



HEALTHY RELATIONSHIPS, HEALTHY COMMUNITY CURRICULUM:

Incorporating mental health, social norms
and advocacy approaches to reduce
intimate partner abuse

Workshop manual designed to empower communities to
develop their own anti-IPA messaging campaigns in Lebanon

3-Day English Language Version, April 2018

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HEALTHY RELATIONSHIPS, HEALTHY COMMUNITY CURRICULUM:

Incorporating mental health, social norms and advocacy approaches to reduce intimate partner abuse

April 2018

Note: This version of the manual was initially developed for work with Syrian refugee community members in Bekaa Valley, Lebanon. It is informed by data collected through interviews and focus groups with community members, as well as ABAAD organizational data. However, the manual can be used with other communities as deemed appropriate. Instructions for adaptation to community are detailed in the introduction.

Acknowledgments

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Please feel free to use content from this curriculum manual as useful. We appreciate if you credit the source. Please see the suggested citation below:

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Foreword

As part of ABAAD's holistic approach to advancing gender equality, we are determined to eradicate Violence Against Women (VAW) by tackling its root causes and challenging gendered social norms that promote inequality and violence. That said, we consider both primary and secondary prevention as crucial in combatting Gender-Based Violence (GBV).

We have developed this manual, in collaboration with the University of Colorado, Boulder, to encourage the use of community participatory approaches as means to develop key messaging about social issues such as Intimate Partner Abuse (IPA), mental health and the factors that play a key role in shaping people's thinking, attitudes and behaviors. IPA is a significant problem in many communities in Lebanon and the Middle East and North Africa (MENA) region, yet literature addressing the issue remains scarce.

IPA has detrimental effects for the victim, perpetrator, children, and the community as a whole. It includes physical and sexual abuse but can also take on subtle forms, such as emotional abuse. In an unhealthy society, the latter often goes unnoticed and adversely affects the next generation. In order to break this vicious circle, it's important to accompany the young generation in their choices about relationships, as they will be contributing to future societies.

The Syrian conflict, which has led to major shifts in traditional gender roles for refugees in Lebanon, increased the risk of domestic violence. What's more, according to the GBV Information Management System, only one-third of survivors seek help. This manual is therefore designed not only to prevent IPA but also to increase help-seeking in refugee communities, to avoid dragging vulnerabilities triggered by conflict into personal choices, so causing "lifetime instabilities" at home.

The manual includes instructions and interactive activities designed to introduce the topic of IPA in a sensitive manner and arouse interest among participants. It incorporates mental health, social norms and advocacy approaches to empower communities and shift existing attitudes about the acceptability of IPA. Although initially developed for use with displaced and refugee communities, the Healthy relationships, healthy community curriculum: Incorporating mental health, social norms and advocacy approaches to reduce intimate partner abuse can be adapted to other groups as well.

We hope that shedding light on the causes of IPA will promote good communication in relationships, human rights, and equality, all of which can contribute to decreasing violence. ABAAD strives to maintain consistent focus on its core mission while developing innovative resources and tools, with the aim of supporting continuity and sustainability and collectively addressing community concerns.

Ghida Anani
Founder & Director
ABAAD

Intervention Objectives

1. Facilitate **development of community-designed messaging materials on intimate partner abuse**, with a specific focus on a) attitudes about acceptability of violence, and b) help-seeking intention/behavior;
2. Increase **knowledge/literacy** about intimate partner abuse, mental health, social norms and human rights;
3. Explore and/or shift existing **attitudes** about the acceptability of a) intimate partner abuse, and b) help-seeking behavior (by promoting 'pro-social' norms);
4. Contribute to improving **mental health, psychosocial well-being, and related coping skills**;
5. **Enhance social cohesion** and **perceived individual and collective efficacy** to address community concerns.

Best practices for use of this manual

This model utilizes a community-participatory approach. Within this model, community members are not only involved as intervention participants, but also as key informants for curriculum adaptation, as workshop facilitators, and as sources of feedback for evaluation of workshop effectiveness.

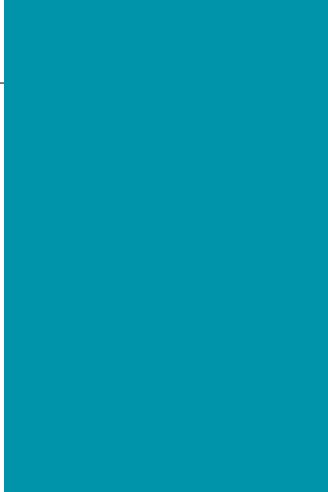
Target population. This intervention is designed to be implemented with a group of no more than 15 participants at a time, led by two co-facilitators devoted to delivering training content and managing group dynamics. It was initially developed for use with displaced and refugee communities but can be adapted to other groups as well. No screening criteria is required; the intervention can be applied to any willing adult. The manual can be used with both women and men adult community members. Some modifications in terms of content can be made depending on the participants' profiles; this is noted where applicable in the body of the manual. Consistent with recommendations in the ABAAD and DRC guidelines on engaging men against gender-based violence¹, interactive activities throughout this manual are designed to introduce content in a sensitive and indirect manner, so as to increase receptivity and minimize potential resistance.

Adaption to community. Considering the importance of community-specific factors, such as chronic stressors and social norms regarding gender roles and help-seeking behavior associated with IPA, we suggest that interventions should be tailored to the specific communities in which they are implemented, in order to increase relevance, applicability, and community buy-in.

To this end, ideally the intervention development and adaptation process should involve collection of initial baseline data to examine relevant phenomena, and ongoing involvement of community members to ensure fit of interventions to specific settings. We suggest a pre-workshop adaptation phase entailing data collection about community-specific practices, norms, beliefs in order to tailor the curriculum accordingly.

For example, although the current version of this manual has had some community specific content removed for generalizability reasons, it was originally developed to be used in a specific community in Bekaa Valley, Lebanon. Our pre-intervention data collection phase entailed focus group discussions (with community women, men, leaders and service providers) and individual interviews with 30 women and men community members. Some data collected during this phase are presented in Annex III, with additional data available upon request. As an additional step, once the tailored curriculum was developed, a committee of community members reviewed the manual and made recommendations for improvement, including use of culturally-relevant activities and strategies for discussing challenging concepts. Although it is not required to use this methodology, we do recommend eliciting community input as possible for adaptation purposes. Areas for use of community-specific content are noted in the curriculum body and examples of community-specific data are provided in Annex III.

¹ ABAAD, Danish Refugee Council. (2015) Practical Guidelines on Engaging Men against Gender-Based Violence for the Promotion of Gender Equality. Retrieved from <https://www.abaadmena.org/documents/ebook.1496120823.pdf>



Facilitator selection and training. The current manual was designed for facilitation by two paraprofessional community members. Facilitators (or one of the two co-facilitators) should ideally be members of the target community in order to increase buy-in and provide within-community (in-group) role models. It is not necessary that facilitators possess professional level training or experience, although ideally they should have experience in community leadership roles and skills relevant for leading discussion-based trainings.

This being said, facilitators must receive intensive training prior to implementation, including review and role-play of the manual, as well as general gender awareness and group facilitation skills related to building a safe group dynamic and encouraging exchange of peer support, addressing group resistance, conflict resolution, and managing emotional distress. Such training should also include opportunities to practice facilitation and receive feedback from community members during a pilot phase. We recommend daily monitoring of workshop implementation by supervisors to ensure fidelity, followed by debriefs with facilitators to provide feedback to aid in building skills.

Workshop evaluation. In order to assess the extent to which this intervention is meeting designated objectives and to inform improvements for future use, we recommend incorporating one or more of the following evaluation strategies: 1) the use of pre-post knowledge tests to assess shift in knowledge; 2) inclusion of daily or post-workshop evaluation forms to assess satisfaction, perceived utility, and recommendations for improvement; 3) group discussion at workshop closing to gather qualitative input from participants about training outcomes and suggestions for improvements. For example, in an initial trial of this manual, interviews were conducted with participants before and two weeks following intervention participants to assess change associated with participation. In brief, data indicated decreased beliefs in acceptability of IPA, increase in acceptability of help-seeking, and improved mental health (please contact authors for additional information, including tools used).

CURRICULUM

DAY 1

4 hours

Section 1: Welcome and Introductions

- » Welcoming Session
- » 1.1. Participant introductions
- » 1.2. Expectations
- » 1.3. Ground rules
- » 1.4. Power of the community/group activity

Section 2: Human Rights

- » 2.1. Defining human rights

Section 3: Mental health and well-being

- » 3.1. Introducing stress and coping: Tissue and marbles activity
- » 3.2. Mental health terminology
- » 3.3. Gender norms and expressing emotions

Section 4. Coping skills: Recognizing and calming tension

- » 4.1. Hot potato (becoming aware of stress reactions)
- » 4.2. Slow and deep breathing (calming stress reactions)

Section 5. IPA: Definition, consequences and causes

- » 5.1. Ana Ahlam film and discussion
- » 5.2. IPA in our community
- » 5.3. Outcomes of IPA
- » 5.4. Causes of IPA

Section 6. Wrap-up

- » 6.1. Day 1 Wrap-up

Section 1

WELCOMING SESSION

(1 hour)



Materials:

Name tags for facilitators; workshop schedule written on flipchart or whiteboard



Duration:

15 minutes



Objective:

To introduce the workshop, describe its origins, and the process by which it was adapted to this particular community.



INSTRUCTIONS:

1. **Welcome participants** as they arrive. Review verbal consent for workshop participation (if available). Invite participants to sit in a circle.
2. Once all have arrived, **introduce yourself**: Share your full name, your organizational affiliation, your role as a community member, and a bit about your experience working in similar projects; ask participants if they have any questions for you.
3. **Introduce the workshop**: *Welcome to this interactive training designed to give you the resources you need to support your community in promoting healthy relationships and wellbeing. We're happy that you have chosen to participate. We hope that you will learn tools that will benefit you, your family, and your community over the next 3 days. We will be meeting from x time to x time each day. We look forward to hearing from you throughout this training. You are experts on your own experiences and those of your community. We hope you will feel comfortable sharing your honest opinions as we work together to create campaign materials (e.g. posters) that can actually be used in your communities.*
4. **Describe the process of adapting the workshop to the community**: *It is important to understand that this workshop is tailored to your community. Throughout the next 3 days we will be sharing feedback that we received from your community which was collected by speaking with people one on one and one and in groups. Here, describe any previous work that supported the contextualization of the training (refer to Annex 3.1, detailing the process for baseline data collection implementation). Invite participants to ask questions about the development of the workshop.*
5. **Optional: Pre-workshop knowledge survey**: If you wish to use a pre- and post- workshop knowledge survey to assess participant learning, administer pre-survey now, with the following explanation:
We will be disseminating a pre-survey now and we will be disseminating a post-survey at the end of the last day of the training. The survey will remain confidential, and its results are used to assess the effectiveness of the training curriculum and facilitators in conveying information with you. This is not an assessment of your personal knowledge and/or abilities and we do not expect that you know the answers to all (or any!) of these questions today. Please feel comfortable answering however you would like. Please try to complete this on your own, and ask us questions if anything is unclear.

Depending on the education level of the participants, it may be necessary to read the survey questions aloud to participants. Facilitators should be proactive in checking in with participants to determine need for assistance; some participants may not feel comfortable readily admitting to being unable to read or having difficulties understanding.



Tips for facilitators:

For participants to be aware of each day's content, and the overall flow of the 3-day workshop, consider putting poster board up throughout the 3 days and/or at the start of each day highlighting the day's content.

Exercise 1.1: Participant introductions

Materials: Ball of yarn

Duration: 15 minutes

Objective: Participant introductions are designed to put everyone at ease and allow the group to begin to get to know one another. The yarn is used to emphasize connections between participants and to set a foundation for a supportive group environment.

Instructions:

1. Facilitators and participants stand in a circle.
2. Facilitators start the exercise with their own introduction as an example to the group. The introduction should include one or more of the following: 1. their name, 2. Something that they like/dislike (and why) (e.g., I like the rain because...), 3. a personal characteristic (e.g., I'm funny).
3. After the facilitator completes her/his own introduction, hold the end of the yarn and throw the ball of yarn to the next participant to continue introductions.
4. After each participant introduces her/himself, she/he holds the string while tossing the ball of yarn to another group member.
5. When all have introduced themselves, ask participants: *What do you think when you see this "web" of yarn connecting our group?*



Key message:

The web of yarn symbolizes that we are all connected - in general as community members, and more specifically, by supporting each other during this workshop over the next 3 days.

Exercise 1.2: Participant Expectations

Materials: Newsprint or whiteboard and markers

Duration: 10 minutes

Objectives: To understand participant expectations and to clarify objectives of the training so that participants are clear about what they will and will not receive and contribute throughout the workshop.

Instructions:

Ask participants:

1. What do you expect to gain from this workshop?
2. List all expectations shared by participants on the board
3. Clarify which expectations will be met in this workshop (e.g., learning about conflict in families, learning mental health coping skills, learning about human rights, helping the community) and **which will not** (e.g., getting jobs, getting money, UNHCR contacts, etc.).
4. Suggest the use of a "parking lot": a piece of newsprint used to list relevant topics to the training that are not directly covered in curriculum. Explain to participants that if time permits at the end of each day, one or more items from the list can be addressed.
5. Share the major objectives of the training (making links with participant expectations as possible):

- Sharing information and learning skills about mental health and coping with stress
- Sharing information about healthy relationships (and decreasing abuse in relationships)
- Increasing social support and connectedness in the community – making friends
- Making posters to improve relationships in the community.



Key message:

This workshop is dedicated to achieving these four objectives and will not be able to meet other participants' needs. However, facilitators can make referrals for other kinds of services not provided in this workshop.

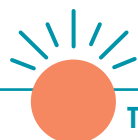
Exercise 1.3: Setting ground rules

Materials: Newsprint or whiteboard and markers **Duration:** 15 minutes

Objectives: Setting rules jointly with the group in order to create a safe, respectful, supportive environment in which participants are comfortable discussing difficult topics and sharing personal information (including by ensuring that content shared is kept confidential). Setting rules can also help topics to be covered in a time-efficient, comprehensive manner by encouraging participants to arrive on time and stay on topic and discouraging certain participants from dominating the discussion and others from remaining silent.

Instructions:

1. **Explain purpose of rule-setting:** *In this workshop, we will be talking about difficult topics, such as relationship conflict, stress and well-being, and it is important that everyone feels safe and respected when sharing with the group. Let's identify ground rules for the next three days to make this workshop as comfortable and productive as possible.*
2. **Ask participants to brainstorm ground rules for the training.** Write rules on newsprint as they are shared and fill in additional rules described below as needed.
3. **Rules should be hung in the group room** and referred to as needed throughout the workshop.



Tips for facilitators:

It is important that participants (NOT facilitators) take the lead in determining the rules to encourage participant commitment to following the rules. However, the following key rules should be discussed. If participants do not suggest these rules, facilitators should help to bring them up (e.g., inform the group that these are rules that previous groups identified as useful).

The primary rule is **RESPECT**. This can include:

- **Respect for others' time**
 - As much as possible, attend all parts of the training and arrive on time
 - Clarify start and end times (e.g., we will start at 9am and end at 1pm, for three days – do all agree?)
 - Clarify break times (e.g., we will take brief breaks at 10:30am and 12pm – do all agree?)
 - Don't answer phone calls in the group (unless there is a concern about a potential emergency).
 - Try to stay on topic to make good use of our limited time.
- **Respect for others' participation** (including those with different opinions, beliefs, religions, etc.)
 - Avoid criticism or putting others down BUT it is okay to disagree respectfully. *What are some examples of ways to express different opinions in respectful ways?*
 - Be an active listener; avoid interrupting.
 - Allow time for all to speak (e.g., equal time for younger and older, more quiet people).



Tips for facilitators (cont.) :

- **Respect for confidentiality:** In this group, we want everyone to feel safe sharing how he or she is feeling. No one should repeat private information shared in the group to anyone outside of the group (share example of times confidentiality was broken and the implications - such as the group member did not return or shut down/stopped talking). In addition, it is important not to share names or personal details of other community members when we talk in the group.
 - Some information can, and should, be shared outside of the group. For example, we hope participants will share general information and coping skills learned in the training. However, you should not tell others about personal stories or emotions shared by participants.
- Be honest with the facilitators about your reactions to the workshop – if you have a concern about something that was said in the group OR you especially like something, tell the facilitators during or after the session.



Key message:

Our group has worked together to develop a list of group rules designed to help us all to feel safe and respected during our time together, and to use our time as productively as possible. We will hang the rules on the wall so that we can refer to them during the next several days.

Exercise 1.4: Power of the community/group activity (Rock Exercise²)

Materials: Large rock(s) (one for whole group or one for each small group).

Duration: 10 minutes

Objectives: To demonstrate the power of group members to support one another, and by doing so, to further encourage a supportive group dynamic during the 3-day workshop.

Instructions:

1. Ask all participant to stand in a circle in the front of the room (or alternatively, to form small groups of approximately 5 participants, each arranged in a circle).
2. Place a large rock on the floor in the center of the circle.
3. Ask for a volunteer to try to lift the rock using only one finger.
4. When this person is unable to do so, ask for several other volunteers to try to lift the rock with only one finger.
5. Next, ask the WHOLE group to lift the rock together with each member using only one finger.

² Adapted from Center for Victims of Torture, Restoring Hope and Dignity: Manual for Group Counseling. <https://www.cvt.org/group-counseling-manual>



Exercise discussion:

After the group successfully lifts the rock (as a group), lead the group in a discussion about the significance of this activity. Ask the following questions and facilitate responses in line with those suggested below.

1. *What does this rock represent?*
 - Burdens, troubles, including displacement-related stressors/worries, etc.
2. *How did the person feel when they had to lift it alone?*
 - It was impossible, difficult, very heavy.
3. *How did the person feel when they had the group to help lift the rock?*
 - It was light, easy to carry.
4. *What does this suggest about the power of a community or group to address challenges or burdens?*
 - Collectively we can accomplish things that are impossible, or quite challenging, to achieve individually. As desired, link to proverb: "One hand cannot clap alone"



Key message:

- *This activity is designed to demonstrate the value and the power of the group in supporting each other to manage burdens, such as the stressors and problems in our lives. We can do this in small ways such as listening to and supporting each other in the group setting.*
- *During the next 3 days, we have the opportunity to work together as a group, to support each other in addressing relationship conflict and related challenges affecting our communities.*

Break 10 minutes

Section 2

HUMAN RIGHTS

(20 minutes)

Exercise 2.1: Defining human rights

Materials:

- Newsprint or whiteboard and markers.
- Picture cards demonstrating human rights (e.g., Food and water; Shelter; Safety/security; Health/freedom from pain; Education; Citizenship; Freedom of movement/ not imprisonment; Freedom of speech; Freedom of religion; Dignity and respect.

- Picture cards of “wants” (non-human rights) (cars, cell phones, fancy clothes, TV, etc.)
- Make sure to have enough pictures to share with participants individually or in small groups.

Duration: 15 minutes

- Objective:**
1. Participants learn to identify basic human rights and distinguish human rights from things that people would like to have but are not human rights.
 2. Linkage is made between human rights framework and this workshop.

Instructions:

1. Explain: *This section will focus on understanding the concept of human rights*
2. Pass out or show cards with images or words for each of the basic human rights and the other rights to individual participants or to small groups
3. Ask each participant (or small group) to show their card to the full-group and explain why it is (or is not) a fundamental human right. Continue until all participants present their cards.
4. Write human rights down on newsprint
5. Based on the above, ask the group: *What does the term ‘human rights’ mean to you?*
6. After eliciting participant responses, define: *Human rights (such as freedom from unlawful imprisonment, torture, and execution) are regarded as belonging fundamentally to all persons. We all have the right to life, and to live in freedom and safety. Nobody has the right to make us a slave or to hurt or torture us. Our rights may be violated by individuals or governments, despite this, a right is believed to belong justifiably to every person.*
7. Discuss the difference between concrete rights such as food and abstract rights such as dignity/ respect. Emphasize that these abstract needs will be important to our discussions throughout the three-day workshop.



Key message:

*Being treated with dignity and respect and living a life that is free from pain are human rights. This includes freedom from mental/emotional pain and pain resulting from violence in relationships. **We will be using a human rights framework throughout this training.***

Section 3

MENTAL HEALTH AND WELL-BEING

(45 minutes)

Exercise 3.1: Introducing stress and coping (Tissue and Marbles Activity)³



Materials: Marbles; Plastic cups or bowls with top covered by a tissue secured by a rubber band.

Duration: 20 minutes

Objective: To introduce the topic of stress and coping using a memorable metaphor; to demonstrate the effects of chronic stress on mental health.

Instructions:

1. Divide participants into five groups of three participants each (alternatively, each participant can do this activity individually) and give each group or individual a plastic cup covered with a tissue and secured around edges
2. Share an example of a community member who has faced many stressors. Explain that each marble represents a stressor, and ask participants to share examples of possible stressors.
3. Participants then take marbles and place them one at a time on the tissue.
4. Explain that some stressors come slowly and others happen suddenly (so marble could be dropped from above and quickly).
5. Wait until all groups/individuals break the tissue.



Exercise discussion:

1. Ask: *How many marbles were you able to add before the tissue tore? Do you think it would be possible to endlessly place marbles upon the tissue without it breaking?*
Building on participant responses, explain: *The tissue represents a threshold of an individual's capacity to hold stress. The marbles represent different stressors in an individual's life.*
2. Ask: *What are some of the sources of stress for you or your community? In the interviews we conducted in this community, what do you think the top stressors for both women and men were? Can you guess?*
Share top stressors from this community (see Annex 3.2 for example)
3. Ask: *Do these stressors sound familiar to you? Have you had similar experiences? How did these stressors affect your well-being?*
Explain: *While it is important to try to reduce the stressors in one's life (the number of marbles), these stressors are sometimes out of our control. We can also work to make the tissue stronger – or to learn ways to cope and to gather support from others.*
4. Ask: *How do you manage stress in your life? What helps you to cope? (e.g. social support, breathing, exercise, religious activities, fun activities with friends or family, etc.)*
5. Ask: *Sometimes efforts to manage stress can have negative effects – any examples? (e.g. drugs and alcohol, yelling/screaming, fighting, etc.) How do you and others feel when you use these negative coping strategies?*

³ ABAAD & Danish Refugee Council (2015).



Tips for facilitators:

Ideally, tissues should hold several marbles, but should eventually break. Test in advance and consider using a thin tissue or adding drops of water to make sure it breaks eventually. If the tissue does hold many marbles, capitalize on the symbolism, pointing out the strength of individuals/communities, but emphasizing that everyone has a breaking point.



Key message:

The Tissue and Marbles Activity helps us to identify some personal stressors and understand more about the ways that we may react to stress. When many stressors compile on one another (like the marbles of the tissue), the average person may feel overwhelmed and break. This is a normal part of the process, but we will be talking more about coping with stress throughout the next three days and learn healthy ways to reduce it.

Exercise 3.2: Understanding mental health terminology

Materials: Newsprint or whiteboard and markers; as desired, images to demonstrate 1) links between physical, mental, and social well-being, and 2) mental health reactions.

Duration: 20 minutes

- Objective:**
1. To define key concepts: mental health; physical, social, and mental well-being; traumatic events; chronic stressors.
 2. To encourage participants to reflect on and discuss their own reactions to stress and trauma.
 3. To describe common mental health reactions, and in doing so to normalize participants' own reactions and reduce feelings of shame and isolation.
 4. To set foundation for linking stress and mental health difficulties to intimate partner abuse.

Instructions:

1. Ask: What do the words – “mental health” mean to you?

Building on participant responses, explain: “Mental health” is defined as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”⁴

2. Ask: What other forms of health/well-being are linked to mental health?

Building on participant responses, explain: Mental health is closely linked to **physical/bodily** well-being (being in good physical health) and **to social well-being** (having social support, feeling connected to one's community). Together, mental, physical, and social health make up a state of overall well-being.

Draw or post a diagram to demonstrate these connections:

Link to marble and cup activity: Recall that a strong tissue (someone with mental, physical, and social health) can hold more marbles.

Share an example from the community to demonstrate effects of surviving war and being displaced to another country on mental health and psychosocial well-being.

⁴ World Health Organization, http://www.who.int/features/factfiles/mental_health/en/

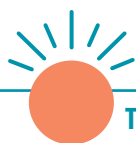


Example from Lebanon: *For example, we asked a Sheikh in Bekaa Valley to define mental health and he responded: "A person is both a body and a soul. Just as the body needs food to survive, the soul has its needs as well. If someone is free from disease and illness, the society he lives in is safe (without war), and he has enough daily food, these are the main reason behind someone being comfortable and relieved."*

3. Introduce term: **"traumatic events"**: *Sometimes a lack of well-being is related to life-threatening or otherwise terrifying events that people may have experienced in war, for example: being arrested and/or tortured, getting shot at, surviving a bomb/missile explosion, witnessing someone else get injured or killed, losing a family member or friend.*
4. Introduce term: **"chronic stressors"**: *Other times, distress may be related to the everyday stressors associated with being forced to leave one's home and trying to survive in a new country, e.g., having to constantly worry about insufficient/uncomfortable living conditions, not having enough food or clothes, unemployment and lack of income, children and their education, the family's future, etc. We discussed many of these stressors during the marbles exercise.*
5. Ask: *What do you think are some common reactions people have to terrifying events from the past, and current stressors?*

Write down participant responses on newsprint. After participants guess, provide responses below if any were not mentioned - can use visuals developed for items below.

- **Fear, anxiety, nervousness** – including current stressors such as financial problems, lack of employment.
 - **Memories, flashbacks** (memories that feel very real, as if the event is happening again), or nightmares about terrifying events
 - **Difficulty sleeping**
 - **Sadness and grief**
 - **Depression/hopelessness** – including feeling that life is not worth living
 - **Somatic/physical symptoms** such as stomachache, headache, losing weight, gaining weight
 - **Irritability/anger**
 - **Guilt/self-blame**
 - **Alcohol and drug abuse** (often as an attempt to cope with the symptoms described above)
6. Ask: *Do you think such reactions are found in this community? How does this fit with your personal experiences?* (Supplement participant responses with community-specific data and examples, as available. See Annex 3.3 for examples).



Tips for facilitators:

- Be prepared to address and correct any stigmatizing responses about 'crazy' people and to explain that mental health and mental health problems operate on a continuum (can be small or large) and are relevant to everyone.
- Post contact information for case management, psychotherapy services, and suicide hotline info on the wall or pass out to all participants to keep with them. Integrate discussions about referral options throughout the workshop at appropriate times.



Key message:

- It is common to experience some mental health problems, especially during stressful times. This does not mean that there is something terribly wrong with you or that you are “crazy”.
- There are coping skills that you can learn to reduce stress and its impact, and places that you can seek help – this will be discussed more in the remainder of this training.
- We hope that you will feel comfortable reflecting on and sharing your own experiences with these issues and that you will respect others’ sharing by showing respect and support, and by keeping confidentiality.

Exercise 3.3: Gender norms and expressing emotions

Materials: None

Duration: 10 minutes

- Objective:**
1. To introduce concept of “gender norms” through discussion of effects on emotional expression;
 2. To send message that in this group, expressing emotions, including with tears, is a sign of strength (especially important to emphasize for men’s group);
 3. In men’s group, to facilitate reflection on ways that gender norms related to expressing emotion invite anger and irritability, and how these emotions are linked to IPA.

Instructions:

Explain: *Sharing feelings, especially about difficult events, can help with stress management. This is sometimes referred to as healthy or positive ‘coping’. However, some people worry that it is not acceptable to express emotions.*

Ask: *In many societies, there are different expectations or norms regarding how men and women should express emotions. What differences have you observed?*

Building on participant responses, explain: *The following are common societal/community expectations about emotional expression – for men and women:*

It is more permissible for women to express emotions than it is for men.

Men should not express emotions in public (such as cry), as men should be “strong” and emotional expression is associated with weakness (stigma).

Explain: *Globally, women tend to report more distress (feelings of fear, anger, disinterest, and hopelessness) than men. Do you think that this is the case in your community? Supplement participant responses with community-specific data if available (see Annex 3.3 for example)*

However, some people have suggested that this does not always mean that men actually experience less distress than women – rather, beliefs about gender roles may result in some men being less willing to admit to feeling distressed.

Share quote: “Regarding fear, he cannot as a man show it because they will say he is a coward, that he is not a man, that is someone who gets scared, they will talk about him. We all get scared. There is not one person without fear. As for sadness, if a man is sad, they say that he is not able to support himself, that he is not a man. A man can be sad when he is on his own, not when he is around other people” -Lebanese man, IMAGES MENA⁵

Ask: *Do you agree or disagree with this quote? How does it affect men when they are not able to express emotions or feel weak for doing so?*

Building on participant responses, ask: Sometimes it is more socially acceptable for men to show irritability and anger relative to other emotions. Can you share some examples of times you or others experienced these feelings? What caused them? How did they impact you or others? What kinds of effects were there on the family?

⁵ Keedi, A., Yaghi, Z., & Barker, G. (2017). “We Can Never Go Back to How Things Were Before”: A Qualitative Study on War, Masculinities, and Gender Relations with Lebanese and Syrian Refugee Men and Women. Beirut, Lebanon: ABAAD and Washington, D.C.: Promundo.



Tips for facilitators:

1. This section is an opportunity to allow **potential perpetrators of IPA to introduce the topic of IPA in their own words**, using their own examples. Listen for participants' examples of ways that feeling angry caused tension, and instances of violence/abuse with wives/partners. Their words and examples should be used to transition into a definition of IPA in the next section. Referencing participants' own words can help to reduce resistance in the following section.
2. This section is focused on men expressing emotions but is relevant for women as well. In women's groups, the facilitator can encourage discussion about:
 - a) How men's potential challenges with expressing emotions such as fear and sadness may affect women, and/or
 - b) How women may have challenges in expressing emotions in different or similar ways.



Key message:

In this workshop, we want to encourage both men and women to express emotions to the extent that you feel comfortable. In this space, expressing emotions (including through crying) is a sign of courage as it shows that you can connect with your feelings and are willing to share them with the group (which is often not easy to do). Both crying and talking about your feelings can release tension and result in better stress management, including better treatment of those you love.

Section 4

COPING SKILLS: RECOGNIZING AND CALMING TENSION

(30 minutes)

Exercise 4.1: Hot Potato (becoming aware of stress reactions)

Materials: 1 ball

Duration: 15 minutes

Objective: To teach participants to recognize physical/bodily sensations associated with stress when they occur. Recognizing stress reactions is a first step in learning to control those reactions, and therefore decreasing physical and emotional distress.

Instructions:

Pre-activity introduction:

1. Start by asking participants to **reflect on current physical sensations:** *When we spoke about stressors and some of the related difficulties people might have – like worry and sleeplessness – did any of it sound familiar to you? It can be stressful just to talk about these reactions and about conflict in relationships, especially if these reactions are relevant for you or others in your life. It is normal to feel anxious or uncomfortable (both emotionally and physically) when having such discussions, or when otherwise thinking about stressful issues in one's life. Does anyone feel this way? How so? How does your body feel?*
2. As participants share feelings, emphasize physical reactions, such as feeling stomach discomfort (butterflies), tension in one's chest and/or muscles, feeling "jumpy", heightened heartbeat/pulse and/or breathing.

Explain: Such feelings may cause us to try to avoid talking about or otherwise dealing with difficult topics – for example, to avoid talking about mental health difficulties (even though we know that talking about things can be helpful).

For men, be sure to also link physical sensations to feelings of irritability and anger discussed previously.

Explain: Now we will do an activity to help learn to pay attention to bodily and emotional reactions and to learn a technique that we can use to calm our bodies and minds.

Hot Potato Game:

1. Ask participants to stand in a circle and pass a ball (the "hot potato") from one person to the next as quickly as they can.
2. One of the facilitators stands outside the circle and turns away from the group so he/she cannot see the other group members.
3. The facilitator taps loudly on a table with a pen while the object is passed, then at a random moment, he/she says "Stop!" (alternatively he/she suddenly stops tapping to signify the "stop").
4. The person in the circle who is holding the object at the time the word "stop" is used must leave the circle.
5. The game continues until only one group member remains in the circle.
6. Remind participants to pay attention to their bodily reactions while playing the game.

Post-activity discussion: After the activity is finished, ask:

1. *How did you feel as you played this game?*
2. *It was likely fun, but at the same time, did you notice feelings of jumpiness, anxiety, or even fear during this game? How was your breathing? Your heart rate? Any other physical feelings?*

Explain: This game is designed to help you to notice "stress/fear sensations" when they occur, such as fast heart-rate, breathing, tense muscles, jumpy feeling in chest. In this case, these feelings were probably fun rather than distressing, but when you experience these sensations outside of a game, and don't feel that you can control them, they can become very uncomfortable.

Ask: For example, I might have these feelings when I am late to go somewhere and stressed in trying to get my child dressed and ready to go. What examples do you have of times when you've felt these kinds of stress sensations?

Ask: Stress reactions like these can easily turn to feelings of irritability and anger. Can anyone share an example of times that they felt stressed, and then began to feel angry?



Key message:

Learning to notice physical sensations associated with stress when they occur is an important first step in learning to relax your body and decrease uncomfortable feelings. Now let's try another activity that can help to calm your body down.

Exercise 4.2: Slow and Deep Breathing (calming stress reactions)

Materials: None

Duration: 15 minutes

Objective: Participants learn a slow/deep breathing exercise for use in reducing physical and emotional feelings of stress.

Instructions:

• Pre-activity Introduction:

Explain: As we discussed earlier, when people feel stressed, breathing often becomes fast and shallow. Learning to breathe slowly and deeply is a very important way to calm down both our bodies and our minds.

Ask: How many of you think that breathing properly is important? By show of hands. For the ones who raised their hands, can you please explain why you think it is important?

Building on participant responses, explain: Breathing well is important because:

- It supplies our bodies with oxygen, which is vital for our survival and helps our minds and bodies to work to their full capacity.
- There is a scientific explanation for why slow, deep breathing can be calming, related to the relationship between our bodies (physical states) and our minds (mental states).
- Research shows that the way we breathe can directly influence our emotions. Fast and shallow breathing sends a message to the brain that there is danger in the environment, and can increase feelings of anxiety and fear. On the other hand, breathing deeply and slowly sends the message to the brain that the environment is safe and that it is ok to relax. In other words, calm breathing = calm feeling.

Breathing exercise: Give the follow instructions, speaking slowly and using a relaxed tone of voice.

1. Find a comfortable way to sit or stand. You can close your eyes, or if you prefer, keep them open and keep them half-closed in a comfortable position (feel free to open them at any time). Try to focus only on how your body feels right here, right now. Notice how your feet feel on the ground, how your clothes feel. Notice how you breathe - often people just breathe shallowly, in and out of their chests.
2. Now, take a deep, full breath all the way into your stomach. You do not have to take in extra air, just a normal amount, but breathe in deeply so that you feel your stomach expand – put your hand on your stomach so that you can be sure that it is expanding as you are breathing in.
3. Now, slowly and smoothly breathe out and as you are doing this, count to 4. Breathe in... 2, 3, 4, and out... 2, 3, 4 (demonstrate 4x).
4. As you're breathing out, think of a word such as "calm" as you're counting to four. Breathe in...Calm 2, 3, 4 (demonstrate 6x).
5. Once you are breathing naturally, try to concentrate on your breath – in, out, in, out. If other thoughts come into your mind, notice them, and then gently return your attention to your breath.
6. Now, continue breathing this way on your own for a few minutes. (Let participants breathe for approximately 2 more minutes.)
7. When you're ready, slowly bring your awareness back to the room.

• **Post-exercise Discussion:**

Ask: How do you feel now? How does your body feel? Do you notice a contrast with how you felt after the 'Hot Potato' game?

Explain: Most people feel a sense of calm or relief after this exercise. However, please note that some people also feel dizzy when they first try it because they are not used to breathing this way – make sure to acknowledge the participants' feelings if this comes up, yet ensure to communicate that this sensation typically goes away with practice.



Key message:

Together, the hot potato and breathing activities can teach you (1) to identify your jumpy or irritable sensations, (2) to take steps to decrease them. This shows you that you have some control over how your body and your mind feel – you can help yourself to feel better. Note that this exercise becomes fully effective when it is practiced regularly – try it at home tonight; we will ask you about your experience once you get the chance to try it.

Break 10 minutes

Section 5

IPA:

DEFINITION, CONSEQUENCES AND CAUSES

(1 hour)

Exercise 5.1: Ana Ahlam film and discussion

Materials: “Ana Ahlam” film; computer and projector; newsprint or whiteboard and markers

Duration: 30 minutes

Objective: To introduce the concept of IPA in an engaging way; to explore forms/categories of abuse/violence.

Instructions: (Movie Screening “Ana Ahlam” film)⁶

(found here: <https://www.youtube.com/watch?v=lkR9MSl52Nc>)

1. Give a brief introduction before showing the movie: “Ana Ahlam” is a short video documentary that presents the life of a Palestinian refugee girl who lives in one of the Palestinian refugee camps in Lebanon. The movie portrays events based on a true story about violence against women and girls. We want to warn you that the movie and its events may be difficult for some to watch, and that it is common to have a strong emotional response (including tears) when you watch it. This is not to scare you, but to prepare you and to tell you that it is ok to express yourselves, and it is ok to cry.
2. After the film ends and before starting with the discussion, give the group a moment to rest. If the group seems very distressed, ask them to reflect on how their bodies feel, then use the breathing exercise from the previous section for a few minutes (not more than 5-7 minutes) to help them to self-calm.

Post-film Discussion: Ask the participants to list all forms of abuse/violence covered in the video. Summarize the discussion by highlighting the different categories of violence as per the list below and how they intersect with the different forms⁷:

1. **Physical**, e.g., hitting, punching, kicking, grabbing, shaking, using weapons
2. **Sexual**, e.g., forcing another person to have sex or engage in sexual acts (including physically and/or through verbal threats/pressure), touching another person sexually against their will
3. **Psychological/emotional**, e.g., verbal threats, insults/criticism, humiliation, destroying possessions, confinement/restricting freedom of movement
4. **Socio-economic**, e.g., depriving of sufficient resources to meet needs/needs of children, controlling/confiscating income, denying another person the ability to work and generate income

Ask: Based on the above discussion what does the term – “intimate partner abuse” – mean to you?

If participants (particularly men) mentioned IPA in discussion about anger and/or stressors in mental health section, then **use their words to introduce this topic**. Explain that we will now talk more about something that the participants mentioned themselves.

Explain: ‘Intimate partner abuse’ is something that can happen when stress impacts personal relationships. ‘Intimate partner’ abuse refers to abuse occurring within the context of the marital relationship or another intimate relationship such as fiancé or boyfriend or girlfriend. It includes all of the forms of abuse we just discussed: physical, sexual, psychological/emotional, and socio-economic.

⁶ As an alternative, or in addition to the movie, facilitators can use following case examples (adapted from Project Ra manual):

Case study 1: Ramy and Laila are married. Ramy is extremely worried because his family is coming for a dinner, and he is wondering if his family members will have a good time, and he wants to show them how great his wife is in cooking. Yet, when he returned home that night, his wife didn't prepare any food since she was feeling sick and couldn't start preparing the dinner. Ramy was very angry as he doesn't want his family to think that he cannot control his wife. They started arguing and yelling and Ramy said that Laila was lazy. The conflict intensified quickly and Ramy hit Laila.

Case Study #2: Bassel and Rouba are a couple who had their second baby. Rouba stays home to care of the children and do the housework, while Bassel works to bring money. Yet, Bassel started giving Rouba lesser amounts of money. She did not have enough money to buy clothes for herself or to visit her family. When she discussed this issue with Bassel, he only said “we do not have enough money. You ask for a lot of things even though you don't make any money”. When Rouba mentioned that he goes out every night with his friends and she suggested that maybe she can go see her family instead, he replied “Yes, I go out a lot but I need to rest after work. You spent the entire day doing nothing”.

⁷ Heartland Alliance International (HAI) & United Nations Relief and Works Agency (UNRWA). (2015).

Community workers guide to understanding gender-based violence and child protection basic concepts. Retrieved from: <http://www.socialserviceworkforce.org/system/files/resource/files/Community-Workers-Guide.pdf>

**Key message:**

IPA is a significant problem in many communities in this region. Violence is not just physical, but rather can take many forms. All forms of violence impact the wellbeing of survivors; therefore, it is important to seek support as needed when facing any type/form.

Exercise 5.2: IPA in our Community

Materials: Paper and markers/crayons/colored pencils for each group member.

Duration: 30 minutes

Objective: To explore IPA in participants' own community and to increase motivation regarding the importance of working together to reduce IPA.

Drawing Activity Instructions:

The drawing exercise is designed to help participants to start thinking about images and messages for the messaging campaign to be developed later in the workshop.

Explain: *Take a few minutes to think quietly about an example of IPA that you have experienced, witnessed, or heard about in your community (you can also think of a story that you heard, saw on television, or read about, about people that you don't personally know).*

1. Ask participants to draw or write something about this event on a piece of paper. Explain: don't worry about your artwork – you can just use a shape or color to symbolize the event. Do not use names or details that would allow others to know anyone's real identity.
2. As participants are drawing, ask them to think about potential causes of the IPA and think about the effects of the event on those involved – the wife, husband, children, and others, including the community.
3. Give participants 10-15 minutes to write/draw about this topic. Facilitators can share their own examples/drawings as desired. If participants prefer not to write or draw, don't pressure them. Invite them to share a story in the discussion to follow.
4. When participants are finished drawing, divide them into small groups (4-5 participants) or keep as one large group. Ask for volunteers to share their images without sharing names or details concerning the people involved, and for other group members to give feedback. After this activity is completed, you can hang up drawings on a wall for participants to view later in the workshop as desired.

Post-drawing discussion:

After all participants who want to share have shared their drawings, conclude with a brief discussion with the full group about common themes, with emphasis on identifying ways that IPA has negatively impacted families and the community as a whole.

Ask: *How common do you think IPA is in this community?*

Supplement participant with community-specific data as available (see Annex 3.4 for example)

Ask: *After this discussion, would you agree that IPA is a problem in this community? Do you think that it is a priority for the community to work together to address this problem?*

**Key message:**

IPA is a problem in this community, deserving of community-wide attention. Everyone/most of us were able to present a case in which they were personally affected or know someone who was personally affected by IPA.

Exercise 5.3: Outcomes of IPA

Materials: Flipchart paper/whiteboard, marker

Duration: 20 minutes

Objective: To explore consequences of IPA for victim, perpetrator, children, and the community as a whole, with the aim of further motivating efforts to reduce IPA and increase help-seeking behaviors.

Instructions:

Explain: *In sharing your stories about the community's experiences with IPA, you have mentioned many of the effects of IPA. Let's summarize now.*

1. Write the four categories of people affected by IPA on newsprint (the abuse survivor, the perpetrator of the abuse, children, the community as a whole).
2. Introduce each category separately and ask participants to think about physical, mental health, social, and economic/legal consequences of IPA for members of that group.
3. Write down participant input and fill in gaps using the information provided in the table below.
4. Emphasize the importance of confidentiality again in this section as specific examples are likely to be shared.

Table 1. Effects of IPA (examples to supplement participant responses)⁸

Effects on...	Physical	Mental health/ psychological	Social	Economic/ restricted opportunities/ legal
Abuse survivor	Bodily injury including bruises, broken bones, reproductive injuries; death	Fear, humiliation, self-blame, nightmares/ flashbacks, depression, suicidal thoughts (link back to mental health discussion conducted earlier)	Social isolation: separation from family and friends due to stigma, shame, feeling that others won't understand. Or may not be allowed to visit others by the perpetrator; Abuse or neglect of children; Stigma from the family and community, leading to exclusion and/or negative treatment. Divorced women may face particular stigma, be criticized as selfish, not prioritizing well-being of the children.	Denied access to money and resources, employment opportunities
Perpetrator of the abuse		Guilt, shame, self-blame	Worsening relationship problems; Social isolation, estrangement from the victim and other family members; Stigma from the family/ community.	Imprisonment and other legal consequences

⁸ IPA Handbook

Effects on...	Physical	Mental health/ psychological	Social	Economic/ restricted opportunities/ legal
Children who witness abuse* * note that children who witness IPA may also be themselves victims of child abuse which results in its own set of consequences (not discussed here).	Physical health complaints related to mental health issues	Anxiety, anger, behavioral problems, low self-esteem, nightmares	Separation from family members Isolation related to shame, stigma, feeling that others won't understand; Growing up to practice abusive behaviors in their own future relationships; Becoming more vulnerable to being abused by others in future relationships	Low school performance, leading to reduced future opportunities
Community as a whole	Families affected by IPA interact with others in the community, resulting in difficulties in workplaces, schools, neighborhoods, and decreasing community cohesion (connections among people in the community). As IPA becomes more common it can become "normalized" or more acceptable in the community, which in turn may increase IPA incidents in other families.			



Tips for facilitators:

Share community-specific data as possible during this section if available. For example:

- Ask: *What do you think were the findings from our interviews with community members about children witnessing abuse between their parents? Share community specific data about percentage of children witness violence in the home (e.g., Annex 3.5).*
- Share that research has shown that when a child witnesses either of his parents being abused by their spouse, it is more likely that he becomes a perpetrator of abuse as an adult.



Key message:

IPA has many detrimental effects in both the short and long-term, for the victim, perpetrator, children, and the community as a whole. In light of this, the remainder of this workshop is dedicated to working together to prevent IPA and to increase help-seeking behaviors in this community.

Exercise 5.4: Causes of IPA

Materials: Flipchart paper or whiteboard and markers

Duration: 20 minutes

Objective: To explore factors contributing to the existence of IPA in this community, with the aim of identifying strategies for reducing IPA.

Instructions:

Explain: *To prevent IPA, it is necessary to think about the factors that contribute to the existence of IPA.* Ask participants to reflect on the community story that they shared in the last activity and to think of the causes of IPA in that example.

- *What do you think are the causes of IPA in your community?* Ask participants to list all the causes they can think of.
- Write all on newsprint/whiteboard (it is also possible to divide the participants into small groups, where each group can record their own ideas then share with the full group). After participants list all their ideas, categorize the list according to causes that are related to:
 1. Stress and mental health;
 2. Social or community norms and beliefs.

Provide examples, if available from community-specific data. Potential examples are detailed in table below.

Table 2. Causes of IPA collected from community interviews and focus groups (suggested examples to supplement participant responses)

Stress and mental health related	Social/community norms related
<ul style="list-style-type: none"> • Stress related to money problems/work (e.g., husband comes home tired/frustrated from long day of very hard work or difficulties finding work; wife is frustrated about lack of funds for household needs) • Stress related to children misbehaving / woman did not complete household responsibilities • Stress related to insufficient space/privacy, including impact on sex life of not having enough privacy • Stress related to jealousy/mistrust (concerns from men or women about the other having affairs, related to non-private living situation) • Stress related to discrimination by/tension with Lebanese community • Stress related to events in Syria or home of origin • Exposure to violence in the past – from the war, from one's own childhood, leading to vulnerability to further violence • Lack of good coping skills, including communication skills to solve conflicts 	<ul style="list-style-type: none"> • Normalization of violence within the culture (violence is a normal part of marriage - many in the community think it is normal for a man to release his tension by abusing his wife, they don't know that it is wrong) • Belief that husbands own their wives / should control their wife / can do anything they want to their wife without consequences • Forced marriage/ child marriage (can make violence more likely because the girl may not be ready to assume the socially imposed responsibilities of being a married woman, which may result in conflict and increased violence. Also, girls can be more vulnerable due to inequitable power dynamics) • Lack of education/awareness about the consequences of violence and how to prevent it



Key message:

As you can see, many of the causes are related to:

1. Stress associated with difficulties surviving as a refugee (e.g., money, unemployment, crowded living situations, discrimination); and
2. Social and cultural beliefs about what men and women should be doing – these are called “gender norms”.

We will talk specifically about the first of these topics now, and then return to the second tomorrow.

Exercise 5.5: Stress, IPA, and coping

Materials: None

Duration: 10 minutes

Objective: To strengthen participant understanding of connection between mental health/stress reactions and IPA. To introduce coping skills for use in calming stress reactions and thus reducing IPA. To create an opportunity for participants to share coping skills they are currently using.

Instructions:

In this section, you may choose to focus on specific questions based on whether you are working with a women's, men's or mixed gender group.

Introduction: Now we will again link back to the topic of **mental health** discussed earlier:

- Mental health problems and IPA are related because stress and lack of coping skills to manage frustrations can increase the likelihood that someone will perpetrate IPA. Dealing with stressors can lead one to feel sad, overwhelmed or **angry** – especially when one feels that things are unfair and/or feels powerless to change things. Feeling anger is a normal reaction to such circumstances. However, the ways one **expresses** anger can lead to positive or negative outcomes.
- Men and women may experience similar feelings but express themselves differently.

1. Ask participants individually or in group to answer the following questions:

Emphasize for women's group:

- What are some common ways that women might express feelings of powerlessness, anger, stress?

Emphasize for men's group:

- What are some common ways that men might express feelings of powerlessness, anger, stress?
- In some cases, it may be difficult for men to express their anger without using violence – why is that?
- For both groups, use information from community-specific data collection as available, e.g., rates of use of violence as a method of coping with stress (see Annex 3.6).

For all groups:

Can you share an example of a time that you were very angry but successfully avoided using violence?

How did you do this?

- Even if we know how to avoid a conflict or fight without using violence, it is sometimes difficult to apply these strategies – why? What can make it easier to use them?

2. **List productive coping strategies shared by participants on a flipchart paper.** Fill in the following responses if not mentioned:

- Changing your place (by leaving the room or the house, or taking a walk)
- Notice your physical feelings of stress, irritability, anger (as we did in Hot Potato game) and use self-calming techniques such as the breathing technique we learned this morning. Other techniques include counting to ten, drinking water, stretching, progressive muscle relaxation – we will learn this technique later in the training.
- Once you are calmer, think of consequences of violence, for the abuser, the one being abused, and others in the family
- Ask for support from others (friends, family, partner)
- Religious activities such as prayer
- Exercising
- Other activities to distract yourself, such as watching TV.



Key message:

The use of coping strategies can help manage stress and therefore reduce IPA. Different people find that different coping strategies are helpful for them – you don't need to like or to use all of these techniques, but if you have a menu of options, you can choose one that works for you.

Section 6

DAY 1 WRAP-UP

(20 minutes)



Materials:

Flipchart paper or whiteboard and markers



Duration:

20 minutes



Objective:

To review content covered during the day, reinforce linkages between topic areas, release tension and build group cohesion, and gain feedback from participants about ways to improve facilitation.



INSTRUCTIONS:

Ask: *What did we talk about today? Allow participants time to list topics. Fill in topics they do not mention.*

Ask: *Why do you think we choose to talk about intimate partner abuse, mental health, and human rights in the same training? What kinds of connections do you see between these ideas?*

Explain:

1. *Mental health problems can increase the likelihood of IPA and decrease help-seeking*
2. *Stress and lack of coping skills to manage frustrations can increase the likelihood that someone will perpetrate IPA*
3. *Feelings of sadness and hopelessness (depression) can decrease the likelihood that someone will seek help when victimized by IPA*
4. *IPA can in turn make someone feel sad or hopeless, or create symptoms such as fear, nightmares, and flashbacks.*
5. *Being treated with dignity and respect, and living a life that is free from pain are **human rights**. This includes freedom from mental/emotional pain and pain resulting from violence in relationships.*

Wiping off flour group activity (optional - useful for releasing tension and promoting group cohesion)
Participants stand in a circle and pretend to wipe flour off themselves, and off others in the circle. Next, participants take some "power of the group" from the middle of the circle and pretend to put it on themselves (see full description in Annex II, ice-breakers).

Circle review. Participants stand in a circle. Explain: *We will go around the circle and each person can share 1) something important that you remember from the day; and/or 2) a question that you would like to address in the days to come. Please also share any feedback that might help us improve the workshop in the upcoming days.*

Homework reminder. Explain: *Remember to practice the breathing exercise at home tonight – we will check in about your experience tomorrow.*



Tips for facilitators:

During wrap up, note key messages shared by participants on a newsprint/whiteboard, particularly comments by participants that may be useful in developing messaging campaign on day 3. Remind everyone to come on time the next day.

CURRICULUM

DAY 2

4 hours

Section 7: Day 2 Welcome and check-in

- » 7.1. Ice breaker and review

Section 8: Gender Norms and IPA

- » 8.1. Man and woman box
- » 8.2. Unhealthy and healthy communication role plays

Section 9: Coping skills break

- » 9.1. Progressive Muscle Relaxation

Section 10. IPA Protections

- » 10.1. IPA and the law
- » 10.2. IPA and religion

Section 11. IPA help-seeking and help-giving

- » 11.1. Impediments to help-seeking
- » 11.2. Strategies for help-giving

Section 12. IPA messaging campaigns review and critique

- » 12.1 Group campaign critiques
- » 12.2 Social norms in messaging campaigns

Section 13. Day 2 Wrap-up

- » 3.1. Day 2 Wrap-up

Section 7

WELCOME AND CHECK-IN

(20 minutes)

Exercise 7.1: Icebreaker and review

Materials: None

Duration: 20 minutes

Objective: To welcome participants back to the session using a fun activity; to send a message about the importance of teamwork in the group setting; to review previous content and check-in about homework.

Instructions:

Welcome activity: brief song, game, or other icebreaker activity.

For example, "the Counting Game" –

Instructions: In this game, the group tries to count from 1 to 10. Any participant can start by calling out "1", and another participant should call out "2", until we reach 10. However, if more than one person calls out a number at the same time, everyone must start over. See Annex II for details and other options.

Play the game with participants until the group succeeds in counting to 10, or until 10 minutes have passed. After the game, ask: What was the purpose of this game and how does it relate to our group today?

Potential responses: Importance of listening, not interrupting, giving space for everyone's participation.

Check-in: Ask: *How was last night? Do you have any questions or thoughts about yesterday's content that you would like to share?*

Homework check-in: Ask: *How was it to try the breathing technique at home? Was it different than doing it here? What was successful or challenging? Did any of you try to teach it to someone else at your home? How was this experience?*

Section 8

GENDER NORMS AND IPA

(55 minutes)

Exercise 8.1: Hot Potato (becoming aware of stress reactions)

Materials: Flipchart paper or whiteboard and markers

Duration: 30 minutes

Objective:

- To introduce concepts of social norms and gender norms;
- To differentiate gender norms from biological sex differences;
- To explore participant perceptions of gender norms in their community;
- To explore how norms relate to IPA and how conflict and displacement contribute to changing norms;
- To challenge the construct of strict gender norms by introducing idea of “human” characteristics which are desirable across genders.

Instructions:

Introduction: Ask: Yesterday we spoke about causes of IPA – who can summarize what we discussed? What were two major categories of causes that we identified?

Building on participant responses, example: One was stress and mental health, and second, we mentioned that an important factor contributing to IPA are the beliefs that societies have about how people should behave in marriages and other intimate partnerships.

Let's talk now about these 'beliefs about what people should be doing' – another word for such beliefs is social norms. Social norms about gender are called gender norms. Now we will do an activity to explore this idea.

Man and Women in the Box - gender norms activity

- On white board draw the table below –

Activities and characteristics we associate with MEN	[leave blank at start of exercise and will later write in 'humans' here]	Activities and characteristics we associate with WOMEN
Notes here:		

1. Ask participants to list the activities that women do, and the activities that men do
 - Write examples provided by the group in the table (examples may include: men protect and provide for their families financially; women take care of children and the household).
2. Ask participants to list some qualities or characteristics that we may think of as associated with men and women
 - Write examples provided by the group in the table (examples may include: men are strong, women are caring)
3. Ask participants to identify which of these items associated with men and women are actually things that only men can do, or that are only true of men, and that only women can do, or that are only true of women. Pick 3 or so items from the list for each.
 - Circle items that are **biologically based** (e.g., giving birth, breast-feeding).

Explain: Often when we think of something that only a man or woman can do, we are focusing on **biological factors** (e.g. getting pregnant, giving birth). The rest of the items are typically **social norms**, or social expectations about the ways people should act in a particular community. Social norms about gender are called **gender norms**. These characteristics or behaviors that a society or community determines are associated with men or women.

4. Explain: Now we will introduce another component to the box activity - we **will make a 'human box'**.
5. Ask: What type of characteristics should both men and women have? For example, would you say that both should be loving and loyal? What else?
 - Do you want to move some of these characteristics to the human box? It seems that some of these qualities are not specific to men or women, but are for humans. Would you agree?
6. Write participant responses in the "human box" (between man and woman columns).

Discussion:

Gender norms & IPA:

Ask: How do gender norms relate to IPA?

Summarize what participants have said, filling in the following points:

1. Some gender stereotypes/norms, such as that men are aggressive and women are weak, or that men need to control their wives (including by use of violence), may increase IPA.
2. If men or women fail to adhere to gender norms (such as when women do not clean the house, or men do not provide money), this can also sometimes increase IPA.

Ask: How do the characteristics in the human box relate to IPA?

Summarize what participants have said, filling in the following points:

3. Taking on "human" traits (e.g., both men and women can be caring) may increase gender equality and make IPA less likely to occur.

Gender norms and displacement:

Ask: How do you think armed conflict and being displaced can affect gender norms?

Summarize participant responses, adding following examples if not mentioned:

- Men cannot protect their family from violence associated with war, nor can they provide financially due to lack of job opportunities
- Women may take on more provider and protector roles (e.g., it may be easier for women to seek aid, and safer for men to travel in the company of women); act as a co-decision maker and problem-solver.

Change in gender roles and IPA:

Ask: How do changes in gender norms affect IPA?

Summarize participant responses, emphasizing that:

- Changes in gender norms can sometimes be a trigger for IPA in our families:
If available, share community-specific quotes, e.g.: "When roles changed, women go to work and men stay home. Men feel helpless. No ego, no dignity. So they become verbally and physically violent with their wives. They would shout for no reason." -Syrian man, IMAGES MENA
- Changes in gender norms can also be positive, depending on how they are handled by couples:
If available, share community-specific quotes, e.g.: "When we first came from Syria, he was self-centered. But when we lived in a tent, he changed, psychologically and mentally as well. We became equal. He listens to me now." – Syrian woman, Marj interviews



Key message:

- Gender norms are the beliefs that a society has about appropriate characteristics and behaviors for men and women.
- Certain kinds of gender norms, such as those that suggest that a man's role in a marriage is to control his wife through violence, can sometimes contribute to IPA.
- Unlike biological characteristics, gender norms are not inherent to men or women, and therefore can be changed.
- War and displacement can change gender norms in ways that can both increase and decrease violence.
- Adopting "human characteristics" rather than adhering to strict gender roles can lead to greater equality and less IPA.

Exercise 8.2: Unhealthy and healthy communication role plays

Materials: Props as desired for role plays.

Duration: 25 minutes

Objective: To demonstrate ways that use of “human” roles (rather than strict gender roles) and healthy communication skills can reduce IPA

Instructions:

Explain: *Let's do a role play to help us understand more about what we have been discussing. I want you to notice how the man and the woman are behaving during this role play. We will ask you questions about what you observed after the acting is finished.*

1. Facilitators should act out two scenes (as per suggested below scenarios): one displaying a couple adhering to gender role stereotypes and using unhealthy communication strategies, and one in which the couple adopt “human characteristics” and use health communication and coping strategies.
2. One facilitator should play the husband and the other should play the wife. Scenes can be based on participant suggestions, topics discussed earlier in the training, or can adapt the following examples:

Facilitator role play #1: Gender role stereotypes/unhealthy communication – example:

The husband comes home from work and is tired and angry. The wife did not complete all of the housework. The husband becomes angry, loud, dominant, shouting, “I work all day to take care of you – your job is to take care of the house, what's wrong with you that you can't do this? Are you lazy? What will the neighbor's think if they see this house? That I can't control you?” The wife replies, “I was working non-stop all day, your children were very bad and making messes. Any way, if you worked harder, I could buy better cleaning supplies, but we have no money!”. The husband says, “don't speak back to me”, the wife starts crying, and refuses to talk. The husband goes to hit her.

Ask: *What did you notice during this role play?*

Explain: *Now we will do a second role play. Please try to notice what is different compared to the first role play.*

Facilitator role play #2: Human roles/healthy communication – example:

Same scenario as above: The man comes into the house, sees that it is messy and gets annoyed. However, he uses breathing to calm down. He asks why the housework is not done in calm tone of voice. The woman explains that she would have liked to do it but she was busy with other things – children, cooking, etc. The husband says that he understands but that he is very tired, and wishes that the house was cleaner because his family member is coming over in a bit. The wife says she knows his job is difficult and wants the house to be clean too, but she is tired too and the kids are running around. How can they solve this with a compromise? Maybe they can share the rest of the cleaning, or the husband can play with the kids to keep them busy while the wife cleans the room.

Ask: *What did you observe? Did you notice anything that the husband and the wife both did differently in this second role play?*

Discussion:

Facilitate participants' discussion, filling in the following points as needed:

- Trying to move away from strict gender norms that can promote violence, e.g., the husband should...; the wife should..., and rather focusing on “human” characteristics and ways that the couple can support each other.
- Coming to a compromise solution in which both the man and the woman make an effort to remedy the situation.
- Use of calm, clear communication, explaining causes of feelings
- Being empathetic (taking each other's perspective)
 - Share relevant proverbs, e.g., there is an Arabic phrase: “How you treat others is how they will treat you.”
- Using coping strategies (breathing) to calm down rather than reacting aggressively



Key message:

In the first role play, we were focusing on gender norms/stereotypes. In the second role play, we tried to apply the characteristics from the human box. This helped to prevent/minimize the risk of a conflict and IPA. Social norms that discourage violence and promote good communication in relationships, human rights, and equality can be helpful in decreasing violence.

Section 9

COPING SKILLS BREAK

(20 minutes)

Exercise 9.1: Progressive muscle relaxation (PMR)

Materials: Chairs or mats for participants to sit comfortably

Duration: 20 minutes

Objective: To teach a skill that can be used to calm muscle tension and therefore reduce feelings of anger/irritability

Instructions:

Ask: We have been discussing a lot of heavy content – how is your body feeling now? Is anyone feeling tense or stressed?

Acknowledge participant experience of tension, as needed, and explain: Now we will practice a relaxation technique called progressive muscle relaxation. Like the breathing exercise we did yesterday, this is useful for calming anger, irritability, anxiety, or fear. As we have discussed before, our muscles often feel tense or clenched at these times – this is a way to relax these muscles and therefore to reduce these emotions.

PMR exercise

Arrange participants sitting in seats or lying on mats (consider what is appropriate/comfortable in the culture). Give the following instructions in a slow, soothing voice, allowing 10-15 seconds of relaxation after the tensing of each muscle group.

1. Please take a moment to find a comfortable position. Explain: you may want to fold your hands in your lap or rest them on the tops of your legs. However you choose to sit, be sure you are comfortable.
2. We will start with the breathing exercise we learned earlier. Take three deep breaths, breathing out slowly each time, imagining the tension draining out of your body. We are now going to relax different body parts at a time. Each time, pay attention to the different feelings between tightening and relaxing the muscles.
3. Tighten your feet by curling them downwards. Hold for 10 seconds and then relax.
4. Tighten your calf muscles by pulling your toes towards you. Hold for 10 seconds and then relax.
5. Squeeze the muscles in your thighs. Hold for 10 seconds and then relax.
6. Tighten your stomach muscles by sucking your stomach in. Hold for 10 seconds and then relax.
7. Tighten the muscles in your arms. Hold for 10 seconds and then relax.
8. Clench your fists. Hold for 10 seconds and then relax.
9. Tighten your shoulders as if you are going to touch your ears. Hold for 10 seconds and then relax.
10. Tense the muscles in your face and forehead. Tighten the muscles around your eyes, nose, and mouth. Hold for 10 seconds and then relax.
11. Mentally scan your body for any leftover tension. If any muscle group remains tense, repeat the exercise for those muscle groups.
12. Now imagine a wave of relaxation spreading over your body. Use your deep breathing. If you would like, shake out your body. (30 seconds).

Optional - add creative visualization component:

- Now imagine a quiet and peaceful place – perhaps a beach, a forest, a field. Take a moment to *imagine a place that makes you feel safe, calm, and relaxed.*
- Now *imagine the smells in this safe relaxing place.*
- *Imagine the sounds.*
- *Imagine the feel of the air/breeze.*
- *What do you notice around you?*
- *Imagine yourself sitting in this quiet place, feeling at peace.*
- *Stay there for the next few minutes, breathing slowing in and out (3-5 minutes)*
- *Now imagine a wave of relaxation spreading over your body.*
- *When you are ready, slowly come back to the room and open your eyes.*
- *Now imagine a wave of relaxation spreading over your body. Use your deep breathing. If you would like, shake out your body. (30 seconds)*

Ask: How do you feel now? Facilitate brief discussion about effects of PMR.

**Key message:**

You can use this when you are angry or stressed and your muscles feel tense, in order to help to calm your body, and therefore, to calm your mind. You can practice this exercise on your own in its entirety or just parts of it (e.g. your legs and feet when you are sitting in a chair, or just your fists). Tonight, try this muscle relaxation exercise or the breathing exercise at home, and consider trying to share these with someone in your family. In our next session, we will check in about your experience.

Break 10 minutes

(optional coping skill or icebreaker – see Annex II)

Section 10

IPA PROTECTIONS

(30 minutes)

Exercise 10.1: IPA and the law

Materials: Flipchart paper or whiteboard, and markers

Duration: 15 minutes

Objective: To provide information about international, national, and local laws regarding IPA; to make a connection between laws and social norms and to show that, to the extent that there are laws against IPA, these represent social norms prohibiting IPA.

Instructions:

Explain: We have spoken a lot about social norms today – now let's think about where they come from. The existence of laws against IPA can decrease its occurrence. To some extent, laws also reflect what is and IS NOT considered socially acceptable. What does the law say about IPA?

Ask: First, what does international law, or human rights law, say about IPA?

Building on participant responses, explain: As we have discussed earlier - freedom from violence (whether sexual, mental, emotional, financial or physical) is a fundamental human right. The right to protection from violence and to security and liberty of person is recognized in major human rights agreements.⁹

Ask: Second, what does the law in your country say about IPA? Do you think that IPA is illegal?

Building on participant responses, describe relevant laws.

Example for Lebanon:

Many people do not know that there are laws against IPA. In fact, although the laws can still be improved, there are existing laws in Lebanon to protect people affected by IPA and steps that can be taken to gain protection.

Law on Protection of Women and Family Members from Domestic Violence (Law 293/2014). Issued in 2014.

This law includes a provision for restraining order to protect the victim and her children. When victim is found to be in danger, the law compels the offender to leave the house and/or victim and other cohabitants (including at risk children) are moved from the house and transferred to a safe temporary residency. The defendant is compelled to pay for accommodation, food, clothes, education, medical treatment for victim.

Lebanese Law is applicable to all persons living on Lebanese territories regardless of their nationality (including Syrians). However, when deciding whether to take legal action, one should be aware of challenges that may be faced in case the person who wants to report an incident does not have the proper and updated legal residency paper work (can be detained).

For displaced persons it is important to note that at times there is a risk associated with reporting IPA (e.g., detainment for those without legal residence) so that participants understand factors relevant to deciding whether to seek legal help.



Tips for facilitators:

Laws change frequently so research is needed to keep this section current. It is very important that you review the legal context in your country and insure that it is up-to-date.

⁹ Instituto Promundo, Salud y Genero, ECOS, Instituto PAPAI and World Education. (n.d.) Program M: Working with young women. Retrieved from <https://promundoglobal.org/resources/program-m-working-with-young-women/>. Page 23.

**Key message:**

This discussion should be tailored to the context and address the following topics:

- Existing law(s) to protect from IPA
- Benefits and risks associated with seeking legal recourse, including any special considerations for displaced persons or other vulnerable populations that should be taken into account.
- Understanding the law about IPA is useful for understanding one's help-seeking options, and also for understanding the social norms about IPA. Laws making IPA illegal suggest that IPA is not considered acceptable in the society.

Exercise 10.2: IPA and religion

Materials: Flipchart paper or whiteboard, and markers

Duration: 15 minutes

Objective: To acknowledge the importance of religion in people's lives and make a connection between religion and social norms; to emphasize that religious perspectives do not promote violence

Instructions:

Explain: Now let's take a few minutes to consider the role of religion. People have many different religious beliefs. In this workshop, we do not intend to closely discuss religion, religious texts or beliefs. As discussed earlier, we are addressing IPA from a human's rights perspective, rather than a religious perspective.

However, religion is very important in many people's lives and can play a major role in shaping people's thinking, attitudes and behaviors. Like the law, religious perspectives contribute to the development of social norms. Social norms are informed by culture, history, geography, socio-economic status, as well as religion.

*While there are many different religious beliefs, **no religion supports violence against family members or justifies the use of it as means of communicating or dealing with conflict.***

*Ask participants to recall the movie "Ana Ahlam" and the statement from the religious leader: "if women are not getting their full rights, **the problem is not in religion (Islam) but rather in people (Muslims).**" What do you think he meant by this?*

Explain: In some cases, social norms that promote violence are assumed to be linked to religious thinking, even though they are actually based on cultural practices/ factors, and not on religion at all.

Provide an example appropriate to the context. E.g., female genital mutilation practiced in Egypt and other countries is often associated with religion; many people state that they continue doing the practice because it is in line with religious beliefs. However, this practice is done by both Muslim and Christians and it was found to have no religious foundation. This is an example of how some norms can be thought to be based on religion when in fact they are not.

**Tips for facilitators:**

This section is especially useful if participants keep bringing up religion in earlier discussions. In this case, you can list "religion" as a parking lot topic and wait to address all questions/comments about religion during this discussion. While it is important to acknowledge the powerful role that religion plays in many people's lives, it is also key to keep this discussion contained and focused on the below key message rather than allowing space for potentially divisive discussion, such as debates about meanings of specific religious texts, etc.

**Key message:**

Different people have different religious beliefs. Yet, regardless of one's religious background, no religion supports violence or justifies the use of it as means of dealing with conflict.

Section 11

IPA HELP-SEEKING AND HELP-GIVING

(30 minutes)

Exercise 11.1: Impediments to help-seeking

Materials: Flipchart paper or whiteboard, and markers

Duration: 20 minutes

Objective: To explore reasons that community members do not seek help when victimized by or perpetrating IPA, or for mental health difficulties. Understanding reasons can help in developing strategies to encourage help-seeking, including through messaging campaigns.

Instructions:

Explain: *Most victims of IPA don't ask for help.*

Share community-specific data about help-seeking as available.

Example from Lebanon: *In our interviews conducted in Bekaa region, we found that almost half (48%) of women and almost all (94) of men agreed that "people experiencing abuse by their partners should keep it to themselves, there is no benefit in telling someone about the abuse."*

Let's think more about this together.

1. Divide participants into 3 groups
2. Ask each of the groups to answer one of the following questions:
 - *Think about someone you know in the community who is experiencing abuse. Why might she/he not ask for help?*
 - *What are some reasons that perpetrators of abuse may not seek help? In other words, what if a man was being abusive and wanted to get help to stop. Do you think he would feel comfortable reaching out to others? Why or why not?*
 - *On the first day, we spoke a lot about the connection between mental health and IPA. In addition to not asking for help for IPA, people often don't ask for help for mental health difficulties – why do you think that this is?*
3. Participants should discuss their topic with their group members and write responses on a flip chart paper.
4. Each group presents their findings to the large group
5. After all have shared, summarize responses referencing the categories below. Use quotes from community-specific data as desired (refer to Annex 3.7)

Reasons that survivors of IPA may not seek help

- Stigma – fear of judgment from the community or family, feelings of shame/self-blame
- Fear of the abuser (e.g., that abuser will "punish" victim or children for reporting)
- Concerns about the children (e.g., what will happen to them if divorced)
- Concerns about the abuser (e.g., that he will go to jail)
- Lack of social support, feeling that no one will care/help
- Lack of knowledge about where to go for help, who to ask
- Worry about having money to pay for support or to support oneself if separated from partner
- Belief that services won't help anyway – or will even make things worse
- Seeing violence as a normal part of marriage

Reasons that perpetrators of IPA may not seek help

- Stigma – fear of judgment from the community or family, feelings of shame/self-blame
- Concerns about consequences (e.g., that he will go to jail or get divorced)
- Concerns about the children (e.g., what will happen to them if divorced)
- Lack of social support, feeling that no one will care/help
- Lack of knowledge about where to go for help, who to ask
- Belief that services won't help anyway – or will even make things worse
- Seeing violence as a normal part of marriage

Reasons that people may not seek help for mental health problems

- Stigma – fear of judgment from the community or family, feelings of shame/self-blame
- Lack of social support, feeling that no one will care/help
- Lack of knowledge about where to go for help, who to ask
- Belief that services won't help anyway – or will even make things worse

Share community-specific quotes, as desired.

Example from Lebanon: “There isn't any acceptance towards this issue. Ignorance is the main reason behind the “non-acceptance” of seeking professional help. If someone went to see a psychiatrist, they'd consider him either stupid or insane...The first word that the general population would describe someone who is seeking professional mental health aid is “crazy/insane” - Service provider, Marj community, Lebanon.



Key message:

Understanding the reasons that people do not seek help can help us to understand how to best support them and encourage them to get help in ways that are right for them.

Exercise 11.2: Strategies for help-giving

Materials: Flipchart paper or whiteboard, and markers

Duration: 20 minutes

Objective: To develop strategies for providing help to community members affected by IPA.

Instructions: Help-giving role plays

1. Provide brief scenarios (use following examples or adapt from examples shared by participants earlier in the training).
 - For a women's group: *Imagine that you overhear a violent fight between your neighbor and her husband. Later, you see your neighbor sitting outside crying, with a black eye. What do you do?*
 - For a men's group: *Imagine that you overhear a violent fight between your neighbor and his wife. Later, you see him sitting outside, looking upset. What do you do?*
2. Ask participants to act out (or to simply discuss) how they would respond to these situations
3. Ask participants the following questions:
 - *What would encourage someone being abused to seek help?*
 - *What would encourage someone who is being abusive (the perpetrator) to seek help?*
4. Facilitate group discussion, emphasizing the following key points. Share community specific data if applicable.

Examples of what individuals can do to support others in their community:

- Listen. Keep confidentiality (don't gossip).
- Don't stigmatize or judge.
- Don't normalize/condone IPA – Acknowledge real danger and pain associated with abuse and let them know that abuse is not okay.
- Provide organization contact information.
- Encourage help-seeking informally through community/social support.
- Be a good role model; spread positive social norms.
 - Share or ask participants to share a community-specific example to explain the **power of role-modeling** (it is important that the example is specific to the community to increase buy-in).

Example from Lebanon: In one of our earlier group sessions, a participant shared a story about a man who helped his wife with housework by cleaning the rugs. At first, he was afraid that his neighbors would judge him for this, so he cleaned them only at night when no one could see him. Later, he decided that he was proud of helping his wife and didn't mind if anyone saw him. The neighbors laughed and whispered at first, but slowly he started to notice that more and more of them were also helping their wives by cleaning rugs and hanging up laundry.

Ask: We have discussed things that individuals can do to help people affected by IPA. What are some things that the community can do, when it works together?

Examples of Community-level interventions:

- Community support groups (for women and men – e.g., for men to talk about stressors)
- Increasing education and economic opportunities for women, e.g. by teaching livelihood strategies, including skills they can use to work from home (like sewing, crafts, if they do not feel comfortable working outside the home).
- Religious leaders can discourage IPA and encourage other strategies for dealing with conflict in their teachings. An example would be pre-marital and post-marital courses that provide good communication strategies for couples.

Ask: What do you know about organizations where people can ask for help? How are such services perceived by community members?

How organizations (international, local, religious) can support community members:

- Facilitators should review existing list of organizational support for IPA and mental health in region.
- Be sure to acknowledge risks of help-seeking (such as being deported if in the country illegally) and potential negative experiences with service providers, such as unfulfilled expectations. Encourage help-seeking but don't raise unrealistic expectations about what service providers can offer.



Key message:

We have now discussed a range of ways in which community members and organizations can provide help to those affected by IPA. **Another way to help others in the community is by developing a messaging campaign to let people know that violence is not acceptable, and to encourage people who are victims of abuse by their partner to seek help. The remainder of this training will be devoted to developing this campaign together.**

Break (15 minutes)

(optional coping skill or icebreaker – see Annex II)

Section 12

IPA MESSAGING CAMPAIGNS REVIEW AND CRITIQUE

(50 minutes)

Exercise 12.1: Group campaign critiques

Materials: Color copies of messaging campaigns (preferably laminated) (see Annex I for examples). Flip chart paper and markers

Duration: 40 minutes

Objective: To provide rationale for use of messaging campaigns to address IPA. To encourage critical thought about effective and ineffective components of messaging campaigns by reviewing existing campaigns (including campaigns that would NOT work in this community).

Instructions:

Provide rationale for messaging campaigns: *As we just discussed, one way to help their communities to reduce IPA is through the development of messaging campaigns designed to encourage help-seeking and to change social norms that promote violence. Why can messaging campaigns be helpful?*

Building on participant responses, explain: *Messaging campaigns are a form of advertising – much evidence supports the use of advertising to get people to behave in a certain way! Consider ads such as for KFC, Nokia phones, etc. What is your favorite advertisement? Why does it work?*

Ask: Why might messaging campaigns be especially useful for addressing IPA?

Write participant responses on flip-chart paper, emphasizing the following:

- Reach a broad population who may not be coming in for services
- IPA is a sensitive topic - not all IPA survivors/perpetrators want to confide in others right away; they can instead see messages and decide how to proceed themselves
- Existing evidence supports the effectiveness of messaging campaigns

Review and critique of existing materials activity:

1. Divide participants into small groups (3 groups of 5 participants each).
2. Pass around messaging materials (a few campaigns for each group) for participants to review. See Annex I for messaging campaign examples and brief background information for each campaign.
3. Post the following questions (on flipchart paper) for participants to answer regarding each campaign:
 - Who is the intended audience?
 - What is it trying to say?
 - What is your reaction to this campaign?
 - What techniques/approaches does it use to send its message?
 - What is effective about this campaign?
 - What could be improved?
 - How would it work in my community? Is it culturally-appropriate?
4. While participants work in small groups, walk around and discuss each of the campaigns with them to make sure they are prepared to share their observations in the large group.
5. After the small group discussions, come back to the full group, and ask each small group to present their ideas to the large group.

6. As they present, ask the following:
 - What are the most effective parts of the messaging campaigns you reviewed?
 - What are the least effective components?
7. Write down responses on flip chart paper.
8. After all groups have presented, conduct a brief discussion to summarize. *Considering all of the campaigns, what ingredients should a good campaign include?* These may include:
 - Catching attention and creating an emotional response
 - Being clear and simple, easy to understand
 - Powerful image(s)
 - Telling a story – including characters
 - Being relatable (something that viewers can identify with)
 - Being culturally-appropriate; using images that are representative of this community
 - Being accessible to people with varying levels of education (e.g., comprehensible to illiterate community members by using images that can be understood without the written message)
 - Providing information about positive behaviors and beliefs held by others in the community (social norms approach – further described in next exercise)



Key message:

Messaging campaigns can be effective ways to change beliefs and increase help-seeking – but some campaigns work better than others for a particular community. Think about these points when planning your own messaging campaigns tomorrow.

Exercise 12.2: Social norms in messaging campaigns

Materials: Color copies of social norms messaging campaigns (preferably laminated). Flip chart paper and markers.

Duration: 10 minutes

Objective: To provide rationale for use of social norms approach in messaging campaigns

Instructions:

Share examples of social norms campaigns (see Appendix I for potential examples, though as desired, can use other examples specific to the context).

Ask: *I also want to review a few campaigns that use a “social norm” approach. Do you remember what a social norm is?*

Building on participant responses, explain: *A social norm is an expectation or belief from a community about the way that people should act in that community.*

Ask: *What is a gender norm?*

Building on participant responses, explain: *A gender norm is a community's expectations about how men or women should act.*

Ask: *How can gender norms and social norms be used in messaging campaigns?*

- Remind participants of the example that was provided in exercise 11.2 (e.g., the story about the man who started cleaning rugs outside where everyone could see him, and then slowly, the other men in the community started to do the same). This is an example of a way that one person can change social norms in a community.

⁸ Berkowitz, Alan (n.d.) A Grassroots' Guide to Fostering Healthy Norms to Reduce Violence in our Communities: social norms toolkit. Retrieved from http://www.alanberkowitz.com/Social_Norms_Violence_Prevention_Toolkit.pdf

- Explain that messaging campaigns focused on community beliefs can also be powerful. This is because what we believe about what the community thinks can guide our behavior.
 - Explain: *For example, many people believe that every man beats his wife. However, we know that this is not true and that many husbands and wives do not engage in violence and rather use other strategies to relieve tension and reduce disagreements. A man may be more likely to beat his wife if he thinks that the community condones this behavior. However, if he knows that other people in his community are not doing this, or disagree, he may be less likely to do it. Therefore, if we want to decrease IPA, one approach is to use a messaging campaign to help the community understand that IPA is not as common as they think, and that many people in the community do not engage in IPA, but rather solve problems through respectful communication.*
 - Explain: *Similarly, a woman may not seek help for IPA if she thinks the community doesn't believe in asking for help. However, if she believes that the community supports help-seeking, she may be more likely to reach out for assistance. Therefore, if we want to increase help-seeking, one approach is to help the community understand that many people in the community think that help-seeking is a good idea.*

**Key message:**

By sharing positive information and examples of what the community really does, we can help community members to feel more comfortable with engaging in the same positive behaviors (or not engaging in negative behaviors). Consider how you might use this “social norm” approach as you think about the campaigns that you will develop tomorrow.

Section 13

DAY 2 WRAP-UP

(10 minutes)



Materials:

Flipchart paper or whiteboard and markers



Duration:

10 minutes



Objective:

To review content covered during the day, reinforce linkages between topic areas, release tension, build group cohesion, and gain feedback from participants about ways to improve facilitation.



INSTRUCTIONS:

Ask: *What did we talk about today? Allow participants time to list topics. Fill in topics they do not mention.*

Wiping off flour group activity (optional - useful for releasing tension and promoting group cohesion)

Participants stand in a circle and pretend to wipe flour off themselves, and off others in the circle. Next, participants take some "power of the group" from the middle of the circle and pretend to put it on themselves (see full description in Annex II, ice-breakers).

Circle review. Participants stand in a circle. Explain: *As we did yesterday, let's review what we discussed today and what questions remain. We will go around the circle and each person can share 1) something important that you remember from the day; and/or 2) a question that you would like to address.*

Homework reminder. Explain: *Please practice breathing and/or progressive muscle relaxation at home tonight, and if possible, teach a family member to do it with you. In addition, as you know, we will be working in the coming sessions in groups to develop our own messaging campaigns for this community. Message campaigns will focus on beliefs about acceptability of violence and on encouraging help-seeking. This evening, please start to think about ideas for your campaign. What are the most effective messages for reaching your community?*



Tips for facilitators:

During wrap up, note key messages shared by participants on a newsprint/whiteboard, particularly comments by participants that may be useful in developing messaging campaign.

CURRICULUM

DAY 3

4 hours

Section 14. Day 3 Welcome and review

- » 14.1. Icebreaker and review

Section 15. Community member development of messaging campaigns

- » 5.1 Messaging campaign development: Group work
- » 15.2 Campaign presentation and feedback session

Section 16. Workshop wrap-up

- » 16.1. Workshop Wrap-up

Section 14

DAY 3 WELCOME AND REVIEW

(30 minutes)

Exercise 14.1: Icebreaker and review

Materials: "Onion" prepared in advance

1. Prepare small pieces of paper (should have as many papers as there are members in the group). On each paper, draw either a question mark sign (meaning knowledge question) or a happy face (meaning fun activity).
2. Create a ball of paper from these different sheets with each sheet wrapped around the next.
3. Prepare a list of knowledge questions about the material covered during the previous sessions, such as "what is IPA?", as well as instructions for fun activities, such as "sing a song" or "tell a joke".

Duration: 30 minutes

Objective: To welcome participants back to the session using a fun activity; to review workshop content.

Instructions:

Check-in: *How was last night? Do you have any questions or thoughts about the last session's content that you would like to share?*

Homework review: *How was it to try the breathing technique or the PMR technique at home? Was it different than doing it here? What was successful or challenging? Did you try to teach it to someone else at your home? How was this experience?*

We're also looking forward to hearing your thoughts about the messaging campaigns. We will get started on these in a few minutes.

Peeling the Onion Activity:

1. Participants stand in a circle and throw the paper ball around from one person to the next.
2. Upon catching the ball, each participant should peel off one of the papers and say whether it has a question mark (meaning knowledge question) or happy face (meaning fun activity)
3. Depending on drawing on the paper, either ask the participants a knowledge question or ask them to take part in a fun activity (according to prepared questions and activities).
4. Participants can answer knowledge questions with help from the rest of the group as needed. The facilitator should fill in correct answers when necessary. Use this exercise as an opportunity to review tricky concepts.

Review of workshop content: To supplement Onion activity review, hang flip chart papers developed throughout the workshop and review key points from each, especially as relevant for developing social norms messaging campaigns.

Section 15

COMMUNITY MEMBER DEVELOPMENT OF MESSAGING CAMPAIGNS

(1.5 hours)

Exercise 15.1: Messaging campaign development: Group work

Materials: Flip chart paper (multiple sheets for each group), art supplies such as markers, crayons, colored pencils, paint, colored and tissue paper, glue sticks, scissors. Flip chart paper with key info from the workshop and example campaigns discussed the session before can be hung on the walls for participants to review as desired.

Duration: 1.5 hours

Objective: Participants develop draft messaging campaigns.

Instructions:

1. Explain: *We will spend most of the remaining sessions developing our own messaging campaigns for our community. The messaging campaigns you develop should be focused on one or both of the following topics:*
 - a) *Changing community member attitudes about the acceptability of violence (setting the "social norm" that IPA is unacceptable);*
 - b) *Increasing help-seeking among community members who may be affected by IPA.*
2. Divide participants into smaller groups (e.g., five groups of three). Explain that group members can work together to develop a campaign, and individuals can also develop their own campaigns as desired.
3. Explain: *Each campaign should include a simple image and a message. The artwork and the writing do not have to be perfect (remember that the design can be further developed later). What matters are your ideas – as community members, you have expertise about how best to reach other members of your community!*
4. Remind participants about use of a social norms approach: *It can be powerful to send a message about the positive (anti-violence) behaviors and beliefs of community members, through images, and through messages such as "In this community, we believe..."*
5. During the next 1-1.5 hours, while small groups are working, visit each group to discuss their progress, answer questions, provide encouragement, etc.

Break 15 minutes

Exercise 15.2: Campaign presentations and feedback session

Materials: Flip chart paper with messaging campaigns developed by each group/participant. Blue tack to hang campaigns on the wall after each is shared

Duration: 45 minutes

Objective: To provide positive and critical feedback to participants about messaging campaigns they have developed; to collaboratively identify salient themes and strong messages/images in existing campaigns, and/or to build on existing campaigns by combining effective components.

Instructions:

1. Each group/individual should bring their campaign to the front of the room and present it to the group for feedback. As desired, feedback session can utilize the discussion questions below:
 - What is your reaction to this campaign?
 - What techniques/approaches does it use?
 - What is effective about this campaign?
 - What could be improved? What do we want to add/change, if anything?
 - How would it work in your community?
2. Once all groups have shared, identify common themes and strong components in each campaign. Explore whether there are ways to combine or otherwise create joint campaign(s) that represent the most effective components of various campaigns.
3. Facilitators take detailed notes as each group presents; all campaign materials and associated notes should be saved.



Key message:

THANK YOU to group members for sharing your ideas about how best to reach others in your community.

Section 16

WORKSHOP WRAP-UP

(1 hours)

Exercise 16.1: Workshop wrap-up

Materials: Optional: Post-test, satisfaction form, cake

Duration: 1 hours

Objective: To share information about the project's next steps and discuss the expectations of participants. To gather participant feedback useful for workshop improvement. To thank participants, celebrate workshop completion, and say goodbye.

Instructions:

Explain post-workshop activities (as relevant): If further steps will be taken with participant campaigns, describe this process here (e.g., using the ideas that you have developed throughout this workshop, we will work designers to develop messaging campaigns).

Post-workshop knowledge survey (as relevant): *Now we will ask you to take a few minutes to complete the knowledge survey that you took at the beginning of the workshop. Again, the purpose is not to test your knowledge, but rather an opportunity for us to learn about how effective we are in sharing information.*

Satisfaction survey (as relevant): *We will also pass out a very brief survey to assess your satisfaction with the workshop. Please be as honest as you can, as this will help us to improve our workshop.*

Group discussion about workshop feedback: *Finally, we would like to take some time to discuss with you as a group your impressions of the workshop. This can be done as a circle review exercise (incorporating wiping off flour/power of the group activity if desired), using the following questions:*

1. Overall impressions?
2. What aspects were most effective?
3. What could be improved?
4. Any remaining questions?

Closing ceremony: As desired, conduct brief closing ceremony, including:

1. Thanking participants for their participation and sharing moments that were meaningful to you as a facilitator
2. Distributing hard copy versions of workshop content as desired
3. Distributing relevant referral resources and contact information
4. Distributing certificates of participation to each participant (if appropriate)
5. Sharing cake or other dessert, playing music, and allowing time for socializing and saying goodbye

References

- ABAAD & Danish Refugee Council. (2015) *Practical Guidelines on Engaging Men against Gender-Based Violence for the Promotion of Gender Equality*. Retrieved from <https://www.abaadmena.org/documents/ebook.1496120823.pdf>
- ABAAD & Promundo. (2016). *Programme Ra*. Retrieved from <https://promundoglobal.org/resources/programme-ra/>
- ABAAD & World Vision. (n.d.) *Varying Perceptions, One Outcome: Field studies monitoring the attitudes and perceptions of women and men towards women's rights in Lebanon*. Beirut: Aaad – Resource Center for Gender Equality.
- Alexander-scott, M., Bell, E., Holden, J. (2016). *DFID Guidance Note: Shifting Social Norms to Tackle Violence Against Women and Girls (VAWG)*. London: VAWG Helpdesk.
- Berkowitz, A. (n.d.) *A Grassroots' Guide to Fostering Healthy Norms to Reduce Violence in our Communities: social norms toolkit*. Retrieved from http://www.alanberkowitz.com/Social_Norms_Violence_Prevention_Toolkit.pdf
- Center for Victims of Torture. *Restoring Hope and Dignity: Manual for Group Counseling*. Retrieved from <https://www.cvt.org/group-counseling-manual>
- Donovan, RJ & Vlasis, R. (2005) *VicHealth Review of Communications Components of Social Marketing/Public Education Campaigns Focusing on Violence against Women*. Melbourne: Victorian Health Promotion Foundation.
- ECOS, Instituto PROMUNDO, PAPAI, Salud y Genero. (2002). *Project H: Working with Youth Men Series*. Retrieved from <https://promundoglobal.org/resources/program-h-working-with-young-men/?lang=english>
- Heartland alliance international (HAI) & United Nations Relief and Works Agency (UNRWA). (2015). *Community workers Guide to understanding Gender-based violence and child protection basic concepts*. Retrieved from: <http://www.socialserviceworkforce.org/system/files/resource/files/Community-Workers-Guide.pdf>
- Instituto Promundo, Salud y Genero, ECOS, Instituto PAPAI and World Education. (n.d.) *Program M: Working with young women*. Retrieved from <https://promundoglobal.org/resources/program-m-working-with-young-women/>
- Keedi, A., Yaghi, Z., & Barker, G. (2017) "We Can Never Go Back to How Things Were Before": A Qualitative Study on War, Masculinities, and Gender Relations with Lebanese and Syrian Refugee Men and Women. Beirut, Lebanon: ABAAD and Washington, D.C.: Promundo. May 2017.
- SASA. (n.d.) *Training Module: Raising awareness about the imbalance of power between women and Men*. Retrieved from http://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA_Activist_Kit/AWARENESS/Training/Awareness.Training.InfAttitudesModule.pdf
- The Reproductive Health Response in Conflict (RHRC). Consortium. (2004). *Gender-based Violence Tools Manual*. New York: RHRC Consortium.

ANNEX I. Messaging campaign examples

A. “Bi Oulo (They say) – an ABAAD campaign



This campaign tells a story from the perspective of a woman who is a victim/survivor of IPA. The text is as follows:

- Our women neighbors used to look at me and say, 'she surely has done something.'
- Neighbors used to hear my voice every day and say, 'if she is unhappy/uncomfortable she would have left.'
- My dad used to take me back to my husband and say, 'in the future he is going to change.'
- My best friend used to tell me – of course he's sick (be compassionate, something is wrong with him)
- Even my family used to say – no one has the right to interfere between a man and his wife
- My mother used to pray and say – you have to endure for the kids....

It is my funeral day, is there anyone who still has something to say?

--

Violence is not a disease, it is a crime – inside and outside of the family.

Ending violence is the responsibility of everyone.

Aim is to encourage help-seeking among victims of IPA and encourage others to help as well.

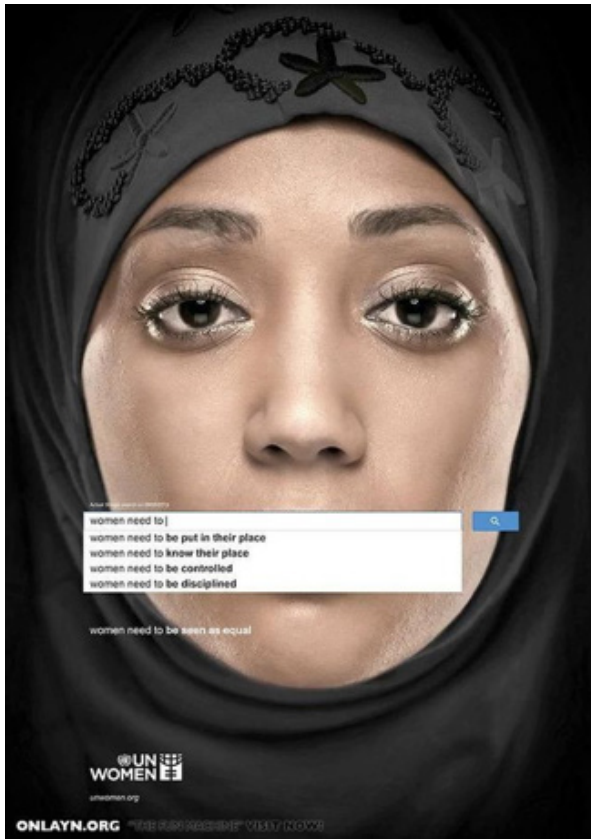
B. Child's eyes campaign



Pay attention to the child's eyes – what has he witnessed? What is he afraid of?

This campaign aims to send the message that IPA between parents can have a negative impact on children.

C. UN Women Campaign



This campaign uses google search engine to identify some common gender norms about women (need to be controlled, disciplined), and to suggest that they should be replaced with a norm of equality.

D. ABAAD Men's Center campaign



This campaign targets men who may resort violence against their partner when as means of relieving stress. The aim is to encourage help-seeking when one is facing pressure or stress that could lead to violence.

E. Campaigns for male victims of IPA



These two campaigns target men who are victims of IPA with the aim of reducing shame and encouraging help-seeking.

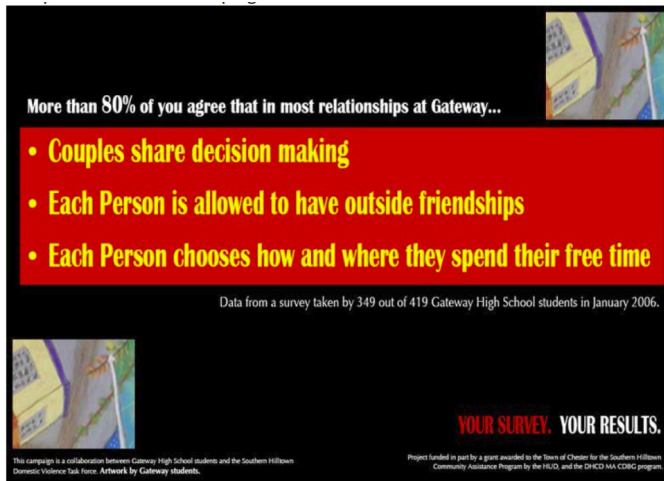
F. ABAAD religious leaders campaign



These campaigns use religious leaders to send messages about the acceptability of violence. The aim to show that all religions discourage, rather than promote, violence.

G. Social norms campaigns

These campaigns¹⁰ use a social norm approach. In other words, they focus on community beliefs about healthy relationships.



This campaign emphasizes that almost all members of a certain community agree about what is needed for a healthy relationship.

This campaign emphasizes that most men in a certain community would not force their partner to have sex when she says 'no'.



This campaign emphasizes that most men in a certain community would not force their partner to have sex when she says 'no'.

¹⁰ Berkowitz, Alan (n.d.) A Grassroots' Guide to Fostering Healthy Norms to Reduce Violence in our Communities: social norms toolkit. Retrieved from http://www.alanberkowitz.com/Social_Norms_Violence_Prevention_Toolkit.pdf

ANNEX II: Ice Breaker/relaxation/self-soothing exercises

Exercise one: Follow the Leader

- Ask the participants to stand in a circle and ask one volunteer to leave the room.
- The group should assign a leader amongst them.
- The group leader is responsible for choosing a certain movement within the group, which the rest of the group must imitate
- The volunteer outside the room is asked to come back in.
- The leader makes movements which the rest of the group imitate, while trying to remain unknown to the volunteer.
- The volunteer is given three chances to discover who the leader of the group is.

Exercise two: The movement

- Ask the participants to stand in a circle.
- The volunteer starts with a specific body movement. All the participants must reciprocate the movement.
- The turn goes to the person next to the volunteer and he/she must start a new body movement.
- The participants must reciprocate the new body movement.

Exercise three: The snow

- Ask the participants to stand within a small distance from each other
- Participants are asked to randomly walk and move within the given distance.
- The facilitator then counts "1,2,3 Snow".
- The participants freeze when they hear the word "Snow".
- Whoever moves loses and leaves the game.

Exercise four: Broken Telephone

- Ask the participants to sit in a circle.
- The facilitator should whisper a funny and long sentence to one of the participants.
- The participant should whisper the sentence to the participant that is beside him/her.
- The sentence moves around the group until it comes back to the person who first spoke it.
- Then the sentence that was first sent out and the sentence that was received should be compared.

Exercise Five: Dusting Flour

- Ask the participants to stand in a circle.
- Ask participants to imagine that they are all covered by flour.
- The participants should work individually to remove the flour from their clothing.
- The facilitator can present first how this can be done: dusting off from arms, down to chest and abdomen, then dusting off from legs.
- Give participants between 2-4 minutes to dust off individually, while encouraging that they cover all their body parts.
- Depending on the group dynamics, it may be also possible to ask participants to dust off the flour from a colleague [please be sensitive especially in mixed gender groups, participants may have reservations around touching another participant especially if they are from different genders].

Exercise six: Body shake

- Introduce the exercise to the participants as follows: *We have been discussing a lot of heavy content – how is your body feeling now? Is anyone feeling tense or stressed? As we have discussed earlier, when a person becomes nervous or stressed, this feeling can easily turn into irritability and anger. However, we can learn ways to release stressful energy stored in the body before it turns into anger or causes a lot of distress. A common reaction is to use this energy to hit, kick, or break something, but let's practice a safer way to release some of this energy. You can use this when you're irritable, or when feeling anxious or stressed. This activity is not only helpful for adults but can also work well for children.*

Instructions:

- Participants should stand in a circle
- Shake your right arm while counting from 5 to 1.
- Shake your left arm while counting down from 5 to 1.
- Shake your right leg 5 times.
- Shake your left leg 5 times.
- Repeat this process, with the 2nd round counting to 4, the 3rd round counting to 3, etc. until the final round when after you shake each limb one time, then finish by shaking the whole body.
- Optional - end by shaking or dancing for a few minutes!

ANNEX III: Community-specific data examples

This Annex consists of data collected in a community called Marj in Bekaa Valley, Lebanon during initial development of this manual. These data are NOT provided to be used in implementation of this intervention for other communities, but rather as examples of community-specific data that can be used to adapt this curriculum to specific populations. As described in the “Best practices for use of this manual” section, we recommend eliciting community input as possible for adaptation purposes. Areas for use of community-specific content are noted in the curriculum body.

3.1. Sample description of community-specific adaptation based on baseline data collection (in Marj community):

We spoke to 21 women and 16 men in interviews, and 40 individuals in focus group discussions (including 6 service providers, 13 community leaders, 12 women community members, and 9 men community members). For interview participants, ages ranged from 18-71, with an average age of 34. All of the participants were married, and most of them (83%) were currently living with their partner. Participants reported being from Dimashk, rural Dimashk, Idlib, rural Idlib, Hums, Halab.

Table 1. Community interview demographics

Gender	21 women; 16 men
Age	Range 18 – 71, mean = 34 years
Partner status	35 Currently married/living with partner; 5 (17%) currently married not currently living with partner
Total number of children	Range 0 – 9, mean = 4 children
Total number family members in the household	Range 2 -9, mean = 6 people in household
Education	31 (84%) less than primary; 5 (13%) primary; 1 (3%) Tertiary/higher education.
Employment	32 (94%) not employed; 2 (6%) employed
Place of origin	Damashk, rural Dimashk, Idlib, rural Idlib, Hums, Halab

The information gained from these community members helped to inform the development of this workshop. We will share some of this information throughout the 3 days in hopes of ensuring that the workshop focuses on local community opinions, not those of outsiders. None of the data contains personal information about those who provided it. A Committee made up of Syrian community members has also reviewed and contributed to this manual.

3.2. Stressors in Marj community

Top three stressors in Marj community:

- having enough money and a job (94% men; 57% women),
- concerns about events and people in Syria (81% men; 48% women),
- having a stable place to live (63% men; 52% women).

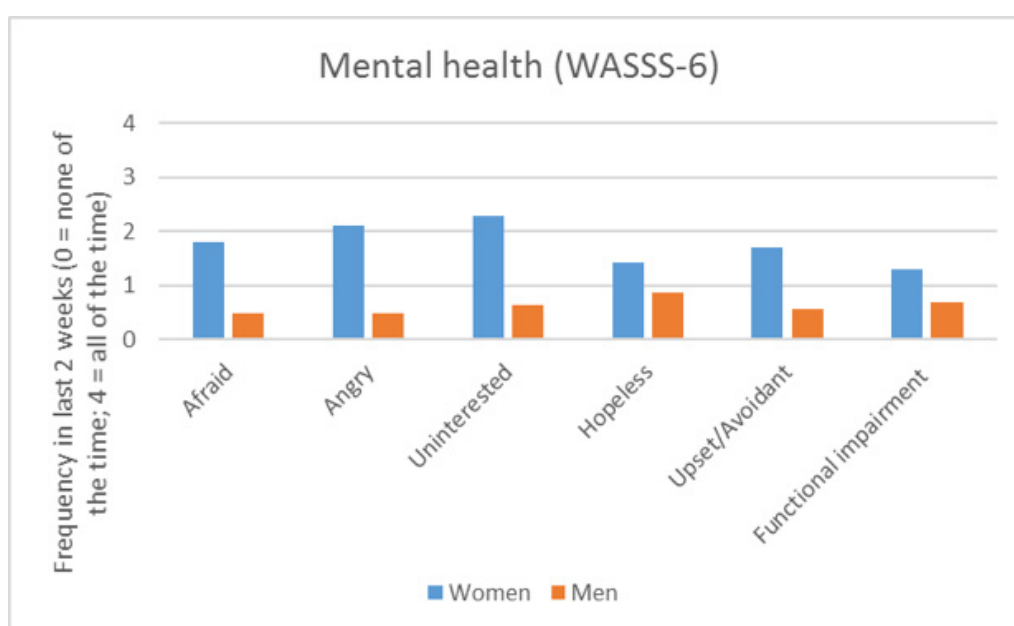
Other major stressors were:

- fears of being displaced from the community (50% men; 38% women)
- safety (38% men; 24% women),
- tension with the Lebanese community (31% men; 33% women),
- having enough food (38% women, 0% men)
- education for children (19% men; 29% women)

3.3. Mental health reactions reported in Marj community:

- 1/3 (35%) of participants reported feeling so afraid that nothing could calm them at least some of the time in the last two weeks, and
- 1/3 (34%) reported that at least some of the time, they felt so angry they felt out of control.
- Almost half (44%) said that at least some of the time they felt so uninterested in things they used to like that they did not want to do anything.
- 27% said that they felt so upset about past distressing events that they tried to avoid talking about it or doing things that reminded them of it.
- More than one out of three people (38%) said that they sometimes felt so hopeless that they did not want to go on living. If you feel like this and think that you might do something to hurt yourself, please talk to one of the facilitators after the session.

Figure1. Mental health reactions by gender in Marj community (community member interviews)



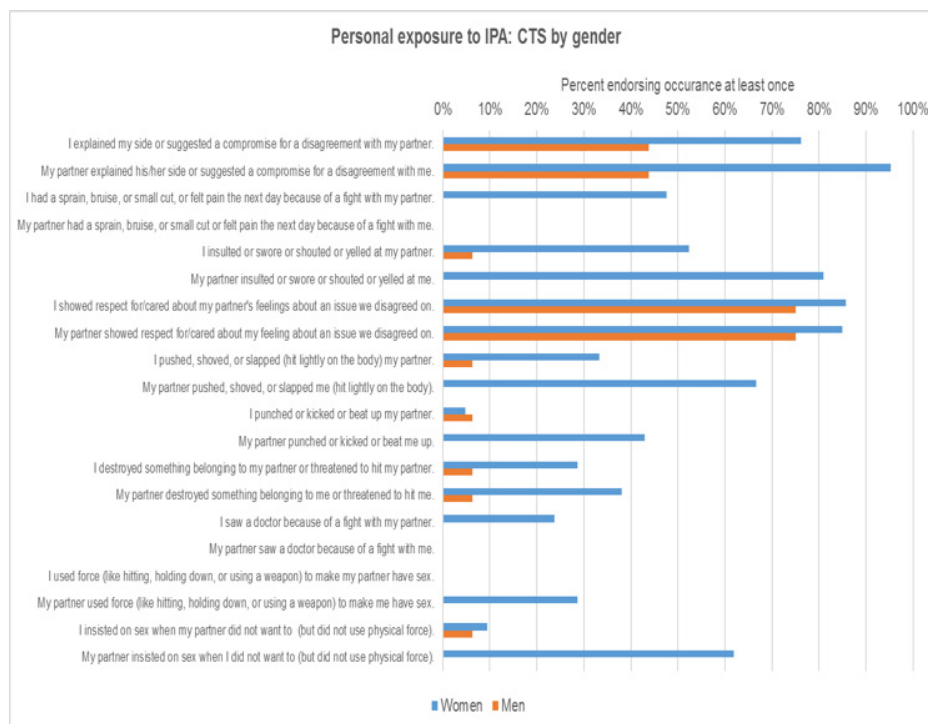
3.4: Rates of IPA in Marj community

In the interviews we conducted in this community:

- 8 out of 10 women (81%) reported that their partner had insulted, swore, or shouted at them (and 52% said that they had done the same to their partner).
- Two out of three women (67%) reported that their partner had pushed, shoved, or slapped them at least once (33% said that they had done this to their partner).
- 43% reported that their partner had punched, kicked, or beat them up (5% said that they had done this to their partner)

Interestingly, men in the community did not report IPA as frequently – only 6% reported that they had insulted or yelled at their partner, pushed or shoved their partner, or punched or kicked their partner. None reported that their partner had done these things to them.

Table 2. Exposure to intimate partner abuse (as measured using the CTS-2 short version) (community member interviews)



3.5: Consequences of IPA for children in Marj community

Nearly half (44% of interviewees; 65% of women and 14% of men) reported that children witness violence in their homes.

Nearly half (46%) reported that when they were children (under age 18) they had witnessed their father beat their mother at least once (27% said that this happened “very often”).

3.6: Reasons for IPA in Marj community

In the interviews we conducted, we found that the most common reasons women gave for their husbands hitting them were:

- money problems (42%)
- difficulties at work (38%)
- when he feels distressed about events in Syria or being away from Syria (38%).

In our interviews in the community, 38% of men and 53% of women reported that they have argued or yelled to release tension. Almost half (46%) of women reported that they have hit their children to release tension.

The following table outlines common causes of IPA and associated quotes from community members, collecting during interviews and focus group discussion:

Table 3. Community perceptions of causes of IPA (community member interviews and focus groups)

Perceived causes of IPA	Representative quotes
Children misbehaving	If one of the children starts crying, and they live in one room only, this would increase the husband's temper. -Syrian woman
Woman did not complete household responsibilities	
Jealousy	Some guys would beat their wives out of jealousy; "your hair is visible", "you are wearing provocative clothes". Women likes to look better than other women. She likes to wear nice, clean, and stylish clothes (clothes that show her body; tight cloth), but the husband would want her to wear large clothes. -Syrian woman
Education gap between the couple	
Stress related to insufficient space/privacy	She would have many children, and they would be living in a small tent (like this tent). There is no privacy. -Syrian woman More than one family are living together in a very small house, the husband would lose his mind (□□□□) -Syrian woman
Sex – difficulty often due to lack of privacy	The husband won't understand; even if you told him that you are tired, or that you are not in the mood. If you tell your husband that you do not want to have sex, he will start beating you. -Syrian woman
Stress related to money problems/work	She would nag that she needs/wants money. – Syrian man If they had 4 or 5 children; and the father couldn't get what he wants (he would want to go out as family but can't afford it, for example), he would start shouting and beating; he may beat the children as well. -Syrian woman As they said, housing and unemployment. The husband is always sitting at home. Cigarettes are not even affordable for him. This would lead him to start having an angry and irritable temper towards his wife. -Syrian woman I know a man who lives at his parents in law place. His wife humiliates him everyday, and she tells him to leave if he is feeling any disdain or dislike to where and how they are living. – Syrian man
Stress related to discrimination by host community	You arrive home already feeling tired and weary psychologically, from everything that has happened with you outside (at work). Then the wife would start nagging. You have people who insult us, Syrians. Yes, especially from Lebanese people. You will hear people cursing you: "Damned is the one who got you here". (□□□□ □□□□ □□□□ □□□□) – Syrian man
Stress related to events in Syria	You will receive a call from Syria saying that your brother or cousin is facing some problems. Therefore, these problems are now your problems. -Syrian woman Then the husband would have a shorter temper than usual; especially towards his wife as well. And the wife will be depressed, and wouldn't feel well. -Syrian woman
Exposure to conflict-related violence	"The state is violent against our men here. It is only normal for our husbands to be violent against us." -Syrian woman (IMAGES MENA)
Belief that husbands should control the wife	
Childhood exposure to violence	

3.7. Help-seeking in Marj community

Table 4: Willingness to disclose IPA, and to whom (community member interviews)

Question	Women	Men
If you were being abused by your partner would you tell someone about the abuse?	71% Yes; 29% No	100% No
If no, why not?	Have no one to talk to; private matter; do not want to become a joke	Scandal, private/familial matter
If yes, to who?	My family; my partner's family; close friends	
If you were using abusive behavior with your partner, would you tell someone/seek help to try to change this behavior?	60% Yes; 40% No	25% Yes; 75% No
If no, why not?	Shame; scandal; gossip	Scandal; private matter

Table 5: Barriers to help-seeking for IPA (community member interviews and focus groups)

Stigma	The rural community is conservative; and these issues are considered private. The issue should not be discussed fearing for the family's reputation (حرجاً على سمعة العائلة). Violence, both verbal and physical, is 40% to 50% prevalent in our village. But 90% of the latter cases stay as a private matter between the couple and within the household. Only the couple's parents would be aware of what's going on. – Syrian community leader As you were saying, sometime shyness would stop a woman from talking. And sometimes the reason would be to keep her reputation and her parents' reputation intact. She wouldn't talk in a subject that is still considered a taboo. But this way, she is losing her life. – Syrian community leader Men wouldn't marry her sisters anymore fearing that they would turn out like her. – Lebanese service provider Yes, it's the society's point of view that worries her the most. In society's perception, it's always the woman's fault. – Lebanese service provider She'll fear to be a divorced woman in this society. – Syrian female
Fear	What I realized is that no one will approach you and tell you "I am being abused". There still exists embarrassment and fear regarding this topic. Even if a woman sought your help, she'll make sure to tell you "please do not say that I am the one who told you". I worked on a case where three women from the camp, after they saw the [organization] flyer I kept there, told me if we could, as an organization, go to the camp to give/present tips to men there. And if we could talk about why they are abusing their wife's, and told me: "but please do not mention that we told you so". Fear still exists, no matter how much you targeted awareness towards women, they are afraid. In my opinion, awareness campaigns should target males instead of females....Nonetheless, they are afraid; they don't have the courage to talk about such sensitive topics. – Service provider in Bekaa Valley Sometimes, she would fear getting her children taken from her, if she sought help. So it's better to keep quiet and indulge what's going on, for the sake of the children. – Service provider Or they might fear for her children (their grandchildren). If she got divorced, he might keep the children and marry another woman, who would become their stepmother. – Syrian woman
Lack of social support	There are many women who have no one by their side, and this would be the reason why her husband controls her. He would tell her: "you do not have a family here, and I can control you in any way I want". However, if a woman has her family by her side or people that she knows, they would have her back. But if she doesn't have anyone by her side, he would control her. – Syrian female
Lack of options (or lack of knowledge about options)	A woman might not talk about her situation for more than one reason. First, she'll overthink the situation and it's consequences, she'll picture herself leaving her home and her children. Her parents might not have a place to welcome her again. They might not have the money she needs to survive. She might not have a job. So she'll view talking about the IPA she's experiencing as useless, because it might not make things better, it might lead her to a miserable route as well. Her husband beats her and do not give her any money, if she sought the Sheikh, he might tell that she is right and she should leave him. But if she left, where would she go? If the woman doesn't have a job and a home, she'll stay quiet and endure her situation. – Syrian community leader In Syria, if she were being subjected to any abuse, she'd go to her parents place. But now, if she were abused, which tent would offer any hospitality? As an organization, you might offer help for a while, but after that, who would help her? –Service provider working in Bekaa Valley But does existence of organizations help? What I meant is that there is a resort/shelter for women. These organizations are now widespread in our community. So when she sees that such organizations exist, and that they are ready to help her; it is possible that she'll seek their help... But if those organizations didn't exist, a woman might choose to indulge the pain, since she doesn't have an alternative or another solution. – Syrian community leader
Barriers to help-seeking for mental health	
Stigma	In addition, people often don't ask for help for mental health difficulties – why do you think that this is? Stigma: There isn't any acceptance towards this issue. It's ignorance is the main reason behind the "non-acceptance" of seeking professional help. If someone went to see a psychiatrist, they'd consider him either stupid or insane...The first word that the general population would describe someone who is seeking professional mental health aid is "crazy/insane" – Service provider, Lebanon

When we spoke with community members we asked, **what would encourage someone being abused to seek help?** We received the following suggestions -

- "If someone around her was by her side, he/she might be able to empower her and advise her to seek help." – Syrian woman
- "Someone who would tell her that she shouldn't live like that for the rest of her life." – Syrian woman
- "She would talk more about her feelings with her neighbor than she would with her parents." – Syrian woman

If you were talking to a woman who told you: "Yes, I am oppressed in my relationship with my husband", • to get her rights; because a women (محكمة شرعية) you can tell her that she can go to the religious court has a right. Then she would be encouraged to talk about the sensitive topic of hers without thinking that he would throw her out of the house and take the children." -Service Provider

When we spoke with community members we also asked, **what would encourage someone who is being abusive (the perpetrator) to seek help?** We received the following suggestions –

- "If he talked to someone who told him that what he did is wrong, then he might change his behavior." – Syrian woman
- "If the husband abuses the wife and treats her in a violent manner, when he meets his friend/s, he/they might advise him. He/they might tell him: 'why did you do that to your wife? The woman would behave better if you talked to her in a kind and gentle way. Both the kind and merciless words are a way of communication, use the kind ones.'" – Syrian woman

