”

“Time to practice
tough love and
refuse to be part
of his life.”

“Coffee coffee
coffee – can’t
get through the
day without my
coffee!”

“Relax people,
weed is habit
forming and not
addictive.”

“Using a drug
does not mean
you have an
addiction or a
problematic
relationship
with drugs.”

“Saw an old school friend – heard that she was into the illegal stuff – no ways! She was smartly dressed and drove a Mercedes.”

“You’re either
clean or on
drugs!”

“I’m not going
anywhere near
that drug user,
I don’t want to
get AIDS.”

“I have severe
back pain and
so I’m grateful
for my daily
over-the-counter
pain
medication.”

People with disability cannot be self-sufficient. They are excessively dependent.

People with disability are to be pitied.

**People with disability
are cursed and
disability is a
punishment for evil.**

**People with disability
are bitter because of
their fate.**

**People with disability
are better off at home**

**People with disability
cannot work.**

**People with disability
cannot have a
family/cannot be good
parents.**

**People living with
disability are asexual.**

**People with disability
need to be cured and
“fixed” by medical
professionals**

**People with disability
need special
educational
programmes**

People with intellectual disabilities are naïve, like children, and cannot make any decisions for themselves.

People with mental health disabilities are dangerous/a threat/violent.

