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NPO法人グローバルブリッジネットワーク
 Global Bridge Network



“Improvement of school environment to combat Menstrual Hygiene Management (MHM) challenges to Stop Adolescent Girls’ School Dropouts in Uganda”

Project Period: April to December, 2019

Activity Title: Gender awareness and sex education including sexual and reproductive health and rights 2 primary schools in Pallisa.

Date and Location:

No	Date	Location
1	21 st October, 2019	Odusai Primary School
2	22 nd October, 2019	Opadoi Primary School

Introduction:

Visionary Lady Foundation (VLF) in partnership with SORAK Development Agencies and with support from Global Bridge Network (GBN) conducted gender awareness, sex education and Sexual Reproductive Health and Rights training in 2 primary schools of Odusai and Opadoi Primary Schools. The activity is a youth-led social empowerment project that seeks to support young people (aged 8-13yrs) on sexual reproductive healthy and rights. It integrates promotion and access of Youth Sexual Reproductive Health Right (SRHR) and prevention of Gender Based Violence (GBV) among young people while further seeking to empower young people to demand for and fulfill their rights in a participatory and inclusive manner that also recognizes and actively engages other community -level actors.

The project is implemented in Pallisa District in various Schools and its *overall objective* is to contribute to a healthy youth population, free from violence and empowered in an inclusive society that promotes rights of children.

Purpose/ Objective of training/ activity:

To equip pupils with accurate knowledge, skills and attitudes on SRHR/GBV Prevention so that they are able to meaningfully live their lives.

The Specific Objectives were to support Pupils to,

- Better understand the concepts of skills based health education (Skills based health education is an approach to creating or maintain healthy life styles and conditions through the development of knowledge, attitudes and especially skills, using a variety of learning experiences with an emphasis on participatory methods) and related peer led health education methodologies

- Acquire accurate information about Gender Based Violence and Reproductive and Sexual health issues including HIV/AIDS
- Discuss their own attitudes and values regarding youth health education
- Develop interpersonal and group communication skills
- Equipping participants with communication and advocacy skills that will enable them to support their fellow peers in seeking redress and health services in the event of violations as well as demand for Government accountability on health services
- To build capacity of participants to effectively engage communities to advocate for and address SRHR services

Participants:

Location	Male/others	Female/others	Total
Odusai Primary School	120	160	281
Opadoi Primary School	100	200	300

Facilitators:

1. VLF Staff (3)
 - Daisy Arutun; Team Leader
 - Onapi Steven; Volunteer
 - Nyamera Betty, Volunteer (Tailor)
2. SORAK Staff;
 - Muhammad Kyeyune; Executive Director
 - Shamim Nalwanga –Programme Officer
 - Viola Nakalembe- Project officer-Volunteer
3. Health Worker
 - Akello Annet

Activities:

The following activities were held.

Training on Sexual Reproductive Health & Rights

This topic helped pupils get the opportunity to learn more about Sexually Transmitted Infections (STI, such as Candida), HIV/AIDS, Teenage pregnancy and their Rights as children. They were also given chance to explore the causes, consequences and prevention of the diseases. A right was defined as something that an individual or population can legally and justly claim.

Reproductive health is a state of complete mental, physical and social well-being and not merely that absence of disease of infirmity, in all matters relating to reproductive systems and to its functions and processes.

Why is Reproductive Health Important?

Reproductive health is important for health, economic, and human development but also Reproductive health needs differ at each stage of life.

Beliefs, attitudes and behaviors towards adolescent sexuality

Participants learnt about the policies and programs related to reproductive health care services, they also got to know the availability and accessibility of existing reproductive health care services including the youth friendly health care services in the different health centers. And also discussed some of the existing beliefs, attitudes and behaviors towards adolescent sexuality for example it is said that when girls have big breasts that means she has sex with very many boys, this has made girls to most often not be free with their breasts and they tend to either tie them or always cover them in a sweater etc.

The facilitator summarized and explained the difference between reproductive and Sexual rights as shown below.

No	Sexual Rights	Reproductive Rights
1	The Right to sexual pleasure without fear of infections, diseases, unwanted pregnancy or harm	The right to the highest attainable standard of health
2	The Right to sexual expression and to make sexual decisions that are consistent with one's personal, ethical and social values	The right to life and survival
3	The Right to sexual and reproductive health care, information, education and services	The right to liberty and security of the family planning
4	The right to bodily integrity and the right to choose if, when, how and with whom to be sexually active and engage in sexual relations with full consent	The right to health, reproductive health and family planning

NB: Pupils were encouraged to always abstain from having sex since they are still very young. Some pupils during the discussions said that some children were already actively engaged in such acts but they were encouraged to always protect themselves.

LIFE SKILLS

The topic enabled participants to learn about the skills of knowing and living with one-self, which included self-esteem, assertiveness, self-awareness, coping with emotions and stress. Abilities which enable individuals to develop adaptive and positive behavior. They help individuals to deal effectively with challenges and demands of everyday life.

Objectives of the session

- Recognize the weak and strong sides of our own behaviors
- Appreciate themselves and identify their own unique talents
- Learn how to take charge of their personal challenges
- Appreciate things that cannot be changed in their lives but accept them for example height, size of breasts etc.

Benefits of Life skills to the youth and adolescents

1. Enables vulnerable children to have greater control of their own lives
2. Promotes positive healthy behaviors among adolescents and youth
3. Empowers adolescents to positively and effectively manage themselves when confronted with difficult situations
4. Enables adolescents to manage situations of stress and emotional breakdown
5. Improves the relationship between youths and significant adults
6. Contributes to making youth/adolescents better citizens in their communities which will lead to benefit the entire nation

CATEGORIES OF LIFE SKILLS

1. Skills of knowing and living with oneself

- Self-esteem
- Self-awareness
- Assertiveness
- Coping with emotions
- Coping with stress

2. Skills of knowing and living with others

- Decision making skills
- Negotiation skills
- Effective communication
- Non-violent conflict relation
- Empathy
- Critical thinking
- Problem solving
- Peer resistance
- Friend formation
- Creative thinking

3. Skills of making decisions

UNPACKING Sexual Reproductive Health Right&MYTHS

Adolescence is a transitional period from childhood to adulthood characterized by personal, mental and social changes.

Characteristics of Adolescent

- High sexual desires
- Want to interact with opposite sex
- Have Peer pressure
- They feel independent
- They are inquisitive
- They move at night

Body changes

- Development of muscles
- Hips grow
- Sexy voice
- Change in voices/ voice deepen
- Menstruation
- Pubic hair
- Body shapes up
- Enlargement of the Penis
- Beards
- Development of breasts

Psychological changes

- Emotional Changes
- Feel shy
- Broaden chest in boys

A myth

- Is a false story believed by some people
- It is a perception for example it is believed that girls with big breasts over have sex
- A story with a hidden a meaning E.g. In Kasese it is believed that when you have sex in the box, the queen mother, the god of the mountain comes and spits in your Vagina and then you will not be able to give birth again

Examples of Myth in relation to SRH

- Short women don't produce
- If you erect and don't sleep with a woman, then you won't produce.
- When you sleep with many women, by the time you marry, she will also have slept with the same number of men
- When one gets hips, they say you are having sex

MENSTRUATION

Body changes and Menstrual management

This session was aimed on how to help girls manage menstruation and body changes as they grow. It also involved defining what menstruation is and what age a girl starts experiencing it.

Participants are made to understand what it is and how to manage it menstrual cycle and the participants had different perceptions of what menstruation is. They among others mentioned that menstruation is the monthly flow of blood through the vagina. Participants wanted to know whether or not women get menstruation, and the facilitator confirmed that bareness has nothing to do with menstruation

Pupils were also made to understand the importance of menstruation, what to use and what not to use during menstruation

How do we manage menstruation?

- Always be prepared, keep track of your days
- Always use sanitary pads or other available cotton materials
- Girls need to sun dry their reusable sanitary pad
- Always change your pads
- Avoid eating too much salt especially during periods
- Drink plenty of warm water or fresh juice
- Take a hot cup of tea
- Don't share reusable pads

Good materials to be used during periods

- Cotton wool with gauze
- Sanitary pads
- Towels

Bad materials not be used during menstruation

- Silk clothes.
- Wet clothes
- Polythen bags

UNPACKING GENDER BASED VIOLENCE (GBV)

The discussion mainly involved defining and helping pupils understand the various concepts such as what gender is, sex, gender norms, gender roles, gender equality, causes, consequences, prevention and how to respond to GBV incidences etc.

There are mainly 2 words Gender and Violence, Gender is what society or culture expects from you based on whether you are male or female while as Violence is inflicted pain put on either male or female.

Types of Violence

- I. Sexual violence:
- II. Physical Violence:
- III. Emotional Violence:

IV. Economic Violence:

Causes of GBV

- Poverty
- Fear of responsibility
- Unequal opportunities to education
- Failure to provide basic needs in the family
- Forced marriages
- Unemployment disrespect among married couples
- Lack of trust in a relationship
- Lack of information about Human Rights and where to seek help

Consequences of GBV

- Family break up/Divorce
- Children dropout of school
- Death
- STIs, AIDS/HIV, STDs
- Child/early marriages
- Early pregnancies
- Unsafe abortions
- Stress
- Loss of livelihood and economic dependency
- Arrests
- Maternal mortality
- Infant mortality

Expected Government intervention against GBV

- Criminalizing all forms of GBV
- Punish all perpetrators and provide help to the victims
- Take action to empower women and give support to their social, economic and physical welfare

Adolescent concerns

- Child pregnancies
- Unsafe abortion practices
- Harmful traditional practices
- Substance abuse
- STI and HIV
- Not able to take care of children

Actions available for adolescents

- Mobilise political, financial and economic support
- Be sensitive

- Provide facts and options but not only don't
- Adolescents should go for SRH services

GENDER AND GBV

Gender	What a society or culture expects from you based on whether you are male or female (roles, behaviors, etc.)
Gender roles	Expectations of how men & women should act and what their roles are in society
Gender Stereotype	An over oversimplified or biased description of the abilities of men and women
Sex	Biological characteristics of men and women
Gender Equality	Giving equal opportunities to men and women in all aspects of life
Gender Norms	Socially acceptable behaviors and roles for men and women
Power	GBV is about socially determined power relations and power between men and women. It occurs because society gives one gender (men/boys) more power than the other. Men using more power over women
Control	All acts are intended to control the victim
Rights	GBV is an abuse of Human rights. It violates the rights of the victim

CAUSES OF DOMESTIC VIOLENCE

- Poverty
- Mistrust
- Lack of confidentiality in the relationship
- Illiteracy

Pictorial



The Headteacher of Opadoi primary school addressing the pupils during the SRHR and GBV Prevention awareness training



A pupil of Odusai primary school sharing experience on how GBV is affecting her and her siblings at home



Group picture after the training in Opadoi Primary School



Pupils participating on a discussion of sexual Reproductive Health Rights and GBV prevention



Program manager from SORAK Development Agency facilitating a session on SRHR/GBV Prevention



The senior man teacher making emphasis on boys to support girls and give them an enabling environment so they can complete school

Major challenges:

1. Lack of material such as brochures, T-shirts with SRHR/GBV messages, written literature with SRHR and GBV prevention information to share with the pupils.
2. Moving pupils from their respective schools to a central place wasn't possible so we visited each school separately which gave us overwhelming numbers of participants but they were all very eager to learn
3. Hard to reach some school because of accessibility problem
4. Lack of a camera to take good pictures

Recommendations:

1. Frequent visit to the schools to carryout similar activities now that Health clubs have been formed in the respective schools.
2. Avail the clubs with Information, Education and Communication (IEC) materials with accurate information in regards to SRHR and GBV Prevention.
3. Need to develop "speaking messages" and give schools to pin around the compound and classes.
4. Need to train teachers on how to handle traumatized children from GBV families

Feedback from VLF

The training was great, numbers of participants were very many and pupils were interested in learning. Boys were actively participating in the activities including the practical activities. They even show cased on how to wear the sanitary pad, it should be noted that the girls are still shy to discuss matters in relation to Menstruation, so we have to develop a creative way in which to build confidence and self-esteem of the girls. More trainings are needed. Realised that the boys are willingly joining the Health Clubs and also supportive to the girls. We hope to develop various activities that will fully engage both boys and girls

Conclusion:

In summary, the training was appreciated by both schools and the Head teachers requested that many more should be done. The targeted numbers of 500 pupils was achieved and pupils impacted with information and skill to properly manage their SRHR.