



SUPPORTING ADOLESCENTS AND THEIR FAMILIES IN EMERGENCIES (SAFE)

Facilitator Training:
Curriculum for Female
and Male Caregivers



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To download the **Supporting Adolescents and their Families in Emergencies (SAFE) resource package**, please go to: www.rescue.org/resource/supporting-adolescents-and-their-families-emergencies-safe

Comments, feedback and further questions are gratefully received by the IRC's Violence Prevention and Response Unit: VPRUmailbox@rescue.org

DISCLAIMER

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INTRODUCTION

Who should deliver this training?

This training is designed for managers or other responsible staff to train participants to become SAFE facilitators who can deliver the SAFE Curriculum for Female and Male Caregivers. This training must be delivered by the same individuals who delivered the initial SAFE Core Facilitator Training. It is strongly advised for two individuals to co-facilitate this training in order to model the practice of co-facilitation and be able to better support small group activities and practice.

Whom is this training for?

This training is for facilitators (both staff and community volunteers) who will be conducting group sessions with female and male caregivers. *All* SAFE facilitators must have completed the SAFE Core Facilitator Training prior to attending this training.

Preparing for this training

- ☐ Review and contextualize the training content, including the training agenda.
- ☐ Prepare an up-to-date map of services for adolescent girls and boys and their caregivers in the implementation location.
- ☐ Define the referral pathways for SAFE facilitators to make safe and confidential referrals for female and male caregivers.
- ☐ Confirm the information and systems in place to report sexual abuse and exploitation.
- ☐ Select an appropriate venue for the training.
- ☐ Use a participatory, active learning approach in the training –
 - This curriculum uses instructional language to help guide you, as the trainer. For example: Say, Do, Explain, Ask, Key Messages, and Trainer Notes.
 - Note that information under “Key Messages” must be shared with participants before moving on with the training.
 - The information under “Trainer Notes” is meant to provide you with extra guidance.
- ☐ Gather materials required, adapting as needed based on what is available.

Materials needed

- ☐ Flipchart and colored markers
- ☐ Paper and pens for every participant
- ☐ Group Agreements from the SAFE Core Facilitator Training written on flipchart paper
- ☐ SAFE Curriculum for Female and Male Caregivers – 1 copy per participant
- ☐ 1 folder per participant
- ☐ “Parking Lot” written on flipchart paper and hung on the wall
- ☐ Diagram of the SAFE Resource Package drawn on flipchart paper (Session 3, Activity 3.1 – Part One)

- ☐ Session titles for the SAFE Curriculum for Female and Male Caregivers written on flipchart paper (Session 3, Activity 3.1 – Part One)
- ☐ The main sections of a SAFE caregiver session plan written on flipchart paper (Session 3, Activity 3.2 – Part One)
- ☐ *Handout 1: Guidance for Facilitating Sessions for Caregivers* – 1 copy per participant (Session 4 – Part Three)
- ☐ Referral pathways guidance document, if available – 1 copy per participant (Session 4 – Part Five)
- ☐ Up-to-date map of available services per location for female and male caregivers, and adolescent girls and boys – 1 copy per participant (Session 4 – Part Five)

Prior to starting the session:

- ☐ Arrange chairs in a circle or U-shape.
- ☐ Hang the Group Agreements up on the wall.
- ☐ As participants arrive, ask them to sign the attendance sheet.

Scheduling information

- Review and adapt the training schedule to suit your timings.
- The total time needed to deliver this training is around 5 hours. Remember to include a break for lunch, as well as breaks during the morning and afternoon. You could also choose to add an additional hour of practice during Session 5 if you feel that would be valuable.

Sample Schedule for SAFE Facilitator Training – Curriculum for Female and Male Caregivers

SESSION	DURATION AND TIMING	LEARNING OUTCOMES By the end of the session, participants will:
SESSION 1 – INTRODUCTION	10 minutes 10.00-10.10	• Become familiar with the schedule and objectives of the training
SESSION 2 – INVOLVING FEMALE AND MALE CAREGIVERS	30 minutes 10.10-10.40	• Understand the importance of engaging both female and male caregivers in SAFE • Become familiar with some of the challenges of working with female and male caregivers
<i>BREAK</i>	10 minutes 10.40-10.50	
SESSION 3 – THE SAFE CURRICULUM FOR FEMALE AND MALE CAREGIVERS	1 hour 30 minutes 10.50-12.20	• Understand the objectives and structure of the Curriculum for Female and Male Caregivers, and the approaches for facilitating the sessions • Become familiar with the topics included in the Curriculum for Female and Male Caregivers
<i>LUNCH</i>	1 hour 12.20-1.20	
SESSION 4 – FACILITATING SESSIONS WITH CAREGIVERS	2 hours 1.20-3.20	• Know the importance of understanding your target audience when delivering sessions

		• Become familiar with techniques for facilitating sessions with adults • Understand the steps to take in response to a disclosure of violence in a group
<i>BREAK</i>	10 minutes 3.20-3.30	
SESSION 5 – PRACTICE	1 hour 3.30-4.30	• Have had the opportunity to review the SAFE Curriculum for Female and Male Caregivers session plans in detail and practice some of the activities • Have been able to identify further support needs in relation to this curriculum
CLOSING	15 minutes 4.30-4.45	

SESSIONS

SESSION 1

Introduction

SESSION SUMMARY

LEARNING OUTCOMES	By the end of this session, participants will: ☐ Become familiar with the schedule and objectives of the training
TIMING	
DURATION	10 minutes
RESOURCES REQUIRED	☐ Paper and pen for each participant ☐ Flipchart and colored markers ☐ Training schedule written on flipchart paper ☐ Group Agreements from SAFE Core Facilitator Training written on flipchart paper ☐ “Parking Lot” flipchart sheet hung up and added to throughout the sessions

Activity 1.1: Welcome and Ice Breaker (10 minutes)

Part One: Welcome (5 minutes)

1. **DO:** Welcome everyone to the SAFE Facilitator Training – Curriculum for Female and Male Caregivers.
2. **EXPLAIN:**
 - To foster a supportive and caring home environment, SAFE recognizes the importance of involving, and building the capacity of, female and male caregivers, given their roles as key adults in the lives of adolescent girls and boys.
 - Today, we will be preparing you to deliver the SAFE Curriculum for Female and Male Caregivers. We will:
 - Consider the importance of working with caregivers in this context
 - Familiarize you with the structure and content of the curriculum
 - Identify some of the communication and facilitation skills you will use in your work with caregivers
 - Give you time to practice some of the activities in the sessions
3. **DO:**
 - Point to the training schedule on the wall, so participants are aware of the agenda for the sessions.
 - Point to the Group Agreements on the wall, and remind participants that we will be using the same Group Agreements as we used in the Core Facilitator Training to ensure that this is a safe and inclusive space.
 - Check for questions or concerns. Capture questions on the “Parking Lot” flipchart sheet and plan to cover them later in the day.

Part Two: Ice Breaker (5 minutes)

1. **DO:** Ask participants if they remember the “Belly Breathing” exercise that we did during the Core Facilitator Training. Ask if anyone would like to volunteer to lead it for the group now as practice, as it will be used with both the adolescent groups and the caregivers.
For reference and to support correct facilitation of the activity, the instructions are as follows:
2. **DO:** Ask the participants to move into a comfortable seated position on a chair or the floor. If it is comfortable for them, ask them to close their eyes or just relax. They can also put one hand on their bellies and the other hand on their chests.
3. **EXPLAIN:**
 - It is normal for your mind to get distracted during this activity. If you find themselves thinking about something else, try to bring your attention back to their breath, your voice, or the activity.
 - Belly breathing has 4 steps:
 - *Step 1 – Breathe in for 4 seconds, feeling as your belly fills up with air, from the bottom to the top.*
 - *Step 2 – Pause and hold the air in your belly for 2 seconds.*
 - *Step 3 – Breathe out for 4 seconds, squeezing the air out from top to bottom.*
 - *Step 4 – Hold the emptiness for 2 seconds.*
4. **DO:** Repeat this breathing exercise slowly for a couple of minutes, repeating the instructions.
5. **ASK:** Why do you think this activity might be useful with your female and male caregiver groups?
If not mentioned, share these points: to help them relax, to help them leave behind some of their stress and worries before starting the session, to teach them a technique they can use in their daily lives.

SESSION 2

Involving Female and Male Caregivers¹

SESSION SUMMARY

LEARNING OUTCOMES	By the end of this session, participants will: ☐ Understand the importance of engaging both female and male caregivers in SAFE ☐ Become familiar with some of the challenges of working with female and male caregivers
TIMING	
DURATION	30 minutes
RESOURCES REQUIRED	☐ Flipchart and colored markers

Part One: Who Are the Caregivers and Why Should They Be Involved? (10 minutes)

TRAINER NOTES: Be aware of your context during the following discussions. For example, it may be common that nonbiological caregivers play an important role, or there may be a high number of unaccompanied and separated children living in alternative care arrangements.

1. **ASK:** Other than biological parents, who are some of the other female and male caregivers of adolescent girls and boys in this context?
If not mentioned, share these examples: grandparents, older siblings, aunts and uncles, neighbors, family friends, parents of friends, etc.
2. **DO:** Ask the participants to turn to the person next to them for a discussion.
3. **ASK:** Thinking back to our discussions on the first day of the Core Facilitator Training, why should we involve female and male caregivers in SAFE?
4. **DO:** Give the pairs 2-3 minutes to discuss and then write their suggestions on flipchart paper.

KEY MESSAGES:

- We recognize the major influence that female and male caregivers have on the lives of their adolescent girls and boys, including on their safety and wellbeing.
- Female and male **caregivers can be gatekeepers, guides, protectors, and role models** for adolescent girls and boys. Their **beliefs, attitudes, and behaviors will have long-term effects** on how adolescents understand themselves, their choices, and their futures.
- Without the “buy-in” of both female and male caregivers into the program, it may be challenging to access and work with adolescents through SAFE, particularly girls.
- It is important to understand **the different situations of female and male caregivers**, and the challenges they face, in order to meet their needs and the needs of their families.

5. **ASK:** We know that the roles of female and male caregivers in the lives of their adolescents are often different. What are some of those differences in terms of their relationships and interactions with their adolescent girls and boys?

If not mentioned, share these examples: Depending on the context, one caregiver may be more of a decision maker than the other; one caregiver may be more involved with discipline; one caregiver may be considered to be more responsible for daily interactions with their children; one caregiver might be responsible for the household and the other for income generation, etc.

KEY MESSAGES:

- Female and male caregivers often have different power in the home. Power is the ability to control and access resources, opportunities, privileges, and decision-making processes. Engaging with female and male caregivers means **understanding how power is used to make decisions** that affect the lives of adolescent girls and boys.
- Facilitators also have a role in **encouraging more shared decision-making** in the home and **challenging the harmful gender norms and gender inequality** that deny female caregivers equal status and power. This is the SAFE Principle of **gender equality**.

6. **ASK:** As part of SAFE, we have an obligation and an opportunity to involve female and male caregivers of adolescent girls and boys in multiple ways. What are these different levels of engagement?

If not mentioned, share these examples:

- *Conducting information sharing activities aimed at gaining caregivers' acceptance of girls' and boys' participation in SAFE adolescent groups*
- *Obtaining written consent for adolescent girls and boys who are identified and enrolled in SAFE groups*
- *Generating interest in the SAFE sessions for caregivers (for those who have an adolescent girl or boy in a SAFE group)*
- *Enrolling and participating in the SAFE sessions for caregivers*

Part Two: Challenges to Engaging Female and Male Caregivers (20 minutes)

1. **DO:** Ask participants to turn to the person on the other side of them to form a new pair.
2. **ASK:** What do you think may be some of the challenges to encouraging female or male caregivers to participate in the caregiver sessions for SAFE?
3. **DO:**
 - After 2-3 minutes, ask the pairs to join with another pair to form a group of 4 and share their ideas with each other.
 - To check understanding, stop the discussions after 2-3 minutes and ask each group to share one idea with the whole group.
4. **ASK:** *(If not already highlighted)* Which of the challenges discussed are faced more by women and which are faced more by men? Why?
5. **EXPLAIN:** In our work on SAFE, we need to be aware of the different situations of female and male caregivers, and in particular, the difference in power between the women and men.
6. **DO:**
 - Ask the groups of 4 to stay sitting together and come up with one strategy to encourage or enable female caregivers to participate and one strategy to encourage or enable male caregivers to participate. What are practical approaches they could use?
 - After 5 minutes, ask each group to briefly share the challenge(s) they chose to address and their suggested strategies. Write their ideas on flipchart paper.

KEY MESSAGES:

- *If facilitators have difficulties gaining female or male caregiver acceptance, they should not be deterred – **it takes time to build trust and acceptance.***
- *Make sure to spend time **identifying acceptable locations and appropriate times** for separate groups of female and male caregivers to meet. Women and men will have different daily activities and availability, and may find different spaces appealing and accessible. This means that SAFE facilitators need to be flexible and able to accommodate times outside of normal working hours, such as weekends, evenings, or early mornings.*
- *Consider **different and tailored outreach strategies** for female and male caregivers, including making door-to-door visits or holding open days or meetings at the SAFE venue to give them space to ask questions, to better understand the program, and to build trust.*
- ***Be prepared with information on other services** that are available for female and male caregivers and their families, so you, as facilitators, can show you are well informed and understand the many pressures and priorities facing caregivers.*

7. **EXPLAIN:** The SAFE weekly team meetings will be an important time to share any challenges you face with your colleagues and work together to develop solutions. You can also talk to your supervisor at any time for support or guidance.

SESSION 3

The SAFE Curriculum for Female and Male Caregivers

SESSION SUMMARY

LEARNING OUTCOMES	By the end of the session, participants will: ☐ Understand the objectives and structure of the Curriculum for Female and Male Caregivers, and the approaches for facilitating the sessions ☐ Become familiar with the topics included in the Curriculum for Female and Male Caregivers
TIMING	
DURATION	1 hour 30 minutes
RESOURCES REQUIRED	☐ Flipchart and colored markers ☐ Diagram of the SAFE Resource Package drawn on flipchart paper (Activity 3.1 – Part One) ☐ Session titles for the SAFE Curriculum for Caregivers written on flipchart paper (Activity 3.1 – Part One) ☐ The main sections of a SAFE caregiver session plan written on flipchart paper (Activity 3.2 – Part One): • Welcome and Review • Introduce the Topic • Activities • Closing • Take-Home Message and Evaluation

Activity 3.1: Overview (35-40 minutes)

Part One: Introducing the Curriculum (20 minutes)

- SAY:** The sessions in the SAFE Curriculum for Female and Male Caregivers focus on the following –
 - Developing parents' and caregivers' knowledge of how their adolescents are developing – physically, mentally, and emotionally – and the impact of the crisis on that development
 - Positive parent–adolescent communication and interaction techniques
 - Stress responses and management strategies for caregivers and their adolescents
 - Informing caregivers about how and where they and their adolescent girls and boys can safely and confidentially access support services – for example, services related to child protection, gender-based violence (GBV), and health
- EXPLAIN:** The sessions have been adapted from pre-existing and tested parenting curricula which have been used in many contexts.² They have also been shaped by the priorities of parents consulted during the development and testing of this resource in Nigeria and the Central African Republic in 2018-2019.
- DO:** Show the diagram of the SAFE Resource Package on flipchart paper as a reminder of where this curriculum fits into the SAFE package.

SAFE RESOURCE PACKAGE

CURRICULA FOR ADOLESCENT GIRLS AND BOYS

- Two life skills curricula: one for girls and one for boys, with guidance to tailor content for ages 10-14 and 15-19
- 5 modules; 16 sessions (2x/week):
 - Getting Started*
 - Our Emotions*
 - Our Relationships and Choices*
 - Our Changing Bodies*
 - Our Safety*

CURRICULUM FOR FEMALE AND MALE CAREGIVERS

- Complementary to adolescent curriculum
- 8 weekly sessions include:
 - Caregiver stress and coping
 - Adolescent development and sexual and reproductive health
 - Psychosocial needs and support
 - Healthy choices and relationships
 - Protection and response to violence

IMPLEMENTATION GUIDE

- Program model and theory of change
- Advocacy and collaboration with other sectors and services
- Guidance and tools for participatory assessment, design, implementation, and transition
- Monitoring and evaluation

TRAINING AND CAPACITY BUILDING

- 3-day core facilitator training
- 1-day facilitator training on caregiver content
- 1-day facilitator training on adolescent sexual and reproductive health
- Recommended further training (e.g. staff care and psychological first aid)

4. **DO:** Show the list of session titles for the SAFE Curriculum for Female and Male Caregivers on flipchart paper and read through the list for anyone who cannot read.
 - **Session 1:** Welcome to SAFE
 - **Session 2:** Understanding and Managing Stress
 - **Session 3:** Developing Healthy Relationships with Our Adolescents
 - **Session 4:** Adolescent Development and Puberty
 - **Session 5:** Adolescent Sexual and Reproductive Health
 - **Session 6:** Guiding Healthy Choices
 - **Session 7:** Supporting Our Adolescents to Cope with Challenges and Stress
 - **Session 8:** Promoting Safety for Adolescent Girls and Boys
 - **Closing**
5. **DO:** Divide the participants into 4 groups and assign 2 of the sessions from the list to each group, so that all 8 session titles are being discussed.
6. **ASK:** Based on the name of each session:
 - What do you think these sessions are about?
 - Why do you think these topics are important for caregivers of adolescents during a crisis?
7. **DO:** Allow 4-5 minutes for discussion and then ask each group to share their feedback. Encourage other groups to contribute if they have more ideas.
8. **ASK:**
 - Which topics do you think will be the most challenging to facilitate with your groups of caregivers? Why?
 - Will these challenges be different for female and male caregivers? Why?

TRAINER NOTES:

- Encourage participants in all discussions to think about the different ways in which female and male caregivers may respond to the session topics, so they are prepared for any resistance or confusion.
- It may be that some topics in the Curriculum for Female and Male Caregivers are quite new to the caregivers themselves. For example, they may not have much information about sexual and reproductive health and hygiene themselves, or they may never have discussed their emotions or how they manage their own stress.
- In some contexts, male caregivers may believe it is not their role—and instead the role of female caregivers—to discuss certain topics, such as puberty, with their adolescent girls and boys. Explain the importance of providing the same information to both female and male caregivers, and facilitate a discussion on the limitations of these gender roles.

Part Two: Delivering the Sessions (10 minutes)

1. **EXPLAIN:**
 - The female and male caregiver sessions should be delivered in parallel with the sessions being offered to adolescent girls and boys.
 - Each topic should be delivered to caregivers **BEFORE** the adolescents are introduced to the topic. This is especially important for the more sensitive topics, such as relationships, puberty, sexual and reproductive health, and safety.
2. **ASK:** Why do you think it is important to deliver each topic to caregivers before the adolescents are introduced to it?
If not mentioned, share this point: to ensure that caregivers are able to provide a supportive environment to their adolescent girls and boys once they start being introduced to new concepts.
3. **EXPLAIN:**³ Based on lessons learned in many different countries, the sessions have been designed to be delivered separately for female and male caregivers, with the option of bringing caregivers together for a final closing meeting if the women consent and believe it will be beneficial.

Part Three: Co-Facilitation Approach⁴ (10-15 minutes)

1. EXPLAIN:

- Using the same approach as the SAFE Curricula for Adolescent Girls and Boys, the SAFE Curriculum for Female and Male Caregivers should be delivered by two facilitators per group.
- Sessions for female caregivers should be carried out by female facilitators, and sessions for male caregivers should be carried out by male facilitators.
- If you decide to have any sessions or meetings with females and males together, these should ideally include one facilitator from each group, ensuring both have an equal role and voice in the facilitation of the session.

2. ASK: Just to check what you remember from your Core Facilitator Training, what are some of the benefits of co-facilitation?

If not mentioned, share these examples: allows for a shared workload; ensures there is a support structure to handle challenging situations; provides an opportunity to demonstrate positive communication skills to participants.

3. EXPLAIN:

- It is important that there are regular coordination discussions between female and male facilitators and their supervisors to ensure that key information is being captured and used in a safe and appropriate manner.
- For example, concerns raised about issues facing adolescent girls or boys, feedback on SAFE content, or challenges faced in engaging or retaining caregivers.
- Your weekly SAFE team meetings offer a dedicated time for these discussions, which should be carefully documented to track follow up.

4. ASK: Which SAFE Principle do we need to adhere to when sharing feedback and learning from the adolescent and caregiver sessions with our colleagues?

If not mentioned, note: Do no harm.

5. EXPLAIN: Confidentiality is very important. We should not discuss individual cases or specific personal information relating to individual women, girls, men, or boys in the SAFE weekly meetings, with the participants in our SAFE sessions, or with members of the community. Such conversations should only happen privately with trained caseworkers if you are concerned about the risk of harm.

KEY MESSAGES:

- *In your role as a SAFE facilitator in the caregiver sessions, **you will lead discussions on sensitive issues** such as gender, violence, sexual health, and reflection on their own parenting skills.*
- *We encourage you to think about your own attitudes during this training. You have been selected as part of the SAFE team **because you demonstrate the adolescent-friendly and nonjudgmental attitudes needed to deliver this content.***
- *If you feel that you do not agree with aspects of SAFE, or if you think your own beliefs or values will affect your work on SAFE, you are welcome to approach us at any time and speak privately about your concerns.*

Activity 3.2: The SAFE Curriculum for Female and Male Caregivers (45 minutes)

Part One: Introducing the SAFE Curriculum for Female and Male Caregivers Session Plan (15 minutes)

1. EXPLAIN:

- All 8 sessions for female and male caregivers follow the same structure, which is very similar to the SAFE Curricula for Adolescent Girls and Boys sessions plans. The structure is the same for all of the sessions to help you feel familiar and confident with the materials.
- Each session plan starts with a summary box providing you with key information about the session. This is followed by step-by-step instructions.

- Most sessions last for 2 hours, including a 10-15-minute break, which can be taken during or at the end of the session. There are a few sessions that are expected to last a bit longer, closer to 2 hours 30 minutes. The suggested length of each activity is included in the session plans.
 - If possible, refreshments should be provided for the participants.
2. **DO:** Refer to the list of the main sections of a SAFE caregiver session plan written on the flipchart –

1	Welcome and Review	5-10 minutes
2	Introduce the Topic	5-10 minutes
3	Activities	70-80 minutes
4	Closing	5 minutes
5	Take-Home Message and Evaluation	5-10 minutes

3. **DO:** Briefly summarize the purpose of each section using the information below –

SECTION	PURPOSE
Welcome and Review	• This is an opportunity to review any questions arising from the previous session or related to any new skills practiced. • It is also an opportunity to provide an overview of the current session. • A small ice breaker or energizer should be included if suitable.
Introduce the Topic	• To introduce participants to the basic concepts or ideas in the session.
Activities	• Activities give caregivers the opportunity to explore the session information in more depth through skills practice or deeper discussion. • This section may require more than the suggested time depending on the topic.
Closing	• The closing activity is an opportunity for caregivers to ask anything they still have questions about, as well as to participate in a bonding activity of their choice.
Take-Home Message and Evaluation	• To reiterate the key message and encourage caregivers to practice new skills at home.

4. **ASK:**
- Thinking about the caregivers you will be working with in your community, do you think that playing games and energizers will be appropriate?
 - If not, what other activities could you use to help the group relax, feel more comfortable and connected with each other, or to become focused?
- If not mentioned, share these examples: singing, dancing, stretching, simple body movement exercises, or a fun question or prompt for everyone in the group to answer.*
5. **EXPLAIN:** For some adults, a physical game or energizer might work very well, but for others it might be uncomfortable, due to age, cultural norms, or comfort levels.
6. **SAY:** Your role as a facilitator is to understand the needs and abilities of your groups and to adapt to what works best for them. Remember, if you are not sure, ask them!

Part Two: Exploring a Session Plan (30 minutes)

1. **DO:** Hand out a copy of the SAFE Curriculum for Female and Male Caregivers to all facilitators, with a folder for them to keep it in.
2. **EXPLAIN:** There is one curriculum which can be used with both female and male caregivers. You will notice that there are notes to help guide you when adaptations are needed for either female or male participants.
3. **DO:** Ask everyone to turn to the first page of Session 1.
4. **EXPLAIN:** The Session Summary at the top includes the following information:
 - **Learning outcomes**
 - **Duration of the session**
 - **Resources required for the session**
 - **What to do to prepare in advance**
5. **EXPLAIN:** As with the SAFE Curricula for Adolescent Girls and Boys, the summary section at the top is just for you and your co-facilitator – you should not read it aloud to the caregivers.
6. **DO:**
 - Read through each activity and take the time to demonstrate parts of it if needed. For example, run the ice breaker so the group gets to experience it and has a chance to move around.
 - Highlight examples of the instructional language, which are the same in the Adolescent Curricula – “Do,” “Say,” “Explain,” “Ask,” and “Facilitator Notes.”
 - At each section, ask the group to identify it on the session plan overview on the wall from the last activity, to be sure they understand the structure of the session.
 - Highlight the suggestions for adaptations for female or male caregivers.
 - Allow time for questions after each section of the session plan.

SESSION 4

Facilitating Sessions with Caregivers

SESSION SUMMARY

LEARNING OUTCOMES	By the end of the session, participants will: ☐ Know the importance of understanding your target audience when delivering sessions ☐ Become familiar with techniques for facilitating sessions with adults ☐ Understand the steps to take in response to a disclosure of violence in a group
TIMING	
DURATION	2 hours
RESOURCES REQUIRED	☐ Flipchart and colored markers ☐ 1 copy per participant of <i>Handout 1: Guidance for Facilitating Sessions for Caregivers</i> ☐ 1 copy for every 2-3 participants of <i>Handout 2: Common Resistance Responses</i> and <i>Handout 3: Steps to Challenging Harm</i> ☐ Contextualized referral pathway/Standard Operating Procedure, 1 copy per participant ☐ Up-to-date service map of available services per location for female and male caregivers, and adolescent girls and boys – 1 copy per participant

Part One: Adapting Our Approaches for Adults (10 minutes)

1. **DO:** Ask for a volunteer to lead a welcome activity or ice breaker that they think would be suitable to run with female or male caregivers. The goal is to get the group energized and alert.
If not mentioned, share these examples: a game, a song, a dance, or a body movement exercise.
2. **ASK:** What do you need to consider when choosing an ice breaker or energizer for the caregivers?
If not mentioned, share these examples: age, cultural norms, space, comfort levels, etc.
3. **ASK:** Would there be differences for female and male caregivers? If yes, what are they?
4. **EXPLAIN:** Remember that you do not have to have all the answers! You are welcome to ask the caregivers for suggestions as it encourages a collaborative approach.

Part Two: Communicating with Caregivers about SAFE (30 minutes)

1. **EXPLAIN:** In your role as SAFE team members, let's think about how to introduce some key topics to female and male caregivers.
2. **DO:** Divide the group into 4 small groups (*each with a mix of men and women, assistants, and community facilitators*). Assign a different target audience and task to each group –
 - **Group 1:** You must explain to **female caregivers** what the SAFE program is and why they should enroll in the caregiver sessions
 - **Group 2:** You must explain to **male caregivers** what the SAFE program is and why they should enroll in the caregiver sessions
 - **Group 3:** You must explain to **female caregivers** what the SAFE program is and why their adolescent girls and boys should enroll in the adolescent sessions
 - **Group 4:** You must explain to **male caregivers** what the SAFE program is and why their adolescent girls and boys should enroll in the adolescent sessions
3. **DO:**
 - Give the groups 5 minutes to discuss and prepare what their presenter(s) will say. Remind them to think about who their target group is. Ask each group to choose 1 or 2 volunteers who will present for their group.
 - Ask each group to present to the larger group by role playing as a group of female or male caregivers. Let each group present before doing a debrief.
4. **ASK:** Ask the group the following questions, reminding them that they should be thinking from the perspective of a female or male caregiver. Spend 1-2 minutes on each question –
 - What did you notice about the communication techniques used?
 - In what ways were they suitable for female and male caregivers?
 - What would have made it clearer or more engaging?
 - What questions do you think the caregivers would have had after hearing it?

KEY MESSAGES:

- *When preparing to meet with caregivers, make sure you have thought in advance about what they would want and need to know.*
- *Make sure you have a good understanding of the SAFE program and why it is relevant for them and their adolescents.*
- *Do not use jargon or unfamiliar language. Be clear and straightforward.*
- *Always allow time for questions.*

Part Three: Facilitation Techniques (15 minutes)

1. **EXPLAIN:** Many of the core facilitation skills that you learned during the Core Facilitator Training are relevant for delivering the SAFE Curriculum for Female and Male Caregivers. But there are some specific points to remember when you are facilitating with adults.
2. **DO:**
 - Divide the participants into groups of 3 and ask: How might facilitation with adults be different from the way you would facilitate with a group of adolescents?
 - Give the group 3-4 minutes to discuss and then take some ideas from each group.
 - Distribute *Handout 1: Guidance for Facilitating Sessions for Caregivers*, which contains some suggestions for facilitating caregiver sessions.
3. **EXPLAIN:** We will read through these tips together now and we encourage you to keep the handout in your folders in case you need a reminder.

Part Four: Practical Scenarios (50 minutes)

TRAINER NOTES:

- This activity can be done with the whole group, but if so, it is important to ensure that you take suggestions from a range of different people, and that you sensitively encourage quieter members of the group to contribute.
- If you are concerned that not everyone will feel confident to contribute, you can divide the participants into groups of 3 to discuss the scenarios first, then ask for feedback from each group after a few minutes.

1. **SAY:** Let's take a moment to think about a few scenarios that might happen in your sessions and plan some responses.
2. **DO:** Ask for a couple of ideas from different people for each scenario, and share the suggestions if not mentioned:

Scenario 1: A male caregiver says that he has more important things to do and doesn't have time for the SAFE sessions.

If not mentioned, share these points: Remind the participant of the benefits of SAFE for him and his adolescents; suggest a private conversation after the session to listen to his concerns; ask for suggestions of what would make SAFE more relevant to him.

Scenario 2: A female caregiver asks to know what her adolescent has been saying during the adolescent sessions.

If not mentioned, share these points: Remind the participant of the Group Agreements and the importance of confidentiality, which is the same in the adolescent sessions; encourage them to use effective communication skills, such as empathy and showing interest, which can help an adolescent to open up and feel that they are being listened to.

3. **SAY:** Now for the next two scenarios, we are going to remind ourselves of how to respond to disclosures of violence within a group setting.

TRAINER NOTES: The responses to the following scenarios may depend on the program's organization or structure, as well as on applicable child safeguarding and mandatory reporting laws in the country of implementation. **Ensure that facilitators have guidance on when and how they should raise issues with their supervisors.**

Scenario 3: A female caregiver discloses an experience of violence during one of the sessions.

If not mentioned, share these points:

- Acknowledge the disclosure by thanking the individual for sharing.
- Remind everyone of the Group Agreements, confidentiality and that this is a safe space.
- Redirect the comment from specific to general and say – “If women experience a similar issue, they can benefit from talking to a caseworker. Any woman can approach me after the session for more information.”
- Sensitively determine if the individual would like to leave the session to take some time out and/or talk with one of the facilitators.

After the session:

- Follow up with the caregiver; inform her of the option to access case management and explain to her the role of the caseworker.
- Talk to a supervisor if you need support; do not break confidentiality.

Scenario 4: A caregiver discloses that they are doing something harmful towards their adolescent during a session – for example, using physical punishments or forcing a child to work in a dangerous situation.

If not mentioned, share these points:

- Acknowledge the disclosure by thanking the individual for sharing.
- Remind the group of the Group Agreements and confidentiality.
- Redirect the comment away from the specific disclosure to a more general statement that sensitively challenges the type of behavior/comment/attitude and reiterates that it is harmful to women, girls, boys or adolescents generally.
- Remind caregivers that they can confidentially speak with facilitators and caseworkers for support in handling difficult situations with their adolescents.

After the session:

- Follow up with the individual at the end of the session.
- Talk to a supervisor if you need support; do not break confidentiality.

4. **EXPLAIN:** We encourage you to prepare yourself for potential challenges by discussing them with your co-facilitator before your sessions. By doing this, you can plan together how you will respond. This will help you to feel more prepared for your sessions. You can also bring challenges to the weekly meeting to get the support of your colleagues or supervisor, ensuring that you do not break confidentiality when describing the issue.
5. **ASK:** Participating in a program like this can create both positive and negative changes in a household or relationship, and could increase the risk of harm for women. How can we be aware of unintended negative consequences on women, such as men becoming more controlling over child care or blaming women as bad parents using information they have learned during SAFE? What can we do if we become aware of harmful behaviors?

If not mentioned, share these points:

- Regularly check in with female caregivers to ensure positive changes are occurring in the household; create the space for them to share any unintended negative consequences.
- Where harm is occurring, discuss risk mitigation actions with the women and address this behavior in the men's groups. This should be raised as part of the weekly SAFE team meetings.

6. **EXPLAIN:** We will now take some time to review two practical handouts. Break participants into small groups of 3 and start by giving them *Handout 2: Common Resistance Responses*.

TRAINER NOTE: Ensure that each group has at least one member with higher literacy to be able to read the handout and explain it to others.

7. **SAY:** Take a few minutes to read over this handout. Discuss in your groups anything that you find interesting or surprising. Then discuss how this information could be useful to you in your roles as facilitators.
8. **DO:**
- After 5 minutes, ask for a volunteer from each group to share one example they discussed about how this information could be useful to them as facilitators.
If not mentioned, share these examples: helps facilitators understand the many ways people may resist discussions about violence; allows facilitators to notice if this type of resistance is happening in their female and male caregiver groups.
 - Distribute copies of *Handout 3: Steps to Challenging Harm* to the small groups.
9. **SAY:** We will now have a look at a related handout. This resource provides 5 steps and practical language to challenge harmful behaviors and attitudes in the group.
10. **DO:** Assign half of the room to read over Steps 1, 2 and 3; assign the other half of the room to read Steps 4 and 5. After 5 minutes, ask for a volunteer to briefly present Step 1, another volunteer to summarize Step 2, and so on until all steps are presented. Check for any questions or concerns before moving on.
11. **SAY:** It can be difficult for new for facilitators to challenge harmful attitudes or behaviors, but it is very important, and with practice you will become more comfortable doing it. These two handouts are also included in the SAFE Curriculum for Female and Male Caregivers for easy reference.

Part Five: Service Mapping and Referrals (15 minutes)

1. **EXPLAIN:**
- Throughout the SAFE sessions, caregivers in both the female and male groups will be discussing and exploring sensitive issues. It is likely that issues related to safety will arise – for example, caregivers either committing violence or reporting violence used against them.
 - The SAFE Principle of “Do no harm” is critical here, as the safety of the caregivers and their adolescent girls and boys is our priority.
2. **ASK:** We introduced the topic of distress and the different forms of violence in the SAFE Core Facilitator Training. How are facilitators supposed to respond to disclosures of child protection and GBV risks in the groups with adolescent girls and boys?
If not mentioned: The role of facilitators is to ensure that after a disclosure occurs, the situation is handled in a way that does not cause further harm. Their role is to provide information to adolescents about the services that are available; if an adolescent expresses interest, facilitators must inform them that a supervisor/caseworker will follow up with them and help to make the referral. Facilitators must immediately inform supervisors of any such requests or other difficult situations.
3. **EXPLAIN:**
- When delivering the SAFE Curriculum for Female and Male Caregivers, facilitators have the same role and responsibility. This means handling disclosures in groups in a way that does not draw negative attention to the person who made the disclosure, in line with the steps we practiced in the previous activity.
 - It also means giving information to female and male caregivers about services that are available to them and their children and asking if they would like us to connect them with a supervisor or caseworker who can support the referral process. In most cases, this will be a referral for child protection or GBV case management.
4. **ASK:** What are some other services that caregivers may need a referral for?
If not mentioned: medical treatment for physical conditions or illnesses; basic needs support including health care/pre-natal care; cash assistance; etc.

5. DO:

- Ensure that every facilitator understands their role and that of supervisors/caseworkers in making a referral in SAFE, and hand out a guidance document for referral pathways if there is one. Take the time to explain the steps slowly and clearly.
- Share the list of available services in each location that facilitators can use to inform female and male caregivers, or adolescent girls and boys. Identify if there are any key gaps in services and highlight sexual violence services, if available. Before moving on, check for understanding of the available services and any concerns.

KEY MESSAGES:⁶

- You must maintain **confidentiality** and treat all concerns with **sensitivity**.
- Facilitators must follow the agreed-upon confidential reporting and referral procedures, and **take action to raise the situation or concern with a supervisor**.
- Facilitators should not act as caseworkers, as they may not have case management expertise. Even if a facilitator is a caseworker, case work may conflict with their facilitation role.
- Facilitators will receive ongoing support from supervisors to know how to deal with disclosures **where female or male caregivers or adolescent girls or boys may be at imminent risk of harm**.

SESSION 5

Practice

SESSION SUMMARY

LEARNING OUTCOMES	By the end of this session, participants will: ☐ Have had the opportunity to review the SAFE Curriculum for Female and Male Caregivers session plans in detail and practice some of the activities ☐ Have been able to identify further support needs in relation to this curriculum
TIMING	
DURATION	1 hour
RESOURCES REQUIRED	☐ Flipchart and colored markers

TRAINER NOTES:

- This 1-hour slot is flexible for you to decide what would be most beneficial for your facilitators to feel ready to deliver this curriculum.
- They might like to spend the time reading through the session plans, discussing them with each other and asking questions. Or they might prefer to work in small groups and select an activity to practice that they think might be challenging or that they feel less confident in.
 - “Session 3: Developing Healthy Relationships with Our Adolescents” includes the topic of empathy – which may be a new topic to some – and could be particularly useful to review and/or practice during this session.
- Whichever format is decided upon, ensure that you are present to support and guide participants throughout the session and to answer questions.
- Be aware that participants may request further time to review and practice the sessions and activities.

1. **DO:** Remind participants that there will be a required training (SAFE Facilitator Training – Adolescent Sexual and Reproductive Health) that will also help them facilitate Sessions 4 and 5 with caregivers. Share practical information such as the date and location of that training.

Closing (15 minutes)

1. **DO:** Refer back to the “Parking Lot” of questions to see if any remain unanswered and either discuss as a group or explain that you will follow up and get back to them with guidance.
2. **ASK:** Ask everyone to stand in a circle and go around one by one, asking everyone to respond to the following –
 - Name one thing you learned today
 - Name one thing you would like to know more about (if anything!)

TRAINER NOTES:

- Remind participants to keep their answers brief to ensure there is time for everyone to speak.
- One trainer should lead the evaluation and the other should write down the answers. This information should be shared with the manager or supervisor of the SAFE team in order to inform ongoing support and further capacity building.

HANDOUTS

Handout 1: Guidance for Facilitating Sessions for Caregivers⁷

- ☐ **Be aware of the gender and ages in the group** – Remember that you are working with adults, rather than children, in these sessions.
 - You must also be aware of the educational and literacy levels of the caregivers. Use familiar, clear words, and examples.
 - As with the SAFE Curricula for Adolescent Girls and Boys, do not use a lot of written materials, flipcharts, and handouts if some of the participants are illiterate or are not confident with reading and writing.
- ☐ **Avoid lecturing or preaching** – Respect the knowledge and experience of caregivers and do not share your opinion.
- ☐ **Build tolerance and patience for caregivers' views** but *always* challenge individual behaviors/comments/attitudes that are harmful to women, girls, or adolescents generally. Be sure to offer alternative viewpoints in line with the SAFE Principles.
- ☐ **Be respectful** – Do not become angry towards, insult, or disrespect any of the caregivers or community members.
- ☐ **Be patient and supportive** – Make sure caregivers are given the time and space to work through any difficult feelings. Offer them support and the opportunity to speak further privately.
- ☐ **Use discussions** – Encourage caregivers to generate ideas in collaboration with you and each other through group discussions, rather than telling them what will work for them.
 - Foster an interactive environment during sessions by asking caregivers questions that encourage them to repeat key points in their own words.
 - Prevent any one person from dominating discussions or intimidating others.
- ☐ **Practice skills through role play** – Drawing on strong evidence suggesting the effectiveness of role playing in parenting programs, caregivers participating in the SAFE curriculum will learn several new skills and practice them through role play.
- ☐ **Encourage peer learning** – Allow caregivers to learn from each other through group work, working in pairs, open discussions, debriefs, and peer feedback. In addition to promoting group unity and open communication, this allows caregivers to learn from each other's advice, experience, and questions.
- ☐ **Use both action and reflection** – Create opportunities for caregivers to practice applying new skills and concepts for themselves, and to reflect on their experiences.

Handout 2: Common Resistance Responses⁸

Common Resistance Responses: Definitions and Examples

Below are examples of common responses you may get from participants reflecting their resistance or disagreement with the information presented in SAFE. These are called “common resistance responses” and facilitators should be prepared to identify them (within themselves and others) and respond to them throughout the program.

1. **Denial:** Asserting that something is not true or not a problem: “That is not an issue.” “Violence is a normal part of any relationship and community – stop making an issue of it.” “I do not know where she got the bruises on her face, she must have fallen.” “There is no problem here – nothing happened.”
2. **Minimizing:** Making something smaller or less serious than it is: “I don’t know why girls and boys make this such a big deal.” “We were hit when we were growing up – it’s a normal part of discipline.” “It was only a slap.” Joking about violence against adolescent girls and boys, and women is a minimizing response as well.
3. **Justification:** Stating that something is right or reasonable: “The bible requires girls and women to serve men, this is natural.” “She deserved it.” “Children need to listen to and obey their elders. They don’t know what is good for them.”
4. **Victim Blaming:** Stating or implying that the adolescent girl or boy is at fault for the violence that she/he experienced: “Well if he had listened to his father, this wouldn’t have happened.” “She asked for it by her behavior.” “He provoked me, I had no choice.”
5. **Comparing Victimhood:** Changing the focus of the discussion or situation by stating that another group also experiences the same problem: “Men experience violence too.” “Women can be abusive to men, too.” “Boys are affected by violence even more than girls.”
6. **Remaining Silent:** Choosing to keep quiet or not speak up in the face of an injustice or problematic act. Not speaking up when violence or disrespect occurs, ignoring something, or pretending you didn’t notice. It can be hard to speak up when violence is something that has become accepted in our communities, and in some cases, it may not always be safe to speak up (e.g., if you fear for your safety in the presence of the perpetrator). However, the more we keep silent, the more we allow the violence to continue.
7. **Reinforcing Norms:** Engaging in behaviors that support power inequality and harmful beliefs and attitudes. Restricting women’s work in the community to address violence against adolescent girls and women. Adults talking about the importance of child participation in the community, while not actually engaging children in a meaningful way. Perpetuating violence and/or discrimination.
8. **Colluding:** Participants supporting harmful beliefs and attitudes of other participants. Agreeing with any of the above responses verbally or by not speaking up. Believing or supporting excuses and justifications for violence. Laughing at harmful attitudes and beliefs that other participants express.

Common resistance reactions:

- Are learned. They are taught by our society in order to reinforce traditional and harmful norms.
- Prevent men from having to take responsibility for their or other men’s actions.
- Allow for women to distance themselves from victims of violence.
- Involve minimizing, denial, and justification.
- Are not right and perpetuate violence and harm against adolescent girls and boys, and women – and **are essential for SAFE facilitators to address.**

Handout 3: Steps to Challenging Harm⁹

This tool is intended to support the facilitators of the SAFE Curriculum for Female and Male Caregivers in responding to challenging moments that may arise while delivering the curriculum. Specifically, this tool provides steps for how to address harmful or offensive comments or behaviors that may be expressed by SAFE participants during the sessions.

Addressing these moments allows facilitators to model accountability and provides participants with opportunities to learn and change. It is essential that facilitators challenge harmful situations and engage with participants in order to identify alternative ways of thinking and behaving.

After a harmful attitude, belief, or behavior is exposed, follow the steps below.

STEP 1:

- **DO:** Ask for clarification to understand why they have that opinion.
- **DO:** Summarize and repeat back the statement or comment.
- **DO:** Identify to yourself which of the Common Resistance Responses is being expressed by the harmful statement or action.
- **SAY:** “Thank you for sharing your opinion with us. Can you tell us why you feel that way?” and/or “So it sounds like you are saying...is that correct?”

STEP 2:

- **DO:** Seek an alternative opinion by involving others.
- **DO:** Send the question back to the group using an open method. For example: “What do the rest of you think of that phrase (or this attitude)?” or “To me that sentence sounds like the victim is being blamed. What do the rest of you think?”

STEP 3:

- **DO:** If nobody offers an alternative opinion, provide one. “I know that a lot of people would never agree with that statement. Many of the men and women I know feel that the rapist is the only person to blame for a rape, and that we all have a responsibility to respect other people’s right to say ‘no’ to sexual activity.” OR “I know that a lot of people would not agree with that statement. Many of the men and women I know feel that children learn better if they are provided with positive discipline, than if they are beaten, and if their negative behavior is discussed together to understand why it is wrong.”

STEP 4:

- **DO:** Remember the SAFE Principles of gender equality and non-discrimination!
- **DO:** When a harmful comment is expressed, use it as an opportunity to reinforce the SAFE Principles.
- For example, say: “How do you think this idea came about?” “Who taught us these ideas?” “How does this idea relate to what we are taught about being a man and what we have been taught about women?” “How does this idea reinforce the power and privilege of men or adults more broadly?” “Are these ideas harmful to the safety of women and girls?” “How do these ideas limit adolescent girls and boys from realizing their potential?”

STEP 5:

- **DO:** Offer facts that support a different point of view and emphasize a helpful perspective.
- **Remember:** Sometimes, there are laws that can support a position, but the law may not be recognized within the country or community. If you are going to reference a law, please ensure it is recognized in the community. "The law says that every person has the right to say 'no' to sex, and the rapist is the only person to be blamed. I agree with this and as a man, I think it is important that we respect a woman's choice to make her own decisions about sex. It does not matter what a woman wears or does. She has the right not to be raped." OR "The law says that corporal punishment of children is wrong and children should not be beaten to teach them lessons. I agree with this and as a woman/man (if they are caregivers themselves then they can say that), I think it is important that we respect our children and help them to make healthy choices themselves about their future."
- **Remember:** It is very unlikely that the participant will openly change their opinion, even after you use these five steps to address the statement. But by challenging the statement, you have provided an alternative point of view that the participant may consider and hopefully adopt later. You have also demonstrated accountability to adolescent girls, boys, and women and offered a different leadership model.

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