manhood 2.0

A Curriculum Promoting a Gender-Equitable Future of Manhood
Acknowledgements

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The Manhood 2.0 program presented here is a milestone in the history of gender programming for young men in the United States. It was created with the specific goal of engaging young men—and those around them such as teachers, parents, coaches, and female peers—in promoting healthy ideas and practices related to manhood in the United States. Manhood 2.0 is based on Program H and Program M, a comprehensive approach to working with youth for gender justice that Promundo and partners first developed in Latin America more than 15 years ago. Since then, the activities have been regularly updated, and they have since been used in more than 35 countries and endorsed by government ministries, research agencies, the United Nations, diverse funders, and, most importantly, by youth themselves. Manhood 2.0 emerges from years of research affirming that inequitable, harmful ideas about manhood are often the drivers of negative health consequences, relationship and sexual violence, bullying, mental health concerns, substance use, and other challenges.

The premise of Manhood 2.0 is that being aware and conscious of how we in our society are raised within the confines of restrictive ideas about gender is not only a necessary, but also a liberating experience. The approach is rooted in popular education, in feminist collective action (intersectional feminism in particular), and in the work of Brazilian educator Paulo Freire. Freire espoused the idea of collective consciousness-raising among those oppressed by the many ways in which people are marginalized—through racism, sexism, homophobia, transphobia, classism, ableism, and so forth. We take this work further by not only supporting young men to recognize ways in which power and oppression manifest in their lives, but also providing them with opportunities to practice skills to create healthier relationships, positive social networks, and nonviolent communities.

We often don’t think of men, or young men, as being harmed by gender norms. But our research and that of many others affirms how rigid norms about manhood, what we sometimes call the “Man Box,” can do just that: trap young men into ways of thinking and being that can harm others, including women and girls. Engaging young men in critical reflection and skill-building is one piece of the puzzle to address gender justice. We believe that young men, as well as young women and individuals of all gender identities, can play a critical role in shaping the world around them. When critically aware of how gender norms and stereotypes shape their lives in negative ways, they will become allies in the cause for gender justice and they will live out gender equality in their own lives. For those using Manhood 2.0, we recommend situating it within broader efforts to engage youth of diverse genders and sexual orientations, parents and other adult caregivers, and adult allies, as well as within broader movements to continue progress towards economic and social justice.

In the era of #MeToo and Black Lives Matter, it is imperative to engage young people as allies to continue progress on gender and social justice. Manhood 2.0 contributes to more informed, reflective, and engaged citizens, young men and women who seek to promote justice in their lives, who seek to live in equality, and who raise their voices demanding it. Manhood 2.0 emphasizes the positive, encouraging young men to add their voices to the cause of gender justice.

We encourage you to use Manhood 2.0 to begin these conversations in your communities and to be part of a community of activists, program staff, youth, and citizens who believe that healthy, equity-seeking young men contribute to a more just world.

Gary Barker, Promundo-US, and Elizabeth Miller, University of Pittsburgh School of Medicine
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Introduction
Background Information on Manhood 2.0

Manhood 2.0 is a gender-transformative curriculum developed by Promundo and the University of Pittsburgh to engage young men aged 15 to 24 in reflecting on the impacts of harmful gender norms, specifically those surrounding issues such as teen pregnancy prevention, dating violence and sexual assault, and the bullying of lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals. The initiative is an adaptation of Program H, an evidence-based program launched by Promundo and partners in 2002. Underpinning this approach is the knowledge that the ways in which boys and young men are socialized hold profound implications for the health, well-being, and security of men and boys, and for women and girls. Research and evaluations increasingly affirm the links between gender-inequitable attitudes and sexual assault, as well as young men's use of contraceptives, health-seeking behavior (including HIV testing), and more equitable relationships.

This manual was created for use by facilitators working to implement Manhood 2.0 to engage young men in gender equity, violence prevention, and creating healthier and more equitable relationships. The Manhood 2.0 manual includes a series of sessions to enable young men to reflect and build collective support for making positive, healthy changes in their lives. Promundo designed this manual in collaboration with the Manhood 2.0 implementing partners, the University of Pittsburgh, and the Latin American Youth Center of Washington, DC.

The original Program H methodology combines group education sessions with youth-led campaigns and activism, and it has been adapted in more than 35 countries around the world. It is based on extensive research on young men in Brazil. More gender-equitable attitudes were found among men who had a peer group supportive of gender equality, better personal experiences related to gender equality, and more meaningful male role models. Program H contains evidence-informed modules for engaging young men in violence prevention. Quasi-experimental evaluations of Promundo-designed gender-equity programs with young men in India and Brazil found a significant impact on increased condom use and reduced relationship violence. For example, an impact evaluation of young men in India who participated in Yaari Dosti (the Indian adaptation of Program H), were two to three times more likely to use a condom during sex after completing the program than young men in a control group. Preliminary results from implementation by the Children's Hospital of Pittsburgh of UPMC indicated that four months after the end of program, Manhood 2.0 participants had significantly more equitable gender attitudes and greater recognition of abuse than when they began the program. Manhood 2.0 participants also reported a slight increase in positive bystander behaviors, while participants in the control arm reported fewer positive bystander behaviors, when witnessing abuse.

Manhood 2.0 is designed to engage young men in the United States in questioning and challenging harmful gender norms, ultimately aiming to transform them. Employing a lens of intersectionality, Manhood 2.0 encourages young men to reflect critically on their identities within the particular contexts in which they are formed. Participants meet in a safe environment and work with their peers to build healthier attitudes, behaviors, and relationships. They are encouraged to talk about gender beyond the rigid divisions of “male” and “female” and to consider and value other gender expressions.

What about Young Women?

Recognizing the need to work with and empower young women alongside men, and based on input from young men themselves, the developers of this curriculum also adapted Program M. Program M engages women in a similar critical reflection process about gender norms and empowerment. It helps young women explore social constructions of gender and the effects of these on their health, and it promotes young women’s ability to develop skills to more confidently make decisions in different spheres of their lives. The adaptation of Program M for US urban settings is called Sisterhood 2.0. While the evaluation of Sisterhood 2.0’s effects is ongoing, its core components mirror those of Manhood 2.0 – including being grounded in intersectional feminist theory and addressing sexual diversity and homophobia. Sites may wish to use both programs in parallel.

Manhood 2.0 as an Integrated Program

We recommend using the group education activities in this manual as part of an integrated program for young men. Evidence from international settings has shown that group education activities alone cannot promote attitude and behavior changes; when these education sessions are complemented by youth-led campaigns, activism, and other community actions, the effects can be greater and longer-lasting. Furthermore, an integrated approach is important to sustaining attitude and behavior changes over time at the community level and beyond. (See the Manhood 2.0 theory of change and the socio-ecological model in the following sub-sections for more information.)

The manual’s activities are divided by the following themes:

1. Welcome
2. Exploring Gender and Identity
3. Exploring Power and Relationships
4. Thinking about Our Emotions
5. Sexual and Reproductive Health
6. Violence and Relationships
7. Making a Commitment to Healthy Lives

Each session contains a series of activities lasting from 30 minutes to an hour, planned for use with groups of young men. Carrying out a carefully selected combination of activities is recommended versus holding scattered or isolated group education activities. Using the “General Guidelines for Program Managers or Coordinators on Implementing Manhood 2.0 in Their Community” in the next section, a facilitator and other program staff should conduct a thoughtful process to design the program and select the activities that are best suited to bring about the desired attitude and behavior changes and for the particular group of participants. The activities featured here have all been tested with young men, but they must be adapted to each context and audience and implemented alongside additional activities.

A fully integrated Manhood 2.0 program means complementing activities with campaigns, activism, workplace training, leadership opportunities, and advocacy. Implementers of Manhood 2.0 are also highly encouraged to make appropriate connections to service providers and other professionals who are part of young men’s lives and influence their socialization. For example, facilitators might refer young men to counseling, a victim service advocate, a health service provider for sexually transmitted infection (STI) testing, or peer mediation, depending on both the needs of the young men and the goals of the program. Ideally, service providers, leaders, and participants will take ownership of the Manhood 2.0 program, carrying it out as part of an existing menu of services and thereby reinforcing its gender-equitable messages far beyond a program led by the facilitator. Additionally, under ideal circumstances, Manhood 2.0 should be connected to an organization’s advocacy efforts to influence gender-equitable public policies at the appropriate levels.
Manhood 2.0’s Theory of Change

The concept of “gender consciousness” that frames the original Program H comes from the idea of critical consciousness developed by Paulo Freire. The process of “conscientization,” according to Freire, links to individuals’ capacity to reflect on the world and to choose a given course of future actions informed and empowered by that critical reflection. This process of reflecting critically on the history of cultural conditions and class structures supporting and framing experiences of gender inequality can help promote personal growth, political awareness, and activism – which can create the conditions to challenge and change gender role prescriptions.

By questioning gender stereotypes, young men who already act as “voices of resistance” against rigid gender norms become further engaged and serve as role models for other young men. The focus on young men (typically aged 15 to 24) comes from recognizing the specific gendered experiences and risks among young men and the importance of reaching young men when they are developing their attitudes and beliefs about gender norms and power dynamics in relationships.

Learn through questioning and critically reflecting about gender norms, to develop new attitudes and skills

Rehearse attitude and behavior changes, and new skills in safe environments of group education sessions

Live gender-equitable, non-violent and healthy attitudes and behavior in everyday life in a sustained way. This contributes to positive outcomes such as increased condom use and improved SRH; and reduced STIs and HIV/AIDS, gender-based violence and gender equity itself

Internalize new gender attitudes and norms

Supporting Influences and Structures

Peer groups questioning and transforming gender norms together; role modeling of gender-equitable lifestyles, and taking action through advocacy in one’s community and broader levels; institutions, structures, services, and policies support these changes

Sourced from Promundo’s H|M|D Toolkit.

In addition, Manhood 2.0 draws upon concepts from social cognitive theory, which enables youth to learn within their social context; the theory of gender and power (including intersectional feminist theory), which examines how rigid constructions of masculinity and femininity in the context of other forms of oppression and marginalization create power imbalances in relationships and drive poor health outcomes; and (3) social norm theory, which examines perceived negative social norms about gender and health and well-being outcomes and works to question whether perceptions reflect reality. Together, these theories inform the context and dynamics in which the Manhood 2.0 theory of change was developed.

Based on this model, Manhood 2.0’s overall goal is for young men to learn through questioning and critically reflecting on gender norms, rehearse equitable and nonviolent attitudes and behaviors in a comfortable space, and internalize these new gender attitudes and norms, applying them in their own relationships and lives. The support of institutions and structures, when accompanying this integral group education process, allows the young men and organizations involved to have the tools to become agents of change for gender justice and social justice. Ultimately, this process contributes to achieving two objectives:

- **Gender equity**, meaning fairness and justice in the distribution of opportunities, responsibilities, and benefits available to men and women, as well as the strategies and processes used to achieve gender equality.
- **Attitude and behavior changes** at the individual and community levels that lead to transformed gender norms within specific objectives.

### What is Gender-Transformative Programming?

Manhood 2.0 is a gender-transformative program engaging young men and boys in gender equality. Programs integrating a gender and power theoretical framework can be classified depending on the extent to which that integration exists and/or seeks to address rigid gender norms within communities. These programs exist on a spectrum from “gender-exploitative” (those that reinforce gender stereotypes and inequities) to “gender-transformative” (those that actively target harmful stereotypes and norms and seek to transform those underlying gender inequalities). In between lies a continuum that also includes “gender-sensitive” programming – those programs that recognize the specific needs and realities of men and women but do not seek to change or influence gender relations.

A literature review conducted by the World Health Organization on gender-related programs confirmed that those interventions that applied a gender-transformative approach were more likely to lead to changes in the attitudes of men and boys than those that did not.

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8. Adapted from a model created by Sophie Namy, formerly at the International Center for Research on Women.
10. Note that these objectives are tied to measureable indicators to assess impact in evaluations (using the Gender-Equitable Men, or GEM, scale). In terms of “attitude changes” (the first step in the theory of change), evaluations have shown shifts toward more gender-equitable attitudes, as previously noted. In terms of “behavior changes,” these objectives reflect the most common types of changes in behavior reported across the various Program H impact evaluations: increased condom use, lower rates of self-reported intimate partner violence, lower self-reported rates of sexually transmitted infection (STI) symptoms, and greater likelihood of contributing to household chores. Evaluations have shown that reported behavior changes tend to reflect the particular focus of the intervention.
Programs that can be categorized as "gender-transformative" move beyond the individual level to also address the interpersonal, socio-cultural, structural, and community factors that influence gender-related attitudes and behaviors. Individual attitude and behavior change does not happen in isolation; larger social, political, and economic forces drive change at both the societal and individual levels around gender relations, gender power relations, and masculinities. For this reason, gender-transformative approaches must aim to effect change at multiple levels of society. In other words, they must take an ecological approach to transforming gender norms.

(See the figure “Manhood 2.0 from the Lens of the Socio-Ecological Model”)

Manhood 2.0 and the Socio-Ecological Model

With regard to supporting influences and structures, it is essential to recognize the various ways that supportive environments for change can be created. The following figure, adapted from the socio-ecological model, shows how several components of the Manhood 2.0 intervention can be combined to create more sustainable change. The socio-ecological model helps envision the many entry points for challenging harmful gender norms at the individual, relational, community, and societal or broader structural levels – where gender norms are learned, internalized, reproduced, and reinforced. Ideally, Manhood 2.0 should be implemented in conjunction with strategies to sensitize the larger community and key institutions on gender transformation and the importance of male engagement.

Manhood 2.0 from the Lens of the Socio-Ecological Model

In Manhood 2.0 interventions, there must be connections among the interventions implemented at these different levels. For example, Promundo has found that group education interventions at the individual and relational levels are often more effective when combined with community campaigns that promote new perceptions of men’s caregiving and validate changes in men’s behaviors and attitudes.

General Guidelines
General Guidelines for Program Managers or Coordinators on Implementing Manhood 2.0 in their Community

This section provides suggestions on how best to tailor Manhood 2.0 to the needs of the young men that will be served. These recommendations should be seen as a guide rather than as a strict, prescriptive approach to adaptation. Depending on resources and time, program implementers and/or facilitators can conduct some or all of the following activities.

FORMATIVE RESEARCH

How do different issues affect gender norms and gender socialization at the relational and community levels? The premise of conducting formative research is to avoid a pre-packaged plan, instead listening to and understanding the needs of the target group and planning accordingly.

Conduct Formative Research

To better understand your population and inform your adaptation of Manhood 2.0, it will be important to conduct formative research to gain insight into the young men’s needs and experiences related to sexual health, sexuality, relationships, violence, and masculinity. In preparation for this, it will be important to ask yourself and your team the following questions:

- What do you aim to achieve by implementing Manhood 2.0 in your setting?
- What do you hope to learn?
- What are the challenges and lived realities of the young men in your setting?
- What are the existing policies and priorities in your community related to gender equality and ending violence against women?

Usually, formative research is conducted using qualitative methods such as focus groups, key informant interviews, and one-on-one interviews with potential participants. Given that all community organizations may not have the capacity to form new focus groups in addition to their current programming, another option could be to ask participants in existing programs for feedback on their community’s needs and realities. Important questions to consider during the formative phase include:

- Who are the role models for young men? To what extent are those role models men who are violent or divisive?
- How does accessibility or transportation impact recruitment for the intervention, especially if community spaces are difficult to reach or scarce?
- How do facilitators create a climate of safety for young men in areas where community and structural violence are highly prevalent?
- How do we most effectively help young men think for themselves? (They are often just repeating what they hear from adults or their peers.)
When conducting formative research, select interviewers with experience conducting qualitative research or plan adequate time to train your interviewers well. Many of the questions you will ask will be quite sensitive, and participants will need to feel that they can trust the person they are speaking with and that the interviewer does not impose opinions on the group. More specifically, interviewers should take the time to listen to what young men and women say about their relationships, what it is like to be a young person, and the challenges they face. What do they want to learn to have a happy life? Make note of potential content that responds to their needs: It is more likely to resonate and lead to changes in participants’ attitudes or behavior. Promundo often incorporates stories from young men facing common challenges, identified during the formative research phase, into the group education sessions themselves.

Develop Your Monitoring and Evaluation Framework

You should ensure that your monitoring and evaluation matches the goals and stage of the intervention. Is this a first implementation or a pilot for which the key goal is to learn about process and improve the intervention, or are you prepared to implement at scale and want to show impact? It will be important to also consider the resources you have to conduct monitoring and evaluation. Think not only about the information you could collect but also whether you will have the capacity to analyze and use the data (rather than collecting data just because you can).

Advisory Boards

It is strongly recommended that you do not adapt Manhood 2.0 in isolation. For example, in recent adaptations in the United States, partners convened a youth advisory board to obtain information on the youths’ perspectives on the curriculum and formative research. Youth selected to participate in the youth advisory board should also meet the eligibility criteria of your program to ensure that their feedback best represents your target population. In addition, Promundo has conducted community advisory board meetings to discuss findings from the formative activities conducted with youth and to gain insight on how to refine the intervention to meet the needs of the targeted youth. The selection of participants for these bodies should also be strategic, thinking about who should be engaged long term in the project.
A Note on Adaptation from Promundo

Evaluations of intensive programs like Manhood 2.0 have shown that intensive, multi-component, multi-level interventions show the strongest evidence of effectiveness. Therefore, adapters of the curriculum are urged to avoid choosing only small parts of the curriculum; this method will not prove to be as effective in design, nor will it provide transformative results. Short-term, one-off, or single-level interventions are often insufficient for substantive and sustainable impact.

Key components and values of a strong curriculum to keep in mind when adapting include:

- Direct, intentional, and critical examination of harmful gender norms
- Continual application over time
- Accountability (that the intervention is not for, by, or about men in a vacuum, but rather it is aware of its context within a patriarchal system in which women and girls are disproportionately disadvantaged)
- Understanding and internalization of the importance of affirmative consent

Conducting thoughtful evaluation exercises before and after implementation will also support continual adaptation of the program based on successes, challenges, and lessons learned.

What Are Your Program's Main Objectives?

There are more than 25 activities in Manhood 2.0. How do you choose what goes into the final curriculum, especially if you have only 10 or 15 weeks with young men? Think back to your program's main objectives. For example:

<table>
<thead>
<tr>
<th>Examples of specific objectives</th>
<th>Example activities (not limited to only these)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce attitudes that support physical and sexual violence, from sexual harassment to rape</td>
<td>Activity 3.2: Persons and Things</td>
</tr>
<tr>
<td>Reduce rates of self-reported intimate partner violence (with different kinds of violence assessed based on cultural context)</td>
<td>Activity 6.2: Exploring Sexual Consent</td>
</tr>
<tr>
<td></td>
<td>Activity 6.5: Empathy Clothesline</td>
</tr>
<tr>
<td></td>
<td>Activity 4.4: The Four Phrases</td>
</tr>
</tbody>
</table>

In general, we recommend the following core curriculum activities:

<table>
<thead>
<tr>
<th>If you have 2 hours...</th>
<th>If you have 8 hours, add these activities</th>
<th>If you have 16 hours, add these activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity 2.4: The Man Box</td>
<td>Activity 3.2: Persons and Things</td>
<td>Activity 4.3: What Do I Do When I Am Angry and Activity 4.4: The Four Phrases</td>
</tr>
<tr>
<td></td>
<td>Activity 3.3: Power Walk</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Activity 5.4: Young Men's Health or Activity 5.6: Understanding Contraception</td>
<td>Activity 5.5: Burning Questions about STIs and the Clinic</td>
</tr>
<tr>
<td></td>
<td>Activity 6.5: Empathy Clothesline</td>
<td>Activity 6.2: Exploring Sexual Consent</td>
</tr>
</tbody>
</table>
It will also be based on the desired outcomes of your program, what activities make the most sense based on the needs of your population, the resources you will have at your disposal (such as space, food, and incentives), and other factors. In addition, it will be essential to include the following, based on a theoretical framework of masculinities:

- Issues of unequal power and male privilege (and how those intersect with experiences of race, class, gender identity, sexual orientation, and other identities)
- The “costs” of manhood for young men, as well as for those around them
- Opportunities to practice or rehearse gender-equitable behaviors in a safe setting
- The differences between healthy and unhealthy relationships

**Program Pacing and Session Length**

Practitioners have learned several lessons about “dosage.” In general, two activities in a session of about two hours over a period of 10 to 16 weeks is ideal. The longer time seems to allow young men to negotiate new ways of interacting, to internalize the norms discussed, and to begin collectively questioning rigid norms in their community.

Promundo staff have also used spreadsheets to map out the activities to select, adapt, and test. A spreadsheet may look like this example:

<table>
<thead>
<tr>
<th>#</th>
<th>Session title</th>
<th>Main objectives of the session</th>
<th>Experiential learning methodology (role play, vignette, other)</th>
<th>Time</th>
<th>Single sex or mixed?</th>
<th>Key gender norms</th>
<th>Link to the literature</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Activity 1: Persons and Things</td>
<td>Increase young men and women's awareness about the existence of power in relationships.</td>
<td>Role Play</td>
<td>1 hour</td>
<td>Mixed</td>
<td>Power inequalities more generally and how those manifest in relationships.</td>
<td>Power inequalities more generally and how those manifest in relationships.</td>
</tr>
</tbody>
</table>

The order of activities is also important. In general, Promundo begins sessions by covering foundational issues related to gender equality (such as basic gender concepts, power, privilege and patriarchy, and masculinities). Then, sessions may move on, for example, to gender roles within sexual and reproductive health decision-making. More difficult or sensitive sessions on violence or sexual consent usually occur towards the end of the program. Sessions conclude with action planning, such as on how to live out more gender-equitable norms, how to develop and launch their own community mobilization campaigns, or how to conduct advocacy in their communities. The best way to end the program will depend on the overarching objectives of your program.
Session Structure

By the end of the adaptation phase, your curriculum should be divided into several sessions, each focusing on a particular theme (themes can be spread across more than one session). All of the sessions are designed with a similar structure or format:

<table>
<thead>
<tr>
<th>Check-In</th>
<th>All of the sessions begin with a “check-in” to welcome the participants to the session and review what was learned in the previous session.</th>
</tr>
</thead>
</table>
| Activities | Each session has two to four activities which include the following components:  
  - **Title and Length**: Each activity has a title, which you may choose to share with the group. The activity’s recommended length is also indicated.  
  - **Objectives**: The purpose of each activity is indicated. The facilitator can inform participants of the purpose before starting a new activity.  
  - **Key Message(s)**: The key message(s) of the activity are indicated. These key messages should be emphasized during and after the activity.  
  - **Materials**: The materials required to facilitate the activity are listed. Materials are optional for some activities.  
  - **Preparation**: These are the steps that the facilitator should take well in advance to prepare for the activity. These steps should be completed prior to the session to save time and to ensure the activity flows smoothly.  
  - **Procedure**: These are the steps for carrying out the activity. The activities are written to be adapted to groups with different reading and writing levels. The facilitator should be attentive to whether the steps are appropriate for the participants.  
  - **Group Discussion Questions**: Most of the activities include group discussion questions to help guide the discussion on the activity topic. These questions serve as guidance for the facilitator. It is not necessary to discuss all of the questions or to adhere to the order in which they are listed.  
  - **Closing Statement(s)**: Final statement(s) for the facilitator to give to the group are provided at the end of each activity. The closing statement(s) emphasize the activity’s key message(s). |
| Closing Circle | The “Closing Circle” is the space in which the facilitator can reinforce the session’s key messages and participants can share their feedback. During this time, the facilitator should encourage participants to share thoughts about what they experienced or felt during the session. This can be along the lines of what they have learned, any thoughts they have regarding the session, or how the lessons learned will benefit them in their own lives. |

Think Beyond Group Education

Other important questions to ask yourself and your team include:

- What are the linkages that we can make to institutions, structures, services, and policies to support changes made by young men?
- How do we involve members of the community broadly, outside of the participants and their families or teachers?
- To what extent is it possible to do a youth-led campaign in schools? In the larger community?
- Are leadership camps a possibility for program participants to further support growth?
PILOT TESTING AND ADAPTATION

Ensure that you set aside at least one to three months to validate and test, test, test your activities with your key populations. This includes not only with young men, but also with professionals who are experienced facilitators and experienced in youth activism, community mobilization, violence prevention, and engaging youth. The testing process may include your youth advisory board and/or expert review board.

Ensure that you set aside time for feedback after each session. In this period for feedback, you will want to find out:

- What did they like in the session?
- What could be improved?
- Were the key messages clear? If not, how could they be made clearer?
- Do the sessions contribute to the achievement of the programmatic objectives?
- Was the session fun and engaging?

Ensure that you assign a note-taker to record these observations and any suggested changes within the draft Manhood 2.0 curriculum. You and your team will come back to these suggested changes and make the needed revisions.

In this pilot phase, it is important to consider young men’s availability:

- Which days and at what times of day are young men typically available?
- How does this vary during the academic year and by grade level?
- How many hours are young men typically available to meet?
- Where do young men usually go when they have leisure time?
- Where is it convenient for young men to meet?

TRAINING FACILITATORS

Choosing the right facilitators and investing in their training is an important step to developing successful group interventions. It is recommended that one or two facilitators lead a small group of 10 to 15 young men (and young women when appropriate). Larger group sizes may require two or more facilitators, depending on facilitators’ skills and experience. In many settings, young men prefer to interact with a male facilitator who will listen and, at the same time, serve as a model. However, pairing a male and female facilitator (when appropriate) has worked well in some settings and provides an opportunity to demonstrate men and women working together with equality and respect. The most important criteria are to find individuals who are able to mobilize a group, who can listen to and motivate them, and who are willing, available, and motivated to lead a group of young men on a process of transformation. A good facilitator must establish trust and respect among the group and make group members feel at ease to ask questions, share experiences, and express themselves.
In some settings, community health and youth advocates or local leaders make excellent facilitators, if they are not overburdened already. The main challenge for professionals such as teachers or health workers is to unlearn top-down models of “teaching” in favor of a more dynamic, group-centered approach. Promundo’s partners have had success training individuals with little to no facilitations experience – men and women from the community who do not have a similar background to health workers or trainers. These individuals can be excellent mobilizers and relatable role models for young men, provided they are given adequate training and ongoing support. When selecting facilitators, it is recommended to:

- Consider using a male and female facilitator who can model respectful and equitable gender relations to the group.
- Choose facilitators who are respected but relatable; facilitators from the same community or surrounding area may be more accepted (although in some settings information provided by “outsiders” may be more accepted) and less likely to move away or drop out.
- Avoid selecting facilitators in positions of authority that might threaten or limit young men's active participation or who are likely to scold participants for their behavior.
- Consider that where facilitators are not financially incentivized or subsidized, only one group session per week might be most feasible.
- Reflect on your long-term program goals and whether there are existing structures (e.g., community health workers) that could support or facilitate the intervention in a sustainable way.
- Ensure trainings have enough time to allow facilitators to transform their own perceptions and practices, and to master the content of the intervention.
- Make sure that trainings include an overview of local laws regarding minors’ rights when relevant, as well as mandatory reporting requirements. Facilitators should also be equipped with easy access to a list of resources to which they can refer participants should the young men need additional care or services.

In general, you will want to plan for facilitator trainings to last at least five to ten days; the longer the curriculum, the longer the training will be. The trainings should allow participants the time to both see how each session should be implemented (with experienced organizations modeling the session the way it should be carried out) and then an opportunity to practice the session themselves. Time should be allotted to give participants feedback, and facilitator feedback forms should be created to give participants written feedback that they can take home (in addition to oral feedback).

**IMPLEMENTATION PHASE**

**Carefully Select the Venue or Space for Implementation**

The venue may include spaces where the practitioners have worked and/or built partnerships, such as workplaces, health facilities, churches, libraries, or recreational or community centers popular with young men.

**Recruiting Young Men**

It is recommended that gender-transformative group education activities be limited to small groups of roughly 10 to 15 participants to ensure everyone can actively participate. The messages you use to explain what the intervention is about and where you recruit young men depend greatly on your intervention design – are you implementing via the health sector, in the community, within existing young men's groups (e.g., sports or after-school clubs), or within an existing youth program.
In general, it is important to tap into young men’s self-interest in change when approaching them to participate. While the groups will aim to challenge common misconceptions, program staff recruiting young men will want to emphasize the idea of the group sessions as promoting “healthy relationships,” “a peaceful life,” and “how to be a better man.” Such language still emphasizes the positive and expected outcomes of the groups and the importance of young men’s proactive engagement. The message should be aspirational and speak to young men’s long-term goals for themselves and their relationships.

Motivate and Encourage Continued Participation

In Promundo’s experience, many young men value the unique opportunity to come together in socially sanctioned spaces with other young men to discuss the issues affecting them. When a safe space is successfully created, young men are often motivated to return to the group week after week. Different incentives can also be used to motivate young men to show up and continue attending. However, material or financial incentives such as snacks, transportation subsidies, T-shirts, airtime or phone credit, certificates, or other materials can sometimes be cost-prohibitive or undermine efforts at sustainability.

There are other ways to incentivize, reward, or value young men’s participation (and facilitators’). For example, you can provide community service or hours of credit for attendance, or you can let young men and women know that their positive changes are valued and validated by community members and leaders. In some settings, Promundo has found that the involvement and visible support of the intervention by community leaders has contributed to a recognizable “brand,” which participants were proud of and strongly associated with. This motivated men to live up to the ideals of the “brand” and mobilized other young men to want to attend as well.

Motivate and Retain Your Facilitators

It is important to think of strategies to support, motivate, and retain facilitators. Facilitators may move away or drop out of the intervention over time. Factors that might contribute to drop-out should be identified and explored during facilitator selection and training, as well as reassessed during implementation. You may also want to consider graduated or cascading facilitation structures, whereby select group participants graduate to become facilitators, replacing or alleviating some of the workload of existing facilitators.

The quality of group education can only be as good as the quality of the training and ongoing support provided to the facilitators. Remember that the facilitators will be interacting with young men (and women) on a regular basis, providing advice, and sometimes listening to difficult stories. This can be challenging, exhausting, and emotionally draining. Without adequate support, it will be harder to retain and motivate facilitators in the long term. The following strategies are recommended to motivate and retain facilitators:

- Make sure not to overburden facilitators with too many groups, constant travel, or lots of paperwork. Be considerate and calculate the amount of time a facilitator puts into preparing for, implementing, and monitoring the intervention. If certain tasks are too time-consuming, work with the facilitators to simplify the programmatic and administrative procedures.
- Ensure facilitators are provided with (and don’t struggle to obtain) the materials needed to successfully implement the intervention – in some settings, this might include materials that might not be obvious or available, such as contraceptive samples.
Keep an Eye Towards Sustainability

- Encourage participants to form a support network among group members prior to the intervention's end, to continue to meet and support each other as young men.
- Identify participants who display the skills and motivation to be facilitators and equip them to facilitate new groups in their community.
- Involve community leaders and local authorities in monitoring and supporting the intervention, and link participants to existing public health initiatives or structures – in some settings, local authorities have invited participants to become peer mentors or to support community outreach efforts on family planning or violence prevention.
- Encourage young men to create their own community action teams or clubs to mobilize other young men in the community, or to join and participate in existing community health committees or other relevant bodies in which they can continue to effect change in their community.

MONITORING AND EVALUATION

Monitoring and evaluation are integral parts of implementing any intervention. Routine monitoring helps to answer output-level questions such as how many sessions were conducted and how many participants attended each session. Evaluations aim to assess the impact of the intervention by answering outcome-level questions such as the percentage of participants who attended clinics with their partners. It is also important to assess the intervention's quality and fidelity, or how well it is implemented.

Program implementers can use a variety of methods to collect regular feedback on the intervention that will help them to quickly identify and address problems if and when they arise. There are a number of key questions that can help to assess this:

- How well are facilitators adhering to the content and messaging?
- How do the participants appreciate and perceive the intervention?
- How could the intervention be improved to help retain and motivate participants?
- How effective is the intervention in achieving its intended outcomes?

Why Evaluate Your Program?

- Since you are asking for people for their time and effort in participating, it is your responsibility to understand whether the program has any kind of positive or negative impact.
- Even though evidence exists already, it is important to ensure the adaptation and current implementation, with its various specificities, are also working.
- You cannot assume that because it “worked” in a different context, with another population, or even just when implemented by a different organization that it will work again in the same way.
- You can learn what is working and not working in your intervention and adjust it accordingly.
What Is the Purpose of Monitoring?

The purpose of monitoring is to capture outputs and to understand the process of implementation and the fidelity to the intervention, as well as to capture challenges, barriers, opportunities, and unexpected impacts as the intervention is being rolled out.

At the bare minimum, you should aim to capture outputs that will help show what is being done (e.g., number of facilitators trained, number of young men recruited, and number of sessions carried out). Outputs allow you to understand the process of implementation and fidelity to the intervention. This can be captured through different data collection methods such as:

- Attendance sheets
- Facilitator diaries
- Photos/descriptions of campaign activities
- Regular facilitator meetings

Each of these data collection methods has advantages and disadvantages. For example, facilitator diaries allow you to attain a fuller picture of how the session went without you being there, but they are time-intensive for the facilitator. You also need sufficient team capacity to read through all of the reflections and address issues as they arise.

Debriefing Sessions with Facilitators

It is recommended to schedule periodic “debrief” sessions with the facilitators in which they can meet in groups to reflect on the progress of their groups, to discuss issues or challenges they are facing, and to develop new or joint solutions. These meetings can also have a therapeutic angle in that facilitators (who can suffer secondary trauma by listening to personal histories of violence or hardship) can gain a sense of healing and debrief on any particular stressors they are facing. These sessions can also provide facilitators with a sense of agency and ownership. By eliciting their feedback and suggestions for improvement, you can send the message that facilitators’ ideas are valued and important. During the initial training of facilitators, ask them how frequently they would prefer these sessions be conducted and the most effective way to structure them.

The debriefing sessions can also provide opportunities for program implementers to identify any risks, key lessons learned, and emerging trends during implementation, allowing time to adjust or reconfigure as needed. During these sessions, you can also identify with facilitators any participants or couples who are demonstrating positive changes and putting into practice gender-equitable behaviors. This can help to identify participants who could provide testimonies, participate in community events and campaigns, or be the subject of case studies to communicate the intervention’s impact externally.

You will also monitor activities to capture challenges, barriers, opportunities, and unexpected impacts as the intervention is being implemented. These can be captured using the previously mentioned tools, as well as through lessons learned documents or adverse event documentation and response processes.

Once you have the monitoring information, what do you do with it? Use your monitoring data to improve your program and/or implementation. Consider sharing lessons learned with key stakeholders, including your community and youth advisory boards, funders, and institutional partners. It is important to try and budget time and funds for this, as it will further improve program quality.
Other Important Tips for Monitoring

• Define what is or is not essential to know in order to monitor the quality of the intervention.

• Identify any red flags that could indicate the need for follow-up with a facilitator or changes to the intervention, and incorporate these into your routine monitoring of the intervention.

• Develop quick, easy-to-use forms such as checklists or multiple-choice questions for facilitators to provide feedback on how the sessions are going.

• Schedule periodic observation visits in which an implementing partner observes a session in progress. Make sure not to disrupt the normal schedule of the group or to distract from the session itself.

• During observation visits, ask participants to provide feedback on the content of the intervention, what they appreciate, and what could be improved. This can assist in improving your ability to motivate and retain participants.

Conducting Evaluation

The purpose of evaluation is to make judgments about a program, to improve its effectiveness, and/or to inform programming decisions. Your program evaluation should be driven by a theory of change – you may be using Promundo’s, or you may have your adapted your own; you want to measure outcomes to match your theory of change. For example, if you think the group setting strengthens trust among group members and thus allows them to ask for help when they need it, you might want to measure trust and help-seeking behavior.

You should define your key outcomes. Typically, this occurs in your proposals and funding mechanisms. In addition, previous international research has shown that Program H (Manhood 2.0) is somewhat unique in that the theory of change and previous evaluations suggest that the intervention affects multiple outcomes: gender attitudes, violence in relationships, sexual and reproductive health (SRH) behavior, and gendered division of tasks. It may also affect sense of belonging and address homophobic bullying and discrimination, as well as mental health issues. This part can get quite exciting, but it is important to think critically about what you really think you might impact.

Also plan to “triangulate” your findings, as there are challenges with self-reporting and how you can address it. This will include surveying young women and other family members in young men’s lives (especially if they are unpartnered). Though this can add costs, it is an important aspect of accountability.

Other Considerations for Evaluation

Certain types of data collection are more expensive than others. In general, focus groups may be less costly than quantitative research since they involve fewer people. It is also important to consider time. It is exciting to collect a lot of data, but you need to be able to analyze and use it.

Develop quick, easy-to-use forms such as checklists or multiple-choice questions for facilitators to provide feedback on how the sessions are going, and consider using an SMS or mobile phone application to collect this information. Additionally, schedule periodic observation visits in which an implementing partner observes a session in progress; make sure not to disrupt the normal schedule of the group or to distract from the session itself.
It is important to be strategic and consider field constraints such as:

- The time frame you have to administer the evaluation instruments
- The length of time participants can spend filling out or responding to your questions
- Ethical considerations such as safety and confidentiality.

Methods for evaluating group education include quantitative methods such as:

- Pre-post tests
- Pre-post tests with a control group
- Randomized controlled trials or other experimental methods
- The Gender-Equitable Men (GEM) scale (see www.promundoglobal.org for more information), including similar scales that have been adapted for use with high school-age young men in the United States.

They also include qualitative methods:

- Focus groups
- In-depth interviews (one-on-one)
- Interviews with partners
- Photovoice
- Most Significant Change technique
Facilitator Guide:

General Tips for Facilitating Manhood 2.0
The Role of the Facilitator

SEE YOURSELF AS A FACILITATOR, NOT A TEACHER

Ask questions to better understand where participants are coming from, and guide them in group reflections to critically look at harmful norms around masculinity. You do not have to be a gender equality or sexual health expert and do not need to have all the answers. Rather, the role of the facilitator is to create an open and respectful environment in which young men can feel comfortable sharing and learning from each other in a safe space.

The role of the facilitator is to promote reflection and participatory learning, present information neutrally, and create a horizontal learning experience where the young men can learn from each other and from active participation in the activities. Other information to keep in mind includes being aware of your position of power; accordingly, avoid judgmental and authoritarian attitudes. Never impose your feelings or opinions on the group and do not aim to instill fear because young men and women can often “switch off” their emotions, interest, or engagement with the topic or feel paralyzed while participating. Always be conscious of the language you use and messages you present to young men and women.

- Review your own views, assumptions, and prejudices, and avoid bringing them to the group.
- Be aware if young men from particular social, cultural, or religious backgrounds trigger certain emotions in you, be they positive or negative, that may affect your own work in the group.
- Include as much physical movement as possible so that participants remain active, alert, and interested.
- Be friendly and create rapport with your participants.

Many of the themes in Manhood 2.0 are complex and sensitive. During sessions, pay attention to the participants’ comfort level. In some cases, you may need to refer individuals to professional services such as counseling. Before you facilitate any session, it is essential that you have a list of available resources for participants should they need additional assistance and that all facilitators are well versed in local laws on minors’ rights, confidentiality, and mandatory reporting. It is important to be aware of the practical realities of the group members’ lives and understand that they may face challenges or dangers when trying to make changes.

Changing attitudes and behaviors is a long process. Participation in these activities will not necessarily lead to an immediate transformation of young men's lives and relationships. However, it is a big step towards promoting personal change.
HOW TO ASK QUESTIONS THAT PROMOTE DIALOGUE

See your group as a process. Ask “process questions,” questions that cause participants to reflect more, cannot be answered with a “yes” or “no,” and are unbiased. See the following chart for additional tips:

<table>
<thead>
<tr>
<th>Yes, Do This!</th>
<th>Don’t Do This!</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ask process questions:</strong> Examples: “What do you think about going to the clinic with your partner? How would it feel to be there?”</td>
<td><strong>Ask questions that can be answered with a “yes” or “no.”</strong> Example: “Will you be getting tested with your partner?”</td>
</tr>
<tr>
<td><strong>Be simple:</strong> Ask, “When?” “Where?” “What?” “How?” “Who?” “Why?” You should continue with a full sentence. Examples: “What were you thinking when that happened? Why do you think that is?”</td>
<td><strong>Ask a leading or biased question:</strong> Example: “In order to be a good boyfriend, will you talk to your partner about birth control?”</td>
</tr>
<tr>
<td><strong>Be unbiased:</strong> Exclude your own feelings and values from the questions, and instead guide participants in identifying problems and solutions.</td>
<td></td>
</tr>
</tbody>
</table>

TIPS FOR SUCCESSFUL FACILITATION

The following are a number of useful tips to help you lead the group sessions. These tips will help you to encourage and create a respectful environment in which young men feel comfortable sharing their opinions and experiences, as well as listen to and learn from others.

Remember the group agreement.

Ask participants to decide on a set of agreements and remind them of those agreements throughout the sessions. Important group agreements relate to listening to and showing respect for others (e.g., not talking when others are speaking, not making rude comments, or not talking on the phone), confidentiality, and participation.

Do not judge.

Remember, you are here to facilitate discussion and reflection. Your role is not to teach or punish anyone. Be friendly and create rapport with your participants. Be aware of your own position of power – avoid judgmental and authoritarian attitudes. Never impose your feelings or opinions on the group.

Promote inclusion.

Ensure that all participants have the opportunity to speak. Be careful not to let one person dominate the conversation or make other people feel that they cannot share their opinions. Encourage people to share their experiences, and learn to identify when people want to speak but may be too shy to say something unless called on.

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Adapted from the Program M Manual (UNFPA & Promundo, 2007) and informed by the Change-Makers Training Concern Liberia Facilitator Handbook prepared by Men’s Resource International.
If a participant begins to take over a group by spending too much time with a story, find an opening and kindly say, “It sounds like you have a lot of valuable experiences to share with the group. That’s great! Do others have similar or different stories they would also like to share?”

**Address participants’ concerns.**

The group meetings can serve as an important opportunity for participants to receive help and advice. As a facilitator, it is important that you validate people’s concerns, but you can also engage the larger group in helping to propose solutions. Ask the group, “How do you think this problem could be solved?” or, “Has anyone faced a similar situation? What did you do?”

**Know and use referral services.**

Some problems that participants face may require outside support. In addition, some participants may prefer to discuss a particular topic, obtain information, or seek support outside of a group setting, or they may need attention from a specialized service provider. As a facilitator, you should be knowledgeable on places where you can refer participants if needed.

**Manage conflicts respectfully.**

If a conflict arises among the group, or if a participant shares a discriminatory view, remind the participants of the group agreement. Encourage other members to help mediate the situation. Ask the group what they think about the question raised or how they would suggest handling the problem. When necessary, you can offer brief responses to questions and clarify misinformation.

**Appreciate honesty and openness.**

Encourage participants to be honest and open. They should not be afraid to discuss sensitive issues for fear of ridicule from their peers. Thank the group members for sharing their personal stories. Never force anyone to participate in the activities. Instead, try to create an environment in which the participants feel comfortable.

**Promote movement and interaction.**

Include as much physical movement as possible so that participants remain active, alert, and interested. You are encouraged to use short energizer activities in between activities in order to keep the participants engaged in the topics you are discussing. You can find some examples of energizers at the end of the curriculum.

**Manage your time.**

Keep track of time; do not spend more than about two hours on a given session. Keep in mind participants’ attention spans and schedules.
Ask for feedback.

Use a “check-out” to receive regular feedback from participants. What do they like and dislike about the activities? What is working or not working? Use their input to improve the sessions. Do not divert from the planned activities, but use feedback to improve the running of the sessions (for example, by including more energizers).

Be respectful in your presence and appearance.

Try to be as respectful as possible in your appearance and nonverbal and verbal presentation. This includes the way you dress (avoiding clothes that distract) and address participants (work on remembering their names – a simple name game can help with that).

Be careful of topics that may cause re-traumatization.

Given some of these issues’ sensitivity, it is possible that participants will bring up personal experiences of sexual trauma or abuse. Given mandatory reporting requirements for facilitators and staff (that is, requirements to report issues such as abuse and sexual assault when the participant is a minor), it is important that at the beginning of each session, you remind participants that they are welcome to leave the room if they feel uncomfortable. They are not required to share any sensitive information, and for those under 18, you as the facilitator are required to report instances of abuse. This should be repeated at the beginning of particularly sensitive activities as well.

Also remind participants of the resources that are available to them and that you are available after the session to talk further. Refer participants to service providers with whom they can discuss any issues they may be having. It is also helpful to go over the ground rules (group agreements) about respecting confidentiality in the group setting, and the participants should also be reminded not to share any personal information that they do not want revealed outside of the group.

Keep discussions from going too far off from the key messages.

One of the main facilitator tools you can use is the “bank,” also known as the “parking lot.” While all discussions are welcome, if a participant brings up a topic that cannot be addressed within the time allotted, write it on a flip chart paper called the “bank” or “parking lot.” It is important that these topics are revisited at another time. However, if the topic is completely unrelated to Manhood 2.0, say something like, “That’s a great comment. We don’t have time to address that right now, but let’s talk more about it after the session.”

RUNNING EACH SESSION

1 Review the activity and guidance.

Prior to each session, review the “Materials Needed,” “Preparation,” and “Facilitator Notes,” as well as the activity procedure. This will help ensure that you are prepared to facilitate each activity and will allow time to gather additional materials and become more informed on the topic if necessary.

2 Prepare the space.

When preparing the space, always arrange chairs in a circle for all sessions unless otherwise noted. It is recommended that during the sessions, participants are offered some type of refreshment and engage in physical activity and motion. Beverages and food tend to be highly valued by participants and help them stay in the group process.
3 **Check in at the beginning of each session.**

It is important to begin each session by warmly welcoming back the group and checking in. A check-in provides time for group participants to share any thoughts, personal experiences, and comments they had based on the discussion from the last session. Spend several minutes checking in prior to beginning the day’s session. In order to have time for the session activities, keep check-ins brief, without responses or discussion – check-ins shouldn’t be more than 10 minutes.

4 **Review the group agreements.**

Most of the sessions will ask group participants to share personal experiences. To create safe spaces for participants, at beginning of every session, review the ground rules that were established by the group in the “Welcome Session.” This promotes trust and confidentiality within the group.

5 **Carry out the activity – but be flexible and creative, and contextualize activities.**

Each activity contains procedures to take the group through activities and group discussion questions to prompt critical reflection. The structure proposed in this manual for implementing activities should serve as a general guide; it is not necessary to apply it verbatim. Facilitators can change the order of certain activities’ elements or alter the listed examples to make them more relevant to their group’s reality and to reflect their own knowledge and skills.

If the topics and examples presented in these activities come across as too abstract or removed from your reality, you can add in examples from your daily life and experiences. This will help participants to be emotionally involved and identify more closely with the material. Sharing personal experiences also helps to model the behavior you want from the young men in your group. Be careful, though, not to stray too far from the curriculum, as this can prevent you from reaching the sessions’ objectives.

6 **Use icebreakers and energizers.**

Icebreakers are short activities that help participants build trust in the group, usually in a lighthearted way. They are a great way to open a session, allowing participants to move around, share, and become comfortable with one another.

Energizers are short activities that are most helpful when the group appears to have low energy, lose interest, or not be responding to the activity. These help to change the routine, get people in motion, and relieve fatigue and boredom. They take only a few minutes.

*See the section at the end of the curriculum that includes a list of possible energizers, which should also work as icebreakers!*

7 **Keep group discussions open-ended and among participants.**

Group discussions can be the most important part of each activity. These discussions are opportunities for young men to reflect on what they've been doing, talk about their thoughts with one another, and think critically about how to see changes in their own lives. It is important for facilitators to make sure that conversations remain open, judgment-free, and comfortable. Try and get the group to talk to one another rather than having one-on-one conversations with whoever is leading the facilitation.

8 **“Check out” at the end of the day.**

End each day with a one-word “check-out” that emphasizes some of the key messages or lessons that they learned during that session. Use this time to reflect on the main conclusions of the day, to announce the next activities, or to see what can be improved and what worked well, for example.
Manhood 2.0
Curriculum
Welcome
Introductions to Manhood 2.0 and Icebreaker

**ACTIVITY 1.1**

**TIME**
15 minutes

**PURPOSE/OBJECTIVES**
1. Introduce young men to Manhood 2.0 and its objectives.
2. Create a welcoming environment for the group to get to know one another.

**MATERIALS**
- Flip chart paper
- Markers

**KEY MESSAGE**
1. Manhood 2.0 is a program for young men, designed to give you a space and opportunity to talk about issues that matter to you.

**Preparation**
- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Post a blank piece of flip chart paper with the heading “Goals of Manhood 2.0” on the wall, and keep it visible throughout the workshop. On this paper, write the following:

  The goal of Manhood 2.0 is for participants to:
  - Think about what it means to be a young man in your community.
  - Think about the person you want to become and how to get there.
  - Learn how to communicate about your needs and emotions.
  - Feel prepared to prevent STIs.
  - Determine if and when you want to have children.
  - Enjoy healthy and respectful relationships with your partners.

- Post a second piece of flip chart paper on the wall. Write out the session themes and agenda for the program.
Procedure

1. Warmly welcome everyone to the session as they walk through the door. Ask them to take some of the refreshments (if they are provided) or simply take a seat in the circle. As soon as everyone has arrived, proceed to the next step.

2. Open the session by introducing yourself. Thank the participants for their time and interest in Manhood 2.0.

3. Tell them that before going into what Manhood 2.0 is about, you will begin today’s session with a short icebreaker.

ICEBREAKER

4. Ask all of the participants to gather in a circle. Tell everyone to think of three statements about themselves; two of those statements must be true, and one must be a lie. Give them one or two minutes to come up with their statements.

5. Go around the circle, starting with yourself and moving clockwise, asking each person to share their three statements in any order they wish. Remind the participants that the goal of the icebreaker is to guess which statements are the lies.

6. After each person shares, have the group vote on which statement they think is a lie. After everyone has voted, have the person reveal which statement was the lie. Then, move to the next participant until all participants have gone.

7. Once everyone has gone, thank them for participating and have them take a seat.

INTRODUCTION TO MANHOOD 2.0

8. Present the main goals of Manhood 2.0 by reading through the flip chart paper and summarizing the following text in your own words:

   Manhood 2.0 is a community-based group education program working with young men. This intervention creates a safe space for young men to take a critical look at what it means to be a man and to create a healthier version of manhood for themselves. After today’s session, you will participate in a number of small-group sessions delivered over the course of the next few weeks.

   Over the next couple of weeks, you will question assumptions about men and women’s roles that you may not typically notice or think about. You will also be able to make new friends to talk about these issues. These sessions are designed to not only challenge you but also provide support when you need it. The ultimate goal of this program will help you to become healthier, happier men.

9. Ask if anyone has any questions.

10. Briefly summarize all of the sessions they will go through in the next few weeks using the flip chart paper posted on the wall.
Exploring Gender and Identity
Welcome and Introductions

PURPOSE/OBJECTIVES

1. Decide on shared agreements for participating in the group.
2. Begin to explore masculinity and what it means to be a man.

TIME

25 minutes

MATERIALS

- Goal of program listed on flip chart
- Markers
- Flip chart paper
- Group agreements poster
- Pens or pencils
- Masking tape
- Sticky notes
- Index cards and pens

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and time allotted for the session.
- Write out the Session 2 agenda on a piece of flip chart paper.
- Post a blank piece of flip chart paper with the heading “Group Agreements” on the wall.

Procedure

GROUP NAME BRAINSTORM

1. Welcome everyone back to Manhood 2.0.
2. Review the agenda for today.
3. Explain that before the session begins, the group should decide what they want to call themselves. Names can be anything they would like as long as it does not go against the values of Manhood 2.0.
4. Brainstorm possible group names on a piece of flip chart paper with the young men.
5. When the group is done listing names, ask them to write their top three choices on a sticky note and put it into a plastic bag that you will circulate.
6. Tally up the votes. The new group name will be decided by whichever name has the highest number of votes. After votes are tallied, announce the winning name: “From now on, we will call ourselves ______.”
Once the group name has been selected, explain that the group will discuss many topics that are personal and potentially sensitive, such as relationships, sex, condoms, contraception, gender, and violence. To discuss such issues, it is important to create a safe, respectful, and comfortable space in order for members of the group to talk freely about such personal and sensitive subjects.

Ask the participants to share ideas or rules that they would like to include in a group agreement. Reference this “Group Agreements” box if the group is having trouble coming up with agreements they would like to put in place.

Read each agreement aloud, stopping every so often to see if anyone has any questions. Add (but do not write), “You have the right to pass if you feel uncomfortable.”

Once the agreements are fully understood, ask participants whether they have any additional statements they would like to include in the Group Agreement.

Have everyone come to the flip chart and initial the Group Agreement.

Thank participants for their help in making the group safe, respectful, and comfortable. Explain that it is up to everyone in the group to maintain the Group Agreement. Ask them that if they see their peers not upholding an agreement, to remind them of the Group Agreement so the group can stay on track.

**Group Agreements**

- Respect the right of others to have different opinions.*
- Let others finish speaking before you speak (“one mic”).*
- Maintain confidentiality. What is said in the group stays in the group.*
- Use “put ups,” not put downs.
- Don’t use jokes that are harmful or hurtful to others.
- Don’t generalize about people. Talk about “some” instead of “all.”
- Use “I’ statements” — own your opinions.
- Everyone should participate.

*Make sure this is included in the final agreement.
Values Clarification

PURPOSE/OBJECTIVES

1. Examine individual attitudes about gender differences, roles, double standards, and inequalities.
2. Question how individual attitudes about gender affect behaviors.

TIME

60 minutes

KEY MESSAGES

1. Your values and attitudes influence your and others’ health and well-being.
2. It is important to respect other people’s views about sexuality and gender, but also to challenge attitudes and values that are harmful to themselves and to others.

MATERIALS

Two signs written on letter-size paper, one saying “Agree” and the other “Disagree.”

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Place “Agree” and “Disagree” signs on opposite ends of the room, and ensure they are adequately spaced for participants to move between the two signs.

If all of the participants share the same view about a statement, play the role of “devil's advocate” by walking to the opposite side of the room and asking, “Why would someone be standing on this side of the room? What would someone say if they were standing there?” If others can’t offer an alternative viewpoint, provide one for the group.

Some participants may say that they don’t know whether they agree or disagree and don’t want to stand beside either of the signs. If this happens, ask these participants to say more about their reactions to the statement. Usually it comes down to interpretation. Rather than telling them what it means, ask them to choose the side that best represents what they believe.
Review the following statements to be used during the exercise.

- It is easier to be a man than a woman.
- Women are better parents than men.
- The best thing for a child is to have a mother and a father.*
- It is OK for a man to be emotional in public.
- It is OK for a woman to carry condoms.
- Men need to have sex more than women do.
- Women and men basically want the same things in a relationship.
- If someone questions my manhood, I should defend my reputation with force if I have to.

Optional: Write them on a piece of paper to refer to during the activity.

The statement marked with “*” is usually used to address issues of homophobia and tolerance. Young men may discuss issues regarding single parenthood or not having a two-parent household. If they discuss those issues, ask probing questions to get them to discuss their feelings around sexual diversity.

Procedure

FORCED CHOICES GROUP EXERCISE

1. Explain to the participants that this activity is designed to give them a general understanding of their own and each other’s values and attitudes. It aims to challenge what they think about men and women’s roles, as well as help them clarify how they feel about certain gender issues. Tell them that everyone has a right to his own opinion and that everyone’s opinions should be respected and heard.

2. Explain that you will read a statement and they should go stand by the “Agree” sign if they agree with the statement or the “Disagree” sign if they disagree. At any time, if they change their minds, they may move to the other side of the room. They also have the option to stand in the middle if they feel neutral about the statement.

3. Read the first statement. Ask participants to stand near the sign that matches what they think about the statement. After the participants have moved to their respective signs, ask for one or two participants standing beside each sign to explain why they are standing there and why they feel this way about the statement.

   Do not respond to their statements with your own opinions. Just listen. However, do look for patterns in the responses. For example, do some participants tend to answer one way and other participants another? Share these observations with the group, and ask them why some groups of men think one way and others think a different way. Encourage participants to pose questions to those who have opposing views.

4. Ask any participants standing in the middle if they have questions about the statement and what information they would need to choose one side over the other. Ask those on the “Agree” or “Disagree” side if they would like to respond to these questions.

5. After a few participants have talked about their attitudes towards the statement, invite anyone who wants to change his mind to move to the other sign.

6. After a few minutes, bring everyone back together to the middle of the room and read the next statement.

7. Repeat the fourth and sixth step until either all of the statements have been discussed or 20 minutes have passed.
GROUP DISCUSSION QUESTIONS

8 What did you learn from this activity?
9 What, if anything, surprised you?
10 How do you think people’s attitudes about how men and women should act affect the way men and women interact with each other?

CLOSING STATEMENTS

11 Your values and attitudes can affect your health and well-being, and how you treat one another.
12 It is good to discuss and debate men and women’s roles in society. This helps us gain new perspectives and share opinions in a respectful way without offending others.
**ACTIVITY 2.3**

What Is This Thing Called Gender?

**TIME**

15 minutes

**PURPOSE/OBJECTIVES**

1. Understand the difference between sex and gender.
2. Reflect on how gender norms influence the lives and relationships of men and women.

**MATERIALS**

- Flip chart paper
- Markers
- Pens or pencils
- Masking tape

**KEY MESSAGES**

1. Gender refers to the norms, expectations, and beliefs about the roles, relationships, and values attributed to girls, boys, women, and men.
2. Gender is not biological or “natural,” but is learned from families and friends, in schools and communities, from the media, and many other places.

*Be sure to read the provided definitions of biological sex, gender, and sexual orientation very carefully before this activity. Practice explaining these terms to friends or colleagues. These concepts can be new, particularly for younger participants, so it is important to make sure you feel comfortable clearly explaining what these words mean in your own words.*

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.

**Procedure**

1. Place a large sheet of flip chart paper in the front of the classroom, and draw two columns. In the first column write “Man,” and in the second write “Woman.”
2. Ask the participants to think of words and phrases associated with the idea of “being a woman.” Write these in the “Woman” column. The responses can be positive or negative. Encourage them to think of typical characteristics such as physical (e.g., long hair), emotional, and biological aspects, among others. Write down all responses on the flip chart, even if some of them make you uncomfortable or if you find yourself disagreeing.
Repeat this step for the “Man” column. Briefly review the characteristics once finished.

Switch the titles of the columns by putting “Woman” in the place of “Man” and vice versa.

Go down the list one by one, and ask the participants if the characteristics mentioned for a woman could be attributed to a man and vice versa. Put a checkmark next to the ones that they believe can be attributed to both and an “x” next to the ones that cannot be.

Tell the participants that everything with a checkmark next to it refers to “gender” and everything with an “x” next to it refers to “sex.”

On a new piece of paper, write out the words “sex,” “gender,” and “sexual orientation.”

Ask the participants, “What is biological sex?” Do not write their answers down. When they are finished, explain the following (after explaining, write it down on the flip chart):

**BIOLOGICAL SEX**

- Biological sex refers to the physical characteristics you are born with. It is assigned based upon a person's anatomy and physical attributes (such as external sex organs, sex chromosomes, and internal reproductive structures). When these classifications don't line up with what is typically considered a male or female body, the individual is usually referred to as “intersex.”

Ask the participants, “What is gender?” Do not write anything down. When they are finished, explain the following (after explaining, write it down on the flip chart):

**GENDER**

- Gender refers to the attitudes, roles, behaviors, activities, and attributes that a community or society determines is characteristic or uses to describes men, women, boys, and girls.
- This is typically associated with or matches one's biological sex; individuals who feel that their gender and sex “match,” or are associated, are referred to as “cisgender.”
- Some individuals' gender identity does not conform to those behaviors that are typically associated with their sex; these individuals can refer to themselves as transgender or non-binary, for example.
- Definitions of “masculine” and “feminine” are not fixed. They change over time and are different from society to society. We learn to be our “gender” by interacting with the world around us.
- Sometimes these ideas of how to be a man are thought to be based on our biology rather than something that we learn (such as the common myth that violence is a part of men's biology).

Ask the participants, “What is sexual orientation?” Do not write anything down. When they are finished, explain the following (after explaining, write it down on the flip chart):

**SEXUAL ORIENTATION**

- Sexual orientation is whom you are romantically, emotionally, and/or sexually attracted to.
- People who are attracted to those of the opposite sex are heterosexual — man attracted to women, woman attracted to men.
- People who are attracted to those of the same sex are homosexual — man attracted to men, woman attracted to women.
- People who are attracted to everyone are known as pansexual — man attracted to women and men, woman attracted to men and women.
- People who are not sexually attracted to others (but may be attracted emotionally or romantically) are known as asexual.
Explain that people often get “gender” and “sexual orientation” confused. Gender has to do with how you express yourself as a man or a woman, while sexual orientation has to do with whom you are attracted to. For example, people often make false assumptions that a guy who is considered tough must be straight and that a guy who is considered sensitive must be gay. However, the exact opposite could be true because gender roles and sexual orientation are two totally different things.

GROUP DISCUSSION QUESTIONS

Lead a discussion using the following questions. If short on time, please prioritize the bolded questions.

• What does it mean to you to “be a woman”?
• What does it mean to you to “be a man”?
• Do you think that men and women are raised the same way? Why or why not?
• What characteristics attributed to women and men are valued as positive by our society? Negative?
• How do our families influence our ideas on how men and women should look and act?
• How does the media influence ideas of how men and women should look and act?
• What would it be like for a woman to assume the characteristics traditionally associated with men? Would it be hard or easy? How would it be for a man to assume the characteristics traditionally assigned to women?
• How do we treat people who don’t fit these characteristics or expectations of what it means to be a man or to be a woman?
• How do these different expectations of how men and women should look and act affect your daily lives?
• In your own lives, how can you challenge some of the negative or non-equitable ways that men are supposed to act?
• What did we learn, and how can we apply these lessons to our own lives?

CLOSING STATEMENTS

“Gender” refers to the way society defines the roles, behaviors, activities, and attributes of men, women, and people who are transgender or nonbinary.

Gender is different from biological sex. It is not biologically derived or something we are born with.

Gender is different from one’s sexual orientation – how someone identifies (as a man, woman, or other gender identity) is not related to who they are attracted to.

Characteristics that are “manly” or “womanly” are not fixed and can change depending on the person and over time. All men are not only “one way,” and all women are not only “one way.”
The Man Box

ACTIVITY

PURPOSE/OBJECTIVES
1. Recognize the challenges men face in trying to fulfill societal expectations about gender roles. Understand the costs of rigid forms of masculinity and that it is possible to change.

TIME
60 minutes

KEY MESSAGES
1. Young men receive many harmful, sometimes contradictory messages on what it means to “be a man.”
2. If young men don’t conform to these messages of masculinity, that does not mean they are “less than” or not good enough.
3. Young men can and should work to redefine more positive and more inclusive forms of masculinity.

MATERIALS
- Flip chart paper
- Markers
- Tape

16 Adapted from the Change-Makers Training Facilitator Handbook, developed for Concern Worldwide Liberia by Men’s Resources International.

Procedure
UNPACKING THE “MAN BOX”

1. Refer back to the flip chart paper from the last activity, What Is This Thing Called Gender?
2. Ask them: What are some of the messages a boy is given when he is told to “act like a man”?

Make sure that they understand that they are discussing external messages that young men receive from others in their community/society.

3. What messages does society send to this boy when he is told to “be a man”?
4. What messages does your local community send to this boy when he is told to “be a man”?

Explain to participants: This is not a list of things you think are true but the messages that boys are given about what they must do to act like a man.
Facilitator probe: How does race/ethnicity or economic background play a role in this?

Write all of the words on the flip chart as they are spoken. Keep repeating the phrase “act like a man” with different expressions in your voice to encourage participants to think of more words.

Discuss where these messages come from (“Who is the messenger?”).

- Do they come from your father? Your teacher? Your mother? Images on television?
- Do the messages or delivery differ if they come from a man or a woman (mother, father, teacher, sibling, or peer)?

You can have the participants act out how the messages are delivered.

Draw a box around the list and say, “This is the ‘Man Box.’”

Ask the group if this seems familiar. Do they (or someone they know) visit this box?

Ask the group to share any experiences or feelings in relation to the messages they have been given (or seen men close to them given).

Explain that the “Man Box” refers to gender roles and expectations of how men, women, boys, and girls must behave; these expectations come from family, peers, society, media, stories, and other sources, with all of these actors and the messages they send influencing the construction of this “Man Box.”

You may want to discuss ideas of manhood and what it means to “be a man” and start to tie these messages to the characteristics from the “act like a man” list.

Ask the group what advantages there are for men to follow these rules and fit inside the box. Write the advantages down on flip chart paper. (Examples include being acknowledged or recognized, believing one is more attractive to women, and being considered more successful.)

Say that men who stay in the box are often perceived to be “better” or “more respected.” Remind them that men and boys work hard to stay in the box because they want to receive these perceived benefits.

Ask the group what happens to a man or boy who does not fit in this box or chooses to step out of the box. Write these responses around the outside of the box.

Ask how behaviors and roles outside the box are perceived. (Are they “feminine”? How do they differ from what is inside the box?)

Ask what methods are used to keep men and boys inside the box (for example, name-calling, threats, or violence).

Mention that there can be consequences when individuals do not conform to these societal expectations of gender roles (for example, being called names or being isolated from peers or friends because they aren’t “tough enough”).

Explain how this shows how men are trained to fit into a box by rewarding certain kinds of behaviors and punishing other kinds of behavior.

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Ask, “Are there any disadvantages to staying in the box? What does it cost individual men to live inside the box? The community?” Write down on a separate flip chart sheet “Disadvantages of Staying in Box.”

If they do not think of any, prompt them with the following examples: issues such as peer pressure to act one way even when you do not want to; impact on physical and mental health — being tough and getting into fights means risks to your body; “switching off” feelings — fear of being “weak” means you can’t be sad even when you feel down; and isolation, which you can sometimes feel if you don’t conform to others’ standards.

Explain that sometimes the box compels men to act out behavior that is harmful to themselves and others to be perceived as in the box. Can they think of some examples? (Prompt with the example of fighting with others to be seen as “tough.”)

Ask, “Are there any advantages of stepping out of the box?” Write answers on a separate flip chart paper. If they do not say anything, prompt them with the following examples: not conforming to others’ ideas of who you are, not embarrassed to get help if you are sad or depressed, and stronger connections with others because you are being who you are instead of who others expect you to be.

Ask, “Can you think of examples of men in your life who do not conform to the messages inside the box?”

Related questions include:

- Who are some famous examples of men who have not conformed to these messages (e.g., the singer Prince)?
- Are there male figures in your life who cook?
- Have you seen male figures that you love and respect cry in front of you?
- Do you have male figures that you love and respect that have turned away from violence?
- How do these men seem — for example, happy or satisfied?

GROUP DISCUSSION QUESTIONS

Ask, “How are you able to move beyond the box?” (If they are unable to think of how, ask them to write this down and think about it for next week’s session.)

Ask, “What are some new messages about manhood that we would like young men to have that aren’t inside this box?”

Discuss what the participants can do to change their own behaviors and attitudes (or those of other men) and be role models for other boys and men. Write these down.

CLOSING STATEMENTS

Although being outside of the box will lead to some of the positive things discussed, it will not happen all at once.

Staying in the box can be harmful, and we should continue to think of ways to break out of this box to be truer to ourselves.
ACTIVITY

2.5 Closing Circle

TIME

10 minutes

PURPOSE/OBJECTIVES

1. Quickly reflect on the day’s session.

Procedure

1. Ask all of the participants to stand in a circle.

2. Ask them to think of how they felt today. Starting with yourself and moving clockwise, ask each individual to say one word about how they felt about today’s session.

3. When each person has finished, thank them all for attending and for their full engagement and participation.

4. Remind them of the time and place of the next meeting.
SESSION 3

Exploring Power and Relationships
Review of Session 2

**TIME**

10 minutes

**PURPOSE/OBJECTIVES**

1. Review Session 2.
2. Reflect on questions and thoughts from the previous session.

**MATERIALS**

- Flip chart paper
- Tape
- Markers

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write the agenda for the session on a piece of flip chart paper and post it on the wall.

**Procedure**

1. Welcome the young men to Session 3 of the program. Thank the group for their participation in the last session, and ask them to recall the key messages or ideas from the previous session. Remind the group of any key messages that they did not remember. Ask them:
   - What did you learn that was most useful to your own lives?
   - Did you practice any of the skills or apply any of the things you learned from the last session?

2. Share a personal highlight from the last session that you as the facilitator really enjoyed.

3. Tell participants that today's session is going to focus on exploring and feeling powerful and powerless.
Persons and Things

PURPOSE/OBJECTIVES

1. To increase young men's awareness about the existence of power in relationships, and reflect on how we communicate and demonstrate power in relationships.

TIME

60 minutes

KEY MESSAGES

1. It is important to keep in mind the ways we can exert power over others.

2. Power is not fixed. It is not something we have all the time; we are constantly in motion, entering and leaving situations in which we have more or less power.

3. Power in and of itself is not bad; it is how we use our power or strength that can make the difference.

Preparation

☐ Review the activity and be sure you understand the content, teaching methodology, and timing.

Procedure

WELCOME

1. Divide the participants into two groups, and have the groups form two lines facing each another with an imaginary boundary. Each side should have the same number of participants, and each participant should have a partner.

2. Tell the participants that the name of this activity is “Persons and Things.” Randomly choose one group to be “things” and one group to be “persons.”

3. Read the following directions to the group:
   - **THINGS:** You cannot think, feel, or make decisions. You have to do what the “persons” tell you to do. If you want to move or do something, you have to ask the “persons” for permission.
   - **PERSONS:** You can think, feel, and make decisions. Furthermore, you can tell the “things” what to do.
It might be helpful to ask for two volunteers to first act out for the group how a “person” might treat a “thing” or give an example such as, “A ‘person’ can request that a ‘thing’ jog in place” or, “A ‘person’ can request that a ‘thing’ conduct all activities with one hand behind their back.”

4. Ask the “persons” to begin the activity, instructing them that they can order the “things” to do any kind of activity. (Alternatively, the “persons” can direct the “things” with hand gestures, using their hands to show they must move ahead or back, move up and down or jump, or move to one side or twirl around.)

5. Give the groups two minutes for the “things” to carry out the designated roles.

6. Finally, ask the participants to go back to their places in the room, and use the following questions to facilitate a discussion.

GROUP DISCUSSION QUESTIONS

7. For the “things,” how did your “persons” treat you? What did you feel? Why? Would you have liked to have been treated differently?

8. For the “persons,” how did you treat your “things”? How did it feel to treat someone as an object?

9. Why did the “things” obey the instructions given by the “persons”?

10. Can you think of relationships in our daily lives where someone treats another person like a “thing”?

11. In your daily life, do you treat others like “things?” Who? Why?

12. Why do people treat each other like this?

13. What are the consequences of a relationship in which one person might treat another like a “thing”?

14. How can power or using power be positive? That is, what are some positive ways we can use power?

15. How does society or culture perpetuate or support these kinds of relationships, in which some people have power over others?

16. Are there particular groups in society who tend to have more power than others?

See if they can link or think about the ways that being a person of color can bar access to power or privilege, being identified as a man can give them space where other peers are not allowed, etc. You can also link this to young men’s interactions with law enforcement and their feelings about being powerless.

17. How can this activity help you think about and perhaps make changes in your own relationships?

CLOSING STATEMENTS

18. There are many different types of relationships in which one person might have power over another.

19. As you discuss relationships between men and women, it is important to remember the connection between how you might feel oppressed – or treated like “objects” – in some of your relationships and how you, in turn, might treat others (including women) like “objects.”

20. Thinking about these connections can help motivate you to construct more equitable relationships with women in your homes and communities.
Power Walk

PURPOSE/OBJECTIVES

1. Understand how gender, race, ethnicity, and other factors influence how much power people have over others in society and how power can be used to restrict some people's progress in life.

TIME

60 minutes

KEY MESSAGES

1. Power has many different faces and meanings.
2. We have many identities (such as male, young, and Latino); some of these identities can give us more power or privilege than others depending on the situation.
3. Referring back to “The Man Box,” it is important to find ways to break out of these “power over” systems and support others who are trying to do the same.

MATERIALS

A set of character cards (see “Preparation”)
Box, bag, or hat
A room or open space large enough for participants to do the Power Walk
Participant handout 3.3

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- The following are characters to be used in the Power Walk, as referenced in the “Materials” section. These characters have been chosen to show participants the effects of a range of situations in which people have power over others, including patriarchy (based on gender), economic exploitation.

Sometimes during this exercise, participants may take more or fewer steps than you think they should. During the activity, do not question them, but make a note to ask about this once the exercise is complete. If you notice that all of the participants are taking a step forward after nearly every statement, this is the opportunity to probe why they think their characters may have the same access to power or resources. It may be important to clarify the rules of the activity and start over.

(linked to class), racism, xenophobia (hatred of foreigners), and discrimination based on mental or physical disability. Adapt this set of characters to reflect the realities of oppressive “power over” systems in your context.

- White male member of Congress
- Wife of male member of Congress
- Black female business executive
- White male employee working for a female business executive
- Latina female documented immigrant working in a factory
- Undocumented male worker, working as a busboy
- Unemployed black gay man
- Unemployed woman receiving public benefits (welfare)
- 12-year-old girl living in public housing
- Female student with many student loans
- Married mother of three in an abusive relationship
- Female nurse
- Black male doctor
- 10-year-old male foster child
- Physically disabled male veteran
- Single black mother working three jobs

☐ Put all of these character cards in a box, bag, or hat for participants to select. Though the activity is brief, taking on the role of some of these characters can be an emotional experience, especially for those characters who experience the most oppression. Be aware of how people react emotionally to the activity.

☐ Remind participants that they can choose to step out of the activity at any point. When you ask participants to hand in their character cards at the end, encourage them to remind themselves that they are now back in the group and are no longer “in character.”

**Procedure**

**POWER WALK**

1. Introduce the activity by explaining to participants that this activity, called the “Power Walk,” will look at how gender, race, ethnicity, and other factors influence how much power people have in society and how power can be used to restrict some people’s progress in life.

2. Ask the participants to stand in a row. Have each pick one of the character cards that you prepared earlier from a box, bag, or hat.

3. Ask each participant to read aloud the role given to him. Explain that you want them to take on the characters that have been written on the cards.

4. Ask the participants to close their eyes and think about what it would be like to be the character they have been given. What would that character’s day look like? After a minute, ask them to open their eyes.
5 Tell them that you will read a series of statements. For each statement, you would like them to consider whether that statement applies to their character. If it does, they should move forward one step. If it doesn't, they should stay where they are.

Remind participants to speak up and ask for help from the rest of the group if they are unsure how a particular statement applies to their character.

6 Read the following statements one at a time, and ask participants to silently move forward one step if the statement applies to them. You do not have to go through all of the statements, just as many as you can. (Start from the top and move down until you reach the end.)

• I have had or will have opportunities to complete my education.
• I don't have to worry about where my next meal will come from.
• I can earn enough money to make a good life for myself and my children.
• I could find a new job easily.
• I can go to the police and not be worried about being threatened with arrest or violence.
• It is easy for me to get a loan to start a business.
• I can determine when and how many children I will have.
• If I have a health problem, I can get the help I need right away.
• I can leave my partner if he or she threatens my safety.
• I can travel around my area easily.
• If I want to use a condom, my partner will listen to me.
• If I have a crime committed against me, the police will listen to my case.
• I can walk down a street at night and not worry about being raped.
• I am respected by most members of my community.

7 When you finish with all of the statements, ask the participants to read their roles out loud again.

GROUP DISCUSSION QUESTIONS

8 Ask the participants to no longer play their character but remain where they are standing, and discuss the activity using the following questions:

• If you did not move or moved very little, how does it feel to see where the others are standing? Does it feel right to be so far behind the others? Who or what is to blame for your position?

• If you moved a lot, how does it feel to be ahead of many of the others? Does it feel right to feel so far ahead? Why are you so far ahead?

9 Ask participants to sit back down in a circle and hand in their character cards.

10 Tell participants to think back to the previous session when they discussed power and being a “person” versus a “thing.” Say that differences based on gender, age, sexuality, or other reasons often relate to power and privilege. Some people who feel powerless can also have power over others depending on the situation. Proceed to the following discussion questions:

• How does one’s race or ethnicity impact how much power he or she may have? How does your gender impact how much power you have?

• What would need to happen in our society so that everyone in this group is standing together in the same line (that is, power is more equally distributed)?

• How can this activity help you think about and perhaps make changes in your own lives? In your relationships? In society?
CLOSING STATEMENTS

11 In this activity, we looked at the different ways people have power over others.

12 Many people can be impacted in multiple ways by “power over” systems. For example, a young, unemployed black woman is impacted by the effects of racism, sexism, and poverty. Most people have some experiences of privilege in their lives and some experiences of oppression.

13 Men are privileged by patriarchy – a system in which men on the whole have power over women. But there are limits to these privileges. For example, the privilege of the white male congressman is far greater than that of the physically disabled male veteran.

14 As we talked about with the “The Man Box,” it is important to find ways to break out of these “power over” systems and support others who are trying to do the same.

15 Hand out Participant Handout 3.3: Understanding Power so participants can read more about different types of power at home.
Some types of power exist in relation to other people or resources: We have (or do not have) power in relation to another person or group that has more, less, or the same power we do. It is a relationship. For example, this includes a teacher and student or a parent and child.

Power is not fixed: It is not something we are biologically born with (that is, it is not inherent to us but is constructed based on circumstance, community, and context) or something that we always have all the time. We are constantly moving in and out of situations and relationships in which we have more or less power – for example, a woman who is a supervisor at work has power over her employees, but she may not have the same level of power at home with her husband.

Power can lead to positive and negative feelings: We often feel positive and in control when we are feeling powerful, and we have negative feelings when we are feeling less powerful. This affects our ability to influence and take action in a situation.

There are different types of power, which can be used in different ways. These are:

- **Power over**: To have control over someone or a situation in a negative way, usually associated with repression, force, corruption, discrimination, and abuse. This involves “taking power” from someone else and then using it to dominate and prevent others from taking it – a win-lose situation.

- **Power with**: To have power on the basis of collective strength and/or numbers – to have power with people or groups, to find common ground among different interests, and to build a common goal to benefit all those in the collective. This power multiplies individual talents and knowledge and is based on support, solidarity, and collaboration.

- **Power to**: The ability to shape and influence one’s life. It refers to having the ideas, knowledge, skills, money, and ability to convince yourself and others to do something. When many people have this kind of power, it can also create “power with.”

- **Power within**: A person’s feelings of self-worth and self-knowledge. This is related to people’s ability to imagine a better life for themselves and to have hope and the sense that they can change the world – the feeling that they have rights as human beings. It involves having a sense of self-confidence and a feeling that they have value because they exist.
Dealing with Disempowerment

**ACTIVITY**

**TIME**

60 minutes

**PURPOSE/OBJECTIVES**

1. Explore how young men can cope with their problems and the effects of trauma, and especially the strong emotions these can create.
2. Discuss some of the harmful and destructive coping mechanisms that some young men use.
3. Help young men recognize the negative patterns in the way they deal with problems.

**MATERIALS**

- Three boxes of different colors
- Small pieces of paper in different colors
- Flip chart paper
- Markers

**KEY MESSAGES**

1. Power has many different faces and meanings.
2. We have many identities (such as male, young, and Latino); some of these identities can give us more power or privilege than others depending on the situation.
3. Referring back to “The Man Box,” it is important to find ways to break out of these “power over” systems and support others who are trying to do the same.

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Taking the three boxes, label each with one of the following:

  - Powerless Box
  - Anger Box
  - Fear and Guilt Box
Divide a piece of flip chart paper into two columns. On one side, write “Positive,” and on the other write “Negative.” See the following example:

| Positive | Negative |

**Procedure**

1. Begin the activity by asking the participants the following:
   - Do you sometimes feel powerlessness, shame, or guilt?
   - What makes you feel like that?
   - How do you deal with those feelings?

2. As they are talking, write down some of their responses.

3. After about five minutes, break the participants into pairs. Give the pairs several pieces of small paper.

4. In their pairs, tell participants that they will be discussing the following questions:
   - What do you do when you feel powerless?
   - What do you do when you feel anger, hate, or aggression?
   - What do you do when you feel injured, shame, or guilt?

5. Show them the three labeled boxes you prepared beforehand. Explain that as they talk about the questions, they should write one-word answers to the questions. As an alternative, they can draw symbols or pictures. (They can take more paper if they like.)

6. Allow them about 20 to 30 minutes to discuss in pairs.

7. After they have finished, tell the young men to put each answer into the box it best matches.

**GROUP DISCUSSION QUESTIONS**

8. When they have finished, tell the young men to come back to the large group and sit in a circle. Lead them into a group discussion of the following questions:
   - How are you doing?
   - What were your thoughts and feelings while doing this exercise?
   - Was it easy or difficult to find examples?
   - What are some examples from your discussions would you like to share?
9 Explain to the young men that they will now refer back to the three boxes with times they have felt powerlessness, anger, and guilt. Say, “Nobody can avoid having problems during life. The main challenge is how to deal with the problems that we do have, and you can do that in different ways. All of us have developed strategies to survive or cope as well as we can with the problems in our lives. However, sometimes people develop negative strategies that create new problems. We will now look at the examples given by you and decide if each is negative or positive and why.”

10 Take the papers out of the box, and read them out loud. Have the participants determine if they are positive or negative.

11 After you have read all of the pieces of paper, brainstorm with the participants some additional examples not mentioned. Ask, “What are some positive coping mechanisms that we can use when we feel powerless or hurt?” Examples can include:

- Physical exercise
- Singing
- Reading books
- Talking with friends, mentors, or peers
- Talking to a counselor or therapist

CLOSING STATEMENT

12 Some coping mechanisms may feel good in the moment but don’t last very long and can, in fact, be negative in the long run – for example, drinking alcohol, taking drugs, seeking out conflicts, or avoiding people (isolation).
Closing Circle

PURPOSE/OBJECTIVES

1. Develop a positive moment to end the day’s session for the young men.
2. Quickly reflect on the day’s session.

Procedure

1. Ask all of the participants to gather in a circle.
2. Name one fun thing you (the facilitator) are going to do before the next session (e.g., “I’m going to play soccer” or, “I’m going to watch my favorite TV show”).
3. The person to your right then repeats the activity you named and says what they will do.
4. The person to their right repeats the previous two answers and then follows with their own. This repeats until everyone has gone.
5. After everyone has finished, repeat all of the fun things the participants will do before the next session and then thank them for their time and energy.
6. Remind them of the time and place of the next meeting.
SESSION

Thinking about Our Emotions
Review of Session 3

PURPOSE/OBJECTIVES

1. Review Session 3.
2. Reflect on questions and thoughts from the previous session.

TIME

10 minutes

MATERIALS

- Flip chart paper
- Tape
- Markers

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write the agenda for the session on a piece of flip chart paper and post it on the wall.

Procedure

1. Welcome the young men to Session 4 of the program. Thank the group for their participation at the last session, and ask them to recall the key messages or ideas from the previous session. Remind the group of any key messages that they did not remember. Ask them:
   - What did you learn that was most useful to your own lives?
   - Did you practice any of the skills or apply any of the things you learned from the last session?
2. Share a personal highlight from the last session that you as the facilitator really enjoyed.
3. Tell participants that today’s session is going to focus on young men and health.
ACTIVITY

4.2 Expressing My Emotions

TIME

30 minutes

PURPOSE/OBJECTIVES

1. Discuss how sometimes emotions can be considered only male or only female, when in fact everyone shares these emotions.
2. Enable participants to better articulate their emotions beyond their current comfort levels.
3. Recognize the difficulties men face in expressing certain emotions and the consequences for themselves and their relationships.

MATERIALS

- Flip chart paper
- Markers
- Pens or pencils
- Paper
- Facilitator Resource 4.2

KEY MESSAGES

1. Young men shouldn’t feel ashamed of the emotions that they feel, even if they have difficulty expressing them.
2. It is natural to feel difficult emotions like pain and anger, but individuals are responsible for how they handle those emotions.

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Prepare the ranking score sheet on a flip chart by referring to Facilitator Resource 4.2: Sample Ranking of Emotions.
Procedure

INDIVIDUAL RANKING OF EMOTIONS

1. Remind participants about how the group talked about the connections between showing or not showing emotions and the messages we receive about manhood. How is emotion connected to the “Man Box”?

2. Refer their attention to the five columns on flip chart paper, and write the following emotions as headings: fear, affection, sadness, happiness, and anger. (See Facilitator Resource 4.2 for an example of how to arrange the words).

3. Explain to the participants that they will be thinking about and discussing how easy or difficult it is for people to express these emotions.

4. Give all participants a small piece of paper and ask them to write down the five emotions on the paper, in the same order.

5. Read the following directions: “Think about which of these emotions you express with greatest ease. Put a number one (1) next to the emotion that is the easiest for you to express. Then think about the next-easiest emotion for you to express and put a number two (2) beside it. Put a number three (3) next to the emotion that is third-easiest; it may not be too hard, but it also may not be very easy. Put a number four (4) next to the emotion you have even greater difficulty expressing. Finally, put a number five (5) next to the emotion that you have the most difficulty expressing.”

SHARING AND CALCULATING FINDINGS

6. After all of the participants have finished ranking their emotions, collect the papers and write down the rankings in the columns on the flip chart (see the example in Facilitator Resource 4.2).

7. Explain that the emotions they numbered as “one” and “two” are those they have often learned to express in an exaggerated way (or learned to express very well). Numbers “four” and “five” are those they haven’t learned to express as well or that they may have learned to repress or keep hidden. Number “three” may represent an emotion they do not exaggerate or repress but probably deal with more naturally.

8. With the entire group, reflect on the similarities and differences among the participants.

GROUP DISCUSSION QUESTIONS

In this activity, be sure to ask all questions.

9. Why do people exaggerate or repress certain emotions?

10. How do they learn to do this?

11. What are the consequences of exaggerating or repressing emotions?

12. How might this chart look different if this were a group of your female peers?

13. What are the differences between how men and women are “supposed to” express emotions?

14. Why are emotions important? (Facilitator examples include: fear helps us handle dangerous situations, and anger helps us to defend ourselves. Ask the participants for examples.)

15. What types of emotions do you feel “safe” showing when you are hanging out with friends or in your neighborhood? Why do these emotions feel safer to show than others?
How do you think expressing your feelings more openly can affect your well-being? Your relationships with other people (such as romantic partners, family, and friends)?

What can you do to express your emotions more openly?

CLOSING STATEMENTS

You shouldn't feel ashamed to express your emotions even if it may be difficult.
Expressing them, without causing harm to others, helps make you stronger and relate better to the world around you.
It is common for young men to hide fear, sadness, and even kindness, and to express anger through violence.
Although you are not responsible for feeling certain emotions, you are responsible for what you do with what you feel. It is critical to distinguish between “feelings” and “acting” in order to find forms of expression that does not cause damage to yourselves or to others.
Sample Ranking of Emotions

The following is an example of how to organize the columns of emotions and participant responses. During the discussion, the facilitator should help the participants identify similarities and differences in rankings. For example, the table shows that there is an almost even split in the number of participants who find it easy to express anger and those who find it difficult. This could lead to a discussion about why these differences exist, and whether men generally find it easy or hard to express anger. It could also lead to a discussion on how this affects men’s relationships with family, friends, and partners. Another interesting pattern in the table is that most find it difficult to express fear. Often, men are expected to be fearless; this example can serve as a basis for discussion about socialization and gender norms.

Remember: 1 = easiest to share/express, 2 = easy to share/express; 3 = middle/neutral/feels natural; 4 = difficult to share/express; 5 = very difficult to share/express

<table>
<thead>
<tr>
<th>Fear</th>
<th>Affection</th>
<th>Sadness</th>
<th>Happiness</th>
<th>Anger</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant #1</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Participant #2</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Participant #3</td>
<td>4</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Participant #4</td>
<td>4</td>
<td>3</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Participant #5</td>
<td>5</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

It is important to remember that the table’s rankings should be anonymous. That is, each line should represent a participant’s ranking but not include his name. The facilitator can instead assign them numbers to which the participants can easily refer during the discussion.
What Do I Do When I’m Angry?

**PURPOSE/OBJECTIVES**

1. Help the participants identify when they are angry and how to express their anger in a constructive and nondestructive way.

**MATERIALS**

- Flip chart paper
- Pens or pencils
- Tape
- Two notecards for each participant, one saying “Yes” and one saying “No”
- Copies of Participant Handout 4.3
- Facilitator Resource 4.3

**KEY MESSAGES**

1. Anger is a normal emotion that every human being feels.
2. Some people may confuse anger and violence, thinking that they are the same thing and that violence is an acceptable way of expressing anger.
3. Learning to express anger in a safe, positive, and constructive manner is better than bottling it up inside.

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Prepare notecards for participants. Each participant should receive two cards, one that says “Yes” and one that says “No.”
Procedure

IN YOUR FEELINGS

1. Hand out the “Yes” and “No” notecards to the participants.
2. Tell the group that you are going to give them some examples of situations. After each example, you should ask them “whether or not you are ‘in your feelings.’” 
3. They should lift up the notecard that says “Yes” if so and “No” if not. They should also think about how they feel and why they might feel that way.
4. Read the scenarios from Facilitator Resource Sheet 4.3: In Your Feelings.
5. After each scenario, give the participants a chance to say why they felt that way.
6. Ask participants for ways they can address the situation in a positive way.
7. When you are finished with the scenarios or 10 minutes have passed, lead the group in the following discussion.

INDIVIDUAL COMPLETION OF WORKSHEET

7. Explain to the group that the purpose of the activity is to discuss how individuals express anger. Many men confuse anger and violence, thinking they are the same thing. Anger is an emotion, a natural and normal one that every human being feels at some point in life. Violence is a way of expressing anger, but there are many other ways of expressing anger that are better and more positive.
8. Pass out Participant Handout 4.3. Read aloud each question, and ask the participants to answer on their own, allowing two or three minutes for each question.

SMALL GROUP DISCUSSION OF WORKSHEET AND LISTING WAYS TO REACT

9. After participants have filled out the sheet, divide them into groups of four or five participants each (at the most).
10. Ask them to briefly comment on what they wrote to the others in the group. Allow 20 minutes for this group work.
11. Hand out flip chart paper to each of the small groups, and ask them to make a list of:
   - Negative ways of reacting when we are angry
   - Positive ways of reacting when we are angry
12. Allow the groups 15 minutes to make their lists.

PRESENTATION AND DISCUSSION

13. Ask each group to present their answers to the whole group.

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19 "In your feelings" is a slang term often used to convey that one is feeling “emotional.” In this instance, it is used for when one feels a great deal of anger or is particularly upset about a situation.
It is very likely that the “positive ways” list will include taking a breath of fresh air or counting to 10 and using words to express what we feel without offending.

If these two tactics are not on any of the lists presented, explain them to the group. It is important to stress that “taking a breath of fresh air” does not mean (for example) jumping into a car and driving around at high speed, exposing oneself to risk, or going to a bar and drinking excessively.

In short, to take a breath of fresh air is simply to remove oneself from the situation of conflict and anger, getting away from the person towards whom one is feeling angry. One can count to 10, breathe deeply, walk around a bit, or do some other kind of physical activity in an attempt to cool down and stay calm.

Generally, it is important for the person who is angry to explain to the other person that he is going to take a break because he is feeling angry — something like, “I'm really fed up with you, and I need to get a breath of fresh air. I need to do something like go for a walk to not to feel violent or start shouting. When I've cooled down and I'm calmer, we can talk things over.” To use words without offending is to learn to express two things: to say to the other person why you are so upset, and to say what you want from the other person without offending or insulting.

Give an example for the group: If your girlfriend arrives late for a date, you can react by shouting, “You’re a bitch. It’s always the same, me standing here waiting for you.” On the other hand, you can look for words that do not offend, such as, “Look, I’m angry with you because you’re late. I would like you to be on time. Otherwise, let me know that you’re going to be late.”

GROUP DISCUSSION QUESTIONS

14 Generally speaking, is it difficult for men to express their anger without using violence? Why?
15 Often, we know how to avoid a conflict or a fight without using violence, but we don’t do so. Why?
16 Is it possible to “get a breath of fresh air” to reduce conflicts? Do you have experience with this? How did it work out? Is it possible to “use words without offending”?
17 What have you learned from this activity? How can you apply this to your lives and relationships?

CLOSING STATEMENT

18 Anger is a normal emotion that every human being feels at some point. The problem is that some people may confuse anger and violence, thinking they are the same thing and that violence is an acceptable way of expressing anger. However, there are many other ways of expressing anger, better and more positive ways. Learning to express our anger when we feel it is better than bottling it up inside. When we allow our anger to build up, we tend to explode.
What Do I Do When I’m Angry?

1. Think of a recent situation when you were angry. What happened? Write a short description of the incident (one or two sentences).

2. Think about this incident, and try to remember what you were thinking and feeling. List one or two things that you felt in your body when you were angry.

3. We sometimes react with violence when we feel angry. This can even happen before we realize we are angry. Some men react immediately by shouting, throwing something on the floor, or hitting something or someone. Sometimes, we can even become depressed, silent, and introspective. How did you demonstrate your anger during this incident? How did you behave? (Write a sentence or a few words about how you reacted and what you did when you were angry.)
In Your Feelings

1. You lose a video game. Would you be in your feelings? Why or why not?

2. Your partner breaks up with you. Would you be in your feelings? Why or why not?

3. Your friend spreads a false rumor about you. Would you be in your feelings? Why or why not?

4. You lose your phone. Would you be in your feelings? Why or why not?

5. You miss the bus or metro to school. Would you be in your feelings? Why or why not?

6. Your friend says that they’ve been sexually assaulted. Would you be in your feelings? Why or why not?

7. Your parent or guardian yells at you in public. Would you be in your feelings? Why or why not?

8. You don’t get the job you wanted or get into the college you wanted to go to. Would you be in your feelings? Why or why not?

9. You can’t go to a party that all your friends are going to. Would you be in your feelings? Why or why not?

10. A police officer stops you at the bus stop or metro. Would you be in your feelings? Why or why not?
The Four Phrases

PURPOSE/OBJECTIVES

1. Propose and rehearse a model for creative conflict resolution.

TIME

45 minutes

KEY MESSAGES

1. When dealing with conflicts, positive confrontation is vital. This means talking and being clear and positive in our communications.

2. We do not “win” an argument or conflict by humiliating others, but rather by finding an agreement or resolution favorable to all.

MATERIALS

- Flip chart paper
- Markers

Preparation

- Review the activity, and be sure you understand the content, teaching methodology, and timing.

Procedure

1. In a brainstorming session, ask the participants, “What is conflict?”
2. Note some of the ideas on a flip chart.
3. Ask the participants to break into pairs, and ask them to (in pairs) think about a conflict, fight, or disagreement they feel comfortable discussing and describe that situation to the other person.
4. After they both have discussed this, tell them, “Partner A will play the role of the person with whom Partner B has the conflict. How would you face him or her?” In their roles, allow them some time to talk more about the conflict.
5 Present the following four phrases:

- **“I can see...”**: This concerns the conduct we see in another person. For example, “I can see that you never greet me when...”

- **“I imagine...”**: Through this phrase, we say what we imagine when observing the other person's conduct. For example, “I imagine that you are annoyed.” It is important to note that when we “imagine,” there is a possibility that we are actually wrong in our interpretation. By expressing what we imagine or how we interpret something, we provide the other individual the opportunity to clarify.

- **“I feel...”**: Here, we share our feelings with the person, saying what we can see and imagine. For example, “I feel sad, and what happened upset me because your friendship is important to me.”

- **“I want...”**: This is when we make a proposal to improve things. For example, “I want you to tell me if something is bothering you.”

6 Ask the participants to go back into their pairs and work to resolve the conflict using some of the phrases presented. When they finish, allow them to discuss in their pairs how they felt doing this exercise.

7 Finish by going back to the flip chart and analyzing the negative values assigned to conflict during brainstorming. Remind them that conflict always exists and can be an opportunity for personal growth and development.

8 Explain that this exercise allows them to express feelings and needs, which are frequently not expressed in a conflict situation. If there are multiple conflicts, it is important to prioritize them and deal with them one at a time.

**GROUP DISCUSSION QUESTIONS**

9 How did you feel in this exercise? Did you notice any difference following the four phrases model to resolve the conflict?

10 What did you discover about yourselves?

11 Does the way we view conflict have something to do with the way we face it?

12 How do you think you will apply what you have learned here today?
Purpose/Objectives

1. Quickly reflect on the day’s session.

Procedure

1. Ask all of the participants to stand in a circle.

2. Ask them to think of how they felt today. Starting with yourself and moving clockwise, ask each individual to say one word about how they felt about today’s session.

3. When each person has finished, thank them all for attending and for their full engagement and participation.

4. Remind them of the time and place of the next meeting.
SESSION

5

Sexual and Reproductive Health
Review of Session 4

PURPOSE/OBJECTIVES

1. Review Session 4.
2. Reflect on questions and thoughts from the previous session.

TIME

10 minutes

MATERIALS

- Flip chart paper
- Tape
- Markers

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write the agenda for the session on a piece of flip chart paper and post it on wall.

Procedure

1. Welcome the young men to Session 5 of the program. Thank the group for their participation in the last session, and ask them to recall the key messages or ideas from the previous session. Remind the group of any key messages that they did not remember. Ask them:
   - What did you learn that was most useful to your own lives?
   - Did you practice any of the skills or apply any of the things you learned from the last session?

2. Share a personal highlight from the last session's work that you as the facilitator really enjoyed.

3. Tell participants that today's session is going to focus on birth control methods and how they work.
ACTIVITY

5.2 The Erotic Body

TIME

30–45 minutes

PURPOSE/OBJECTIVES

1 Reflect on how men and women experience sexual desire and the different messages they receive from society about sexuality and eroticism.

MATERIALS

Magazines and newspapers
Scissors, paper, and glue

KEY MESSAGES

1 There is a difference between what the media shows as desire and what people feel.
2 These depictions can affect the way we view sex.
3 These perceptions can lead to sexually risky behaviors that can result in unintended health outcomes, such as increasing the risk of contracting HIV and other STIs and the risk of unplanned pregnancy.

Procedure

1 Distribute a sheet of paper to each participant, and lay out some magazines, glue, and scissors in the middle of the room.
2 Explain that each participant should produce a collage on what makes men think about sex using pictures, words, and other images cut out from the magazines and newspapers.
3 Allow the participants about 15 minutes to look through the magazines and newspapers and produce their collages.
4 Distribute a second sheet of paper to each participant and ask them to produce collages about what makes women think about sex.
5 Allow the participants 15 minutes to produce the second collage.
6 Invite participants to volunteer to present and discuss their collages.
GROUP DISCUSSION QUESTIONS

7. What is sexual desire? How is male sexual desire depicted in these collages? What about female sexual desire? What are the similarities and the differences between the images chosen? (Facilitator Note: If participants do not understand these questions, rephrase as, “How do these magazines, and the media more broadly, represent or show the ways that men and women think about sex?”)

8. Take out your phones, and open up your favorite social media page. How do the magazine images compare with what you see on your social media feeds? Do you see the same stereotypes? Do you see different ones? Why is that?

9. In general, are these fair or accurate representations? How might it look if you had more of a say in the portrayal of sexual desire?

10. Do both men and women feel sexual desire? Why or why not?

11. Are there any differences in how they feel sexual desire?

12. Do all men feel sexual desire the same way? How so? Do all women experience sexual desire in the same way? How so?

13. How can messages in the media influence young men’s attitudes and behaviors about sex and desire— for example, having sex without a condom or not making sure both you and your partner have been tested? Do these messages create unrealistic expectations? Why or why not?

14. What have you learned from this exercise? How can you apply this in your own lives and relationships?

CLOSING STATEMENTS

15. Both men and women have sexual desires and can feel sexual excitement. This excitement depends on biological as well as social and psychological factors.

16. Images in media, such as in movies, social media, YouTube, and porn websites, often show sexual desire and our bodies in an exaggerated or unrealistic way. Many of these portrayals contribute to constructing the “Man Box.” This can distort the perceptions we have of our own bodies, what to expect in our partners, and the ways in which we think about sex and sexual desire.

17. It can also influence some of our own behaviors. Such expectations can make us or our partners more likely to take risks that have consequences for our health, such as not using a condom.

18. Every person is unique. If we were all the same, the world would be boring. It is important to appreciate the differences in both ourselves and our partners, and question images that portray men as having power over women in sexual interactions.
ACTIVITY 5.3
The Male Body, The Female Body

TIME 45 minutes

PURPOSE/OBJECTIVES
1. Increase participants’ awareness and knowledge of the reproductive system anatomy, physiology, and sexual health.

KEY MESSAGES
1. The key to preventing pregnancy is to make sure the sperm and the egg do not meet and to prevent the fertilized egg from implanting in the uterus.
2. The only guaranteed way to avoid a pregnancy is to not have sex.
3. If you choose to have sex, there are several methods that you can use to prevent the transmission of HIV and other STIs and to prevent unplanned pregnancy.

MATERIALS
- Small pieces of paper or cards
- Pens or pencils
- One copy of each:
  - Resource Sheet 5.3A
  - Resource Sheet 5.3B
  - Resource Sheet 5.3C
- Copies for everyone:
  - Resource Sheet 5.3D
  - Resource Sheet 5.3E
  - Resource Sheet 5.3F
  - Resource Sheet 5.3G

Participants might not feel comfortable asking questions about men and women’s bodies and genitalia. If this is the case, it might be helpful to invite them to write down their questions on small pieces of paper, which can then be collected and read aloud with the answers at next week’s session.
Preparation

- Review the activity and be sure you understand the content, teaching methodology and timing.

- Prior to the session, use Resource Sheet 5.3D: The Female Reproductive System and 5.3E: The Female Sexual and Reproductive Anatomy to write out the following words on small pieces of paper or cards:

**Female Sexual Anatomy Terms**

- Ovary
- Uterine (Fallopian) Tube
- Uterus
- Cervix
- Vagina
- Outer Lip (Labia Majora)
- Inner Lip (Labia Minora)
- Vulva
- Clitoris
- Urethral (Urinary) Opening
- Anus

- Use Resource Sheet 5.3F: Male Sexual and Reproductive Anatomy to write out the following words on small pieces of paper:

**Male Sexual Anatomy Terms**

- Ductus (Vas) Deferens
- Penis
- Urethra
- Epididymis
- Testicle (Testis)
- Scrotum
- Prostate Gland
- Seminal Vesicles
- Bladder

*These can be laminated and used for multiple sessions.*
Procedure

1 Explain to the group that in this activity, they will discuss different parts of the anatomy. Because the curriculum will focus on preventing unplanned pregnancies, in this activity and the ones that follow, "sex" is taken to mean sex in which a penis enters a vagina. Other sexual acts (such as oral or anal sex) will be specified as they arise.

2 At the beginning of the session, divide the participants into three groups.

3 Give one group a copy of Resource Sheet 5.3A and the set of pieces of paper with the names and descriptions for the female reproductive system.

4 Give the other group a copy of Resource Sheet 5.3B and the set of pieces of paper with the names and descriptions for the male reproductive system.

5 Give the third group a copy of the Resource Sheet 5.3C and the set of pieces of paper with the names and descriptions for the female reproductive system.

6 Read through each definition for the different parts of the anatomy while participants look at their diagrams. After you have read this, tell the groups that they will be labeling each part of the diagram with the correct terms.

7 Allow the groups 10 minutes to discuss and label the drawings.

8 Ask the groups to present their pictures and explain their answers. As each group presents its picture, invite the participants to ask questions and make corrections.

9 Use the answer key to provide the participants with the correct answers.

10 Distribute full copies of Resource Sheets 5.3.D, 5.3.E, 5.3.F, and 5.3.G to the participants, and briefly explain their contents. Ask if they have any questions about the information provided.

11 Wrap up the discussion with the following questions.

Optional Step: Invite the participants to write out additional questions they have about women and men's bodies on small pieces of paper. These can be put in a box or bag and then selected one by one for discussion.

GROUP DISCUSSION QUESTIONS

12 What were the most difficult reproductive organs to identify? Why? What did you learn today that you might not have known before?

13 Why do you think it is important for young men to know the name and function of both male and female reproductive organs?

14 What are the benefits to knowing these things with regards to preventing unplanned pregnancy and preventing HIV and other STIs? In what ways will this information change an individual’s behavior or approach to their body?

This is an opportunity to move away from simple “technical knowledge” to knowing how pregnancy can impact the ways they approach their own fertility.

15 How often do young men talk about these things?
What are some of the challenges that young men and young women face in trying to access, talk about, and understand this information? Do young men feel comfortable asking for this information? Why or why not?

**Possible follow-up question:** What could be done to make young men feel more comfortable talking about it?

Who can you talk to about these things? What can you do to ensure that young people in your community have more accurate information about these topics?

**Here are other questions to probe more with young men if you have time:**

- *What is the connection between our knowledge of the reproductive systems and pregnancy?*
- *Do young men feel embarrassed asking questions about their body? Why or why not? If so, where does this embarrassment come from?*

**CLOSING STATEMENTS**

18 As young men, you have the right to know and understand your bodies fully.

19 Understanding your sexual and reproductive systems is important to have a fulfilling sex life, which includes the prevention of unplanned pregnancies, STIs, and HIV infection, as well as maintaining good reproductive system health and reproductive planning (whether you choose to have children or not).

20 The key to preventing pregnancy is to make sure the sperm and the egg do not meet, and to prevent the fertilized egg from implanting in the uterus.

21 The only guaranteed way to avoid a pregnancy is to not have sex.
Female Sexual and Reproductive Anatomy
Male Sexual and Reproductive Anatomy
The Female Reproductive System
Answer Key for Facilitator

RESOURCE SHEET 5A
1. Outer Lip (Labia Majora)
2. Inner Lip (Labia Minora)
3. Vaginal Opening
4. Clitoris
5. Urinary Opening

RESOURCE SHEET 5B
1. Bladder
2. Seminal Vesicles
3. Ductus Deferens
4. Penis
5. Urethra
6. Epididymis
7. Testicle (Testis)
8. Scrotum

RESOURCE SHEET 5C
1. Ovary
2. Uterine Tube (Fallopian Tube)
3. Uterus
4. Cervix
5. Vagina
The Female Reproductive System Handout Key

IN THE DIAGRAM

**Ovaries**: Two female glands that contain thousands of eggs that will only mature after puberty.

**Cervix**: The narrow “entryway” between the vagina and uterus. The cervix is flexible so it can expand to let the baby pass through during childbirth.

**Uterus**: A hollow, muscular organ connected to the uterine tubes and the vaginal canal. This is the organ in which gestation (i.e., the process of carrying a fetus in the womb between conception and birth) occurs.

**Vagina**: Canal that forms the passageway from the uterus to the outside of the body. This connects the uterus to the vulva, through which menstrual blood is eliminated. This is where vaginal sex occurs.

**Uterine Tubes (Fallopian Tubes)**: Connect the ovaries to the uterus.

OTHER KEY INFORMATION

**Ovulation**: Every woman is born with many eggs in her ovaries. During puberty, the ovaries start making more estrogen and other hormones, which cause bodily changes.

The eggs “wake up” and begin to mature; each month, one egg matures in one of the ovaries. Once a month, the ovaries release an egg (ovum). This is called ovulation. The released egg moves along one of the two uterine tubes, which connect the ovaries to the uterus. As the egg travels, hormones released at this time make the lining of the uterus (called the endometrium) thicken with blood and fluid. This makes the uterus a good place for a baby to grow.

A woman can get pregnant if she has sex with a man without birth control and his sperm joins the egg (in a process called fertilization) on its way to the uterus. If the egg is not fertilized, it will be eliminated by the uterus (along with the hormone-induced thick lining) in what is called menstruation.

**Note**: If a woman has unprotected sex (i.e., without any barrier method to prevent sperm from entering the uterus) two to five days before ovulation occurs, sperm might have had time to travel into the uterine tube, and egg fertilization may occur there.

**Pregnancy**: The fertilized egg travels to the uterus, attaches to the lining of the uterus, and remains there for 35 to 40 weeks of pregnancy – the time it takes for the fertilized egg to transform into an embryo and then a fetus.
IN THE DIAGRAM

Labia: Two sets of rounded folds of skin: the labia majora (the outer lips) and the labia minora (or inner lips). The labia cover and protect the vaginal opening. The inner and outer lips come together in the pubic area.

Vaginal Opening: Opening protected by the labia and through which menstrual blood leaves the body.

Clitoris: Sitting atop the labia, a cylindrical body made up of the same type of tissue as the head of a penis. It is very sensitive, and its only purpose is the woman's sexual pleasure. Its stimulation can cause most women to feel intense physical pleasure, which is called orgasm. The muscles and nerve endings of the clitoris are connected to the vagina, and parts of the vaginal wall are susceptible to the sensation of pleasure, meaning that orgasm can also be achieved by the stimulation of the vaginal wall.

Urinary Opening: The opening from which a woman urinates.

OTHER KEY WORDS

Bladder: Muscular sac that stores urine (pee) until it is released through the urethra (a short tube that carries urine from the bladder to the outside of the body), located in the lower part of the abdomen.

Hymen: Covering the opening of the vagina, it is a thin piece of tissue that has one or more holes in it. Sometimes a hymen may be stretched or torn, such as when a tampon is used or during a first sexual experience. If it does tear, it may bleed a little bit.

Mons Pubis: The mound of tissue and skin above the legs, in the middle. This area becomes covered with hair in puberty.

Vulva: Area covering the entrance to the vagina; this refers to the female external reproductive organs. The vulva has five parts: mons pubis, labia, clitoris, urinary opening, and vaginal opening.
IN THE DIAGRAM

**Bladder**: Muscular sac that stores urine (pee) until it is released through the urethra, located in the lower part of the abdomen.

**Seminal Vesicles**: Located at the base of the bladder, the two seminal vesicles secrete a thick fluid that nourishes the sperm.

**Ductus Deferens (Vas Deferens)**: Long, thin tubes that transport sperm away from the epididymis and through the prostate gland, then flowing into the urethra.

**Penis**: External male organ through which semen and urine leave the body. It is made of the same spongy tissue as the clitoris, filling with blood during stimulation. During sexual excitation, the penis fills with blood and gets larger and harder, a process called erection. If the penis is stimulated during the erection, this can lead to orgasm, during which semen is released from the penis through the opening of urethra in a process called ejaculation. Man can also release some semen during erection before orgasm. Men can also get excited and ejaculate in their dreams, especially during puberty.

**Urethra**: Canal that carries urine from the bladder to the urinary opening. In men, the urethra also carries semen out of the penis. The urethra is longer in males, so the microorganisms that cause urinary infection are less likely to “climb up” and cause infection than it is the case for women.

**Epididymis**: Organ where sperm are stored and mature after they are produced in the testicles. It can be felt by examining or touching the upper side of the testis (which is important to differentiate from any tumor or swelling of the testicle, which might be a symptom of testicular cancer).

**Testicle (Testis)**: Male reproductive gland that produces sperm and the male sex hormone testosterone, responsible for male secondary sex characteristics such as skin tone, facial hair, tone of voice, and muscles.

**Scrotum**: The sack where the testicles are located.
The male sexual and reproductive anatomy includes external organs, glands, hormones, and sperm. From puberty onward, sperm are continuously produced in the testicles (or testes), which are found inside the scrotum. As the sperm mature, they move into the epididymis, where they remain to mature for about two weeks. The sperm then leave the epididymis and enter the ductus deferens. These tubes pass through the seminal vesicles and the prostate gland, which releases fluids that mix with the sperm to make semen. During ejaculation, semen travels through the penis and out of the body by way of the urethra, the same tube that carries urine. The urethral or urinary opening is from where a man urinates or ejaculates.

**Sperm**: A male sex cell that contains 23 chromosomes.

**Semen**: Fluid made of sperm cells from the testicles, fluid from the seminal vesicles, prostate fluid, and secretions released by another pea-sized gland below the prostate (the bulbourethral gland), which is released by the penis during ejaculations.

**Ejaculation**: The release of semen from the penis.

**Prepuce (Foreskin)**: The skin that covers the head of the penis, or glans.

**Prostate Gland**: This walnut-sized gland surrounds a portion of the urethra and produces some of the fluid in semen, fluid that enables the sperm to travel. The prostate fluid and sperm form semen.
Q. Can semen and urine leave the body at the same time?
A. Some young men worry about this because the same passage is used for both urine and semen. A valve at the base of the urethra makes it impossible for urine and semen to travel through this tube at the same time.

Q. How long should a menstrual cycle last?
A. A menstrual cycle occurs when the thickened lining of the uterus and extra blood are shed through the vaginal canal. Menstrual cycles take place over about one month (around 21 to 34 days), but each woman’s cycle is different. Many women have a cycle that lasts 28 days. The cycle includes not just the period, but the rise and fall of hormones and other body changes that take place over the month.

Q. When are women and men fertile?
A. Women: When a girl starts having menstrual periods, it means that her reproductive organs have begun working and that she can become pregnant if she has vaginal sex. A woman is able to become pregnant only certain days of each month. A woman is fertile when she is ovulating. Ovulation is the periodic release of a mature egg from the ovary. This happens around 14 days before the start of the next menstruation, although the timing cannot be predicted with total certainty.

Men: Beginning with his first ejaculation, a man is fertile every day and has the ability to father a child for the rest of his life.

Q. Can a woman who has never had sex use tampons?
A. Yes. Tampons are compressed cotton formed into a cylindrical shape. They are pushed into the vagina during menstruation to absorb the blood entering the vagina from the uterus.

Q. What is the right length of a penis?
A. The average penis is between 4.3 and 7 inches long when erect. There is no “standard” penis size, shape, or length. Some are fat and short. Others are long and thin. There is no truth to the idea that a bigger penis is a better penis.

Q. How does a woman know if she has a vaginal infection?
A. Vaginal infections are very common, and most women experience at least one in their lifetime. If the infection is caused by increases in the number of bacteria in the vagina, it is called bacterial vaginosis. If the infection is caused by an overgrowth of the fungus Candida, it is called a vaginal yeast infection. There are many possible signs of a vaginal infection, but many women have none or only a few of these symptoms. Symptoms include unusual vaginal discharge, burning when urinating, itching around the outside of the vagina, and more. They may be mild or severe.
Q. Why should people pee after sex?
A. For young women, peeing after sex helps to prevent urinary tract infections, infections of the urinary system. Peeing after sex helps remove any bacteria that may have entered the urethra during sex. It is recommended that young men also pee after sex.

Q. Is it normal to have one testicle hanging lower than the other?
A. Yes. Most men’s testicles hang unevenly.

Q. Is it a problem for the penis to curve a little bit?
A. It is normal for a boy or a man to have a curving penis.

Q. What are those bumps at the head of the penis?
A. The bumps are glands that produce a whitish cream-like substance. This substance helps the foreskin slide back smoothly over the head of the penis, the glans. However, if it accumulates beneath the foreskin, this substance can cause a bad smell or infection. It is important to keep the area under the foreskin very clean at all times.

Q. What is masturbation?
A. Masturbation is defined as rubbing, stroking, or otherwise stimulating one’s sexual organs – the penis, clitoris, vagina, and/or breasts – to obtain pleasure or express sexual feelings. Masturbation is a normal part of human sexual development and one of the ways to learn about our own bodies. Many people, men and women alike, masturbate for pleasure and learning. There is no scientific evidence that masturbation causes harm to the body or mind. The decision about whether or not, or how often, to masturbate is a personal one. If you have questions or concerns about masturbation, you should talk to a trusted adult such as a parent, teacher, faith leader, or health provider.

Q. Is it normal to have an erection in public?
A. Yes, it is normal. Even though you may think it is embarrassing, try to remember that most people will not even notice the erection unless you draw attention to it.

Q. Will wet dreams or ejaculation make someone lose all of his sperm?
A. No. The male body makes sperm continuously throughout his life.

Q. What is pre-cum?
A. Pre-cum is a fluid that is released during sex before ejaculation. This fluid can contain sperm, which could cause pregnancy. If an individual has HIV or another STI, the infection can be transmitted through pre-cum. Therefore, it is best to always wear a condom during sex, consistently and correctly.
**ACTIVITY**

**5.4 Young Men’s Health**

**TIME**

45 minutes

**PURPOSE/OBJECTIVES**

1. Encourage participants to translate the “Man Box” to health problems. How does the “Man Box” affect or impact their health?
2. Expand participants’ understanding of how stereotypes may lead to common health problems among young men.
3. Help participants think through and recognize different health-seeking behaviors and understand the importance of maintaining healthy behaviors.

**MATERIALS**

- Flip chart paper
- Small pieces of paper
- Tape
- Markers
- Sticky notes

**KEY MESSAGES**

1. It is our responsibility to take care of our bodies and our health.
2. Asking for help and seeking physical and mental health services are not signs of weakness; they are signs of being in charge of one’s own well-being.

**Procedure**

1. Tape enough pages of flip chart paper together to draw two full outlines of the human body. Ask for a volunteer to serve as a model for drawing the outline of a body. Have the participants draw two outlines, side by side.

2. Once they have drawn the outlines, ask participants to fill in the sketch of one figure with details to make him a young man – give him a face, dress him, and give him a personality. For example, what does he like to do for fun? What does he do on the weekends? Everyone should take part in the drawing exercise. Ask the participants to give a name to the young man that they have drawn.
3 On the second outline, ask for a volunteer to sketch the genitals on the body. If the participants are too embarrassed to do this, the facilitator can do so.

4 When the outlines are finished, give each participant two sticky notes and ask them to write one common health problem or need that young men face (e.g., alcohol dependency or violence) on each note.

5 When they have finished writing, ask each participant to read aloud the health problems or needs, and stick them on the part of the body where this health problem appears. It does not matter if some problems are repeated.

6 Next, ask the participants to read aloud the characteristics of being a man that they wrote in the “Man Box” activity. After reading the characteristics again, ask the participant to write one of the characteristics on a sticky note and stick it on the body next to the health problem/need with which the characteristic can be associated. For example, the characteristic of having many sexual partners might be stuck next to the body's groin area to signify its association with risks for HIV and other STIs.

> Probe to see if the participants identify alcoholism, violence, suicide, unplanned pregnancy, HIV/STIs, and substance abuse as health problems. If they have not mentioned these problems, ask if these are issues that young men face in their community (particularly highlighting unique health problems).

GROUP DISCUSSION QUESTIONS

7 What health problems or needs do young men have?

8 What are the causes of these health problems? What are their consequences?

9 What is the relationship between young men's health needs and what is inside the Man Box?

10 How do expectations of what it means to be a man impact the behaviors or risks that young men take with their health (such as excessive drinking)?

11 How does young men's health affect the health of their partners?

12 When men are ill or sick, what do they do? Do they usually look for help as soon as they feel ill, or do they wait? When women are ill or sick, what do they do?

13 Where do men and women learn this? From parents? Peers? Others?

14 What can we do to encourage other young men to take better care of their health?

CLOSING STATEMENTS

15 Because of the messages we receive, many men do not worry about their health and may believe that taking care of their body or being overly concerned with their health is feminine.

16 It is important that as young men, you learn the importance of taking care of yourselves, including going to a clinic when needed and asking for help. Doing so has benefits for both you and your partners.
Burning Questions about STIs and the Clinic

MATERIALS
- Flip chart paper
- Markers
- Tape
- Laminated STD/STI cards
- Participant Handout 5.5A
- Participant Handout 5.5B

KEY MESSAGES
1. There are many myths and misunderstandings about HIV and other STIs. Understanding the facts and what to do is a way to empower and protect yourself.
2. Many common STIs – such as chlamydia, gonorrhea, and syphilis – can be cured by taking antibiotics (pills).
3. Some STIs – such as HIV and herpes – cannot be cured, but medicine can help treat them.
4. A person can be infected with an STI and show no symptoms.
5. If you are sexually active, you need to get tested regularly for STIs.
6. Getting tested is an inexpensive, simple process in which you either receive an oral swab or give blood and urine samples.
7. You can obtain condoms and other forms of birth control at your local clinic without your parents' consent.
8. It is very important to get and use condoms or another form of birth control every time you have sex or engage in sexual activity.

It is suggested that you have a medical professional attend this session in case participants have more questions.
Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Review information on the services of local clinics.
- Set up the laptop, flash drive with the Virtual Tour, LCD projector, and screen.
- Write the following six questions on a piece of flip chart paper before the session, and post them on the wall.

![Flip chart with questions](image)

 Procedure

**BURNING QUESTIONS ABOUT STIs**

1. Explain that the group will be looking at some common questions and answers about sexually transmitted infections, or STIs. Explain that many people use the term “STD,” which stands for sexually transmitted disease. Explain that these two terms are the same, but that the health community usually calls them “infections,” thus the acronym STIs.

2. Have the participants call out STD/STIs that they know. As they call them out, hand a laminated card with that STI to that participant.

3. When all of the STIs are handed out, tape the first set of categories (viral, bacterial, and parasitic) to the wall. Have the young men tape up their STIs under the category they think it belongs to. When the STIs are in the correct positions, discuss why they are in each place.
   - Viral – treatable but not curable
   - Bacterial – cured completely
   - Parasitic – living things that must be killed

4. Repeat step 3 with the next set of categories (treatable, curable, and killable).

5. Go through the types of treatments that are available.
Throughout the discussion discuss the ways that STIs can be contracted (such as orally, skin-to-skin contact, intercourse, mucosa, and bodily fluid exchange).

*Mucosa:* A mucus-secreting membrane lining all bodily passages that are open to the air, like our mouths, nostrils, eyes, and ears. An easier way to remember is to think of all of the parts of our bodies that are moist, sticky, or wet.

Allow participants to ask questions freely, and clarify any misinformation or confusion.

**THE CLINIC**

***Questions Brainstorm***

Ask participants whether they know the names of any local family planning clinics (e.g., Planned Parenthood). Ask whether they have ever visited one or know someone who has. Ask young men to share what it was like and what they know about the clinic or its services. If not mentioned, be sure to include birth control and HIV/STI testing as services provided by clinics.

Explain that if they have never called a clinic before, they will be practicing today. Participants will carry out role-plays in which they call the clinic to inquire about STI testing and make an appointment.

Tell the participants that before making the calls, they will need to generate a list of questions. Ask participants what kinds of questions they will want to ask.

Write all of the questions generated on a piece of flip chart paper. During the brainstorm, try to incorporate the questions in the “Questions for Clinic Phone Call” box into the list. These are some questions that will help young men gather helpful information from the clinic staff.

Remind participants that they will be role-playing a call to the clinic to ask about STI testing. Review the questions with the group to make sure they are all helpful. Cross out any that will not be helpful with this assignment.

### Questions for Clinic Phone Call

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What services do you provide?</td>
<td>Is it confidential?</td>
</tr>
<tr>
<td>What STI services do you offer?</td>
<td>Can I bring a friend?</td>
</tr>
<tr>
<td>How much do they cost?</td>
<td>What do I need to bring?</td>
</tr>
<tr>
<td>What is involved in a visit?</td>
<td>Can I have a female/male doctor?</td>
</tr>
<tr>
<td>How long will it take?</td>
<td>How do I get there?</td>
</tr>
<tr>
<td>Do I need an appointment?</td>
<td>What are your hours?</td>
</tr>
<tr>
<td>Do I need parent permission?</td>
<td></td>
</tr>
</tbody>
</table>
PHONE CALL ROLE-PLAY

13 Ask for a volunteer, and invite him to come and sit at the phone station. Give him the following instructions: “You will be calling the clinic to inquire about obtaining an STI test. You will need to request an appointment to come in and get tested. Be sure to cover as many questions from the list as possible, and come up with your own questions, too.”

14 Again, explain that a facilitator will play the role of the receptionist at the clinic. Remind the volunteer that he is calling the clinic to make an appointment to get an STI test.

15 Debrief the call by asking the following questions:
   • How comfortable would you feel calling the clinic on your own?
   • How comfortable would you feel going to the clinic on your own?

GROUP DISCUSSION QUESTIONS

16 What do you think prevents some young men from visiting a clinic?
17 What advice could you give a young man who feels this way?
18 What other fears or concerns do you have about visiting a clinic?
19 How can young men support their partners going to the clinic to obtain family planning services (for example, they can go together)?
20 Is what you have learned about clinics different from what you expected? What did you expect, and what was different?

CLOSING STATEMENTS

21 You can obtain condoms and other forms of birth control at your local clinic without your parents’ consent.
22 It is very important to get and use condoms or another form of birth control every time you have sex or engage in sexual activity.
23 Provide information for your local clinic for young men and adults, if available.
# Burning Questions about STIs Chart

<table>
<thead>
<tr>
<th>Infection/Disease</th>
<th>Viral, Bacterial, or Parasitic</th>
<th>Oral</th>
<th>Skin to Skin</th>
<th>Intercourse</th>
<th>Treatable, Curable, or Killable</th>
<th>Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Herpes</td>
<td>Viral</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Treatable</td>
<td>Fluid-filled blister/rash or no presenting symptoms</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>Bacterial</td>
<td>Yes</td>
<td>Yes if one “skin” is mucosa</td>
<td>Yes</td>
<td>Curable</td>
<td>No presenting symptoms</td>
</tr>
<tr>
<td>HIV</td>
<td>Viral</td>
<td>Yes</td>
<td>Yes if there are two open wounds</td>
<td>Yes</td>
<td>Treatable, preventable with daily medication (pre-exposure prophylaxis, or PrEP)</td>
<td>No presenting symptoms</td>
</tr>
<tr>
<td>Syphilis</td>
<td>Bacterial</td>
<td>Yes</td>
<td>Yes if chancer is present</td>
<td>Yes</td>
<td>Curable</td>
<td>Lesion at site of infection – open sore</td>
</tr>
<tr>
<td>Scabies</td>
<td>Parasitic</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Killable</td>
<td>Itchy rash (if you have hair)</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>Bacterial</td>
<td>Yes</td>
<td>Yes if one “skin” is mucosa</td>
<td>Yes</td>
<td>Curable</td>
<td>No presenting symptoms</td>
</tr>
<tr>
<td>Human papillomavirus (HPV)</td>
<td>Viral</td>
<td>Yes</td>
<td>Yes if genital warts are present</td>
<td>Yes</td>
<td>Treatable, preventable with vaccine</td>
<td>Warts, but most of the time no presenting symptoms</td>
</tr>
<tr>
<td>Crabs</td>
<td>Parasitic</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Killable</td>
<td>Itchy rash (if you have hair)</td>
</tr>
<tr>
<td>Trichomoniasis</td>
<td>Parasitic</td>
<td>No</td>
<td>Yes, vaginal and urethral</td>
<td>Yes</td>
<td>Curable</td>
<td>Most commonly discharge or no presenting symptoms</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Viral</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Preventable with vaccine</td>
<td>No presenting symptoms</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>Viral</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Curable, but hard to get rid of</td>
<td>No presenting symptoms</td>
</tr>
</tbody>
</table>
Burning Questions about STIs

1. What are STIs, and how do people get them?
   - STI stands for sexually transmitted infection. STIs are a group of infections that are passed from one person to another through sexual contact.
   - STIs are most often passed via vaginal and anal sex. STIs can also be passed through oral sex and from an infected mother to a newborn during childbirth.
   - For an infection to occur, one person must be infected and pass the infection to his or her partner.

2. What are the most serious STIs?
   - HIV infection and syphilis can both be fatal without taking medication.
   - Gonorrhea and chlamydia, if left untreated, can cause infertility in both men and women.
   - Human papillomavirus (HPV) is an STI that has different strains, some of which produce genital warts and some of which can lead to cervical cancer in women.
   - The presence of any STI increases the risk of contracting HIV.

3. Can STIs be cured?
   - Many common STIs – such as chlamydia, gonorrhea, and syphilis – can be cured by taking antibiotics (pills).
   - Some STIs are viruses and therefore cannot be cured. Examples include HIV and herpes. However, medical treatment and medication can help treat these infections and make them less severe.

4. How do I know if I have an STI?
   - Many people who have STIs have no symptoms. When symptoms appear, they may include:
     - Abnormal discharge from the vagina or penis
     - Pain or burning with urination
     - Itching or irritation of the genitals
     - Sores or bumps on the genitals
     - In women, pelvic pain (pain below the belly button)
Burning Questions about STIs (continued)

5  How can I protect myself from STIs?
   • The best way to protect yourself from STIs is not to have sex.
   • If you are sexually active, you can protect yourself by having sex only with an uninfected partner who has sex only with you.
   • If this is not possible, or if you do not know if your partner is infected or having sex with only you:
     • For vaginal or anal sex, use condoms every time.
     • For oral sex, use a condom over the penis or plastic wrap or a condom cut open to cover the vagina or anus.
     • Engage in other forms of sexual activity, such as using your hand to stimulate your partner.

6  What should I do if I think I might have an STI?
   • Go to a clinic and have a medical professional check you as soon as possible. Do not wait and hope the STI will go away.
   • If you have an STI, it is important to tell your most recent sexual partners, if possible, so they also can get treatment.
   • When you get to a clinic, they will have you urinate in a cup and take some blood. This will give them everything they need to determine whether you have an STI.
Clinic Appointment: STI Test

BACKGROUND

John is calling the clinic to make an appointment to get screened for STIs.

DIALOGUE

Clinic: “Community Clinic,” how may I help you?

John: Hi, I’m calling to make an appointment. I need to get tested for STIs.

Clinic: Sure, what type of service do you need?

John: I need to get tested for STIs.

Clinic: OK, that’s fine. We can schedule an appointment for you. I just need to get some information from you. First, can you tell me your name?

John: John Ramsey.

Clinic: Thanks, and your date of birth?


Clinic: OK, and what day and time works well for you? Our teen clinic hours are from 1 to 6 p.m., Monday to Friday.

John: I could be there on a Monday or Wednesday, anytime.

Clinic: OK, how about 1 p.m. on Monday, August 1?

John: That works.

Clinic: Great, you’re all set for a STI screening on Monday, August 1, at 1 p.m. Do you have any questions?

John: Yes, um, what will they do to me when I get there?

Clinic: You’ll come in and fill out some information for us. Then you’ll wait to see the doctor. When the doctor meets with you, she’ll discuss your health situation, explain the tests, and then take a urine and blood sample. Depending on your symptoms, there may also be a physical exam to observe any bumps or sores.

John: OK, so, how much will it cost?

Clinic: We operate on a sliding scale fee, so we charge you based on how much money you make. For most teens, our services are free, so don’t worry about cost.

John: Do I need my parent’s permission?

Clinic: No, you don’t. At our teen clinic, you can get STI services without parent permission.20 Anything else?

John: No, I think that’s it.

Clinic: Ok, we’ll see you on the 1st. Thanks for calling.

John: Thanks.

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20 It is the law in most US states that teens can get STI services without parental permission. If this is not the case in your state, update this script accordingly.
# Understanding Contraception

**PURPOSE/OBJECTIVES**

1. Provide information on contraceptive methods and discuss male involvement in contraceptive use.

**MATERIALS**

- Paper
- Pens or pencils

- Resource Sheet 5.6A
- Resource Sheet 5.6B
- Resource Sheet 5.6C

- Samples of contraceptive methods and/or drawings of methods

**KEY MESSAGES**

1. Not having sex is the most effective method to protect against unplanned pregnancy and STIs.

2. Contraception is not just a woman's responsibility. It is important for young men to know the most common methods of birth control and which methods best protect against both STIs (including HIV) and unplanned pregnancy.

3. By being knowledgeable about different methods of birth control, young men can make better decisions with their partners about how to prevent STI/HIV infection and unplanned pregnancy.

4. It is best to always use dual protection – that is, male condoms and one female-controlled method of birth control to delay unplanned pregnancies and protect against STIs, including HIV.

5. An important aspect of a healthy relationship is understanding what contraceptives are, how they work, and why they are important.
Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- If available, bring samples of different contraceptive methods to the session. In the discussion, talk about the advantages and disadvantages of each method, cultural and personal beliefs about each, and which methods are easiest and most difficult to obtain and use. It is also important to research beforehand where young men can access and find out the cost of the different methods discussed.
- It is highly recommended to have a medical professional attend this session, as young men may have additional questions. If this is not possible, refer them to Resource Sheet 5.6B, which includes a list of medically accurate and youth-friendly websites where they can find more information.

Procedure

1. Explain to the group that in this activity, they will discuss different forms of birth control to prevent unplanned pregnancy. Throughout this activity and the ones that follow, “sex” is taken to mean sex in which a penis enters a vagina. Other sexual acts (such as oral and anal sex) will be specified as they come up.

2. Divide the participants into four small groups.

3. Distribute the birth control samples or drawings of birth control methods according to the following list:
   - Group 1: Abstinence
   - Group 2: Hormonal contraceptives (includes pills, patches, and shots)
   - Group 3: Barrier methods (includes male and female condoms and diaphragms)
   - Group 4: Intrauterine contraception and implants (rods) (includes intrauterine devices)

4. Pass out copies of Resource Sheets 5.6A and 5.6B, and ask participants to review them in their small groups.

5. Write down the following questions on a separate piece of flip chart paper, and ask them to discuss:
   - Does your assigned method reduce the risk of both unplanned pregnancy and STI/HIV transmission?
   - How does this method work?
   - How effective is the method (when used correctly according to the instructions)?
   - What are its advantages and/or disadvantages?

6. After 20 minutes, have each group present for two minutes. Then ask all participants, “What do young men in your community think about the different methods of birth control? Why?”

7. When they have finished, go over any questions they may have. Be sure to emphasize the following points: 1) Not having sex is the most effective method to prevent unplanned pregnancy and protect against STIs. 2) The next best way to protect oneself against STIs and to prevent unplanned pregnancies is to use both a condom and another form of birth control, as discussed above. This is called “dual protection.”
GROUP DISCUSSION QUESTIONS

8 What did you learn in this activity?
9 In real life, who tends to think about birth control more (men or women)? Why do you think this is?
10 Where do young people get information about sex and birth control? Is this information usually reliable? Are there any other sources of information?
11 When do men talk about birth control, if at all? In a relationship? When they are just hooking up?
12 Which methods do young people have the most access to? The least access? What are the most commonly used methods among young men in your community?
13 Knowing about different forms of birth control can show your partner you really care about them. Why do you think that is?
14 Why is it important for men to be informed and supportive of the choices young women make when it comes to their own birth control?
15 How can men take on shared responsibility, with the consent of their partner, when it comes to birth control?
16 How can this information help you in your daily life?

CLOSING STATEMENTS

17 Not all birth control is the same; some forms are more effective than others.
18 Some of the things we have heard about birth control are not always true. It is important to separate facts from misconceptions.
19 These misconceptions can be harmful to young men and their partners if they continue to be told as truths when they are not.
20 Because not all birth control prevents both unplanned pregnancies and STIs/HIV, it is best to combine condoms and one other form of birth control.
21 Understanding how different forms of birth control work is the first step to empowering ourselves to make decisions that are best for our and our partners’ health.
22 We have a role to play in taking joint responsibility for pregnancy prevention.
Types of Birth Control

GROUP 1: ABSTINENCE
Not having sexual contact of any kind, including oral, anal, or vaginal sex. Abstinence is the most reliable way to prevent pregnancy and HIV/STI infection.

GROUP 2: HORMONAL METHODS – INCLUDES COMBINED ORAL CONTRACEPTIVE PILLS, CONTRACEPTIVE PATCHES, AND INJECTIONS (“SHOTS”)

Combined oral contraceptive pill
Also called “the pill,” oral contraception is a hormonal method of birth control that is taken every day. It uses two hormones – estrogen and progestin – to keep the ovaries from releasing an egg. It also causes changes in the uterus and cervix to keep sperm from joining with the egg. Oral contraception does not protect against HIV/STIs.

Chances of getting pregnant while on this form of birth control: 9%

Contraceptive patch
The patch uses the hormones in the birth control pill but sends them through your skin into your blood. It works to stop the ovaries from releasing an egg. It also causes changes in the uterus and cervix to keep sperm from joining with the egg. The patch does not protect against HIV/STIs. The patch works on a four-week cycle. A new patch is put on each week for three weeks (being thrown out after that week). During the fourth week, no patch is worn, during which a woman has her period.

Chances of getting pregnant while on this form of birth control: 9%

Injection
The shot (taken every three months) uses the hormone progestin to stop an egg from being released. It also causes changes in the cervix to stop sperm from joining with the egg. The shot does not protect against HIV/STIs.

Chances of getting pregnant while on this form of birth control: 6%

GROUP 3: BARRIER METHODS – INCLUDES DIAPHRAGMS OR CERVICAL CAPS, MALE CONDOMS, FEMALE CONDOMS, AND SPERMICIDES

A condom acts as a barrier to keep blood, semen, and vaginal fluids from passing from one person to the other during sex. These fluids can carry HIV/STIs. If no condom is used, the infection can pass from the infected partner to the uninfected partner.
Male condoms

Male latex condoms (or polyurethane condoms, for those allergic to latex) decrease the risk of HIV/STI transmission. They are designed to keep semen from joining with the egg. Condoms can also be made of animal membranes, but these are not recommended for preventing HIV/STIs.

Using a condom with another reliable form of birth control – also known as the “dual method” – is the second-best protection from unplanned pregnancy and STIs (abstinence being the first). It is much better than using one method alone.

Chances of getting pregnant while on this form of birth control: 18%

Female condom

The female condom is a thin pouch that goes inside the vagina. Worn by the woman, the female condom forms a barrier to keep sperm from joining the egg. It also helps protect against HIV/STIs. The female condom is packaged with a lubricant and is available at drug stores. It can be inserted up to eight hours before sexual intercourse.

Chances of getting pregnant while on this form of birth control: 21%

Diaphragm

A diaphragm is a round latex or silicone cup that goes inside the vagina. It prevents sperm from joining the egg by covering the cervix (the opening to the uterus). To be most effective, the diaphragm should be inserted every time someone have sex and used with a spermicide, a gel or cream that kills sperm. Diaphragms do not prevent HIV/STIs.

Chances of getting pregnant while on this form of birth control: 12%

GROUP 4: INTRAUTERINE CONTRACEPTION AND IMPLANTABLE RODS (INCLUDES T INTRAUTERINE DEVICE)

Intrauterine device (IUD)

The intrauterine device (IUD) is a small, T-shaped device that is put into and left inside the uterus. Depending on the type of IUD, it can last many years. There are two types of IUDs. One type uses the hormone progestin to prevent pregnancy; it can also be called by its brand names, the Skyla (lasts three years), the Liletta (lasts three years), and the Mirena (lasts five years). The second type, called ParaGard, has copper in it (which sperm don't like) and lasts 10 years. Both methods work to stop sperm from reaching the egg. The ParaGard can also act as a form of emergency contraception. IUDs do not protect against HIV/STIs.

Chances of getting pregnant while on this form of birth control: Less than 1%

Implantable rod

The implant is a small plastic rod about the size of a matchstick that is placed under the skin of the upper arm. It is also called by its brand name, Nexplanon. It uses the hormone progestin to cause changes in the cervix that can stop sperm from joining with the egg. It may also stop the ovaries from releasing eggs. The implant is a long-acting form of birth control because it can be left in the body for up to three years. The implant does not protect against HIV/STIs.

Chances of getting pregnant while on this form of birth control: Less than 1%

Spermicide

Spermicide is a contraceptive substance that destroys sperm, inserted vaginally prior to intercourse to prevent pregnancy. Usually, spermicides are combined with contraceptive barrier methods such as diaphragms and condoms.

Chances of getting pregnant while on this form of birth control: 28%

Additional Web-Based Resources

BEDSIDER

https://www.bedsider.org/

IT’S YOUR SEX LIFE

http://www.itsyoursexlife.com/pregnancy/comparison/birth-control-methods

ADVOCATES FOR YOUTH

http://www.advocatesforyouth.org/topics-issues/contraceptives/1278?task=view

PLANNED PARENTHOOD

https://www.plannedparenthood.org/learn/birth-control

TEEN SOURCE

http://www.teensource.org/birth-control
Women shouldn’t use birth control because they won’t be able to have kids later on in life.
This is not true. Women who use birth control can still have children when they are ready.

Only women who are having sex use birth control.
This is not true. Women use birth control for a variety of reasons, including preparing for when they have sex, acne, infections in the ovaries, iron deficiency, and other reasons.

Only women can use birth control.
This is not true. Male condoms are a form of birth control.

If a woman is on birth control, then her partner does not need to wear a condom.
This is not true. With the exceptions of condoms, most forms of birth control do not protect against the transmission of HIV and other STIs. Even if a young woman is on a hormonal or intrauterine form of birth control, it is best to also use a condom (known as the “dual method”) to make sure you and your partner are fully protected.

It doesn’t matter if a woman uses birth control. It doesn’t affect me.
Even if you are using condoms, condoms are not always effective at preventing unplanned pregnancies. If your partner also chooses to use a female-controlled method of birth control (that is, birth control other than condoms), this helps avoid unplanned pregnancies.

A man should have a say in whether a woman uses birth control.
Open communication about what method of birth control to use is a characteristic of a good relationship. Men should be aware of the different forms of birth control and should feel comfortable asking their partner about what type of female-controlled method of birth control they are using and discussing options. However, men should respect women’s choices about what method they use. Remember, condoms are a form of birth control, and it is best to use a condom during every sexual act to prevent unplanned pregnancy and to protect against HIV and other STIs. It is recommended to use both a condom and one other form of birth control for additional protection (the “dual method”).
How to Use Male Condoms

PURPOSE/OBJECTIVES

1. Demonstrate the correct use of a condom on a model.
2. Identify reasons for incorrect condom use.
3. Help participants express greater familiarity and comfort in using a condom.

TIME

30 minutes

KEY MESSAGES

1. Consistent and correct use of a condom combined with another reliable form of birth control every time you have sex reduces, though does not eliminate, the risk of HIV/STI transmission and unplanned pregnancy and eliminates the estimated condom failure rate of 13%.

2. Practice how to use a condom before having sex. To use condoms correctly, you need to be comfortable with how to use them.

MATERIALS

- Flip chart paper
- Markers
- Tape
- Penis models
- Male condoms
- Paper towels
- Copies of Participant Handout 5.7 for all participants

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.

- Using Participant Handout 5.7, prepare letter-size sheets of paper with each listing one of the 11 steps for correct condom use. Prepare two full copies of these steps, and laminate these cards if possible to make them more durable.

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Procedure

1 Refer participants to Resource Sheet 5.6A and Resource Sheet 5.6B (discussed in the previous activity), noting where “male condoms” are listed. Ask participants what makes male condoms unique. Write down their responses on a flip chart paper.

2 If not mentioned, include the following:
   • Protect from STIs and pregnancy
   • Don’t require an appointment at a clinic
   • Are affordable and accessible
   • Are easy to use
   • Is the only male-initiated method besides not having sex and a vasectomy
   • Like the female condom, must use a new one with each sex act

3 Explain that because condoms are such an important method of birth control and STI prevention, this activity is going to be dedicated to learning how to use condoms correctly. Say that when you say “condom” in this activity, you mean male condoms.

4 Ask participants how a condom protects against STIs.
   Answer: A condom acts as a barrier to keep blood, semen, or vaginal fluids from passing from one person to the other during intercourse. These fluids can carry HIV and other STIs. If no condom is used, the infection can pass from the infected partner to the uninfected one.

CONDOM PRACTICE

5 Split the group into two teams.

6 Distribute a set of the “11 condom use steps” cards in random order to the members of each group.

7 Explain that the two groups will compete in a race to see who can place the cards in the correct order first. Depending on the room, each team can either place the cards on a wall using tape or simply place the cards in order on the floor. Once a team has finished, they should all raise their hands.

8 Give the group up to five minutes to place their cards in order. Allow them to debate the order with one another until they reach consensus.

9 Ask the first group that finishes to present their steps and ask everyone if they agree with the order. If the other group disagrees, ask why they disagree.

10 Pass out Participant Handout 5.7 to participants, and compare their placement of the steps with the order of steps on the worksheet.

11 Declare a winner.

12 Explain that participants will now be given a chance to practice putting a condom on a wooden model.

13 Before they practice, perform a demonstration.
   During the demonstration, discuss the use of lubricants: Only water-based lubricants should be used with condoms, NOT lubricants that are made with oil (including petroleum jelly, baby oil, or hand or skin creams). Name readily available water-based lubricants that participants are likely to be able to obtain.

   Explain that some men like to put a drop or two of lubricant on the inside of the condom to increase pleasure or sensation. Lubrication can be used on the outside of the condom as well. One or both partners may prefer the sensation of sex with lubricant applied this way.
Divide participants into groups of three.

Explain that each member in the group will take a turn demonstrating how to use a condom. The other members should observe and assess whether the demonstration is done correctly by referring to Participant Handout 5.7.

When they have completed the demonstration, ask participants to come together in a semicircle.

End the demonstration by cautioning participants that condoms can break during sex. Emphasize that using a condom correctly can reduce the likelihood of condom breakage.

GROUP DISCUSSION QUESTIONS

Lead a discussion using the following questions. If short on time, prioritize the bolded questions.

- What was most challenging about this exercise?
- What were some of the mistakes that you made or that you saw other people make?
- Were you unsure of the order of any steps? Why?
- Do you think most people who use condoms follow all of these steps? Why or why not?
- What do you do if the condom breaks or you lose an erection?

You can talk to them about emergency contraception or hand out a resource for them to read more about it.

- What are some of the challenges with either getting or using condoms that young men typically experience?
- Who usually decides when and how to use a condom, young men or young women? Why do you think that is?
- How comfortable do young men feel about using condoms? What may cause some of this discomfort? What can be done to reduce the discomfort?

CLOSING STATEMENTS

Using a condom combined with another reliable form of birth control every time you have sex reduces the risk of HIV/STI transmission and unplanned pregnancy.

Practice using condoms before you have sex. To use condoms correctly, you need to be comfortable with them.
1. Store the condoms in a cool, dry place.

2. Make sure that it is a latex or polyurethane condom and that the package is not damaged. Also check the expiration date. Use a new condom for every act of vaginal, anal, or oral sex throughout the entire sex act (from start to finish).

3. Place the condom nearby and make it easily accessible.

4. Open the package carefully. Do not rip the condom, and make sure there are no tears or defects.

5. Unroll the condom slightly to make sure it faces the correct direction over the penis.

6. Pinch the air out of the tip, and roll the condom onto the base of an erect penis.

7. The man inserts his penis for intercourse.

8. If you feel the condom break at any point during sexual activity, stop immediately, withdraw, remove the broken condom, and put on a new condom.

9. After ejaculation, hold the condom at the base of the penis, then withdraw the penis from your partner.

10. Take the condom off before your penis gets soft, making sure that semen doesn’t spill out.

11. Wrap the condom in a tissue, and throw it away. Never use it twice.
Male Condom Negotiation

PURPOSE/OBJECTIVES

1. Identify reasons why young men and women choose to use and not use male condoms.
2. Practice condom use communication, and come up with ways to overcome barriers when one partner does not want to use condoms.
3. Assess how different barriers may be influenced by factors related to gender.

TIME

60 minutes

KEY MESSAGES

1. It is difficult to talk about condom use because people may not think about it until the “heat of the moment.” However, open, honest communication about condom use before you start having sex is an important way of showing someone you care about their health and yours.
2. There are many ways to show how condom use is a “win-win” situation for both partners.

MATERIALS

- Flip chart paper
- Markers
- Tape

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
Procedure

BRAINSTORM

1. On a flip chart sheet, write, “Reasons why people DO NOT wear condoms.” Make two columns, and
write “Men” in one and “Women” in the other. It should look like this:

   Reasons why people DO NOT wear condoms
   
<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
</table>

2. One a separate flip chart sheet, write, “Reasons why people want to wear condoms.” Make two
columns, and write “Men” in one and “Women” in the other. It should look like this:

   Reasons why people want to wear condoms
   
<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
</table>

3. Explain to participants that you want them to identify the reasons why people do and do not use
condoms. Ask participants to list as many reasons and barriers as they can. Try to get at least six
to nine reasons for each written down.

4. Review the list, and clarify any reasons that are unclear.

OVERCOMING BARRIERS

5. Divide the participants at random into four groups (for example, by numbering them or giving them
different colors).
   
   • Group 1: Man who wants to use a condom
   • Group 2: Man who does not want to use a condom
   • Group 3: Woman who wants to use a condom
   • Group 4: Woman who does not want to use a condom
Explain that each group has five minutes to discuss additional reasons for their group’s assigned belief. They should feel free to build on the ideas from the brainstorm.

Explain to the participants that each group will be given 10 minutes to perform a role-play of condom negotiation and to discuss amongst the full group. Explain that each group should select one person to represent the group in the role-play. Each individual will have to act out the type of person they were assigned (e.g., a woman who wants to use a condom).

Ask for the first role-play negotiation to take place: one person from Group 1 (man who want to use a condom) with one from Group 4 (woman who does not want to use a condom). They will have five minutes to role-play the negotiation as their characters, imagining that consent has already been established.

After the first negotiation, ask the actors how they felt and what they realized during the negotiation. Ask the other participants what they felt or realized watching it. What were the reasons that the young woman did not want to use condoms?

Ask for the second role-play negotiation to take place: one person from Group 2 (man who does not want to use a condom) will negotiate with one from Group 3 (woman who wants to use a condom).

Conduct this discussion in the same way. Ask the actors how they felt and what they realized during the negotiation. Ask the other participants what they felt or realized watching it. What were the reasons the young man did not want to use condoms?

Bring the participants back together, and ask the following questions:

- In what ways are these negotiations similar to what happens in real life? What are the consequences of unsuccessful negotiation?
- What were the strongest reasons for not using condoms?
- What are some arguments that you could give to encourage your partner to use a condom? How can you tell your partner that you want to use a condom?
- Who should suggest condom use? Can a young woman suggest condom use? Can she carry condoms?
- Do you think gender roles or power relationships affect condom negotiation between men and women?
- What are the roles and responsibilities of young men and of women in using condoms? Are they the same or different? How so?

It is difficult to talk about condom use because people don’t think about it until the “heat of the moment.” However, open, honest communication about condom use is an important way of showing someone you care about their health and yours.

There are many ways to discuss wearing a condom and protecting oneself for both partners.
ACTIVITY

5.9 Closing Circle

TIME

PURPOSE/OBJECTIVES

1. Quickly reflect on the day’s session.

Procedure

1. Ask all of the participants to gather in a circle.
2. Ask them to think of how they felt today. Starting with yourself and moving clockwise, ask each individual to say one word about how they felt about today’s session.
3. When each person has finished, thank them all for attending and for their full engagement and participation.
4. Remind them of the time and place of the next meeting.
SESSION 6

Violence and Relationships
ACTIVITY

6.1 Review of Session 5

PURPOSE/OBJECTIVES

1. Review Session 5.
2. Reflect on questions and thoughts from the previous session.

MATERIALS

- Flip chart paper
- Markers
- Tape

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write up the agenda for the session on a piece of flip chart paper and post it on the wall.

Procedure

1. Welcome the young men to Session 6 of the program. Thank the group for their participation in the last session, and ask them to recall the key messages or ideas from the previous session. Remind the group of any key messages that they did not remember. Ask them:
   - What did you learn that was most useful to your own lives?
   - Did you practice any of the skills or apply any of the things you learned from the last session?
2. Share a personal highlight from the last session that you as the facilitator really enjoyed.
3. Tell participants that today's session is going to focus on how to have healthy relationships based on honesty, equality, and respect.
Exploring Sexual Consent

ACTIVITY 6.2

PURPOSE/OBJECTIVES

1. Define the concept of sexual consent.
2. Apply the definition of consent to real-life situations.
3. Identify strategies to establish if consent exists.
4. Understand the gender dynamics that may exist around giving consent and accepting when consent is not given.

TIME

60 minutes

KEY MESSAGES

1. Asking and receiving enthusiastic sexual consent is an important aspect of any healthy relationship.
2. Both you and your partner should enjoy sex. Checking in to make sure that your partner is also having fun is important and can make having sex more fun.
3. Harmful ideas about masculinity or what it is to be a man may lead some men to pressure a partner for sex, not accept a partner’s decision not to have sex, or put their own sexual needs above their partners’.
4. Consent is not possible if one or both people are under the influence of drugs or alcohol.
5. Talk about it! Ongoing conversation is an important vehicle for consent.

MATERIALS

- Sticky notes
- Flip chart paper
- Markers
- Pens or pencils
- Index cards with scenarios
- Facilitator Resource 6.2
Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- On the index cards, write each of the scenarios from Facilitator Resource 6.2 in large font.

Procedure

INTRODUCTION

1. Say that two words that often come up when talking about sexual relationships are “responsibility” and “respect.” Both individuals in a relationship have a responsibility not only to set their own sexual limits but also to respect the sexual limits of others.

2. Write the word “sexual consent” on flip chart paper, and ask the group to explain what it means and why they think it is important.

Key Notes for the Facilitator to Remember:

- Consent means checking in and making sure your partner is comfortable.
- Everyone has a choice in what they do and do not do.
- Open communication is important in establishing consent.
- Look at body language — if you aren’t sure, just ask.
- Look to establish an enthusiastic yes — sex is more enjoyable when both partners are excited about what they are doing and who they are doing it with.
- Consent cannot be granted if your partner is unconscious or extremely drunk.

3. Clarify that “sexual consent” simply means agreeing to participate in a particular sexual behavior. Both individuals have to agree to do something, and if one person does not want to, they are not giving their consent. This is extremely important because any sexual act without consent is considered sexual assault and is against the law.

4. If this has not been explicitly stated during the group discussion, write on the flip chart:

   Sexual consent means that both partners have agreed upon sex and that this agreement is stated either by words or actions without pressure.

DEFINING SEXUAL COERCION

5. Discuss the following:

   a. When a person makes someone else feel obligated or forced to do something that they don’t want to, they may be coercing them. Ask participants for some examples of this when it comes to sex. Some examples are:

      - Make you feel like you owe them sex — for example, because you’re in a relationship, you’ve had sex before, they spent money on you or bought you a gift, or you went home with them.
      - React negatively (with sadness, anger, or resentment) if you say no or don’t agree to something.
      - Play on the fact that you’re in a relationship, saying things such as, “Sex is the way to prove your love for me” or, “If I don’t get sex from you, I’ll get it somewhere else”
**b.** Sexual coercion is “the act of using pressure, alcohol or drugs, or force to have sexual contact with someone against his or her will” and includes “persistent attempts to have sexual contact with someone who has already refused.” Ask the group if they can give some examples OR ask if they have questions about what that means: Think of sexual coercion as a spectrum. It can vary from someone verbally pressuring or manipulating you to someone actually physically forcing you to have contact with them. Think of sexual coercion as a spectrum. It can vary from someone verbally pressuring or manipulating you to someone actually physically forcing you to have contact with them.

c. It can be verbal and emotional, in the form of statements that make you feel pressure, guilt, or shame. A person can also be made to feel forced through more subtle actions.

**ASKING FOR CONSENT AND CHECKING IN**

6 Ask the group to explain how we make sure that our partner wants to have sex and is enjoying it. If they aren’t, why not?

7 Say, “We’ve heard that ‘no’ means ‘no,’ but sometimes our partners give us non-verbal signals that show that they may not be comfortable or having fun.”

8 On a piece of flip chart paper, write “Signals to Check In” at the top of the left-hand column. Ask young men to provide examples of signs that a person may be unsure about having sex and list them on the left-hand side.

9 On the same flip chart, write “Checking In” on the right-hand side. Ask participants to list things a person could say or do to check in with their partner and determine if this is something that they still want to do. After creating both lists, the flip chart should look something like this:

<table>
<thead>
<tr>
<th>Signals to Check In</th>
<th>Checking In</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unresponsive body language</td>
<td>“Are you okay with this?”</td>
</tr>
<tr>
<td>Being withdrawn</td>
<td>“Is this still turning you on?”</td>
</tr>
<tr>
<td>Nervousness</td>
<td>“You seem nervous. Are you comfortable with this?”</td>
</tr>
<tr>
<td>Tears</td>
<td>“How is this making you feel?”</td>
</tr>
</tbody>
</table>

10 Split the group into pairs. Hand each pair one of the sexual consent scenarios written on the index cards. Ask them to first see if consent is possible (i.e., the partner is conscious and able to say “yes” or “no”). If so, have them write up a skit that shows some ways they can “check in” on their partner to make sure that they are giving enthusiastic consent. Have them take about five minutes.

11 After five minutes, have each team role-play their skit. After each team has gone, ask them if they have any additional questions or thoughts about the skits. When they have finished, lead the young men into a larger group discussion using the following discussion questions.
GROUP DISCUSSION QUESTIONS

12 How was it trying to think of ways to check in on your partner and make sure they were comfortable with the situation?

13 What are some of the messages we receive or expectations about sex that young men and women receive that affect the way they vocalize their desires or needs?

This is asked in general, but if they only talk about men or women, or heterosexual couples, try and ask questions that would broaden their answers.

14 What are some of the fears that young women may have in being strongly vocal about what they do not want?

15 What are some fears that young men may have on being strongly vocal about what they do not want?

This is not an opportunity for the young men to complain about false rape accusations. If a participant suggests this, ask others if they agree and allow the participants to challenge each other. If no one challenges this idea, see if you can ask probing questions that help them reflect – e.g., “What are some of the reasons young men may think that?”

16 Why is it important to ask for or confirm consent? How can confirming or affirming consent from our partner make sex more fun or enjoyable?

17 Why is it important for people to accept “no” for an answer? Does this always happen? Why not? What can we do if their response is unclear and negative to this?

18 How can we apply some of the things we discussed today to our lives?

CLOSING STATEMENTS

19 Harmful messages about masculinity may contribute to pressuring a partner for sexual activity and not accepting a person’s decision not to have sex. We should respect every person’s right to say no to things that they are uncomfortable doing.

20 Consent is not possible if one or both people are under the influence of drugs or alcohol.

21 The best way to know that you have consent is to talk about it! Ongoing conversation about what a partner is comfortable or uncomfortable doing is an important vehicle for consent.

22 While we have all heard that “no” means “no,” be open to listening to the silent or unspoken ways that your partner may be communicating that they do not want or feel comfortable engaging in some act. Asking questions and making sure that they are OK can build better intimacy between partners.
Sexual Consent Scenarios

Checking In

1. Taylor and Alex have been married for two years. Sometimes Taylor gets home late and Alex is already sleeping. Taylor wakes Alex up to have sex. Sometimes Alex does not want to, but Taylor insists.

   Has consent been established, and if so, what are some check-ins Taylor can use?

2. Tracy and Keith are planning to get married and have a family together after they finish studying. Keith tells Tracy that he loves her and that they should have sex. Tracy has said in the past that she wants to wait until they are married. Keith is not very happy, but he agrees to wait. One day, Tracy says to Keith that she wants to have sex. While they are hooking up, Keith notices that Tracy isn't as enthusiastic as she has been in the past and seems withdrawn.

   Has consent been established, and if so, what are some check-ins Keith can use?

3. Fred asks his girlfriend, Angela, to come to his house to have sex, saying his parents are not home. Angela agrees. They get to his house and start kissing. However, when Fred starts taking off her clothes, Angela realizes that she is not ready to have sex and tells Fred to stop. They keep making out. Angela says, “We shouldn't do this,” but continues to touch Fred in an intimate way. As they continue to hook up, Angela says, “This is a bad idea.”

   Has consent been established, and if so, what are some check-ins Fred can use?

4. Everyone says that Molly is very promiscuous. She goes around saying that she has had sex with lots of guys. She goes to a party at Michael's and drinks a lot of beer. Molly and Michael go up to his room and start making out. Michael wants to have sex, but Molly is slurring her words and can't hold herself up.

   Has consent been established, and if so, what are some check-ins Michael can use?

5. Jordan and Pat have been hooking up for about a year. They are not in a dating relationship and don't really hang out regularly, but they have sex from time to time. It has been a little while since their last hook-up, so Jordan texts Pat to see if Pat is free to come over this Friday and watch a movie. Pat says sure and comes over that Friday. Halfway through the movie, Jordan starts kissing Pat, but Pat is not receptive to it. Jordan keeps going, saying, “C'mon baby, you know why I invited you here.” Pat eventually gives in but isn't really participating and at one point just lies there. Jordan is confused because Pat is always down for sex.

   Has consent been established, and if so, what are some check-ins Jordan can use?
ACTIVITY

6.3 Bystander Intervention

TIME

60 minutes

PURPOSE/OBJECTIVES

1. Discuss how to develop and use safe and effective outcome-based interventions to prevent and interrupt sexist behaviors, violence, and conflict in school and community settings.

MATERIALS

- Flip chart paper
- Markers
- Participant Handout 6.3

KEY MESSAGES

1. There are safe and constructive ways to prevent violence, which may differ based on the situation, personal preference, and safety.

2. While there is no “right” way to prevent or respond to violence in every setting, there are many options, and if you think creatively, you can almost always find something that will work.

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Think about how you would answer the question posed in the “Giving and Receiving Constructive Feedback” exercise so that you can share your own experience with participants.
- Use scissors to cut out each of the four scenarios on Participant Handout 6.3 so they are on separate sheets of paper.

Often when individuals see someone else doing something wrong or harmful, they react in one of two ways: silence or anger/violence. One of the main goals of this exercise is to help the participants move beyond this and think — based on their own experience — of how they can challenge harmful behaviors in ways that are constructive and effective. Responding with anger and violence often feels emotionally satisfying, but it is almost guaranteed to produce a negative counter-reaction and possibly even escalate the confrontation. This exercise encourages participants to think about how to de-escalate the situation as the first step in challenging the harmful behavior.
Procedure

GIVING AND RECEIVING CONSTRUCTIVE FEEDBACK

1. Ask participants the following question, and tell them that their answers will relate to the next exercise: “When you have done something wrong or made a mistake, such as something that hurts another person or leads to conflict in your family, how would you prefer that people let you know?”

2. Ask participants to provide answers, writing them on a flip chart. Possible answers include the following examples – if some of these are not mentioned, feel free to bring them up for discussion:
   - “I prefer that someone takes me aside after it happens and speaks to me privately instead of embarrassing me in front of the whole community.”
   - “I prefer constructive criticism telling me what I can do better rather than just attacking me for what I did wrong.”
   - “I think it is more effective when the criticism is focused on the behavior and is not a personal attack on my character.”
   - “I like it when someone explains why the behavior is wrong so I understand it rather than just saying it is wrong.”

3. After you have made a list, thank participants for sharing their personal experiences and remind them that they should keep what they have learned about themselves and each other during this exercise in mind as they complete the next exercise.

INTERVENCING TO CHALLENGE SEXISM AND PREVENT VIOLENCE

4. In this exercise, participants will be divided into small groups to brainstorm and demonstrate ways to effectively intervene to challenge sexism and prevent violence. Divide participants into groups of four or five, and then give them directions for the first part of the exercise.

5. Give each group of participants one of the scenarios on Participant Handout 6.3.

6. Instruct participants to read the scenario out loud in their group and then to develop a short skit in which they demonstrate the sexism or violence in the scenario, as well as one or more interventions that young men like themselves could use to stop the negative action. They should think about how the intervention can be effective and safe, as well as prevent future violence. They should also keep in mind their brainstorming in the first part of this exercise about how they like to be confronted when they have made a mistake or done something wrong.

7. After each group performs their skit, ask the larger group to describe the intervention(s) that they saw used. Keep a list of the interventions on the flip chart to discuss after the groups have presented. If some interventions seem likely to escalate or inflame the situation, ask as part of the debrief if there are any disadvantages the group could see from using that particular approach. Also ask the performers why they chose the intervention(s) they did and why they thought they would be effective.

8. After each performance, ask the participants if they would really be comfortable enough to carry out the bystander behavior modeled in the skit. If not, ask them to consider what they would be comfortable doing. If it isn’t direct engagement, perhaps it is telling a parent, teacher, or friend.

9. By the end, you should have a list of several ways to challenge violent behavior. Highlight for the group that, no matter what the situation, there are always many ways one might intervene.

The following are a few additional strategies and intervention approaches that, if they do not come up during the discussion, you may want to insert into the list and talk about with the participants.

SESSION 6: VIOLENCE AND RELATIONSHIPS
Explain to participants that there are four different ways to intervene or “stand up”: direct approach, team up, distract, and call an authority. What are some examples of each? If participants have trouble coming up with their own examples, provide the following:

**Direct Approach:**

- Calmly ask the person to explain his actions and why they are engaging in the negative behavior. Pose questions and ask for clarification about what they are doing and why in a non-confrontational way that helps to change the dynamic and also may help the person realize what they are doing is a problem.
- Educate the person about the possible consequences of their actions, as well as the harm they could inflict on the victim(s) and even on themselves.
- Suggest alternative actions that can accomplish the same goal but that will provide better outcomes.
- Speak from a perspective of friendship, and begin with your concern for the person. For instance, say that you do not want them to get in trouble with teachers or the police, and that you think they are a better person than what their actions may suggest to others.
- Speak from your own perspective. Rather than saying, “You shouldn’t do that, use ‘I’ statements” and explain how you feel about the person’s actions, how they may bother you, or why you feel they are harmful. This method feels much less accusatory for the person being confronted.

**Team Up**

- If you do not know the person well, if you think they may respond with violence or hostility, or if you think they will not be convinced by just one person, recruit other young men and women from this group (or others from the community) to speak with them. Perhaps include someone whose opinion they value, such as a friend, relative, elder, or community leader.

**Distract**

- Compliment or highlight something the person has done well or that you admire before bringing up what they have done wrong.
- If all else fails, try distraction. Some situations are not the time or place for education, but you can interrupt to ask for the time or directions, thus breaking the dynamic of someone using violence or sexism and possibly giving the person being targeted a chance to leave.

**THINGS NOT TO DO**

- Never react with violence or too much force or with shouting and anger. This is likely to escalate the situation, making it more dangerous for everyone.
- If you fear that the person will use physical violence against you as well, then do not intervene alone. Instead, immediately alert the police or ask others in the community to help also.
- Your first concern is the health and safety of the person who has been attacked. If it is necessary to keep the victim safe, then let the other person leave the scene while you help the victim.

**Possible Homework Assignment**

- Before the final session, ask participants to look for opportunities to use the different kinds of interventions discussed and demonstrated today. Ask them to write down in a journal what kinds of situations they saw, whether or not they did anything, and if so, what they did. Emphasize that this is not a test or something they will be criticized for, but rather an opportunity to learn and practice and also to explore situations in which intervening might be more difficult.
GROUP DISCUSSION QUESTIONS

11 How did it feel to do come up with these scenarios? Were they easy or hard?
12 Why might someone be afraid to intervene in a situation of violence or conflict?
13 Why might someone feel able to intervene in a situation?
14 What are some ways that we can support ourselves and others to intervene in situations of violence or harassment?
15 Who is more likely to intervene in situations? An older man? A younger man? A woman? Why might that be?
16 Do young men feel comfortable or prepared to intervene in situations of violence or harassment?
17 How can we take the techniques we learned today and apply them to our own lives?

CLOSING STATEMENTS

18 There are safe and constructive ways to prevent violence, and these ways differ based on the situation, personal preference, and safety.
19 While there is no “right” way to prevent or respond to violence in every setting, there are many different options, and if you think creatively, you can almost always find something that will work.
Bystander Intervention Scenarios

1. Your friend Jason was involved with Mary in the past. They recently stopped hanging out as much, and he has been calling and texting her to try and get back together, blaming her for the break-up. Mary has asked him to stop calling and texting, so he asks you for help to try and get her back.

2. You have been at a party for a few hours when you see your friend Chris trying to take Lucas back to his house. Lucas is really drunk and has trouble responding to you when you ask him what's going on.

3. You and some friends are hanging out on the corner. Two of your friends are calling out at girls that walk by. To any that respond negatively or get angry, your friends reply with, “You’re ugly,” or call them “bitches” or similar names.

4. You and some friends are out at a restaurant. Your friend Robert is there with his girlfriend, Tanya, and starts to accuse her of looking at other guys, getting angry and grabbing her arm to make a point. Tanya insists that it’s not true and she’s not interested in any other guys.
Healthy and Unhealthy Relationships

ACTIVITY 6.4

PURPOSE/OBJECTIVES

1. Name healthy and unhealthy behaviors that exist within relationships.
2. State the most important characteristics of a healthy relationship for themselves personally.
3. State “dealbreaker” characteristics that would require them to end a relationship.

TIME

60 minutes

KEY MESSAGES

1. Healthy relationships are based on communication, honesty, equality, respect, and responsibility.
2. Unhealthy relationships can lead to violence, unplanned pregnancy, and STIs.
3. Being in a healthy relationship can provide you with support and happiness.
4. If you find yourself in an unhealthy relationship and want to leave, you can seek support from friends, family, or others to help you leave.

MATERIALS

- Flip chart paper
- Pens or pencils
- Paper
- Tape
- Markers
- Three “Relationship Range” cards (see “Preparation”)
- A set of “Relationship Situation” cards (see “Preparation”)

Preparation

☐ Review the activity and be sure you understand the content, teaching methodology, and timing.

☐ Before the activity, write the following “Relationship Range” categories in large letters on separate pieces of paper: “Healthy,” “Unhealthy,” and “Depends.”
Write each of the following “Relationship Situations” on a separate piece of letter-sized paper:

- The most important thing in the relationship is sex.
- You spend some time by yourself without your partner.
- You have fun being with your partner.
- Your partner is still close to his or her ex.
- You talk about avoiding pregnancy and STIs.
- You make your partner feel guilty for not wanting to have a baby with you.
- You usually make every decision for the couple.
- You stay in the relationship because it is better than being alone.
- You are in control of yourself and able to make your own decisions.
- You talk about problems when they arise in the relationship.
- You argue or fight almost every day.
- Your partner forces you to have sex when you don't want to.
- Alcohol and other drugs play a major role in your relationship.
- Your partner hits you.
- You ask your partner for their social media passwords.
- You give your partner the silent treatment after they look at other women or men.
- You have a friend spy on your partner.
- You pressure your partner to not use any form of birth control when you are having sex.
- You ask your partner to break rules made by his or her parents.
- You keep your word.

Procedure

**INTRODUCTION TO ACTIVITY**

1. On a flip chart in front of the group, write “Healthy” on the left side and “Unhealthy” on the right. Explain that these are two types of relationships that will be explored today.

2. Ask the group to define healthy and unhealthy romantic relationships by brainstorming words under each of the two categories that help describe them. Your flip chart may look like this:

<table>
<thead>
<tr>
<th>Healthy</th>
<th>Unhealthy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honesty</td>
<td>Lying</td>
</tr>
<tr>
<td>Communication</td>
<td>Poor communication</td>
</tr>
<tr>
<td>Equality</td>
<td>Domination</td>
</tr>
<tr>
<td>Respect</td>
<td>Being Dismissive, Belittling</td>
</tr>
<tr>
<td>Trust</td>
<td>Mistrust</td>
</tr>
</tbody>
</table>
3 Place the list of healthy and unhealthy characteristics aside, and be prepared to revisit it later in the activity.

“RELATIONSHIP SCENARIO” CARDS: HEALTHY, UNHEALTHY, OR DEPENDS? (20 MINUTES)

4 Explain that participants are going to look further into what is a healthy or unhealthy relationship. At the top of a large wall or chalkboard, place the three relationship cards apart from each other, with “Healthy” on the left, “Depends” in the middle, and “Unhealthy” on the right.

5 Hand out two notecards to each participant. Tell them to write down a “healthy” scenario on one card and an “unhealthy” scenario on the other. (These can be made up, something they’ve seen or heard, or something that happened to them).

Mix the “Relationship Situation” cards up, and hand them out to different participants. Tell the participants to place the cards in the column they think the situation should be in: “Healthy,” “Depends,” or “Unhealthy.”

If you do not have enough scenarios or variety, you should then hand out the example situations you have written up before the session.

6 After all of the “Relationship Situation” cards have been placed, ask the group what they think about the placements. Review each situation one by one, allowing time for discussion. If they don’t agree, remind them of the qualities of a healthy relationship (communication, respect, equality, responsibility, and honesty). Ask them if the situation shows these qualities, and move the situation to the appropriate column.

GROUP DISCUSSION QUESTIONS

7 Is being in a relationship a barrier or an opportunity? Why or why not?
8 What, to you, are the most important things in a relationship? Is this different for everyone?
9 What are some challenges or barriers to being able to build the type of relationship we want? To building healthy, equitable relationships?
10 What are some the consequences of not being in a healthy relationship for you? For your relationship with others?
11 How can we address situations when our and our partners’ priorities are different?
12 What role does trust play? How do we build that?
13 What happens when we feel like we can't trust our partner?
14 What are ways to build better communication or trust? What is our role in doing that?
15 How do we assess a healthy relationship and walk away from a relationship that we don't find healthy? Why would someone stay in a relationship that is unhealthy?
Empathy Clothesline

**ACTIVITY**

**TIME**

60 minutes

**PURPOSE/OBJECTIVES**

1. Identify the forms of violence that we perpetrate or that are committed against us or surround us, including emotional, physical, and sexual violence.
2. Identify ways that the cycle of violence is perpetuated and can be broken.
3. Recognize that many of us have been exposed to and have perpetrated different forms of violence and abuse, and that we have the ability to make a change through choosing to be nonviolent.

**MATERIALS**

- 4 x paper sheets for each participant
- Tape
- A pair of shoes for the “building empathy” activity
- String for the clotheslines
- OR
- 4 large pages of flip chart paper to place the cards on
- Clothespins, if using string for clotheslines

**KEY MESSAGES**

1. There are many ways that people can be hurtful towards others. This can include physical as well as verbal and emotional ways of hurting each other. Hurting others in these ways is a form of violence.
2. Violence is often passed from person to person. Someone who has been hurt is more likely to hurt others later because of the pain they feel. This does not mean that violence will definitely take place, but just that it might. Recognizing the hurt and finding support for pain are some of the ways to stop this from happening.
3. We have the opportunity here to break the cycle of violence that we experience and to prevent that cycle from passing on to others.
• While it is critical with every session to remind young men about the limits of confidentiality and to review the ground rules, this activity asks young men to think more deeply about their exposure to violence and violence they may have perpetrated. Young men should be reminded that the discussion is anonymous; they should not put their name on the sheets. Remind young men that they do not need to disclose anything.

• Facilitation should always be done together with someone who has been trained in supporting survivors so that young men have an identified person to talk to if they would like. The content of this activity is very sensitive, and it is possible that young men may not feel comfortable during the discussion. They should be allowed to excuse themselves if they wish. All young men should be given—and reminded how to use—resources relevant to interpersonal violence at the end of the session, with physical copies of those resources handed out to them.

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- When we talk about abuse, violence, and hurting people, we tend to only think of physical aggression, but it is important to think about other forms of violence. It is also essential to help young men think about the acts of violence that they perpetrate, because very often we think others are violent but never ourselves.

Procedure

IN THEIR SHOES ACTIVITY

1. Explain that the purpose of this activity is to talk about the hurt we cause to others and how that may make others feel and vice versa. To do this, we need to remember that this is a safe space where we provide respect and confidentiality. Additionally, review the limits of confidentiality and the availability of someone to talk to (e.g., victim service advocate).

2. Bring out a pair of shoes, and ask the participants to pass them around.

3. Explain that these shoes belonged to a person who was abused by their partner. Tell them to think about who this person is and what their story is.

4. Ask the participants the following:
   - Describe the person they imagined—who are they?
   - How might this person be feeling?
   - Why do you think it is important to imagine what it is like to be in someone else’s shoes?
   - How can “being in someone else’s shoes” change the way we interact with others?

5. Transition to the next activity.

EMPATHY CLOTHESLINE ACTIVITY

6. Explain that the group will set up four clotheslines and that all of the participants should write a few words on the sheets of paper.
Give each participant four sheets of paper. Place on each clothesline the following titles:

a. An example of someone hurting another person
b. How someone might feel when they are hurt
c. How I might feel if I hurt someone
d. How I might feel if I am hurt

Ask each participant to think for a while about things they may have seen or heard and to write a short response to each title. Each person should write at least one reply for each clothesline (or category). Allow about 10 minutes for this task. Explain that they should not write much, just a few words or a phrase. Remind them not to put their names on the cards.

Ask the participants to place their cards face down on a table in the front of the room. Shuffle the cards, and begin to place them on the different clotheslines or flip charts for each of the four categories.

After all replies are on the clotheslines, allow the group to walk around and read all of the responses.

**GROUP DISCUSSION QUESTIONS**

11 What are the most common types of ways we hurt one another?
12 How do we feel when someone uses violence against us?
13 How do we feel when we use violence against other people?
14 What does it feel like when we've been hurt by someone with whom we are in a sexual or romantic relationship? How is this different than if this was someone with whom we were just friends or have a casual relationship?
15 How does the media (music, radio, movies, pornography, etc.) portray some of the violence we've talked about?
16 Dr. Martin Luther King, Jr. once said “Returning violence for violence multiplies violence, adding deeper darkness to a night already devoid of stars. Hate cannot drive out hate. Only love can do that.” This quote illustrates that violence or abuse is like a cycle, and it is our duty to interrupt this cycle of abuse. What do you think about this? Where might we see cycles of violence occurring? (In our community? In our neighborhood?)
17 What role do you think you have to play in preventing this cycle of violence?
18 What are ways to heal this pain? What can you do to help someone who has been hurt? How does it feel to help others?
19 What have you learned in this activity to help overcome violence?

**CLOSING STATEMENTS**

20 Ask the group what it was like for them to talk about violence and abuse they may have seen, heard, or experienced.

21 If anyone in the group shows a need for special attention from something said during the discussion, ensure you as the facilitator bring the young person to meet with one of the site leads (at the agency where program is being held). Ensure the young person knows where to get help, consider referring them to appropriate services, and discuss the issue with other senior staff at your organization (see the introduction to these activities). Facilitators should adhere to mandatory reporting requirements as specified by their agency or organization.
**Purpose/Objectives**

1. Quickly reflect on the day’s session.

**Procedure**

1. Ask all of the participants to gather in a circle.
2. Ask them to think of how they felt today. Starting with yourself and moving clockwise, ask each individual to say one word about how they felt about today’s session.
3. When each person has finished, thank them all for attending and for their full engagement and participation.
4. Remind them of the time and place of the next meeting.
SESSION

7

Making a Commitment to Healthy Lives
Review of Session 6

PURPOSE/OBJECTIVES

2. Reflect on questions or thoughts from the previous session.

TIME

10 minutes

MATERIALS

- Flip chart paper
- Tape
- Markers

Preparation

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write the agenda for the session on a piece of flip chart paper, and post it on the wall.

Procedure

1. Welcome the young men to Session 7 of the program. Thank the group for their participation in the last session, and ask them to recall the key messages or ideas from the previous session. Remind the group of any key messages that they did not remember. Ask them:
   - What did you learn that was most useful to your own lives?
   - Did you practice any of the skills or apply any of the things you learned from the last session?

2. Share a personal highlight about the last session’s work that you as the facilitator really enjoyed.

3. Tell participants that today’s session is going to focus on ways they can promote healthy relationships, promote responsible sexual behavior, and address men’s abuse and violence against women and other men.
Let’s Talk about It

**PURPOSE/OBJECTIVES**

1. Help participants recognize the different forms of expressing themselves and develop mechanisms for assertive communication.
2. Practice communication around contraception and supporting partners’ choices.

**KEY MESSAGES**

1. Talking about contraception with your partner is an important part of preventing pregnancy until you and your partner are ready for parenthood.
2. Supporting your partner in their choice of contraception is important. Communicating your support is a way to build trust while at the same time sharing your needs and protecting yourself.
3. Practicing these conversations can make them easier to have. You shouldn’t be ashamed to engage in healthy, respectful conversations with your partner.

When discussing communication, it is fundamental to teach and lead by example. There is no point in having well-constructed discourse if everything we do indicates the contrary. Thus, facilitators should reflect on their communication style and model positive, assertive communication throughout the course of this activity (and all activities).

**Framework for Discussion:** The purpose of this activity is to help young men practice communicating with their partner about contraception. Young men should learn to feel comfortable asking their partner about contraception and expressing that they would like their partner to use methods of contraception outside of only condoms. However, it is important to remember that this does not mean that young men should “take control of” or decide on their partners’ contraception — they ultimately need to support their partners’ decisions regarding their own body. Remember that you can always choose not to have vaginal sex if you are not comfortable with your partner’s decision on pregnancy prevention methods.
**Procedure**

**PART A**

1. Addressing the group, ask participants what comes into their minds when they hear the word “communication.” As they are talking, note what they say on the flip chart. This should be free-flowing and include all ideas. Encourage participants to think of non-verbal forms of communication, but other than that, allow them to say what they think.

2. Divide the group into pairs, and tell them to think of a situation when they felt satisfied with the communication. Then, ask them to share their example with their partner. Tell them to both describe the communication itself and any body language or non-verbal methods that were practiced.

3. Working in pairs, ask the participants to come up with the common elements of satisfactory or positive communication, and write these down.

4. Bring the groups back to discuss what conclusions they reached about what is required for good communication. Remember that it is important to consider verbal and non-verbal communication. Examples include:
   - Using “I feel”
   - Listening attentively
   - Using open body language (e.g., arms not crossed)
   - Being clear and honest
   - Being empathetic
   - Assuming the other person has good intentions
   - Not interrupting

5. Write down some of the themes of positive communication so participants can reflect on them later.

**PART B**

6. Write the words “aggressive,” “passive,” and “assertive” on a flip chart. Start a discussion about different types of communication.

7. Ask the participants: What do we mean when we call some forms of communication “aggressive”? Use the following bullets to inform the conversation.

**Aggressive**

- Using violent behavior to communicate – something that can hurt other people.
- Not taking into consideration the other person's needs.
- Not accounting for others' feelings.
- Using either physical violence or one's body to intimidate or make others feel powerless.
- Making accusatory statements that make the other person defensive. For example, “You're a liar because you said you have never had sex, but then you said you were on the pill.”

**Passive**

- Communicating in a way in which we don't take responsibility by avoiding the truth and allowing others to decide for us.
- Not being clear with our needs or intentions.
• Allowing others to make decisions for us and not being fair to ourselves because we haven’t said what we really feel. For example, wanting your partner to be on some form of birth control, but not saying anything.

Assertive

• Taking into account our needs and answering clearly what we think or feel, while at the same time respecting others.
• Not interrupting others, but saying what we need to say.
• Being open with our feelings. For example, “I feel like it’s important for us to take care of ourselves and our health and use a condom.”

8 Ask the participants to form three groups. Hand out one of the following three scenarios to each group. Ask each group to develop a role-play/sketch for their given situation.

Scenario 1

A young man and a young woman have started dating and want to have sex. The young man does not want to become a father at this time in his life. He knows that he will wear a condom, but he wants to be fully secure and make sure his partner is on some form of birth control. He wants to ask her and talk to her about this, and he plans on having a conversation with her when they meet up later that weekend.

Scenario 2

A young man and his partner have been dating a little while and have decided to have sex. The young man has been tested and does not have HIV or any other STIs. He mentioned this to his partner, who responded that they didn’t care and that was stupid anyway. The young man would like for his partner to get tested and has decided to have another conversation about it.

Scenario 3

A young man and his partner have been dating for a while. During that time, they have been having sex without a condom. The young man has attended the Manhood 2.0 program and now wants to wear a condom when having sex. He wants to talk to his partner about it, but is afraid that his partner will think he has been cheating. He decides to have this conversation with his partner the following day after school.

9 Tell each group they should develop the skit/role-play, for this story – keeping in mind to shy away from passive and aggressive forms of communication and to focus on assertive forms that respect the individual they are speaking to.

10 They can give the characters backstories – encourage them to be creative in bringing this situation to life (for example, by giving them names and talking about how they know each other). Give them about 10 minutes to develop their role-play.

11 Once they are done, have each group present to everyone.

12 Ask the groups the following:

• What was the easiest part of developing this skit? What was the most challenging?
• What are some of the things you liked or learned from the other skits?

13 After each group has presented, bring the group together and open the discussion.
GROUP DISCUSSION QUESTIONS

14 What types of communication do young men most use in their intimate relationships? Why?
15 Why is it sometimes difficult to have these types of conversations?
16 What happens when our partners or others respond to us using passive or aggressive forms of communication? How can we approach these situations?
17 What are some ways to make these conversations easier? Can we think of any other examples to have positive, productive conversations?
18 What have you learned from this activity? How can you or your peers apply this in your lives and relationships?

CLOSING STATEMENTS

19 Communication is a key component of healthy relationships. Practicing assertive communication is finding balance in expressing ourselves and our wishes assertively; we are taking into account our needs and clearly expressing what we think or feel while at the same time respecting others.
20 Communicating is a way to build trust while at the same time sharing your needs and protecting yourself.
21 Practicing these conversations can make them easier to have. You shouldn't be ashamed to engage in healthy, respectful conversation.
**Activity 7.3: My Support Network**

**Time**
30 minutes

**Purpose/Objectives**
1. Help young men reflect on important relationships and social networks that they can rely on during difficult moments.

**Materials**
- Flip chart paper
- Pens or pencils
- Markers
- Stickers
- Double-sided tape
- Resource Sheet 7.3

**Key Messages**
1. Support networks serve as an important source of resources, solidarity, and guidance in life. Creating a support network provides an opportunity to share what we feel, think, and want in a positive way, as well as gain advice and support from others.

**Procedure**
1. Explain to the participants that you are going to do an activity that will make them think about the important relationships in their lives and the people who they can turn to for support or advice when they have a problem. Thinking back to the activity “Let’s Talk about It,” how can we build a network to help achieve some of the goals we’ve made for ourselves?

2. Give each participant a copy of Resource Sheet 7.3 and a pen or pencil. Tell the participants to think about the people they turn to for advice when they have a problem.

3. Tell the group they should put themselves at the center of the circle. In the circles around the center they should write the names of those who they can rely on for support or advice. The people they can rely on the most should be in the rings closest to the center. Those who provide less support or advice should be placed in the outer rings/circles. Tell the participants that “support” can be either advice or financial or material assistance.
4 Give the participants 15 minutes to complete their forms. Then, ask if any of the participants would like to share their social support network with the whole group. After some individuals have shared their networks, open the discussion using the following questions.

**GROUP DISCUSSION QUESTIONS**

5 Was it easy or difficult to identify the people you can rely on for help and support?
6 In what ways do these individuals and networks help you as an individual? What advice do they provide?
7 How do ideas of manhood or stereotypes about men impact our ability to ask for or receive support?
8 If you are having a disagreement with your partner or friend, whom can you turn to for advice?
9 Are there people you would like to rely on for more help, support, and guidance?
10 How can we build those lines of communication?
11 How can we provide the same type of support we wish to have from others?
12 What can we do to strengthen our social support networks?
13 Did you learn anything that can be applied in your own life?
My Support Network
Who Am I? Where Am I Going?  

**Activity 7.4**

**Purpose/Objectives**

1. Reflect on how young men construct their identities and life plans and on the importance of having a positive sense of self.
2. Help participants understand and prepare for possible obstacles to achieving their goals.

**Time**

40 minutes

**Key Message**

1. Support networks serve as an important resource for solidarity and guidance in life. Creating a support network provides an opportunity to share what we feel, think, and want in a positive way, and gain advice and support from others.

**Materials**

- Flip chart paper
- Notebook paper
- Markers
- Pens or pencils
- 'Man Box' flip chart
- Cards from Facilitator resource 7.4

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.
- Write the prompt questions on flip chart paper.

*This is an introspective activity and should be carried out with the utmost sensitivity. If the participants do not feel comfortable making a drawing or painting of themselves, the procedure can also be adapted to other techniques such as discussion in pairs, writing, the creation of collages, or the use of dolls.*

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22 Adapted from the Latin American Youth Center’s SWAT Curriculum on promoting peer-to-peer mentoring on sexual health.
Procedure

1 Invite the participations to sit comfortably, take a deep breath, and close their eyes. Ask them to think about the following questions:
   - How would I describe myself?
   - What do I like doing the most? The least?
   - What have I been told I do well?

2 Tell the participants they will have 20 minutes to draw, paint, or create something that represents who they are. Write the questions from the previous step on flip chart paper so that the participants can refer to them while creating their pictures.

3 After the participants finish their representations, invite them to think about the following questions, and write them down on a piece of paper:
   - What do I want to be like in 10 years?
   - What will “success” look like at that time?

4 Tell them to now draw a picture of themselves 10 years from now.

5 Ask the participants to think about any barriers or challenges to achieving those goals. What are some things that may prevent them from reaching these goals? Begin to distribute the “Adjustments to Life Scenarios” cards. Remind them that this is just a game and not real life.

6 Have each participant read their card to themselves. After a minute, give yourself a card and read it aloud. Discuss with the group why this would make it very difficult for you to accomplish your goal.

7 Go around to each participant, and discuss how their “adjustment to life scenario” would affect their ability to accomplish their goals. Ask:
   - What are some ways you can prevent this possibility from happening?
   - If one of these things were to happen, how could you continue to work towards your goals?
     What are some of your options?

8 Divide the group into several groups based on their “adjustment” (that is, all those who received “tested positive for HIV” should be grouped together). As groups, tell them to discuss some of the options they presented and the following questions:
   - Why might someone choose this option?
   - Why might someone not choose this option?

9 Allow them to discuss for about five to 10 minutes, and then bring them back into a large circle.

GROUP DISCUSSION QUESTIONS

10 What things do people consider when setting goals for the future?

11 How flexible are most people when things don’t go as planned?

12 (When applicable) How might someone avoid negative adjustments?

13 What are some things that could happen that you might not be able to control?

14 What role does the “Man Box” play in whether or not we achieve our goals? What are the ways in which it can hold us back?

15 How can we apply the lessons from Manhood 2.0 to achieving some of these goals or desires we have for our future?
## Adjustments to Life Scenarios

Make several copies of the following scenarios:

<table>
<thead>
<tr>
<th>You were arrested for a minor crime.</th>
<th>You tested positive for HIV.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your partner told you that she is pregnant (which was unplanned).</td>
<td>You tested positive for herpes.</td>
</tr>
<tr>
<td>You became a single parent.</td>
<td></td>
</tr>
</tbody>
</table>
**ACTIVITY**

**7.5**

Circles of Influence

**TIME**

**45** minutes

**PURPOSE/OBJECTIVES**

1. Guide participants in recognizing how others’ thoughts, beliefs, and actions influence their own.

**MATERIALS**

- Masking tape
- Character name tags
- Resource Sheet 7.5

**KEY MESSAGES**

1. What we do or don’t do, say or don’t say can have an impact on others.

2. Our actions can have positive and negative impacts on others. People are influenced not only by their relationships, but also by others in the community and in society. We should think about how our behavior can influence others.

3. Actions speak louder than words. You can talk all you like about the right thing to do, but actions are what matter.

“Circles of Influence” was adapted from the SASA! Start Prep Module to address unplanned pregnancy. The character statements can be adjusted to address multiple vulnerabilities facing young men, including teen dating violence, LGBTQ bullying, substance abuse, and more. Before facilitating, read through the character statements and adjust them to address the needs of your community.

**Preparation**

- Review the activity and be sure you understand the content, teaching methodology, and timing.
Using the masking tape, tape several pieces of flip chart paper to the floor. They should be large enough to make four large concentric circles, as shown in the following drawing.

Prepare name tags for each of the character names provided in the character list.

Photocopy and cut out the character statements provided at the end of these instructions (in large print for reading). Fold the character statements in half so no one can read them, and attach each one to the corresponding name tag.

**Procedure**

**INTRODUCING THE ACTIVITY**

1. This session will explore how we need to reach out to all of the different people and groups in a community in order to effect community change.
2. Explain to participants, “In this next exercise, we will explore how the thoughts, beliefs, and actions of others create community norms (or community ‘rules’) and how these norms influence change in the community. Norms are unwritten rules in a society that guide how people behave. Norms can and do change over time.”
3. Bring their attention to the four concentric circles on the floor.
4. Ask the participants to take one pile (consisting of a name tag and piece of paper) and a piece of tape. Ask participants to tape the name tags to their chests. Tell them they can read their pieces of paper, but only to themselves.
5. Ask the participants who have chosen the characters “Jordan” and “Jessica” to stand inside the smallest, innermost circle.
6. Ask the rest of the participants to read out their roles.
7. Bring their attention to the circles on the ground. Note that one circle is labeled as “individual,” one “relationship,” one “community,” and one “society.”
8. Ask the group to decide in which circle their character would fit – individual, relationship, community, or society. Have them talk with each other if they don’t know where they should go or are confused.
9. Have participants take their place in the circle.
Announce to participants, “These individuals are named Jordan and Jessica. Jessica and Jordan, please introduce yourselves to the group by each reading the first sentence on your piece of paper.”

Explain the first part of the exercise as follows:

a. “I will ask a participant to introduce himself and to read only his first sentence aloud to Jordan and Jessica. They are the main characters in this exercise.”

b. “This participant will then tap another participant who will do the same, until all participants have had a turn.”

Ensure there are no questions. Start the exercise by randomly choosing one of the participants to go first.

Once everyone has had a turn, conduct a short debrief using the following questions (make sure participants remain in position):

a. “Which circle do you think has the most influence on Jordan and Jessica? Why?”

b. “Do any of the circles have no influence on Jordan and Jessica? Why or why not?”

c. “What does this exercise tell us about the social rules or expectations in our community?”

d. “What does this mean for how we understand the world and how we act?”

Summarize Key Points:

- Everyone is influenced by many factors and people without even realizing it.
- People are usually influenced the most by the people who are the nearest to them. They influence us in everyday life.
- Even community members who are not as close to us as friends and family influence how we think and act.
- Broader societal influences like the media and national laws also affect individuals, even if this isn’t as direct or immediate.
- Around all of us are circles of influence: family and friends, community members, and society.

Explain to participants that they will now continue the exercise. Start with Jordan and Jessica. Have the person who began read the second sentence aloud.

He will then go and tap one person on the shoulder, returning to his place in the circles.

The person who was tapped on the shoulder will read his second sentence.

The game will continue like so until everyone (except for Jordan and Jessica) has read his second sentence.

When everybody is finished, ask Jordan and Jessica to read theirs. Debrief the game as follows:

a. “What happened when more people were convinced of the benefits of engaging in preventing unplanned pregnancies?”

b. “What can we learn about effective community mobilization from this exercise?”

CLOSING STATEMENTS

Ideas in the community can change. It is up to all of us.

Everyone has a role to play.

It is up to everyone in the community to create a supportive environment for new behaviors and attitudes.
Character Statements

Jessica

1 My name is Jessica. I am dating Jordan. Recently, Jordan and I had unprotected sex, but I don’t know who to talk to about this and feel scared.

2 My name is Jessica. Jordan and I talk to one another about how to stay safe and make sure we delay pregnancy until w are ready to have kids.

Jordan

1 My name is Jordan. I am dating Jessica. We recently had unprotected sex. It doesn't bother me because she will figure out what to do if she ends up pregnant.

2 My name is Jordan. After going to Manhood 2.0 and talking with my group, I believe I have a responsibility to take an active role in preventing pregnancy and protecting ourselves from STIs and HIV. Jessica and I went to the local clinic together to find out our different options for birth control and how to access them. We now have open conversations about this and other health matters.

Jordan’s Father

1 I am Jordan's father. I was raised knowing that women control when and how to have babies and that men don’t really have a say in when a pregnancy happens.

2 I am Jordan’s father. Men and women should have open and honest communication around their health, and men can talk to their partners about whether or not they are ready to have children.
**Jordan’s Friend**

1. I am a friend of Jordan. We hang out a lot. I believe that you can’t trust a woman when she says she is on birth control and you have to protect yourself.

2. I am a friend of Jordan. When we talk, I respect him for taking an active role in going to the clinic with his girlfriend and talking about birth control and how to avoid unplanned pregnancies. In fact, now I do the same with my girlfriend.

**Jessica’s Friend**

1. I am a friend of Jessica. She and I discuss everything together. My relationship is similar to hers — my boyfriend decides whether or not to wear a condom, and that is it.

2. I am a friend of Jessica. My boyfriend and I can and should make decisions about birth control together.

**Jessica’s Aunt**

1. I am Jessica’s aunt. I believe if we talk to our kids about having sex, it will encourage them to have sex. We should be teaching them to say no until they are married.

2. I am Jessica’s aunt. I believe that while our kids should wait until they are ready to have sex, it is important to have conversations early about avoiding unplanned pregnancies and preventing STIs and HIV so they have the tools they need to protect themselves.

**Jordan’s Classmate**

1. I am Jordan’s classmate. We sit next to each other in class and talk from time to time. He says that using a condom is stupid, but I say nothing. It isn’t my business.

2. I am Jordan’s classmate. I tell him that wearing a condom is very important to protect both himself and a partner and encourage him find out more information about how to protect himself.
Pastor

1. I am a pastor. I say to not have sex until you are married.

2. I am a pastor. I attended a training on health and gender, and I talk to the youth that come to my church about going to get tested, wearing a condom, and getting information about birth control.

Pharmacist

1. I am a pharmacist. You buy things from me and ask my advice. It doesn’t matter to me what you do.

2. I am a pharmacist. I have brochures and pamphlets available to give you more information about different types of birth control and their effectiveness, and I inform you that emergency contraception is available without a prescription. I answer questions that you may have, and I suggest you go to the local clinic for more information if you need it.

Teacher

1. I am a teacher. I teach health class. Every year, I teach the same thing. I mostly focus my attention on the girls. I don’t care if the boys listen as long as I fulfill my requirements.

2. I am a teacher. Recently, I attended a gender training on men’s roles in avoiding unplanned pregnancy, and I now specifically invite boys to talk to me or one of the other health teachers if they have questions. I also am finding ways to incorporate messages about gender equality and joint responsibility into my school lessons.

Youth Center Worker

1. I am a program director at a youth center. The center works with youth to promote health. Most of the time, it’s only girls who come in with questions about preventing unplanned pregnancy because they care more than the boys do.

2. I am a program director at a youth center. The center sees the importance of working with both men and women to promote joint decision-making on preventing unplanned pregnancies. We now hold Manhood 2.0 sessions to help encourage young men to take an active role in both their and their partners’ health.
**Health Care Provider**

1. I am a health care provider. I provide information and assistance, but I don't ask anything. It is not my business.

2. I am a health care provider. We organized a small workshop among health care providers to learn more about how to make young men feel safe in clinics and want to ask questions. We now have a specific outreach program dedicated to young men.

**Jessica’s Doctor**

1. I am Jessica's doctor. I see her at her clinic visits but have never met her boyfriend. Boys do not usually come to this type of place.

2. I am Jessica’s doctor. I encourage Jordan to come to the clinic with Jessica – or alone – to find out more information, and I encourage him to get tested for HIV and other STIs and stay healthy.

**Jordan’s Coach**

1. I am Jordan’s coach. We are close, and I talk to him about school. I don’t talk about his personal life because that is none of my business.

2. I am Jordan’s coach. I encourage him to have conversations with his girlfriend about birth control and going to the clinic to make sure they are both healthy. It is important to his future to delay pregnancy until he is ready, and I am here to support him if he has questions.

**Employee at Department Of Health**

1. I am an employee of the Department of Health. I decide which services are available at the health centers in my city. We've heard that we need to work with men on sexual health and education, but that would just mean more guidelines and more work for our already overburdened staff.

2. I am an employee of the Department of Health. We know that we need to work with men, so we encourage men’s participation in understanding sexual health and the different types of birth control available. We also decided to implement men’s clinic hours to be able to reach more men.
City Council Member

1. I am a city council member. I work with my fellow council members to decide where funding needs to go. There are too many more important things that need to be taken care of, and we just don’t have the resources to make young men care about pregnancy prevention.

2. I am a city council member. I attended a workshop on gender and health and engaging men in sexual health. I realize that it is important to make sure everyone has all of the information and access to services they need. I am working with my fellow council members to make sure that there is enough funding for organizations, clinics, and schools to have the resources they need to engage and support young men.
**ACTIVITY**

### 7.6 Closing Circle

**Purpose/Objectives**

1. Review what has been learned in the past several sessions.
2. Reflect on remaining questions and thoughts from all sessions.
3. Think critically about how participants want to use this information going forward.

**Materials**

- Participant Handout 7.6

**Procedure**

1. Introduce the activity.
2. Distribute Participant Handout 7.6.
3. Ask each participant to reflect on the program and its content. Ask them to share how it has changed them by filling out the handout.
4. Next, ask each individual to share one thing they will change as a result of participating in this program.
5. Thank them all for their participation. Name one thing that you learned from being a part of their group and facilitating these discussions.
6. Distribute certificates (optional).
PLEASE COMPLETE THE FOLLOWING SENTENCES

1. A harmful stereotype about men that I reject is...

2. An important characteristic that I want in a healthy relationship is...

3. One way I can be the best man I can be is...

FINAL COMMITMENTS

One action I intend to take to be healthier and incorporate some of the things I have learned is...

One action I intend to take to support others is...
How-To Guide: Community Mobilization

PURPOSE/OBJECTIVES

1. Provide young men with the tools and guidance to lead campaigns and be advocates during and after their implementation of Manhood 2.0.
2. Provide an entry point for continuing to disseminate information shared during implementation to a broader audience.

Why a How-To Guide?

- True substantive and sustainable impact includes both the intervention and the guidance for young men to be the architects of gender-transformative social awareness campaigns that can challenge systemic toxic norms. Young men can use what they have learned in Manhood 2.0 to be change-makers and influencers in their peer groups and communities. Putting into practice what’s been learned and sharing that information with others are invaluable to making sure that knowledge is never forgotten.

- Community mobilization requires a group of people to take coordinated action to improve their quality of life or to seek change in terms of policies or government services. It promotes the recognition of local resources and allies and serves as a platform to build, strengthen, and integrate efforts by individuals and organizations in order to effectively and collaboratively solve problems identified in the community.

- It should be noted this guide is not a stand-alone module. The goal is to provide further tools for those participants interested in more guidance and options to advocate for what they’ve learned in Manhood 2.0.

Procedure

BUILDING A CAMPAIGN

1. Conduct a needs assessment.
   - Gather information about men and boy’s gender-related attitudes, depending on the campaign goals – as well as their knowledge, behaviors, and practices related to the issues to be addressed. The Manhood 2.0 curriculum and the Promundo “Man Box” study are great starting points for resources at this level. It should also include a mapping of media and social networks, which could be tapped as part of the campaign strategy.
2 Develop a profile of a “typical” young man for each campaign target area or population.

• A useful technique for outlining the characteristics of the target group is to create a character profile. This involves developing a profile of a “typical” young man from the target group, thinking about various characteristics such as socio-demographics, hobbies, attitudes about gender roles, sexual behaviors such as condom use and number and type of partners, access to and use of social services and programs, health knowledge, and general aspirations. It can also be helpful to name this person and to create a physical appearance.

• Although this technique requires a degree of generalization about the target group, it is not intended to diminish the diversity that exists among young men, but rather to assist in developing messages and strategies that would be attractive to, and appropriate for, the target group as a whole.

3 Define sub-themes for the campaign.

• Within the themes of gender equity and health, it is necessary to identify sub-themes (e.g., communication with partners about sex and condom use, speaking out against violence, and speaking up in support of equal pay and opportunities for all genders and races) that will form the basis for the campaign. These sub-themes should be easily identifiable from what the needs assessment identifies as necessary and/or appropriate for the target group.

4 Develop basic messages for the campaign sub-themes.

• This step often requires the most creativity and time. Campaign messages that are positive and action-oriented are often more attractive and inspiring than those that demean men and/or focus only on negative consequences.

5 Map sources of influence and information.

• This involves identifying and understanding the different sources of influence and information that shape male attitudes and behaviors related to gender, relationships, and health. These can be groups of people such as peers and families; institutions such as schools, workplaces, and health services; and media formats such as newspapers or TV. Again, this should come from information collected during the needs assessment in addition to the input from young men and other stakeholders involved in the process.

6 Define strategic media and social channels.

• Building on the profile and the mapping exercise, the next step is to determine which media (e.g., radio, YouTube, Twitter, Facebook, or Instagram) and social channels (e.g., peer educators, local celebrities, or community figures) would be the most strategically valuable in reaching the target group(s) and/or secondary audiences with messages highlighting positive models of masculinity, gender, and the target messages. It is important to also keep in mind how easy it will be for the target group to access these different channels, as well as the technical and financial feasibility of utilizing these channels for the campaign.

7 Pre-test with target and secondary audiences.

• This is the process by which campaign messages are confirmed as being clear, being relevant, and informing and/or mobilizing young men as intended. Involving peers in the campaign development process helps to ensure the relevance and impact of these messages. Nevertheless, it is still necessary to undertake extensive pre-testing to ensure that messages are widely understood. Pre-testing can be done through focus groups with individuals who are representative of the target group. It is also important to pre-test messages with secondary stakeholders to ensure that they are acceptable and appropriate and will not generate backlash. Timing is also important to campaign strategies. For instance, campaigns can launch with “teasers” to spark the audience’s curiosity, followed by media messaging and interactive activities.
ALTERNATIVES TO COMMUNITY MOBILIZATION

Given that not all participants may be interested in developing their own full campaign, the following are some alternative ways that young men can apply Manhood 2.0 in their everyday life:

- Do more of the chores and household tasks, even if they are not some you would traditionally handle.
- Join a youth mentoring program.
- Create a formal peer group in your community or school in which young men can talk about some of the subjects in Manhood 2.0.
- Present on these topics when applicable in school projects.
- Share lessons and information learned with your partners, siblings, and friends.
- Mobilize your circles of influence (see Activity 7.5: Circles of Influence) around Manhood 2.0 themes.
- Be thoughtful in both words and actions so they uphold the principles of gender-equitable behavior and nonviolence highlighted in Manhood 2.0.
Energizers
Sample Energizers

SPAGHETTI

1 Split participants into two to three groups with about five to 10 people each. Each group forms a tight circle, with everyone sticking their hands into the center. With one hand, everyone grabs the hand of another person. Then, using the other hand, they grab the hand of someone different.

2 The object of the game is to get untangled without letting go. By climbing, crawling, and wriggling around, participants can create one large open circle or, sometimes, two unconnected ones.

3 If they are totally stuck, you can tell groups they can choose to undo one link and then reconnect once that person has turned around, seeing if that works.

   This energizer is fun and creates a nice physical bond among participants. It also subtly communicates ideas of working together to accomplish a task.

SHRINKING ICEBERG

1 Split participants into two groups of five to eight people.

2 Put two blankets or several sheets of newspaper on the floor. Ask each group to stand on one blanket or newspapered area.

3 Explain this is an iceberg that is melting, reducing in size by half every month. The object is to see which full team can stay on the iceberg longer.

4 Ask the teams to get off the blanket and fold it in half (or remove half the paper). Each time, see how the teams find ways to support each other to allow everyone to stay on.

5 The first team to keep more than half of their team on the iceberg wins.

HOT PEPPER

1 Gather the participants in a circle. Toss a ball (or another tossable object) gently to a participant. Participants should continue gently tossing the ball, saying “Hot” when they catch it.

2 As the ball is being tossed around, randomly call out, “Pepper!” The person holding the ball when “Pepper!” is called is removed from the circle.

3 Tossing the ball continues until only one person is left.
THE RAINSTORM

1. Ask the participants to stand in a circle with their eyes closed.
2. Say that a rainstorm is approaching.
3. Ask everyone to rub their palms against their pant legs.
4. Then ask them to lightly pat their thighs with their fingertips.
5. Ask them to do it harder. Then, ask them to pat their hands against their thighs.
6. Start slapping your hands faster and faster against your thighs.
7. After a while, go back to lighter slapping, then patting, etc., to reverse the entire order until it is quiet again and the storm has passed.

_This is a physical but calming exercise that can be used as a closer._

I’M GOING TO THE STORE...

1. Create a circle of chairs in the center of the room. Have enough chairs so that only one person does not have one.
2. Have one person stand in the center of the circle. They should start the game by saying, “I’m going to the store, and I’m taking my friend who...” and choosing a trait that some of the people seated have. For example, “I’m going to the store, and I’m taking my friend who has a red shirt on.” All of the students with a red shirt on will get up and race to another chair, including the person in the center, leaving the remaining person without a chair to stand in the middle of the circle.
3. The next person in the center repeats the phrase with a new trait. The rule is that participants MUST get up and move to another chair if the trait applies to them. They cannot move to the chair next to them.
4. Repeat several times.

STOMP PATTERN

1. Teach the participants a three-count stomp pattern and do it together. (Pattern: stomp-stomp-clap, stomp-stomp-clap.)
2. Then, teach the participants a four-count stomp. (Pattern: stomp-stomp-stomp-clap, stomp-stomp-stomp-clap.)
3. Divide the participants in half. Have one group do the first pattern and the second do the second pattern at the same time.
4. If there is a bit more time, you can have individuals create their own patterns for the group to imitate.