Peer Groups for Refugee Adolescents

Lessons from Guinea and Tools for Starting Your Own

DRAFT*
January 2004

*Please note: this document is still being revised by IRC, although IRC is happy to share it in its current form with those that may find it useful.
Table of Contents

Introduction 21

Peer Groups in Guinea 2
  Background 3
  How Clubs Operate 5
  \textit{IRC Support for Peer Clubs} 9
  Lessons Learned 16
  Resources 17

Tool Box 20
  Tools for Needs Assessment 22
  Tools for Start-up 25
  Tools for Implementation 34
  Tools for Monitoring 48
  Tools for Evaluation 50
Introduction

What are peer groups for adolescents?

Peer groups are small groups made up of similar people that come together for a specific purpose. Often the people in the group will be of the same sex, approximate age, ethnicity or profession. Peer groups could be made up of Nigerian accountants, older women from a rural county, or university students. The important thing is that people in the group consider the other members to be pretty much like themselves.

Adolescent peer groups are groups of teenagers. If men and women view themselves differently and have very different roles, it may work best to have separate groups for boys and girls in that society.

Why use peer groups?

Peer groups for young people have a number of uses in a refugee, IDP or returnee environment. They provide an opportunity for students to learn from each other and talk about topics uncomfortable to discuss in front of elders or the opposite sex (like menstruation, sex or drug abuse). The groups can reinforce classroom learning, allowing students to practice what they’ve learned and delve more deeply into subjects by discussing them with their peers. Or, they can educate students on themes not covered at all in a classroom, like how to say “no” to unwanted sex, or how to put on a condom.

Peer groups are a good way to spread ideas to adolescents who aren’t in school and to other refugees not in the group. Young people can be very effective at teaching other refugees -their friends, families and neighbors - because they know what to say and they know how to say it. This is especially true for highly sensitive and potentially taboo issues concerning gender, reproductive health and social norms, such as domestic violence, rape, female genital mutilation, abortion, or men’s and women’s roles. Peers can also be strong persuaders, motivating their friends to do something, like stay in school, or not do something, like smoke.

The groups also give young people a chance to gain valuable life and leadership skills, such as presenting ideas in a discussion, public speaking, planning group activities, and organizing community events. The students gain self-confidence, and, through trying to make changes in their communities, they can acquire a sense of control over their lives that can be difficult to attain in a refugee situation. This not only benefits the individuals involved, but the groups can also help make the camps better places to live.

What’s in this guide?

This manual will describe peer group programs for adolescents as developed in Guinea. It will also offer suggestions for setting-up peer programs in your country.
Peer Groups in Guinea

Part 1
Background

What is the situation of refugees in Guinea?

Guinea has sheltered refugees from Liberia and Sierra Leone since 1989. Originally, most lived in four border regions of Guinea spread across some 700 miles, alongside a host population with whom many refugees shared common ancestry, language, and family ties. As the numbers seeking refuge swelled and incursions on Guinean soil by rebel factions became both more frequent and intense, refugees were increasingly placed in large camps away from the border area. At the height of the civil crisis in Sierra Leone, approximately 500,000 refugees were living in Guinea. With the advent of election and a tenuous peace in that country, many Sierra Leoneans have repatriated, only to be replaced by those fleeing renewed fighting in Liberia. Guinea is currently home to around _____ refugees.

The Guinean government and numerous NGOs, with UNHCR acting in a protection and coordination capacity, provide food, education, basic health care and psycho-social services to refugees.

Why were peer groups started?

The conflicts in both Sierra Leone and Liberia have been marked by their brutality against the civilian population, including mutilation, mass killings, rape, and extensive use of child soldiers. Many adolescents experienced or witnessed traumatic events during the war or in the chaos of dislocation and flight. As a refugee, their lives are not necessarily stable or secure. Many young people were separated from their parents during rebel offensives and live with distant relatives, other youth, or on their own. Young women and girls, sometimes with encouragement from parents, may form relationships with older male “supporters,” who can provide extra needed income for food or clothing. The vastly unequal power between these partners can lead young women to have unprotected sex, resulting in high rates of STDs and unintended pregnancies. Also, pregnancy was found to be the leading cause of girls dropping out of school\(^1\); in 1998, less than 30% of students in grade 12 were female.

In response to these problems, IRC’s health education department began in 1997 to seek ways to offer more support to vulnerable and sexually active young women. Girls participating in focus groups asked the department to sponsor standing groups so they could continue to discuss their issues. As a result, peer groups called “Young Women’s Social Clubs” (YWSCs) were formed in refugee high schools. Groups for boys, “Young Men’s Social Clubs” (YMSCs), were started in 1999 after male students requested clubs of their own. In 2000, 38 YWSCs and 35 YMSCs were active in Guinea, with over 700 members.

What is the purpose of the clubs?

The clubs are meant to give young people a forum to learn about and discuss reproductive health and life skills in single-sex groups. They also provide an opportunity for students to organize and do something about the social and health issues that concern them.

What has been the impact of the clubs?

Boys talk about how their club has affected them

“[The YMSC] makes you to learn more about yourself, also about women.”
“I have fully understood that the man and the woman have equal rights.”
“It teaches me not to use violence on your girlfriend or woman.”

YMSC members, June 2000

The Young Women’s and Young Men’s Social Clubs in Guinea have proven to be popular among students and effective as a way to reinforce classroom learning, develop leadership skills and bring about positive changes in refugee camps and communities. Some specific benefits of the program have been:

- increases in students’ knowledge of STD and AIDS prevention
- a better understanding of the opposite sex
- greater willingness to use a condom
- 380 educational activities conducted by clubs in their communities, reaching over 12,000 people (in 1999)

**Girls discuss the impact of their clubs**

“[The YWSC] workshop has taught me about my importance in the world.”
“I am encouraged to press forward when I am faced with problems.”
“I have the zeal of expressing myself among people.”
“[Girls] feel very proud of themselves, knowing that they have equal rights…with men.”

YWSC members, June 2000

**Impact of the Clubs: Another View**

The first workshop was a lesson to us in the wisdom of starting slowly. We knew how school worked—that girls remained silent before boys, that they preferred to bow their heads and look down rather than be laughed at or corrected. It goes without saying that this discouraged female participation. We had wonderful visions of the girls launching themselves immediately into the meat of learning and discussion. Alas it was no to be. After the first YWSC workshop, the staff of the Health Education Department realized that this was to be a long-term project. Boys around or not, the girls pretty much just stared at the floor, it was exactly the same as in a regular classroom.

But a year and a half of steady focus has worked wonders. It turns out that the crust of demureness, thicker or thinner depending on the girl, was nevertheless just a crust. This was impressed upon me most by the slow but steady unfolding of the girls’ personalities—something I was able to see during workshops, competitions, and even at schools. The girls began to make themselves heard. At one school I visited just the other day, of fifteen students the only girl in the class—whom I recognized from last year—was standing up consistently to give answers. The boys still hissed at her and corrected her (falsely, and rightly) nearly every time, but she ignored them and continued to answer. And YWSC workshops, to put it mildly, have changed remarkably.

Many of the girls who last year seemed so timid and withdrawn have become strong personalities. When I walk now around the camps and school campuses they smile and wave, but I think to myself, “God, I don’t even know these girls.” They have their chins up, they shout at the boys—they strut. They have a presence about them that can only come with confidence; and they carry this presence wherever they are: in school, in the camp, wherever.

Jeremy Eggleton, June 1999
How the Peer Clubs Operate

Young Women’s and Young Men’s Social Clubs in Guinea all function slightly differently, because each club decides on its own rules and activities, within a basic set of guidelines provided by IRC. Clubs either vote or decide by consensus on a charter for their club that specifies their mission, goals and objectives, structure and rules. The following describes elements common to the clubs.

Who are the club members?

Clubs were originally designed for refugee students, but have expanded to include Guinean students and refugees who aren’t in school. The clubs are intended for adolescents. Many have rules that only those 15 and older can join, but most clubs allow any “mature” young person (past puberty) to be a member. Members vary in age from 14 to 25, but most are in their upper teens. Clubs have no size limit; most have between 10 to 25 members.

Each club is single sex: students told us they were more comfortable discussing personal, social, and reproductive matters with only their own sex present.

How are clubs structured?

Club members vote or find consensus on a series of officers. The typical format is:

- a president and vice-president whose responsibilities are to provide peer leadership, initiate new projects and directions, set an agenda for meetings and represent the group to the school and the community. Typically, these are girls or boys in the upper grades.
- a secretary functions as a note-taker for meetings, cataloguing goings-on, assembling documents and undertaking special administrative tasks.
- a treasurer who is charged with club accounting. Though money is very rarely given to clubs, the position existed in case it was needed. Also, some clubs have undertaken fundraising to support activities independently of IRC.

Who provides adult guidance to the youth clubs?

Clubs select an adult of the same sex as the club to act as a sponsor. The sponsor’s role is to offer an adult perspective and support to the club. Sponsors help students organize their activities and make sure the concepts they are teaching each other are factually correct. Sponsors also attend IRC workshops with their students and act as chaperones.
When and where do clubs meet?

Most clubs meet every week or every other week, either right before or right after school. They usually meet for one or two hours at most. Night meetings and overly long meetings are not acceptable to parents, who want to keep track of where their children are. Clubs usually meet on the school campus. Most arrange with the principal to use an empty classroom or the school canteen.

What do the clubs actually do?

Club members discuss issues relevant to being an adolescent boy or girl growing into a man or woman. Discussions can either be to share information adolescents should know or to discuss common problems young men or women face. This form of discussion is intended to lead to action. Both types of discussions are described in more detail below.

- **Information exchange:** One or a few members prepare beforehand and teach the others about a certain topic, using mini-lectures, stories, dramas or educational games and activities – with a discussion afterwards. Groups cover topics such as the male and female reproductive systems, the menstrual cycle, conception, pregnancy, goal-setting, self-esteem, STDs and AIDS.

- **Problem solving:** Groups also discuss problems that they want to do something about. They discuss a problem, analyzing the effect on themselves and the causes of the problem. Next, they identify and plan an activity they can do that might help solve the problem. Afterwards, club members meet again to discuss how it went and what to do next. The process might look something like this:

  ![Diagram](https://via.placeholder.com/150)

  Clubs have undertaken many activities to resolve problems they face. Some examples include:

<table>
<thead>
<tr>
<th>Problems identified by young men</th>
<th>Activities undertaken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fighting in school and camp</td>
<td>Counseling friends against fighting</td>
</tr>
<tr>
<td>Alcohol and drug abuse</td>
<td>Hosting sports and games for in- and out-of-school youth</td>
</tr>
<tr>
<td>Unwanted pregnancies, STDs and AIDS</td>
<td>Making anti-drug posters and displaying them in schools, at community centers and cafes</td>
</tr>
<tr>
<td>Violence against women</td>
<td>Advising friends on how to obtain and use condoms</td>
</tr>
<tr>
<td></td>
<td>Educating people in the camp through song and theater</td>
</tr>
<tr>
<td></td>
<td>Speaking out against gender violence at camp meetings and among friends</td>
</tr>
</tbody>
</table>
What does this look like in practice?

The following descriptions of activities conducted by YWSCs and YMSCs in Guinea may also help to describe how the clubs work.

<table>
<thead>
<tr>
<th>Problems identified by young women</th>
<th>Activities undertaken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dropping out of school</td>
<td>Mentoring younger girls, helping with schoolwork</td>
</tr>
<tr>
<td></td>
<td>Visiting girls who’ve dropped out</td>
</tr>
<tr>
<td>Unwanted pregnancies, STDs and AIDS</td>
<td>Holding “video shows” of AIDS prevention videos</td>
</tr>
<tr>
<td></td>
<td>Playing games and role plays to practice refusal skills and condom negotiation</td>
</tr>
<tr>
<td>Discrimination</td>
<td>Educating camp members on the importance of women using songs and theater</td>
</tr>
<tr>
<td></td>
<td>Speaking for women’s rights in speeches and debates at health fairs and other local events</td>
</tr>
<tr>
<td>Violence against women</td>
<td>Identifying community resources that deal with preventing gender violence and counseling survivors</td>
</tr>
</tbody>
</table>

The Forecariah Region of Guinea held a Song and Drama Competition at the height of the rainy season in 1999. One giant, tarpaulin-covered school hangar created a relatively dry stage area and auditorium for the public to view the productions of regional clubs. More than 2,000 Sierra Leonian refugees were in attendance as the rain came down endlessly on the plastic sheeting above. Young men and women from the social clubs of Dakhagbe school performed a drama on the complexity of reproductive health education. It was a bold drama because it confronted people with the controversial issue of teaching material some Sierra Leonians might consider inappropriate for young people. The play was elegant and a true success in that it forced people to think about the problem, empathized with their concerns and offered them a solution. At the same event, a local band adapted a winning health education song about the dangers of AIDS, playing an electrified dance version for the audience.
On the UNHCR-sponsored Day of the African Refugee, the young women of Koyamah Camp joined with their male counterparts to perform for a crowd of hundreds, including many members of the Guinean host community. The theme of the day was the importance of fidelity to one’s studies, explored through various angles. Singing songs, they drew the crowd in with the gospel-flavored melodies of Liberian church music. This was followed by a long drama that engaged the assembly entirely, portraying the difficulty a young, serious girl can face when trying to avoid peer pressure at school. It was humorous, but carried a strong message not only to parents, but to younger girls and boys at school. Finally, they did a discreet but straightforward lesson on the rhythm method of contraception. This was directed to all adults in the audience (the children didn’t understand because sex was veiled by euphemism), but particularly to the schoolgirls who were coming of age. The broad acceptance of such a frank intervention seemed also to be the result of the approach taken by the girls—that education should come first, girls should keep their eyes on the future and control their lives as much as possible in order to get there, while recognizing the reality of young Africans’ lives.

Sample Song -

Let’s Be Serious In Life
by Lola YWSC

Chorus: Listen brothers and sisters to us
We have a story to tell
This is what we want to say
Let’s be serious in life

Stanza I: Sometimes we look at life to be
Joking, dancing and fooling around
Soon we’ll find that it is too late
Let us try to use our time

Stanza II: We may find that we are poor
Life for us is just useless
But don’t ever give it up
You can manage to live it

Stanza III: Put your minds to what you do
Tighten your belts and do your best
Soon you’ll find that in the end
You’ll give yourself a little smile
IRC Support of Peer Clubs

What is IRC’s approach to support of the clubs?

In order to achieve the program’s goals of improving young people’s life skills and increasing their confidence, IRC intends that clubs should be as autonomous as possible. Running the clubs themselves, students learn important leadership skills such as planning, organization, decision-making, and working as team. The more ownership students feel for the club, the more they control club activities themselves, the more pride and confidence they can experience from club initiatives.

For this reason, IRC has avoided providing supplies and materials that clubs can obtain on their own and has tried to minimize directing club activities, while recognizing that clubs needed more help in the earlier stages of the project. IRC’s has endeavored to pull back from the intensive support provided at start-up to encouraging more and more self-leadership as the clubs progressed.

What structure was in place to support the program?

A health education department was actively working with IRC-run refugee schools across four regions of Guinea before the club project was initiated. Staff included a health education coordinator, four regional managers and 18 local-level health counselors. Prior to starting the YWSC/YMSC program, the department provided health classes from pre-kindergarten to 6th grade, conducted first aid and mental health counseling in schools, and supported student health clubs and reproductive health peer educators. (Please see the How to Guide for Reproductive Health Education for Adolescents in Guinea published by IRC for more information about Guinea’s health education programs and a description of how the components fit together.) IRC Guinea was fortunate in that peer groups for adolescents fit readily within the existing overall program goals and funding was already available from BPRM for health education activities.

Base clubs at an existing center in the camp

Locating peer clubs at refugee schools was a natural fit in Guinea, since IRC oversaw school administration and a productive working relationship already existed between the health education and education programs. Basing clubs at schools lends legitimacy to club efforts, affords a venue for clubs meetings, and provides an interested audience for club activities. It also ensures that the majority of members can read and write, which simplifies the running of workshops and club record-keeping. However, adolescent peer groups need not be located at schools, but could be centered around women’s centers, community centers or churches. Also, while it is helpful to be able to “hang” clubs on an existing structure, they need not be affiliated with any institution at all if doing so would limit membership to the clubs or artificially restrict club activities.
How did IRC start-up the project?

With the help of a consultant, IRC developed an approach for the development of its YWSCs, which also served as a template for the later start-up of YMSCs. IRC prepared administratively to initiate the YWSC program by coordinating with school authorities for permission to base the program through schools, determining how much money was available in the existing budget to support the program, and locating a coordinator to steer the program.

Because the youth club program requires a great deal of energy and attention, it was necessary to locate a staff person solely for this effort; other staff were already overextended. IRC Guinea was fortunate at the time to have a Peace Corps Volunteer (PCV) serve as club coordinator during the initial phase of the project.

How were the clubs themselves formed?

Together, the PCV and a regional health education manager visited each potential school, publicizing and distributing a sign-up sheet to generate interest in the clubs. Once signed up, the group met for the first time and held a start-up session similar to the one outlined in the toolbox. The session was read through, discussed, and debated. Students were given a night or two to think about whether they wanted to have such a club, and they reconvened to initiate (or not) the club in their school. This involved choosing officers, registering with the school officials, informing the community, and, most importantly, locating a sponsor. IRC requested that the clubs choose a literate adult of the same sex as the club, preferably a respected member of the community who was already a role model for younger people.

How did IRC help clubs get activities underway?

Once all the clubs in a region were formed a launch workshop was convened in the regional capital. This workshop acted as a starting stimulus for the clubs, provided potential activities and ideas for a three-to-six month trial period, and helped the students feel the scope of what they are undertaking. The workshop length was kept to three days, so as not to disturb the students’ schedules too much, and covered a variety of topics. For the YWSCs, these included: Decision Making Skills, Project Planning and Proposal Writing, Abstinence/How to Say No and Avoid Peer Pressure, Gender Violence, Female Anatomy and Physiology, Conception and Pregnancy, Contraception, AIDS, STDs, Condoms, Female Genital Mutilation, and the Role of Women in Society. Students divided into their own club groups at the end of the workshop, and the last session was the development of a group of goals, objectives, activities and a three-month time line. Organizers helped them determine what resources were necessary, and how they could be found. Attendees were limited to four or five, for a total of about thirty per regional workshop. Generally, the four club officers and the sponsor were the attendees. The sponsor’s presence was mandatory.

After the launch workshop, clubs were encouraged to undertake the projects outlined in their timelines, using suggestions for activities supplied by staff or designing their own. Workshop attendees were first to educate their fellow club members about what they had learned, using the
workshop activities in their participant manuals, then the whole club could spread their learning to others in the community. The PCV made extensive visits to YWSCs during this period, to answer questions, give advice on activities, and make sure the purpose of the club was well understood.

**What materials does IRC provide to clubs?**

IRC provides reference books and materials for the clubs to use when teaching themselves as well as their friends and neighbors about reproductive and social health. Materials include: a storage trunk with locks; picture cards on unsafe abortion, gender violence and male and female reproduction systems; and, drums and sassas for songs and dramas. Every six months, clubs also are sent a fresh supply of white and colored chalk, markers, poster paper, masking tape, crayons for the production of teaching aids, and copybooks and pens for keeping club records. A list of materials IRC supplies to clubs and a sample distribution checklist are provided in the toolbox.

---

**Be sure to put a system in place for the storage and accountability of materials.** In many resource poor refugee settings, items like books and markers are valuable commodities and may easily go missing. Also, the relative lack of status accorded to adolescents in many parts of the world may make it difficult for clubs to keep their materials. A system should be set up to ensure both that club members have control of their materials and also that no one person can walk off with them. Early in the project, IRC Guinea sometimes had problems with school officials taking books from the students and keeping them for themselves. Now, all materials and books are kept in the club’s storage trunk in the principal’s office, but the keys are held by designated club members. Also, books must be signed out using a log kept by the principal. At the end of each school year, the regional health education manager checks to ensure that all books are in place.

---

**What follow-up support is provided to the clubs?**

Most follow-up support is provided by the club officer. S/he visits club meetings and community activities, distributes supplies and helps organize regional follow-up workshops.

IRC provides two follow-up workshops per year, separately for Young Men and Young Women’s clubs. Workshops are meant to build on knowledge and skills they have gained previously and further develop their ability to conduct community activities. Workshop content is developed based on survey results, feedback from sponsors, local health counselors and regional health education managers, and topics students themselves request.

As with the launch workshop, participant manuals are provided to all participants. Manuals include a summary of information presented during the workshop and activities that club members can use to teach the material to other club members. A sample section from a participant manual is shown in the toolbox. IRC also distributes a participant manual for each
Club as a whole to include with their resource materials, as well as a copy for each school library.

Workshops are evaluated through short knowledge and attitude tests before and after the workshop, evaluation forms for students to tell us what they thought about the workshop, and facilitator observations. After each workshop, the health education staff meets to discuss how the workshop went. Evaluation forms and pre-post results are assessed to determine what may be improved for next time. If a topic has not been well understood, it may be repeated in a later workshop, with changes made to the session to enhance learning.

**Critical question: Who should attend the workshops?**

In Guinea, we decided to limit each workshop to no more than 30 club members and sponsors, in order to engage rather than lecture to participants. Because people teach in the way they are taught, we found that it was very important to use participatory methods, modeling the discussions, games and activities club members could use to teach their peers. Since only a few club members could attend a workshop, we asked sponsors to select different individuals each time from among the older members of the club. Older students were more able to convey what they learned to their younger friends.

**What support is provided for club sponsors?**

Sponsors play a significant role in club motivation; oftentimes it is the sponsor that determines the level of interest and satisfaction students have in their club. However, sponsors are not paid by IRC, they volunteer their time. To provide additional support and encouragement to club sponsors, IRC holds a day-long meeting for sponsors once a semester. The meetings allow sponsors to get to know their colleagues from other areas and share ideas on how best to work with the clubs. They are also an opportunity for IRC to show appreciation for all the energy and effort sponsors give to students.

**💡 Develop the skills of sponsors.** Some sponsors may be tremendously energetic and committed to working with the clubs, but have a “top-down” way of working. Instead of helping adolescents organize and plan activities, they may design educational campaigns or other events and dictate tasks to members. It goes without saying that this undermines the purpose of the clubs. You may want to organize “pre-service” workshops specifically for sponsors, which clearly outline their role and how to help young people lead and organize themselves - gently guiding rather than directing. It may also be helpful to go over participatory training and evaluation with the sponsors.
How does IRC help adolescents maintain interest in the clubs?

The IRC health education department in Guinea sponsors a number of competitions and special events throughout the year to help motivate club members and encourage technical exchange between clubs. Some of these include:

- **International Women’s Day, World AIDS Day and World Refugee Day Festivals:** Clubs submit proposals and may receive funding for local festivals on these days. If successful, they organize multiple activities in their camp or town to raise awareness and educate other refugees on issues related to the theme of the day. In 2000, the International Women’s Day festivals featured parades, debates, song, dramas and speeches on diverse themes, including girl’s education, wife-beating and the importance of women in nation building.

- **Poster and Essay Contests:** Students prepare poster-sized drawings or written essays on a theme specified by IRC. Past themes have included “The Role of Women in Society” and “A Woman I Admire,” and “Refugee Health.” The best posters and essays from each region win a prize, and are duplicated and sent to all junior and senior high schools.

- **T-shirt Contest:** Each year, IRC holds a contest for the design of YWSC and YMSC t-shirts. The winning designs are chosen for visual appeal and presenting a clear educational message related to reproductive or social health. The design selected in 2000 for YWSCs featured the importance of girls staying in school; YMSC shirts had an anti-drug theme. IRC prints t-shirts for each club and distributes them to all active members and sponsors as a thank-you for their work during the year. The shirts reflect the pride students take in their clubs, and also serve to disseminate a health education or awareness-raising message in the camps.

- **Newsletter:** Every semester, students submit articles about their activities, poems on refugee life, health promotional drawings, cartoons, and stories, as well as new songs and dramas they have written. IRC compiles these into a newsletter that is sent out to all schools and clubs. This enables students to feel part of a larger effort, to identify with similar groups on the other side of the country. It is an excellent tool for spreading successful activity ideas, and keeping all club members current on what is happening all over the program. It also serves to remind the clubs that they, and their ideas, are important. This helps keep morale high in a large program where an individual student
could feel lost (IRC Guinea had 80,000 students at one point), but would have a similar effect in a much smaller context.

- **Song and Drama Competitions:**
  Once a year, IRC holds song and drama competitions for clubs in each region. Teams with the best songs and dramas move on to a national competition. The competitions are occasions for students to exchange health promotion ideas and for IRC to showcase effective techniques and reward the most creative and hardworking students. The best songs and dramas are compiled on tape and in a booklet that is distributed to every school. A sample drama is shown in the toolbox.

**How is the program monitored?**

Young Women’s and Young Men’s Social Clubs are monitored through observational visits and monthly reports. The club officer and regional health education managers make frequent field visits to monitor club activities. They check clubs’ activity logs (where all club meetings, activities and events are recorded), discuss with club members how their activities are going and how they may be improved, and attend meetings and activities held by the clubs. Club leaders use their activity logs to complete a monthly report form that is sent to the regional IRC office. The forms are reviewed and combined at the regional level and are sent to the health education coordinator.
How does IRC evaluate the peer group program?

IRC uses two main methods to determine effects of the YWSC and YMSC clubs on the members and students in general. Evaluation methods used are:

- **Reproductive health survey:** IRC conducts a yearly survey of students’ knowledge, attitudes and practices concerning reproductive health and gender issues. In 1997, schools in each region were selected and students from grades 7-9 were randomly chosen to complete the survey. The number of students in each grade who took the survey was proportionate to the total number of students in that grade. This survey serves as our baseline, since it was conducted before the YWSCs and YMSCs began.

  Each year, IRC conducts the same survey again. In 2000, ____ students from 14 schools completed the survey. Data is entered into Epi Info (a basic statistical software program) for analysis. Responses are compared to previous years to see what, if any, changes have occurred. We are not able to compare schools with and without the program, since IRC runs all refugee schools in Guinea and all high schools have YWSCs and YMSCs. However, we can compare the knowledge, attitudes and practices of students who are and are not club members.

- **Focus groups and interviews:** Trained staff members visit selected schools in each region and hold focus groups with club members and non-members. They also conduct one-on-one interviews with sponsors and principals. Respondents are asked how they think the YWSC and YMSCs have impacted them, their schools, and their communities, as well as how they think IRC could improve the program.

When analysis is complete, health education department staff meets to discuss the results. The results are used to adapt workshop content and make changes to the way the program is administered. A copy of the reproductive health survey and focus group guides may be found in the toolbox.

If you use focus groups as a needs assessment at the beginning of your program, you could hold them again after one or two years to qualitatively assess changes in knowledge, attitudes and practices. This can give in-depth insight into how the peer group program may have influenced adolescents.

---

2 Minor modifications have been made over the years, but most of the questions remain the same.
Lessons Learned

The IRC Guinea experience with girls and boys youth clubs was successful in many ways. But it goes without saying that a great deal was learned about how to build an even more successful program—mostly by trial and error. Were we to start from scratch once more, we would pay particular attention to the following areas:

- **Have one person acting as club coordinator.** In Guinea, we did not always have a full-time coordinator for the clubs. After the departure of the initial Peace Corps Volunteer, almost a year past before we had anyone to fill that role. Regional health education managers did not have time to take on all the activities of the club coordinator, and as a result some clubs lost direction and drive. With a point person for these clubs, they will prosper, money or not.

- **Acceptance for the clubs, and the subject matter they deal with, needs to be built slowly and collaboratively with the opinion leaders of the refugee community.** Sensitive subject matter was, in many ways, the *raison d’etre* of these clubs. The forum itself is designed for honest, open exchanges between peers. This can be a cause for friction in a traditional population. Additionally, as an international NGO, we cannot rely on the refugees’ inherent dependence on the international community to promulgate new ideas invasively—as a price for assistance. Rather, new ideas or ways of thinking should be accepted by the target population on their own terms. In IRC Guinea, this meant significant work with refugee camp committees, nurses and doctors, tapping important and well-respected individuals for sponsorship positions, and most importantly, exercising a good relationship with the local PTA. Addressing the issue of the subject matter’s sensitivity through public education is also a good approach.

- **Fully develop a mentoring program.** A Big Brother/Sister mentoring program was initially seen as a mini-activity each club might do if it chose to. The benefits of such a program in a community with many dislocated and damaged families are clear, as are the benefits of such a program on girls’ retention in schools, and on developing a cadre of youths for the promotion of better public health in the student (and wider community) population. It should therefore be promoted not simply as one possible activity clubs can undertake, but as a focus of all the clubs—perhaps with a workshop and a two month timetable devoted specifically to the issue. This could be developed by a club coordinator.

[More to come]
Resources


Funding the Future: Resources for Adolescent Health Programs in Developing Countries, Center for Population Options (now Advocates for Youth), Washington, DC 1994.


*Methodological Review: A Handbook for Excellence in Focus Group Research*, Academy for Education Development (HEALTHCOM, 1255 23rd St., NW, Washington, DC 20037 Tel (202-862-1900)).


Spence, Susannah, *Staying Clean and Healthy: Creative Activities for Teaching Basic Personal Hygiene Habits*, Health Edco, Waco, TX.


*Working with Young People on Sexual Health and HIV/AIDS*, Appropriate Health Resources and Technologies Action Group (Farringdon Point, 29-35 Farringdon Road, London EC1M 3JB Email (ahrtag@gn.apc.org), London, 1996.

Tool Box
Tool Box Contents

Tools for Needs Assessment

1.1 Adolescent focus group outline [to be added]
1.2 Sample interview guides for service providers and community members or leaders

Tools for Starting Peer Groups

2.1 Job description
2.2 Resource books for clubs
2.3 Materials checklist
2.4 Group start-up session

Tools for Implementation

3.1 Workshop topics
3.2 Sample pre-post test
3.3 Sample workshop evaluation
3.4 Sample agenda
3.5 Sample workshop session (trainer’s guide)
3.6 Sample section of participant manual
3.7 Sample drama

Tools for Monitoring

4.1 Monitoring forms for clubs
4.2 Monitoring forms for regions

Tools for Evaluation

5.1 Sample survey
5.2 Focus group guide for YWSC members
5.3 Focus group guide for YMSC members
Interview Guide for Service Providers (Host country government, UNHCR, NGOs)

Introduce yourself, explain your purpose.

What do you think are the main problems refugee adolescents are experiencing?

What services do you provide for adolescent refugees?
(ask them to describe each one, explaining where they operate, who is served, hours of operation, how many are served)

What areas of unmet need do you see where IRC might get involved?

Thank you very much for your time.
Interview Guide Community Members or Leaders

Introduce yourself and explain your purpose.

What problems do young people in your camp face?

What is here in your camp that helps young people?
This could be things that specific people, (like the church pastor or a youth leader), groups (savings clubs, sports clubs or other community groups), or organizations (schools, churches, NGOs, UNHCR, etc) are doing.

How do they help young people, what do they do?
Who is mostly helped?
(Is it girls and boys, or only boys? People from all over the camp or just one part? All ethnic, religious groups or mostly certain ones?)

What else is here that could be used to help young people?
(Things that maybe are not being used for that now, but could be, like sports fields, a library, community center.)

What programs or services would you like to see for youth that are not here now?

Thank participants very much for helping.
REPORTS TO: Health Education Coordinator

LOCATION: Gueckedou

GENERAL DESCRIPTION: The Youth Club Officer (YCO) will take the lead in planning, implementing and evaluating activities with IRC’s Young Women’s and Young Men’s Social Clubs (YWSCs and YMSCs). These clubs are voluntary after-school single sex clubs for students 15 years or older. They meet to discuss reproductive health and other issues (e.g., women’s rights and gender violence), and conduct activities to educate other students and community members on these topics.

DUTIES AND RESPONSIBILITIES:

1. Assess the training needs of YMSC/YWSC members and their sponsors.
2. Assist in the creation of training materials for YMSC/YWSC workshops.
3. Serve as a co-facilitator at YMSC/YWSC workshops.
4. Compile and/or edit monthly YMSC/YWSC newsletters.
5. Develop instructions for simple activities on gender awareness, gender violence, contraception and other issues that club members can conduct in their schools and communities.
6. Collaborate with regional health managers to motivate and provide technical assistance to YMSC/YWSCs.
7. Make visits to clubs in all four IRC regions (N’zerekore, Macenta, Gueckedou, and Forecariah).
8. Assist in the development and implementation of strategies to evaluate the activities of YMSC/YWSCs.
9. Train a local staff member to take over the project.
10. Represent the department at IRC schools, meetings with other NGOs, and in other refugee and community settings.
11. Other tasks as needed.

QUALIFICATIONS REQUIRED: The YCO should have experience providing health education to adolescents and young adults. Experience organizing youth groups and conducting participatory training workshops is also necessary.

LENGTH OF SERVICE: April 1, 2001 - March 31, 2002
**Resource Books for Clubs**

Books for Young Women’s Social Clubs:

* Where Women Have No Doctor
* The New Our Body, Ourselves
* It’s Perfectly Normal
* What Is Happening To My Body?
* Healthy Living, Healthy Loving
* Making a Life For Yourself
* Having Your Period
* Feeling Good About Growing Up
* Two Girls and Their Dreams
* Can Betsy Stay in School?
* Frieda Doesn’t Get Pregnant
* Choices

Books for Young Men’s Social Clubs:

* It’s Perfectly Normal
* Feeling Good About Growing Up
* To Have A Son Like You
* The Path Of Peace
* Frieda Doesn’t Get Pregnant
* Choices
* Deadly Habits
* Who Killed Danny?
* My Brother Is A Soldier
Name of club: ________________________________________

Materials given by: ________________________________

<table>
<thead>
<tr>
<th>MATERIALS</th>
<th>DATE REC'D</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STATIONARY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crayons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Markers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masking tape</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flipchart paper</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Copybook</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pens</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White chalk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colored chalk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scissors</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>MUSICAL INSTRUMENTS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sassa</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>BOOKS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It's Perfectly Normal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where Women Have No Doctor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The New Our Body, Ourselves</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What Is Happening To My Body</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy Living, Healthy Loving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Making a Life For Yourself</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having Your Period</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feeling Good About Growing Up</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two Girls and Their Dreams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Can Betsy Stay in School?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frieda Doesn't Get Pregnant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Choices</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To Have A Son Like You</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Path Of Peace</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frieda Doesn't Get Pregnant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deadly Habits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who Killed Danny?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>My Brother Is A Soldier</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PICTURE CARDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td>AIDS - spread/prevention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reproduction - female/male</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV Does Not Spread</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signs of AIDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug &amp; Tobacco Abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abuse of Antibiotics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effects of Alcohol Abuse on the Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Habits that Affect Health – Drinking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Menstrual Cycle</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Puberty in Boys</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Puberty in Girls</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sponsor’s name: ______________________________

Sponsor’s signature: __________________________

Date: __________________________

YWSC/YMSC President’s name: ______________________________

YWSC/YMSC President’s signature: __________________________

Date: __________________________
This is designed to be the very first activity you do as a YWSC which wants to become active. It would also be a good thing to do at the start of each new year to help you get back into the flow of things and refocus your energies as a club. It should take two or three sessions – maybe one week’s worth of meetings.

Since this might be before the elections, when there is not yet a president or another officer, a very motivated and confident person will have to lead or “facilitate” the session.

1. **Introductions** (20-30 min)
   - Gather together the girls who want to form the club.
   - The facilitator says hello, introduces herself, and writes “Young Women’s Social Club” on the blackboard.
   - Each girl will stand up, introduce himself, and give one purpose of a YWSC.
   - The facilitator will write these on the board. The girls will copy them into their notebooks.
   - If the girls are shy and will not speak, the facilitator can give a few of her own examples for why a YWSC exists.

2. **Mission Statement** (20-30 min.)
   After these purposes for Young Women’s Social Club are on the board:
   - The facilitator will write up the “Mission Statement” below. A mission statement is a one-sentence explanation of what an organization’s purpose is.
   - This is the mission statement for YWSCs. It is a complex sentence.
     “The Young Women’s Social Club (YWSC) was created to provide peer support and promote the health and well-being of club members, fellow students and community members through education, recreation, dialogue, discussion and other activities designed to increase awareness of women’s issues.”
   - We can make it into a few sentences to be more easily understood:
     1. The YWSC was created to provide peer support.
     2. The YWSC was created to promote the health and well-being of club members, fellow students and the rest of the community.
     3. This will be done through education, recreation, dialogue, discussion and other activities.
     4. All these activities will be designed to increase awareness of women’s issues.
   - Compare what the girls have said with the mission statement.
   - It is OK if what the girls have said does not exactly match the statement in words, but the ideas are the same. For instance, if a girl says, “A purpose of the YWSC is to raise self-esteem,” the facilitator can match is to the part of the statement which reads,
“…promotes the health and well-being of club members.” This will show that self-esteem is a part of a healthy person.

3. Goals (and Activities) (20-30 min)
A YWSC, like a young woman, must have Goals and Activities. Doing activities helps you achieve goals. Achieving goals helps you finish your mission. Compare this to a young girl who wants to make the people in her country healthy. Her mission is to make the country healthy. Her goals include becoming a doctor, then going to the public health school. Activities which will help her achieve these goals are very immediate: she needs to pass all her math and science classes this year.

We want to find out what goals the YWSC needs to set, if it has the mission statement given above.

- The facilitator uses the same strategy she used in step 2 (above) to have girls give their ideas for YWSC goals.
- She will write the girls’ ideas of goals on the board. Everyone will copy them.
- She will also write the following IRC goals on the board and compare them, like she did in steps 2 and 3 (above):
  a. To increase knowledge about reproductive health care. This includes knowledge about abortion, contraception, female mutilation, anatomy and physiology, menstruation, STDs and HIV.
  b. To encourage the education of females.
  c. To increase knowledge and develop awareness about other women’s issues. These include sexual violence, self-sufficiency, gender awareness and women’s rights.
  d. To provide peer support to refugee young women.
- Take a few minutes to make sure that everyone understands these goals, and how they fit into a mission statement.

4. Activities (20-30 min)
Given these goals, what activities will help you make each goal a reality?

- Each girl thinks of ideas and the facilitator writes them up.
- If they run out of ideas, choose others from this list to help them. Don’t write all at once though; usually people just need hints, and can do the thinking themselves.
- Make sure all these ideas, and any others they can think of, are written on the board and copied into copybooks after.

  Workshops  
  Guest speakers  
  Debates  
  Songs, dramas and programs  
  Celebrate International Women’s Day  
  Have a career day
Big Sisters program
Poster contents
Study sessions using IRC reference books
Study sessions to support other girls academically
Visit counselors
Hold regular meetings
Sports competition
Social events: dances, etc

• Take a few minutes to make sure the girls understand how these activities can help the goals we set out in step 4, and how achieving the goals in step 4 will complete part of the mission in step 3. For instance, by holding study sessions every Tuesday, the girls will be fulfilling two goals: providing peer support (goal b), and promoting the education of females (goal d). These two goals, if they are fulfilled, are working towards the completion of the mission.

• The reason we have goals, activities and mission is not to confuse people. It is so that people know why they do the things they are doing. If they realize what the purpose of their activity is, and how it helps the bigger picture, they will be more likely to stay focused.

5. Elections/Sponsors (20 min)
   Once this has been completed, you can choose officers by election—or a fix a date to do so. If a sponsor has not been chosen yet, take the suggestions from the girls about who it could be.

6. Choosing an activity (30 min)
   Pick one of the activities you thought of, find a couple of people who, with support from the sponsor, would be willing to organize it and set a date on which you will have your activity. The people chosen to do this and any others who are interested will then break off on their own for about 30 minutes to discuss how they will make they activity happen; they will set dates for follow-up meetings, identify problems and solutions, etc.

7. Group emblems (1 hour)
   Divide the group into 3 parts. Each group will work on one of the following projects:
   a. A motto: Think of several mottos that would be good ones for your group to have, then present them to the whole club for a vote (a motto is a phrase which captures the spirit of something). The motto of Liberia is “The love of liberty brought us here,” because the country was founded by freed American slaves. That of the United States of America is “Out of many, one,” and it refers to the fact that the USA is made of fifty smaller states united as one.

   b. A symbol or picture: Draw an image of symbol that does the same thing visually that a motto does with words. Design several and present them for the group to vote on.

   c. A song or anthem: This can be sung at the beginning of each meeting to remind each girl why she is part of the group; it will represent the spirit of the group in song. For instance, here is a song written by the students of Cabral Refugee School in Macenta:
Togetherness is good for our mothers,
Togetherness is good for our sisters,
Togetherness is good for young girls,
And togetherness is good for the women.

By being together we prevent oppression,
By being together we prevent discrimination,
By being together we prevent oppression,
And by being together we prevent discrimination.

8. Once these things are presented and decided, fix a date for the next meeting (no more than two weeks) and take suggestions as to what the agenda should be.

9. Pass out copybooks so that the girls can write down the Mission Statement, the Goals, the possible Activities and Motto, Symbol and Song. They can memorize the song and the mission statement for next time. Adjourn meeting.

IDEAS FOR YWSC ACTIVITIES

DRAMA CONCERNING WOMEN’S ISSUES
  a. Select a drama from the drama booklet, or elect a group of students to write a short drama concerning a woman’s issue
  b. Assign parts.
  c. Make a rehearsal schedule.
  d. Invite students, parents, community members and IRC staff to attend. BE SURE TO CHOOSE A TIME THAT IS NOT DURING SCHOOL HOURS!

SONGS ABOUT WOMEN’S ISSUES
  a. Learn existing songs dealing with women’s issues, or choose a few students to write their own.
  b. If your school does not have drums or sassas, you can request them from the health specialist.
  c. Practice the songs.
  d. Invite students, parents, community members and IRC staff to attend.

MAKING POSTERS OR HOLDING A POSTER CONTEST
  a. Ask for club members to make and fix posters around the school which celebrate women
     OR
  a. Select a topic and a submission date for a poster contest.
  b. Inform students and other girls in the community that you are holding a poster contest and let them know the topic. Post flyers or make announcements to do this.
  c. Ask some teachers, health workers, students or other influential members of the community to serve on a judging panel to decide which posters are the best.
  d. Set a date for the exhibition of the posters.
  e. Inform IRC staff of the date of the exhibition.
WOMEN’S HEALTH PROGRAM
a. Hold an initial meeting with the principal, interested teachers, and other YWSC members to discuss ideas for a health program. The themes should be based on women’s issues.
b. Select one topic for the program. Possible topics include: anatomy and physiology of the male reproductive system; family planning; FGM (female circumcision); or violence against women.
c. Decide what the main activity will be. Possibilities include: dramas; songs; debates; round table discussions; small group activities.
d. Assign tasks to different people. Make sure that at least a couple of people are working to arrange each activity. These will include: publicizing the fair, arranging for a place and a time to have it, inviting special guests (like the Health Specialist, for instance), setting up on the day of the fair, etc.
e. Decide whether you will want refreshments or vendors to sell food.
f. Inform students, community members, and IRC staff about the date and topic of the fair. If two schools are close together, consider working together on one fair.

GROUP DISCUSSIONS – A simple activity for a quiet afternoon with any number of people.
a. Select a topic from one of the club’s reference books.
b. Assign one or two members to read or research the topic.
c. Reserve time during the club’s meeting for the one or two members to explain what they have learned.
d. Discuss the topic as a group or in small groups.
e. The members who researched the topic or the sponsor should answer questions from other members.

WOMEN’S ISSUE TALK
a. Select a topic on women’s issues.
b. Assign club members to research the topic.
c. Write an outline of the main points that will be covered during the talk.
d. Set a time and date for the talk and select a location.
e. Invite other female students and teachers in your school or the community.
f. Hold the talk.

Have great and productive semester!!!
## Sample Workshop Topics:

<table>
<thead>
<tr>
<th>YWSCs</th>
<th>YMSCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision-making</td>
<td>Gender Awareness</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>Gender Violence</td>
</tr>
<tr>
<td>Goal-setting</td>
<td>Goal setting</td>
</tr>
<tr>
<td>Public speaking</td>
<td>HIV and AIDS</td>
</tr>
<tr>
<td>Giving health talks</td>
<td>Self-esteem</td>
</tr>
<tr>
<td>How to say no to sex: Abstinence</td>
<td>Understanding differences</td>
</tr>
<tr>
<td>Birth control pills</td>
<td>Empathy</td>
</tr>
<tr>
<td>Conception and pregnancy</td>
<td>Listening skills</td>
</tr>
<tr>
<td>Contraception overview</td>
<td>Peace education overview</td>
</tr>
<tr>
<td>Depo Provera</td>
<td></td>
</tr>
<tr>
<td>Menstruation</td>
<td></td>
</tr>
<tr>
<td>Male and female reproductive systems</td>
<td></td>
</tr>
<tr>
<td>Role of women in society</td>
<td></td>
</tr>
<tr>
<td>Preventing unwanted pregnancy</td>
<td></td>
</tr>
<tr>
<td>Gender issues</td>
<td></td>
</tr>
<tr>
<td>STDs and AIDS</td>
<td></td>
</tr>
<tr>
<td>Gender violence</td>
<td></td>
</tr>
<tr>
<td>Condom use and negotiation</td>
<td></td>
</tr>
<tr>
<td>Female genital mutilation</td>
<td></td>
</tr>
</tbody>
</table>

A workshop with YWSCs and YMSCs together could focus on:

- Relationships
- Planning club activities
- Designing educational campaigns
1. Which part is found in both men and women?
   a) Urethra  
   b) Cowper’s glands  
   c) Seminal vesicle  
   d) Labia minora

2. Which part is found only in men?
   a) Urethra  
   b) Bladder  
   c) Clitoris  
   d) Prostate gland

3. Can a girl get pregnant the first time she has sex?
   a) yes  
   b) no

4. When is a woman most likely to become pregnant?
   a) right before her period  
   b) right after her period  
   c) in the middle of her cycle  
   d) any time during her cycle

5. Which of the following make a woman pregnant? (Circle all that apply.)
   a) taking oral pills  
   b) a man’s sperm meets with her egg  
   c) hard sex  
   d) a man’s sperm goes into her womb

6. How often do most women ovulate?
   a) every day  
   b) every week  
   c) every month  
   d) no one knows

7. Which contraceptive method is the most effective at preventing pregnancy?
   a) Condom  
   b) Pill  
   c) Rhythm method  
   d) Mucus method
8. Which of the following methods of preventing pregnancy are not reliable?
   a) rope
   b) withdrawal
   c) pot under the bed
   d) all of the above

9. Can condoms be too small for some men?
   a) yes
   b) no

10. Can putting oil on a condom spoil the condom?
    a) yes
    b) no

11. Name 3 things young men can do to help prevent abortion.

12. Abortions can cause:
    a) pain
    b) sterility
    c) death
    d) all of the above

13. Who is responsible for making sure girls don’t get pregnant?
    a) girls
    b) boys
    c) both partners

14. Using a condom spoils the pleasure of sex. Do you:
    a) strongly agree
    b) agree
    c) disagree
    d) strongly disagree

15. I will use a condom the next time I have sex.
    a) strongly agree
    b) agree
    c) disagree
    d) strongly disagree

16. Abstinence is not good for young men.
    a) strongly agree
    b) agree
    c) disagree
    d) strongly disagree
1. What did you like the most about this workshop?

2. What did you like the least?

3. How could this workshop be improved?

4. What topics would you like to have in future workshops?

5. Please evaluate your facilitators.
Young Men’s Social Club Workshop
Agenda

Day 1
Welcome and introductions
Pre-test
Self-esteem
Goal-setting

Day 2
STDs and AIDS

Day 3
Gender Awareness
Gender Violence
Post-test
Evaluation
Closing
Gender Awareness

Time: 2 hours

Objectives:
• To understand the difference between gender and sex.
• To recognize the roles forced unto women by society

Materials: poster sheets, markers, tape, B/B, chalk

Procedure:
I. Visualization exercise (15 min)
Instruct participants to close their eyes and imagine that they were from another country where women hold the dominant role in society. Women are the leaders and they are the heads of the family. Men are important for the reproduction of children and doing housework but God has given women most of the power and they control most aspects of society.

Imagine that as a young child, you are never given attention like your two older sisters are. They are always given more food. When you are sick, your father won’t take you to the health clinic because he doesn’t want to waste money on you. Soon, you’d he married off anyway.

As you grew, you are forced to do more and more of the work around the house and in the bush. You wash the dishes, the clothes, chop wood, carry water, prepare meals, take care of your little brother. Your sisters attend school but you aren’t allowed to go. Once in a while they teach you a little of their lesson, and you really enjoy that, especially math, but most times they are too busy playing with their friends. You have too much to do at the house anyway.

When you are 14 years old, you are married off to an old woman in a far off village who already has 3 husbands. As the youngest husband, the other ones are very cruel towards you. They beat you when the wife is not around plus make you do all the housework. On the days your meals are prepared late because you were in the bush looking for wood, your wife beats you until you can barely move. You haven’t met any friends in this village and cannot trust anyone, so who can you talk to? You are usually the last one to bed and the first to wake up. There is just too much work and you are always tired.

Discussion (45 mins)
Ask the participants:
• Describe the story.
• How did you feel as a man in this society?
• How do you think the women felt in this society?
• How do you feel about the women, (ex. your wife) in the story?
• Would you like to live in this society? Why or why not?
• Is this society fair? Why or why not?
Does something like this happen in your community? (it is usually opposite)
How do men feel here?
How do you think women feel here, living like this?
If you don’t want the kind of society described in the story, why are women forced into these roles? (if students say it’s tradition, ask them if all traditions are right, ask for some examples where beliefs have changed)

The point is that NOBODY should be forced into these kind of roles.

III. Defining gender and sex (45 mins)
Ask a volunteer to come to the front. Ask the participants: What makes ________ a man?
How do we know that ________ is a man?

- Which of these things is he born with and what was he not born with?

Afterwards, explain the difference between gender and sex.
**Sex:** a person’s characteristics that are biological, making us male or female (what you are **born with**)
**Gender:** a person’s characteristics that come from society. All that makes John a man and Mary a woman that is based on society and is leaned from others.

Ask the participants to number from 1 to 9 in their copybooks. Read the following statements and let them write S meaning sex or G meaning gender for any statement they feel comes from a person’s sex or a person’s gender.

1) Women are better cooks that men. (G)
2) Boys’ voices break at puberty, girls’ do not. (S)
3) Women give birth to babies and men don’t. (S)
4) Boys are able to go to school, but girls must stay home and work. (G)
5) Women can breast feed babies, men can bottle feed babies. (S)
6) Girls develop breasts and boys do not. (S)
7) According to the UN statistics, women do 67 percent of the world’s work yet their earnings for it amount to only 10 percent of the world’s income. (G)
8) Women farmers in India are paid only 40-60 percent of the men’s wage. (G)
9) In ancient Egypt men stayed at home and did weaving. Women handled family business. Women inherited properties and men did not. (G)

Go over the correct answers. Ask the participants:
- Did any statements or answers surprise you?
- Do the statements indicate that gender is inborn or learned?
- What is a role? (a part that people play)
- What is a gender role?
  - (roles given to people according to their male or female gender)
  - (parts they play in society because they are male or female)
  - (what is expected of men and women by society)
- Are gender roles the same around the world?
- What differences can you see between men’s roles in Sierra Leone/ Liberia/ Guinea/US?
- What differences can you see between women’s roles in Sierra Leone/Liberia/Guinea/US?
Do gender roles change over time? Ask participants to give examples of how men’s and women’s roles have changed over time in Sierra Leone and Liberia.

So, gender roles are the roles of men and women influenced by society and are different between cultures and can change over time.

IV. Conclusion (15 mins)

Ask participants what lessons they learned from this session.

Summarize: We have seen that how men and women are viewed and treated by society comes from traditions. We have seen that traditions can change. None of the men here would like to trade places with women. Women are human beings too, so why do we allow them to suffer?
STDs and AIDS

The Facts

The Definition

$S$ = Sexually
$T$ = Transmitted
$D$ = Disease

An STD is a disease that is usually spread through sexual contact.

What are the signs of STDs?

- an unusual discharge or odor from the sex organs
- sores, blisters, or bumps near the sex organs or mouth
- pain or burning during urination
- pain in the lower part of the belly
- pain or bleeding during sexual intercourse
- fever, aches, and chills
- itching
- swelling of the scrotum

These symptoms can be summarized by:

$D$ = discharge
$I$ = itch
$S$ = swelling
$P$ = pain
$U$ = ulcers (sores)

But sometimes an infected person has no symptoms at all!

What do you do if you get an STD?

- Get treatment immediately.
- Avoid sex until you are cured.
- Inform the person who gave you the STD so he/she can be treated as well.

Prevention versus cure

- It can be difficult to get treated for STDs, because the proper drugs are sometimes not available. So it is much better to avoid ever getting these diseases.
The treatment can also be very expensive; the price of a condom is nothing in comparison!

AIDS has no cure; it is killing people worldwide. Prevention is our best hope!

What is AIDS?

H = Human  A = Acquired
I = Immuno-deficiency  I = Immune
V = Virus  D = Deficiency
S = Syndrome

HIV is the virus that over time causes a weakening of the immune system known as AIDS.

How does HIV work? How does it affect the body?
- HIV kills the body’s white blood cells so the body has no protection against germs.
- Since the body’s defenses are reduced, other germs can easily enter the body and kill the person.
- It can take up to 10 years for HIV to kill most of the body’s white blood cells. During this time, people with HIV in their blood may look and feel normal.

Can you look at a person and know that they have AIDS?
- No, it won’t be known unless the person has a blood test.

How long does it take to die from AIDS?
- AIDS is the last stage of the illness. Since the immune system is weakened, other sicknesses can attack and make the person ill.
- The person with AIDS will usually die within 1 to 3 years of the first symptoms.

How is AIDS spread?
- It is spread through the exchange of some bodily fluids such as blood, semen and vaginal discharge. You are most likely to be infected from unprotected sex or sharing needles.

How then, is AIDS not spread?
- by sharing clothes or towels or utensils (such as cups or spoons)
- by touching, kissing, shaking hands, crying, coughing, sitting close together
- by mosquito bites

Once again, how can you prevent AIDS?
- abstain from sex
- stick to one faithful partner who is uninfected
- use condoms
- make sure a clean needle is used when you get an injection
- buy a new razor when you get a haircut
- don’t get a blood transfusion unless you know the blood has been tested
Prevention methods:

- **Abstinence** (not having any kind of sex, 100% effective)
- **Faithfulness** (keeping to one partner, effective if both partners observe it and are uninfected to start with)
- **Condoms** (effective when used properly and every time you have sex)

The Activities

**Activity 1: Pass It Around Game**

Before the game starts, select three people and secretly give them special instructions. Tell one person that he or she has an STD, give one a sock to wear on his or her hand, and tell the third to refuse to shake hands with anyone.

Explain to everybody that they will each need a piece of paper and a pen. They will shake hands with five different people. After shaking each person’s hand, they should write down the person’s name on their paper.

After everyone has finished shaking hands and everyone has five names written down, explain that shaking hands in this game represents sexual intercourse and that one person among them has an STD.

Ask the person with the STD to raise his or her hand. Then find out who shook hands with that person; those people are now infected. Call all the infected people to one side. Ask everyone to see if any of them shook hands with those who are infected and so on. Also, inform the group that the person wearing the sock on his or her hand was wearing a condom and didn’t get infected. There was also one who abstained and didn’t get infected. See how many people were infected in the end.

Discuss:

- How did it feel to get infected?
- How did it feel to find you were not infected after all because you used a condom?
- How did it feel to be the one spreading the infection?

**Activity 2: Posters**

Have a poster contest on preventing STDs and HIV. Posters should promote one or all three forms of prevention: abstinence, faithfulness, condom.

**Activity 3: Advising a Friend**

Read the following story to club members:

Your friend Hawa has had a boyfriend, Modibo, for several months. During the break, he left to go to his uncle’s house to visit in a nearby camp. Meanwhile, Hawa started to date another boy, Musa. Musa and Hawa had sex and about 7 days later, Hawa noticed a yellowish-white discharge from her vagina. She didn’t realize that Musa had been sleeping with several other
girls. In one week, Modibo is to come back from break, and she doesn’t know what to say to him or what to do.

She comes to you for advice.

Discuss with members:

➢ What would you tell her?

After members give their ideas, make sure that they mentioned the following:

• Tell the friend about the effects of untreated STDs (pain, can kill babies, sterility, cancer, death).
• Tell her how STDs can be spread (to others through sex).
• Tell her how she can keep from giving the disease to others (avoid sex, use condoms).
• Make sure the friend goes to the clinic to get treated.
• Make sure the friend tells her sexual partners so they can get treated too.

Activity 4: What is the risk of contracting HIV?

Make 18 small signs with each of the Behaviors listed. Do not include their risk.

Hang 3 signs around the room—High Risk, Low Risk, No Risk. Pass out the 18 behavior signs and tell they should decide what is the risk of catching HIV from their behavior. They should move to that area of the room.

Now go through each behavior one at a time and see if the person with that behavior put herself in the correct risk area. Discuss the results with everyone:

➢ How do you feel looking at this?
➢ Does knowing that some things are definitely or probably a risk worry you?

<table>
<thead>
<tr>
<th>Behavior</th>
<th>High Risk</th>
<th>Low Risk</th>
<th>No Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstinence</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing needles for injection, body piercing, or tattooing</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual intercourse without condoms</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deep kissing</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dry kissing</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Getting a blood transfusion</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donating blood</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Using a public latrine</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Shaking hands with a person with AIDS</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Hugging a person with AIDS</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Being coughed on by a person</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Activity 5: Who is Responsible for Safe Sex?

Have members stand in a big circle.

Explain that you will read some questions and they should decide,

- Should it be the man or the woman who does the following things?

If they think the answer is the man, they should take a step back (out of the circle).

If they think the answer is the woman, they should take a step forward (into the center of the circle).

If they think the answer is the man and woman both, they should stay where they are and raise both hands in the air.

Now read through each of the following questions and give everyone time to choose a position. After each question, stop and discuss whose responsibility it is.

1) Who should start discussion about whether or not to have sex?
2) Who should decide whether to abstain from sex?
3) Who should start discussion of sexual history and safe sex?
4) Who should get information about condoms, STDs, and AIDS?
5) Who should choose to engage in other sexual behaviors instead of intercourse?
6) Who should decide whether to abstain from intercourse when there are no condoms available?
7) Who should plan ahead and get condoms before intercourse?
8) Who should tell the partner that using condoms is the right thing to do?
9) Who should pay for the condoms?
10) Who should make sure condoms are used at each act of intercourse?

Discuss:
- Sex is something shared between two people. Should they also share the responsibility?
- Should everyone have the right to protect herself?
Sample Drama:  

Neglected Woman  
By Lola YWSC

Characters: Father, Mother, 1st daughter, 2nd daughter  

Scene I  
Father: What are the girls doing over there? Is this the only thing you have to do every day? Girl children always bring hardship on people. Get out of here or I will throw you out with my left foot! Wait, let me call her mother, because I am sick of seeing them here. Musu! (Mother comes running) Look you have only brought me shame in this world by bearing only girls for me. Around the community and in other homes, men are proud of having boys, but for me only girls. Take your girls away! I rather had none than to have hopeless creatures like these. I say take your daughters or I’ll get them out. Why should I keep them? Soon they will marry and my name will be lost in the world. (Mother and children disappear from stage crying. Father leaves later.)

Scene II  
Mother: What has happened to me? I have asked God to bear a son, but I was only able to have two daughters, now I don’t have a husband! Oh God!  
1st daughter: Mama, don’t cry, because we are girls doesn’t mean that we are not humans. We will be your boys.  
2nd daughter: We will be your husbands too. We have the right to be here; we have the right to also live.  
1st daughter: Mama, be a strong woman and send us to school.  
Mother: Yes girls, I have heard you people. I will send you girls to school and will never give-up. But you too should not make me ashamed.

Scene III  
Narrator: They went to school and completed. One of them became a nurse and the other a teacher.  
2nd daughter: I must reach my sister so that we can visit Papa. He will be happy to see us. (She goes to her elder sister and she knocks on the door)  
1st daughter: Who is that knocking this bright lovely morning?  
2nd daughter: Open the door my dear woman. (They meet, hug and greet each other.) I want us to reach to Papa since it has been many years. I still think about him although he threw us out and denied us because we are girls.  
1st daughter: Yes, I too was thinking about it, but my sister, I don’t want to go. Papa never acted nice to us. Suppose we never had a strong mother. Let’s discuss it with mother first.  
2nd daughter: Yes, it is true, but let us visit Musu first. She always told us to forgive Papa; she will be happy to hear that we want to see him. (Children visit their mother to ask for permission to visit their father, mother agrees to it.)  

Scene IV  
Father: (Father works on his farm.) Oh! I am suffering, nobody, no friend, I will die. Oh! (He sees two women coming towards him.)  
Daughters: Hello old man.  
Father: Hello madam, are you from the UN office? Please help, I am really suffering.  
Daughters: We are your daughters, can’t you remember us? (He drops his hoe and runs to meet his daughters and begins to cry and asks for forgiveness)  
1st daughter: Papa, we are your children. We will never keep anything against you. I am a nurse and my sister is a teacher. Girl children can make a difference too. We have a place in the society just like boy children.
Young Men’s / Young Women’s Social Club
Monthly Activity Report

Date: ______________________

School: ________________________ Region: ________________________

Number of meetings held this month: ________________________

Number of discussions held this month: ________________________

What topics were discussed?
--------------------------------------------------------------------------------

--------------------------------------------------------------------------------

Number of activities completed this month: ________________________

Please describe the activities carried out this month:
(What, when, where)

1) ________________________

2) ________________________

3) ________________________

4) ________________________

Number of people who attended YMSC/YWSC activities: ______________

Describe any materials you need and what you plan to use them for: ______________

________________________________________________________________________

________________________________________________________________________

Signature of YMSC/YWSC President  Signature of YMSC/YWSC Sponsor
YWSC MONTHLY ACTIVITY SUMMARY

Month: __________________________    Region: __________________________

Number of clubs in region: _______    Number of reports received: ___________

Total # of discussions this month: ____    Total # of activities this month: __________

Total # of people who attended activities: _______________________

<table>
<thead>
<tr>
<th>Type of activity</th>
<th># of times activity was reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health talks</td>
<td></td>
</tr>
<tr>
<td>Songs</td>
<td></td>
</tr>
<tr>
<td>Dramas</td>
<td></td>
</tr>
</tbody>
</table>


YMSC MONTHLY ACTIVITY SUMMARY

Month: __________________________    Region: __________________________

Number of clubs in region: _______    Number of reports received: ___________

Total # of discussions this month: ____    Total # of activities this month: __________

Total # of people who attended activities: _______________________

<table>
<thead>
<tr>
<th>Type of activity</th>
<th># of times activity was reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health talks</td>
<td></td>
</tr>
<tr>
<td>Songs</td>
<td></td>
</tr>
<tr>
<td>Dramas</td>
<td></td>
</tr>
</tbody>
</table>
This Survey is anonymous. Please do not write your name on it. Information from this Survey will be used to improve health education program in IRC schools.

Please circle only ONE answer except where there are other instructions.

SCHOOL: __________________________ GRADE LEVEL: ________________

1. What is your age? ___________

2. What is your sex?
   a. female
   b. male

3. Are you married?
   a. yes
   b. no

4. How many children do you have? ____________

5. What is your nationality?
   a. Sierra Leonean
   b. Liberian
   c. Other

6. How many years have you attended any IRC school in Guinea? ________________

7. What groups do you belong to? (Circle ALL that apply.)
   a. church
   b. mosque
   c. peer educators
   d. african unity club
   e. young women’s social club
   f. young men’s social club
   g. health club
   h. other: ______________________________
8. What is your source of support? (Circle ALL that apply.)
   a. parent
   b. other relatives
   c. friends
   d. godpa
   e. petty trade
   f. work (cutting wood, washing clothes, etc)
   g. other support: ____________________________

9. What is the correct way to use condom? (Circle ALL correct answers.)
   a. let the penis weaken before removing the condom
   b. unroll the condom unto the standing penis
   c. open the condom package with your teeth
   d. no space at the end of the condom once it is on the penis

10. How many times should you use the same condom to have sex?
    a. once
    b. twice
    c. three times
    d. as many times as you want
    e. as many times as you want as long as you clean it between

11. What is the correct way to use family planning pills?
    a. take only the white pills
    b. take only the brown pills
    c. take one pill before having sex
    d. take one pill each day

12. What are the advantages of using contraceptives, such as condoms, family planning pills, IUD, or injection? (Circle ALL correct answers.)
    a. they prevent unwanted pregnancy
    b. they make you strong
    c. some can prevent sexually transmitted diseases
    d. some can prevent high blood pressure
    e. some can prevent craw-craw
13. When does pregnancy begin?
   a. when a woman’s egg is mature
   b. when a man discharges sperm
   c. when a man’s sperm enters a woman’s womb
   d. when a man’s sperm enters a woman’s egg

14. At what time in a woman’s monthly cycle is she most likely to become pregnant?
   a. at any time during her cycle
   b. right before she receives her period
   c. in the middle of her cycle
   d. right after she finishes receiving her period

15. Can a girl who has started receiving her period get pregnant the first time she has sex?
   a. yes
   b. no

16. Which of the following are sexually transmitted diseases? (Circle ALL correct answers.)
   a. syphilis
   b. craw-craw
   c. typhoid
   d. herpes
   e. gonorrhea

17. How are sexually transmitted and AIDS spread?
   a. through drinking water
   b. by shaking hands
   c. by kissing
   d. by having sex
   e. by sharing clothing

18. How can someone tell that he or she has a sexually transmitted disease? (Circle ALL correct answers.)
   a. sores on the neck
   b. sores on genitals
   c. running nose
   d. hair on genitals
   e. strange liquid coming from genitals
19. Can a person ALWAYS tell if he or she has a sexually transmitted disease?
   a. yes
   b. no

20. How can sexually transmitted diseases be prevented?
   a. do not shake hands with other people
   b. do not kiss other people
   c. urinate right after having sex
   d. use condoms when having sex
   e. use family planning pills

21. Which of the following methods of contraception is thought to be the MOST effective at preventing pregnancy?
   a. condoms
   b. birth control pills
   c. foaming tablets
   d. rhythm or calendar method
   e. withdrawal

22. How can the spread of AIDS be prevented? (Circle ALL that apply.)
   a. do not shake hands with other people
   b. do not kiss other people
   c. do not use needles or razors that have been used on other people
   d. use condoms during intercourse
   e. use family planning pills

23. What is rape?
   a. loving to your friend’s wife
   b. trading sex for food
   c. forced sex

The next questions ask about your opinions and practices concerning gender, reproductive health, sex and contraception. For these questions, there are no right or wrong answers. Please just give your own opinion and remember that you do not have to answer any question that you don’t want to.

24. What job would you like to do after you finish your schooling? _________________

25. How many years should a girl go to school? _______________
26. Where did you learn about sexually transmitted diseases and AIDS? (Circle ALL that apply.)

a. from a doctor or nurse  
b. from a parent or relative  
c. from a friend  
d. from an IRC peer educator  
e. from an IRC school health counselor  
f. from an IRC health specialist  
g. from an IRC teacher  
h. from other person: ____________________________  
i. I have no knowledge about STDs and AIDS.

27. In the last year, who has talked to you about sex? (Circle ALL that apply.)

a. parent  
b. teacher  
c. friend  
d. peer educator  
e. School health counselor  
f. young women’s social club member  
g. young men’s social club member  
h. health worker in the community  
i. other: _____________________________________

28. If you need contraceptives, treatment for sexually transmitted diseases, or other reproductive health services, where can you go?

a. to a doctor or nurse  
b. to a black bagger  
c. to a pharmacy  
d. to an IRC peer educator  
e. to an IRC school health counselor  
f. to an IRC health specialist  
g. to an IRC teacher  
h. other: ____________________________

29. What age do you think is best for young men to start sexing?

a. 10-12 years old  
b. 13-15 years old  
c. 16-18 years old  
d. 19-21 years old  
e. 22 years or older
30. What age do you think is best for young women to start sexing?
   a. 10-12 years old
   b. 13-15 years old
   c. 16-18 years old
   d. 19-21 years old
   e. 22 years or older

31. What is your opinion of a 20 year old woman who has never had sex?__________________

32. What is your opinion of a 20 year old man who has never had sex?__________________

33. A man should flog his wife if she lovers out. Do you:
   a. strongly agree
   b. agree
   c. don’t know
   d. disagree
   e. strongly disagree

34. In the last year have you ever hit your boyfriend or girlfriend?
   a. yes
   b. no

35. A woman has the right to refuse to sex with her husband if she doesn’t want to sex.
   a. strongly agree
   b. agree
   c. don’t know
   d. disagree
   e. strongly disagree

36. Do you know any young woman who had an unwanted pregnancy who tried to take it out?
   a. yes
   b. no
37. How frequently do young women who have had unwanted pregnancies try to take them out?
   a. almost always
   b. sometimes
   c. not very often

38. If you do not want to have sex but your girlfriend or boyfriend does, do you think you could say no?
   a. yes
   b. no

39. Have you ever had sex before?
   a. yes
   b. no

IF YOU ANSWERED "NO" TO QUESTION 39, DO NOT ANSWER ANY MORE QUESTIONS.

40. How old were you the first time you had sex? _________________

41. Have you had sex in the last year?
   a. yes
   b. no

IF YOU ANSWERED "NO" TO QUESTION 41, DO NOT ANSWER ANY MORE QUESTIONS.

42. How often did you have sex in the last year?
   a. one time every few months
   b. one time a month
   c. 2-3 times a month
   d. one time a week
   e. a few times per week
   f. every day

43. Have you had sex with more than one partner in the last year?
   a. yes
   b. no
44. How would you feel if one of your partners suggested that you all use a condom during sex? __________________________________________________________

____________________________________________________________________

45. In the last year, did you worry that you or your sex partner(s) might get pregnant?
   a. yes
   b. no

46. In the last year, did you worry that you might get sexually transmitted diseases?
   a. yes
   b. no

47. Have you or any of your sex partners had an unwanted pregnancy in the last year?
   a. yes
   b. no

48. Have you or your partner done something in the last year to take out a pregnancy?
   a. yes
   b. no

49. Did you use contraceptives (including condoms) at any time in the last year?
   a. yes
   b. no

50. If you answered "no" to question 49, why didn’t you use contraceptives in the last year?
   a. I wanted to get pregnant (or my partner wanted to get pregnant).
   b. I did not know where to get contraceptives.
   c. Contraceptives are too difficult to use.
   d. Contraceptives are too expensive.
   e. I was afraid my parents would find out.
   f. My religion forbids the use of contraceptives.
   g. Other reasons: _____________________________________________________

IF YOU ANSWERED "NO" TO QUESTION 49, DO NOT ANSWER ANY MORE QUESTIONS.
51. If you used contraceptives in the last year, what type of contraceptives did you use?

   a. condoms
   b. birth control pills
   c. foaming tablets
   d. injections
   e. rhythm or calendar method
   f. withdrawal
   g. IUD
   h. other methods: ________________________________________________

52. Each time you got contraceptives in the last year, how long did it take you to get them?

   a. less than one hour
   b. 1-4 hours
   c. 5-9 hours
   d. 10 or more hours

53. During the last year, where did you USUALLY buy your contraceptives?

   a. in a clinic
   b. in a pharmacy
   c. in the market
   d. from an IRC peer educator
   e. from an IRC school health counselor
   f. from an IRC health specialist
   g. from someone else: ________________________________________________

54. Where did you learn about the contraceptives methods you used? (Circle ALL that apply.)

   a. from a doctor or nurse
   b. from someone at the pharmacy
   c. from someone at the market
   d. from a parent or relative
   e. from a friend
   f. from an IRC peer educator
   g. from an IRC school health counselor
   h. from an IRC health specialist
   i. from an IRC teacher
   j. from someone else: ________________________________________________

55. Did you use any type of contraceptives the last time you had sex?
56. Have you ever talked with your sex partner or partners about using condoms?
   a. yes
   b. no

57. Did you use a condom the last time you had sex?
   a. yes
   b. no

Thank you very much for taking this survey.
**Introduction**

Introduce yourself and explain the following to participants; answer any questions they have.

**Purpose:** To find out your views on how to improve the Young Women's Social Clubs and get your ideas on the effect you think your group is having in schools and refugee communities.

**Ground rules:** This is meant to be a free discussion; it is not a test. There are no wrong or right answers. Please feel free to say whatever you feel. You can add to or disagree with whatever your friends say, just please remain respectful. You don’t have to be recognized before you talk, but please make sure not to interrupt others.

What your group says will be kept confidential - no one's name will be written down and it will be combined with what others say. Please help keep confidentiality by not repeating what your friends say to anyone else later.

**Discussion Questions**

**How to improve the YWSC**

1) What do you like about being a YWSC member?  
Prompt: *What are some things you have done that you are proud of?*

2) What don’t you like about being in this club?  
Prompt: *What difficulties does your club have?*

3) What do you think should be changed to make the YWSC better?  
Prompts: *What would make it easier to be in the club? What could your club do differently?*

4) What would you like IRC to do differently?  
Prompt: *What could IRC do better to help the club?*

**Effects of the YWSC**

1) How do you think being in the YWSC has helped you?

2) How has the YWSC helped other young women in your school?  
Prompts: *Have you seen any changes in what girls know about reproductive health? Any changes in STDs? Contraceptive use? In unwanted pregnancies?*
3) What about young women in the community, who are not in school?
Prompts: Have you seen any changes in what girls know about reproductive health? Any changes in STDs? Contraceptive use? In unwanted pregnancies?

4) Do you think the YWSC has had any effect on how girls view themselves?
Prompts: Do you see any changes in how girls look at things or how they act? How they see the role of women? How about what girls plan to achieve in life?

5) Have you noticed any difference in girls' progress in school?
Prompts: Have you seen any change in girls speaking in class? In dropping out?

6) Are there other effects you think the YWSC has had on young women?

Other

1) Do you have any other final words or recommendations to the Health Ed. Dept.?

Conclusion

Thank participants for their valuable contributions to the discussion.
Introduction

Introduce yourself and explain the following to participants; answer any questions they have.

Purpose: To find out your views on how to improve the Young Men’s Social Clubs and get your ideas on the effect you think your group is having in schools and refugee communities.

Ground rules: This is meant to be a free discussion; it is not a test. There are no wrong or right answers. Please feel free to say whatever you feel. You can add to or disagree with whatever your friends say, just please remain respectful. You don’t have to be recognized before you talk, but please make sure not to interrupt others.

What your group says will be kept confidential - no one’s name will be written down and it will be combined with what others say. Please help keep confidentiality by not repeating what your friends say to anyone else later.

Discussion Questions

How to improve the YMSC

1) What do you like about being a YMSC member?
Prompt: What are some things you have done that you are proud of?

2) What don’t you like about being in this club?
Prompt: What difficulties does your club have?

3) What do you think should be changed to make the YMSC better?
Prompts: What would make it easier to be in the club? What could your club do differently?

4) What would you like IRC to do differently?
Prompts: What could IRC do better to help the club?

Effects of the YMSC

1) How do you think being in the YMSC has helped you?

2) How has the YMSC helped other young men in your school?
Prompts: Have you seen any changes in what your friends know about reproductive health? Have you seen any changes in how young men get along with each other? In unwanted pregnancies? Condom use? Contraceptive use? Violent behavior?
3) What about young men in the community, who are not in school?  
Prompts: Have you seen any changes in what your friends know about reproductive health? Have you seen any changes in how young men get along with each other? In unwanted pregnancies? Condom use? Contraceptive use? Violent behavior?

4) Do you think the YMSC has had any effect on how young men view themselves?

5) What about how young men view women?  
Prompts: Do you see any changes in how your friends look at women or how they act towards them? What about changes in how young men view rape or other forms of gender violence?

6) Are there other effects you think the YMSC has had on young men?

**Other**

1) Do you have any other final words or recommendations to the Health Ed. Dept.?

**Conclusion**

Thank participants for their valuable contributions to the discussion.