

# Psychosocial Support Group Sessions **Manual**

***Supporting, Empowering, and Protecting Refugees  
and Jordanians***

***Manual for Program Managers and ARDD-LA Psychosocial  
Facilitators***



**ARDD-LEGAL AID**

Arab Renaissance for  
Democracy & Development

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**Psychosocial Support (PSS) Unit**

## Forward

As principal author, I'm proud to present the Psychosocial Support Group Sessions Manual, developed by the PSS Unit at ARDD-Legal Aid. This manual contains 10 facilitator guides responding to psychosocial needs of refugees (mostly Syrian but others too) and vulnerable Jordanians. Development of this manual arose out of practical need. ARDD-LA was facilitating sessions on issues including women's rights awareness raising and political participation, but refugees and local participants were asking for other help, too. *How do we know if our children are okay? I'm homesick! My teenager refuses to go to school because he's bullied. I can't sleep. My 8-year-old has started wetting the bed again. My husband has become violent. I feel overwhelmed. I cry all the time.* All of these and many more difficult questions were directed at ARDD-LA's program staff and so it was decided to develop sessions to meet and enhance participants' abilities to help each other solve these kinds of problems.

Using a resilience framework, we wanted to firmly focus sessions on teaching individual peer-to-peer support, skills training, and information provision while acknowledging the personal strengths, resourcefulness, and solidarity of participants. We also wanted to make the sessions evidence-based and in accordance with best international practice, but we were also determined to work with local cultural norms, values and faiths, and to make use of the skills of local mental health professionals in session design and facilitation. The team developed, piloted and refined most of these modules over an 18-month period, and continue to do so, and we have plans to develop more sessions addressing different issues as they emerge.

The vulnerabilities of participants in these sessions and the sensitive nature of topics discussed means sessions must always be facilitated by trained, local mental health professionals. I must thank Dr Lina Darras, Team Leader of the Psychosocial Support Unit at ARDD-Legal Aid, originally a counseling psychologist, now turning her attention to the humanitarian sector, for her tireless work over the past two years in developing, implementing and refining these sessions with hundreds of refugees and Jordanians in Zarqa, Balqa, and Salt. Without her energy, dedication and expertise, this manual would not exist. I would also like to extend a special thanks to Oxfam GB, whose support for projects including Women's Access to Justice (WAJ) and Voices for the Future made the development and piloting of this manual possible.

I would like to extend a special thank you to ARDD- Legal Aid's technical experts, all of whom worked together as a team to make this manual possible: Directors Samar and Souzan Muhareb for their expertise in women's rights and law; Dr. Sanaa Abdo for her knowledge of adult learning techniques and expertise in faith-based approaches; Roza van der Heide for her clinical psychology expertise; and Carlin Mackenzie for administrative assistance. Their support and expertise has allowed ARDD-Legal Aid to develop a

manual to support and enhance the resilience of the most vulnerable in Jordan.

Finally, I would also like to acknowledge those organizations whose excellent resources we've made use of in the development of this manual: the World Health Organization, Mercy Corps, United Nations Children's Fund, the United Nations Population Fund, United Nations Entity for Gender Equality and the Empowerment of Women, and UNHCR.

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Thank you,

A handwritten signature in black ink, appearing to read 'Tamara Marcello'.

Dr. Tamara Marcello  
MHPSS Consultant, Amman, Jordan

# Introduction to this Manual

## **Background to the Manual**

This Manual was developed in 2013-2014 by the Psychosocial (PSS) Unit of ARDD-Legal Aid. ARDD-Legal Aid is a Jordanian NGO that works to promote human rights, gender equity, advocacy and empowerment among Jordanians and refugees. This manual is also available in Arabic.

The ARDD- Legal Aid's Psychosocial Support (PSS) Unit's mission is to use evidence-based mental health and psychosocial support (MHPSS) approaches to contribute to creating a just and stable society that is free of inequity and conflict by empowering marginalized groups to acquire and enjoy their universal rights and freedoms. The PSS Unit provides protection to refugees and vulnerable Jordanians by using MHPSS interventions to prevent sexual and gender based violence (SGBV), and to empower women, men and children to realize their human rights.

## **Who is the Manual For?**

The Manual is designed for program planners and managers to assist in developing programs involving psychosocial support group sessions, and also provides a guide for facilitators.

## **Introduction to the Sessions**

These 10 group sessions are designed to provide psychosocial support to Syrian refugees and vulnerable host community members in Jordan. Most sessions are designed to last two hours.

The sessions are not designed to be taken in consecutive order, but rather it is expected that program designers pick and choose the most relevant sessions for their needs.

Sessions tackle the following issues:

1. Building Cooperation Between Host Communities and Refugees
2. Coping after Distressing Experiences
3. Understanding Gender Based Violence
4. Beliefs About Gender Based Violence
5. How Parents and Communities Can Help Children Cope
6. Preventing Violence Against Children
7. Teaching Children Positive Discipline
8. Personal Empowerment for Women: Assertiveness & Self-Esteem
9. Assertiveness Training For Women (To Follow Legal Empowerment Training)

## 10. Managing Stress for Couples

### **Theoretical Development**

The sessions were developed in an ad hoc manner in response to various requests from different partners and programs. Nevertheless, each was developed with a broad framework of gender-based violence prevention in mind. For women, there is much research showing the protective and vulnerability factors for abuse. Some of these factors cannot be changed (such as gender, age, number of children, etc) but there are some protective factors which can be enhanced. The group sessions were developed to enhance protective factors including:

- ✓ Independence
- ✓ Assertiveness
- ✓ Self-esteem and self-care
- ✓ Motivation to make the necessary changes in their lives
- ✓ Awareness of their rights
- ✓ Knowledge of GBV, and
- ✓ Awareness of available support networks

These modules were developed with the intent to focus on the personal and interpersonal level as the unit of change. The sessions focus less on wider level social level change. For maximum effectiveness, sessions should be integrated into larger programs of change which encourage social level change.

### **History & Values in the Development of the Sessions**

Sessions were developed and refined throughout 2013 and 2014 and (most) were piloted and refined as part of two ARDD-Legal Aid's and Oxfam's ongoing programs – Women's Access to Justice (WAJ), and VOICE.

Sessions were developed to conform to standards and values set by ARDD-Legal Aid, the Inter-Agency Standing Committee (IASC) and the MHPSS Working Group in Jordan. Sessions were developed with the following values in mind:

- Emphasises a resilience and recovery based approach rather than a vulnerability based framework
- Recognises beneficiaries are active agents in the face of adversities
- Uses approaches that support participants to feel control over decisions that affect their lives
- Promotes human rights and gender equity
- Acknowledges the personal strengths, resourcefulness, solidarity, and social support of the beneficiaries

- Builds on pre-existing community resilience approaches
- Prioritizes enhancing existing community and family support
- Uses non-specialist non-clinical terminology to avoid stigmatization
- Subscribes to the 'Do No Harm' principle
- Based on best practices in group work design
- Works within a good understanding of cultural and religious sensitivities
- Does not raise expectations of beneficiaries in situations where we cannot meet those expectations
- Prioritises providing up to date information to beneficiaries
- Aims to protect dignity and to promote self-efficacy
- Respects beneficiaries' sociocultural traditions, religions and knowledge

### **Methods Used in Developing Sessions**

The following methods were used in development of sessions:

- Reviews of best practice literature in psychosocial support group methodologies
- Assessments of the needs of Syrian refugees in Jordan
- Assessments of the needs of vulnerable Jordanian host communities in Jordan
- Participation from beneficiaries in the design and in the evaluation of piloted modules
- Improving local cultural sensitivity through piloting and reviews from local psychosocial experts
- Review and feedback from ARDD-Legal Aid and Oxfam in Jordan

Each session involves a mix of different types of psychosocial support techniques including:

- Psycho-education
- Provision of information about available services,
- Skills teaching, and
- Peer to peer support skills

### **Who Are Sessions Designed For?**

Sessions should ideally comprise no more than 10-15 participants and are designed specifically to target mixed groups of Syrian refugees and Jordanian host community members. Most groups can be conducted in camp settings (with the exception of Session 1). Some groups are designed for women only (Modules 3, 4, 8, & 9) while the rest are designed for mixed groups of men and women. Note that sessions were not developed to work effectively for

men only sessions. We suggest not using these sessions for men only sessions. Sessions with men only need to be specifically devised with this group in mind.

### Can Sessions Stand Alone?

Program designers can pick and choose from these sessions depending on their needs. While most sessions can be used as stand alone sessions, two sessions (Sessions 3 & 4) are designed to be conducted as a set. This means Session 4 cannot be conducted unless Session 3 has already been conducted. See table below for an outline of which sessions can be used when.

	Name	Hours	Men & Women Mixed	Syrian Refugees & host communities mixed	Camp Setting	Incompatible with...	Stand Alone Session
1	Cooperation	2	✓	✓	☒	None	✓
2	Coping after Distress	2	✓	✓	✓	None	✓
3	GBV 1	2	☒	✓	✓	None	✓
4	GBV 2	2	☒	✓	✓	None	☒
5	Helping Children Cope	2	✓	✓	✓	None	✓
6	Violence Against Children	2	✓	✓	✓	None	✓
7	Positive Discipline	2	✓	✓	✓	None	✓
8	Women's Assertiveness and Self Esteem	2	☒	✓	✓	Session 9	✓
9	Women's Assertiveness (to Follow Legal Empowerment Training)	3	☒	✓	✓	Session 8	✓
10	Couple Skills	2	✓	✓	✓	Session 3,4,8,9	✓

### Importance of Integrating Sessions Into Larger Programs

As with all MHPSS work, sessions should be conducted as part of an integrated and larger program of work, alongside other programs, rather than as stand-alone work. For example, ARDD-Legal Aid integrated some of these psychosocial modules into a wider legal empowerment program which had as its core component awareness raising for women about their legal rights. We also integrated these modules into our VOICE program which had as its primary aim to highlight refugees' voices as active agents of change rather than passive recipients of aid.



## **Who Should Conduct These Sessions**

These sessions should be conducted by a trained facilitator from the local community. For rapport development between facilitator and group, and to ensure there is a deep understanding of questions and issues, sessions should be conducted in Arabic by a trained and skilled facilitator with similar sociocultural and religious background to the participants involved. Women's only groups should be conducted by a female facilitator.

## **How Long Are Sessions?**

Each session is designed to last 2 hours (except Module 9 Assertiveness for Women which lasts 3 hours). Preferably, sessions should not be split up but should be conducted in full. However, with careful planning, some modules can be split into hour long sessions.

## **Important Training Issues**

- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance

## **Evaluating Sessions**

We are currently developing pre and post measures to be used in conjunction with these sessions.

**About This Manual**

The manual sets out a guide for facilitators for each session. Each session is divided in subtopics that provide the facilitator with guidance on how to conduct the session plus handouts for each major topic, including notes for the facilitator.

# Session Summaries

## **Summary of Session 1: Building Cooperation Between Host Communities and Refugees**

This session focuses on increasing social cohesion and cooperation between refugees and local communities. We aim to help refugees adapting to live in host communities, and also to help host community members adjust to the presence of refugees in their communities using psychosocial techniques and teaching them individual coping skills. We address topics such as changing gender roles and ethnic and cultural identities and assisting refugees in handling marginalization and discriminatory attitudes in the host community.

### **Aims**

Session 1 aims to help refugees adapting to live in host communities, and also aims to help host community members adjust to the presence of refugees in their communities using psychosocial techniques and teaching individual coping skills.

### **Objectives**

1. Assisting refugees and host community members in dealing with homesickness and displacement
2. Helping host community members to better understand the feelings of refugees, and vice versa – helping refugees understanding the feelings of host community members
3. Assisting refugees and host community members in understanding changes to refugees' gender role, ethnic and cultural identities
4. Assisting refugees in handling marginalization and discriminatory attitudes in the host community
5. Assisting refugees and host community members in managing the integration of refugee children into the community

### **Techniques**

Session 1 uses a variety of psychosocial techniques to increase cooperation between host communities and refugees, including:

- Self help approaches to enable participants to start talking and sharing about their experiences and feelings of homesickness and begin to help them discover things that help with homesickness.
- Life skills training in how to deal with homesickness such as providing structure to the day and routines, recreation, a positive attitude, breathing and relaxation techniques; problem solving skills

- Supportive discussion and peer support in dealing with homesickness and displacement; changes in their gender roles; effects of displacement; and in handling marginalization and discriminatory attitudes

### **Who is Session 1 Designed For?**

- While this session focuses on refugee adaption, it was designed for mixed groups of host community members and Syrian refugees. It can also be used for groups comprising only Syrian refugees.
- The session assumes group members are relatively newly arrived in Jordan (1 month to 2 years)
- This session is appropriate for men only, women only, or mixed gender groups.
- This session is appropriate for those living in host communities. This session is not appropriate for refugees in camp settings.

## **Summary of Session 2: Coping with Distressing Experiences**

### **Introduction**

In this session we aim to help participants cope with their emotional reactions and their children's reactions to distressing experiences. We focus on identifying types and symptoms of distress and how to strengthen positive coping methods and resilience. We also focus on normalizing these reactions after a stressful event.

### **Aim**

Session 2 aims to help participants cope with their emotional reactions and their children's reactions to distressing experiences, helping them build resilience and positive coping strategies in themselves and their children.

### **Objectives**

1. Helping participants to identify types and symptoms of distress and strengthen positive coping methods and resilience.
2. Helping participants to identify distress -related symptoms in children and young people
3. Providing information about positive coping mechanisms
4. Teaching participants ways to help their children handle and cope with various types of distress.
5. Providing safe space for people to express their thoughts and feelings and to get support from people who experienced the same.
6. Normalizing reactions after a stressful event.

### **Techniques**

Session 2 uses a large array of techniques to support its aims, including:

- Skills learning: Helping parents learn culturally relevant techniques to help their children handle and cope with various types of distress.
- Psycho-education about normal emotional reactions after war and displacement
- Peer support: talking and sharing about their distressing experiences in Syria and discussing how to support and collaborate with each other
- Life skills training in methods to cope after distress, including problem solving and healthy living among others
- Providing referral information

**Who is Session 2 Designed For?**

Although this session focuses on the experience of adult women and men Syrian refugees, particularly those newly arrived in the country (a few months to 2 years), it is designed to be conducted in groups of mixed refugees and host community members. It can be used in camps and with those in the community.

## **Summary of Session 3: Understanding Gender Based Violence (GBV)**

### **Introduction**

Session 3 and 4 focus on GBV. The first part, session 3, aims to raise general knowledge and awareness about the nature and different types of GBV and SGBV during the different phases of an emergency and about the consequences to the individual, the family, and the community. We also provide information such as existing services and we aim to teach skills to beneficiaries in how to protect and care for survivors/ victims of violence in their community. In Session 4 we continue to work on GBV but here we aim to go more deeply into sensitive issues and look into deeper beliefs about violence against women.

Session 3 can be used stand-alone session and does not need to be conducted with Session 4. However, Session 3 is a prerequisite for Session 4 and should always be taken before Session 4.

### **Aims**

Session 3 aims to raise awareness about sexual and gender based violence issues and to enhance survivor wellbeing in the community.

### **Objectives**

1. Raise awareness about the nature and different types of (S)GBV during the different phases of an emergency
2. Raise awareness about the consequences of GBV and SGBV to the individual (physical, emotional, and social), the family, and the community
3. Raise awareness about the availability, confidentiality, and respectfulness of (S)GBV services in their community and how survivors/ victims and their families can access them
4. Build trust in the community about (S)GBV services which will respect the survivor/ victim and his/ her family, and will treat him/her and his/her family with confidentiality and dignity.
5. Teach skills in how to protect and care for survivors/ victims of violence in their community
6. Help participants see the need for non-judgmental, compassionate, non-rejecting approaches to caring for survivors/ victims of GBV/ SGBV.



## **Techniques**

Session 3 uses the following psychosocial techniques to achieve its aims and objectives:

- Supportive discussion and peer support for women who have experienced GBV
- Skills training in how to protect and care for survivors/ victims of violence in their community.
- Referral information provision including information about GBV services in specific areas
- Lay counseling techniques in helping participants see the need for non-judgmental, compassionate, non-rejecting approaches to caring for survivors/ victims of GBV/ SGBV.
- Peer to peer work discussing how to support each other

## **Who is this session designed for**

Session 3 is designed specifically for use in GBV prevention work with Syrian adult refugee women and local adult Jordanian women. This session is not suitable for working with men. This session focuses on GBV against women and teenage girls and does not go into detail about GBV against children (including child abuse) or men. It is suitable for working with abuse survivors and those at risk of abuse and violence, so long as the facilitator has specialist knowledge and training in responding to GBV.

## **Summary of Session 4: Beliefs About Gender Based Violence**

### **Introduction**

This session is the continuation of Session 3 and should not be used without Session 3. This session continues discussing GBV, but this time goes more deeply into sensitive issues and looks into deeper beliefs about violence against women. We will help women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions and aim to teach women that violence is not a good way to interact with each other and to solve problems.

### **Aim**

Session 4 aims to go more deeply into GBV issues through discussing underlying causes and contributing factors.

### **Objectives**

1. Aiming to go more deeply into sensitive issues, look into deeper beliefs about violence against women.
2. Helping women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions.
3. Teach women that violence is not a good way to interact with each other and to solve problems
4. Helping women to clarify myths and realities about GBV
5. Helping women to increase their knowledge about the roots and causes of GBV

### **Techniques**

Among others, Session 4 uses the following techniques:

- Psycho-education about the psychological consequences of GBV
- Supportive peer to peer discussion to help women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions and aim to teach women that violence is not a good way to interact with each other and to solve problems.

### **Who is this session designed for**

As for Session 3, Session 4 is designed specifically for use in GBV prevention work with Syrian adult refugee women and local adult Jordanian women. This session is not suitable for working with men. This session focuses on GBV against women and teenage girls and does not go into detail about GBV

against children (including child abuse) or men. It is suitable for working with abuse survivors and those at risk of abuse and violence, so long as the facilitator has specialist knowledge and training in responding to GBV.

## **Summary of Session 5: How Families and Communities Can Help Children Cope**

### **Introduction**

Sessions 5, 6, and 7 address issues concerning children, and are aimed at parents, caregivers, families and communities. Session 5 provides some basic information about children's problems specifically in times of war and displacement and how parents can help build resiliency in children. Module 6 discusses development stages of children, violence against children, and helps communities use their wisdom to prevent violence against children in their communities. Module 7 focuses specifically on teenagers.

### **Aim**

Session 5 aims to help parents to better care for their children, assist them in coping, and guide them to deal positively with their children's behaviours.

### **Objectives**

1. Share common problems they are experiencing with their children and children in their communities.
2. Understand the kinds of problems children experience living in refugee settings & kinds of hardships children endure during times of conflict.
3. Understand how to help support children in our families and communities.
4. Understand the basic rights of children.
5. Understand the problems with physical force as a punishment technique and providing alternative approaches
6. Understand resilience and protective factors when it comes to children coping with the aftermath of war and displacement.

### **Techniques**

Among others, Session 5 uses the following techniques:

- Supportive peer to peer discussions sharing ideas about children's problems, how to cope, and how war, conflict, and displacement affect children.
- Lay counselling skills in how to help support children in our families and communities.
- Psycho-education about parenting and the consequences of violence to children.
- Skills teaching in providing positive discipline with children.

**Who is this session for?**

- This session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.
- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for use both in camp and in urban and rural community settings

## **Summary of Session 6: Violence against Children**

### **Introduction**

Session 6 follows on from Session 5 by providing more in depth discussion of developmental stages and the impact of war on development, and it then moves to a discussion of violence against children and a discussion of how communities can use their wisdom to work together to promote the wellbeing of children.

### **Aim**

Session 6 aims to help parents to better protect children and to clarify that violence against children is unacceptable in all settings including home, school, and the community.

### **Objectives**

- Understand normal developmental stages (babies through to teenagers)
- Understand how conflict, flight and displacement can impact on development
- Understand the role of psychological wellbeing of carers on children's wellbeing.
- Understand the different types of violence against children (physical, neglect, sexual and the different contexts in which these can take place)
- Appreciate how communities can use their wisdom to work together to promote the wellbeing of children.
- Use problem solving to come up with community solutions to community-level problems with children.

### **Techniques**

Among others, this session uses the following techniques:

- Psycho-education about child development (different stages) and information about the consequences of war and displacement on these stages. These can disrupt the normal growth and development of children.
- Self help using problem solving to come up with community solutions to community-level problems with children.

**Who is this session for?**

- Like Session 5, this session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.
- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for use both in camp and in urban and rural community settings

## **Summary of Session 7: Positive skills for Caring for Children and Teenagers**

### **Introduction**

Session 7 assists parents in identifying common problems of childhood, along with ways to manage them, and also assists families and communities in dealing with teenagers.

### **Aim**

Session 7 aims to help parents use positive discipline approaches in dealing with children's common problems, and to increase their capacity to deal with their teenage children.

### **Objectives**

1. Understand positive parenting approaches.
2. Understand the signs of a number of common difficulties experienced by children (especially refugee children), and learn some practical ways of coping with them
3. Understand living with teenagers and how to help refugee teenagers manage their emotions.
4. Discuss ways to manage children's most common problems.
5. Appreciate how communities can use their wisdom to work together to promote the wellbeing of children.
6. Understand how to help support children in their families and communities.

### **Techniques**

Among others, Session 7 uses the following psychosocial techniques:

- Supportive discussions about common problems of children
- Skills building to increase the capacity of parents in dealing with their children's problems.
- Skills building to increase the capacity of caregivers in dealing with the behaviour of teenagers.

### **Who is this session for?**

- Like Session 5 and 6, this session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.



- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for both in camp and in urban and rural community settings

## **Summary of Session 8: Personal Empowerment for Women: Self-Esteem and Assertiveness**

### **Introduction**

Session 8 focuses on increase women's personal self-confidence, self-esteem, and to teach them basic assertiveness skills. The aim is to provide the personal empowerment skills (assertiveness, importance of self-esteem) which can form the basis for more active community and social change. The session invites participants to think about cultural and personal barriers to women communicating assertively, investigates aggression vs passive communication, finds culturally relevant ways to overcome negative self talk, and helps participants move towards making active changes in their personal lives in light of what they learned in the session.

This session is incompatible with Session 9 as it covers many of the same topics. Session 9 is developed specifically to follow a legal empowerment session. Program planners should choose either Session 8 or Session 9.

### **Aim**

Session 8 aims to improve women's assertiveness and self-esteem.

### **Objectives**

1. Help participants see that self-esteem and self-confidence along with assertiveness are values that already exist in their culture for women
2. Help participants find ways to overcome the cultural and personal barriers to being assertive and to having high self-esteem
3. Assist participants to understand negative self-talk and to find ways of finding alternative positive self-talk
4. Encouraging women towards being motivated to make personal changes in their lives as a result of the session

### **Techniques**

Session 8 uses a variety of techniques including supportive discussion and skills teaching in assertiveness.

### **Who is this module for?**

This module is suitable for women only, both refugees and Jordanian women. It is suitable for use in urban, rural and camp settings. This session works well taken after the GBV sessions.

## **Summary of Session 9: Assertiveness Training For Women (To Follow Legal Empowerment Training)**

### **Introduction**

Session 9 is designed to follow legal empowerment training for women, and it focuses on assertiveness training and self-esteem. (Legal awareness trainings provide information about family status laws in Jordan including laws regarding domestic violence, child custody and their rights regarding divorce and alimony). The aim is to provide personal empowerment skills which can form the basis for more active community and social change. Assertiveness skills can be used in their personal lives and can be used in public life, for example when engaging with the legal system.

The session invites participants to think about cultural and personal barriers to women communicating assertively, investigates aggressive vs passive communication, finds culturally relevant ways to overcome negative self talk. Participants role play real life situations to practise assertive behaviour.

This session is incompatible with Session 8 as they cover many of the same topics. Session 9 is developed specifically to follow a legal empowerment session. Program planners should choose either Session 8 or Session 9.

### **Aim**

Session 9 aims to improve women's assertiveness and self-esteem. This session aims to empower women through skills teaching to be able to make practical use of the legal rights information. It aims to allow participants to translate the information they have been given in the awareness raising session into action (no matter how small) in their daily lives.

### **Objectives**

1. Help participants see that self-esteem and self-confidence along with assertiveness are values that already exist in their culture for women
2. Practice assertiveness skills in real life role play situations (e.g. using 'I' statements, broken record technique, and saying 'No')
3. Teaches non-verbal communication skills in assertiveness
4. Helping participants to identify those occasions when it might be useful to use assertiveness skills – ie in order to meet their valid needs
5. To help raise self esteem by assisting them in identifying things they like about themselves
6. Encouraging women to take on empowering values which underpin assertiveness – self-respect, recognising their own needs, ask for what they want, and to not be overly responsible for others, etc.

7. Teach women how to use common problem solving techniques to raise the likelihood that they consider all their options before taking on a particular course of action
8. For those women who are resistant to the idea of the benefits of women being assertive - to try to shift their perspective even if the shift is subtle. For example, to shift these women's views so that even if they feel they cannot change themselves, to ask them to consider whether they would like their own daughters to be more assertive.

### **Who is this module for?**

This module is suitable for women only, both refugees and Jordanian women. It is suitable for use in urban, rural and camp settings. This session is designed to be used after the legal empowerment session.

### **Notes for Facilitators**

- Other sessions last 2 hours, but Session 9 lasts 3 hours.
- These sessions will not stand alone but will be incorporated into a larger number of sessions with groups covering other issues including human rights awareness raising, information provision, etc
- Facilitators have been trained in how to provide basic emotional and practical support and general psychosocial support skills in community settings and have had specific training on how to implement the sessions involved in this programme
- Facilitators can adapt the style and tone of the session to suit different types of participants – for example older women and more traditional women may have more resistance to embracing assertiveness whereas younger women and more educated women may be more open to the idea. Facilitators must be skilled and experienced at working sensitively with these different groups, providing a balance between respecting cultural traditions and values, and encouraging participants to value women's assertiveness and women's rights.
- Facilitators are trained in human rights and equity, community participation, the do no harm principle, aiming to build upon existing community resources and capabilities, etc
- In addition to the Discussion Guide below, facilitators should rely on their knowledge of psychosocial processes in the communities they are working in, their local knowledge, and their common sense in running the groups and offering assistance

## **Summary of Session 10: Managing Stress in Couples**

### **Introduction**

This session aims to provide individuals with better ways of communicating and handling conflicts in their couple relationships. We help participants to see the link between stress (such as the stress of war, displacement, etc.) and family problems including violence. We aim to teach skills such as communication and conflict management.

### **Aim**

Session 10 aims to provide individuals with better ways of communicating and handling conflicts in their couple relationships, so as to reduce stress.

### **Objectives**

1. Help participants see the link between stress (such as the stress of war, displacement, etc) and family problems including violence and couple problems including increased arguing, etc.
2. Help participants see that improving the way they manage conflict will be important in helping them be happier
3. Help participants realise that they cannot change their partner; they can only change themselves and their own behaviour. Encourage participants to learn to focus on how they can change, not just on how their partner should change.
4. Teach participants basic communication skills which will help in their relationships (how to be a good listener, how to talk effectively, etc)
5. Teach participants basic conflict management skills that they can use themselves in their couple relationships
6. Help participants have a sense of what their 'bottom line' requirements are in a marriage – what would they not accept in their partner's behaviour? What would they do if this happened in their relationship?

### **Techniques**

This session uses a variety of techniques including:

- Psycho-education
- Life skills training (communication and conflict resolution)

### **Who is this Session For?**

1. This session is suitable for couples who are married or who are engaged to be married.

2. This session is suitable for refugee and Jordanian couples

3.

# Session 1

## Building Cooperation between Host Communities and Refugees

## **Session 1: Building Cooperation Between Host Communities and Refugees**

### **Introduction**

This session focuses on increasing social cohesion and cooperation between refugees and local communities. We aim to help refugees adapting to live in host communities, and also to help host community members adjust to the presence of refugees in their communities using psychosocial techniques and teaching them individual coping skills. We address topics such as changing gender roles and ethnic and cultural identities and assisting refugees in handling marginalization and discriminatory attitudes in the host community.

### **Aims**

Session 1 aims to help refugees adapting to live in host communities, and also aims to help host community members adjust to the presence of refugees in their communities using psychosocial techniques and teaching individual coping skills.

### **Objectives**

- Assisting refugees and host community members in dealing with homesickness and displacement
- Helping host community members to better understand the feelings of refugees, and vice versa – helping refugees understand the feelings of host community members
- Assisting refugees and host community members in understanding changes to refugees' gender role, ethnic and cultural identities
- Assisting refugees in handling marginalization and discriminatory attitudes in the host community
- Assisting refugees and host community members in managing the integration of refugee children into the community

### **Techniques**

Session 1 uses a variety of psychosocial techniques to increase cooperation between host communities and refugees, including:

- Self help approaches to enable participants to start talking and sharing about their experiences and feelings of homesickness and begin to help them discover things that help with homesickness.



- Life skills training in how to deal with homesickness such as providing structure to the day and routines, recreation, a positive attitude, breathing and relaxation techniques; problem solving skills
- Supportive discussion and peer support in dealing with homesickness and displacement; changes in their gender roles; effects of displacement; and in handling marginalization and discriminatory attitudes

### **Who is Session 1 Designed For?**

- While this session focuses on refugee adaption, it was designed for mixed groups of host community members and Syrian refugees. It can also be used for groups comprising only Syrian refugees.
- The session assumes group members are relatively newly arrived in Jordan (1 month to 2 years)
- This session is appropriate for men only, women only, or mixed gender groups.
- This session is appropriate for those living in host communities. This session is not appropriate for refugees in camp settings.

### **Notes for Facilitators**

- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of terms such as 'integration' and 'community tensions' as using these terms can bring harm. Rather, positive terms should be used including 'social cohesion' and 'cooperation'.
- If there are Jordanians in the group, the group facilitator will need to be very careful to include Jordanians in the discussion. Jordanians should be encouraged for all questions to give their viewpoints. The risk is that the Jordanians may feel marginalized so it is important to be very careful to include them in all discussions. The aim is to achieve an integrated group during the session, where there is harmony between Jordanians and refugees.
- This session assumes that group members do not already have good access to psychosocial resources, but do have good information about other services available to them and links to services provided through UNHCR, etc. such as safe spaces, cash assistance, etc. This module does not provide this information.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program

- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance

## Session 1 Facilitation Guide

Timing/ Materials	Facilitator Guide	Notes
10 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and explain why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about 'refugees adapting to living in this community'. Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be interactive with everyone having a say. Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time. Tell them they can always ask you about something after the session or in the break.</li> </ul> <p><b>Introduction Exercise (to the group)</b></p> <ul style="list-style-type: none"> <li>• <i>First names</i></li> <li>• <i>Are you a refugee or a community member?</i></li> <li>• <i>Where are you from?</i></li> <li>• <i>How long have you been here?</i></li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable - if not already known - to understand the composition of the group (whether they are refugees, how long they have been in the community and how long they have been away from Syria)</p>
30 minutes	<p><b>2. <u>Dealing with Homesickness and Displacement</u></b></p> <p><b><u>Discussion: Sharing about experiences of homesickness</u></b></p> <p><b><u>(5 mins)</u></b></p> <p>For refugees</p> <p><i>How did you first feel when you arrived here?</i></p> <p>For host community members</p> <p><i>Have you ever moved country, neighbourhood, or home?</i></p> <p>For all</p>	<p><b>Key Issue:</b> participants to start talking about and sharing their experiences and feelings of homesickness. Help them understand these feelings are normal.</p>

	<p><i>What things did you miss about home? What things do you still miss?</i></p> <p>(Here, probe for missing family members, friends, homes, work, routines, etc. Discuss these briefly and then emphasise that it is normal to feel these things.)</p> <p><b><u>Exercise: What can help?</u></b></p> <p>For all</p> <p><i>What has helped you manage your homesickness? What has made it better?</i></p> <p>Discuss the following things that can help.</p> <ol style="list-style-type: none"> <li>1. <u>Time</u> (the longer you are in the new place, the more you adapt as you get used to the new life. Explain that it is normal to feel like this)</li> <li>2. <u>Support</u> from family and friends (having information about family and friends in Syria, having supportive friends and family. Ask: Do you have supportive friends and family here? What does 'supportive' mean? Encourage them to seek out support from their friends and community. Also, here encourage them to look for and access formal support services.</li> </ol> <p><i>What else helps? Discuss each below.</i></p> <ol style="list-style-type: none"> <li>1. <u>Providing structure to the day and routines.</u></li> <li>2. <u>Recreation</u></li> <li>3. <u>A positive attitude</u></li> <li>4. <u>Feeling relaxed</u> helps as well. Here, teach some basic stress management - breathing or other relaxation techniques. (**See Relaxation Handout). Distribute handouts.</li> <li>5. <u>Problem Solving</u>. Identify areas where they could improve and briefly discuss the problem solving approach (**See Problem Solving Handout). If time, go teach a problem solving approach to help them with an example problem. Distribute handouts.</li> </ol>	<p><b>Key Issue:</b> here, we begin to help them discover things that help with homesickness.</p>
20 minutes	<p><b>3. <u>Adapting to living in the new community</u></b></p> <p><i>Ask both:</i></p> <p><i>For newcomers – How do you feel as a newcomer?</i></p> <p><i>For locals – How do you feel having refugees?</i></p>	

	<p><u>Discuss: community tensions between host community and refugees</u></p> <p>For refugees - downward change in social status, discriminatory attitudes in the host community, loss of identity –cultural in a new environment.</p> <p>For host community - feel like ‘strangers in my own country’, economic situations is getting worse, jobs going to Syrians, downward changes in social structure of the community, etc.</p> <p><i>Were things always like this? Were there any times when the refugees and host community worked together or were on good terms?</i></p> <p><i>How can we help the situation? Can we agree on some common goals? Move them towards a sense that they need to have a joint sense of purpose, shared goals. Where possible, encourage gratitude in the refugees and encourage compassion in the host community.</i></p>	
15 minutes	<b>BREAK</b>	
15 minutes	<p><b>4. <u>Child Integration</u></b></p> <p>For refugees - <i>How have your children adapted to being here?</i></p> <p>For host community – <i>how have your children adapted to having refugees here?</i></p> <p>Here, a brief opening discussion which may cover things like – behavioural problems, misbehaviour, and risk taking (in adolescents). Explain that in another session we will discuss specific ways of handling children’s problem behaviours (misbehaviour, etc) but today we want to talk about more general issues of integrating children into the host community.</p> <p><u>Helping children to make friends in the host community</u></p> <p>Ask all</p> <p><i>Have your children had problems making friends? Are there any problems between newcomer children and teenagers and locals?</i> (here, prompt for problems with bullying, name-calling, racist comments, laughing at accents, etc).</p> <p>Ask all - <i>How have you managed these problems?</i></p> <p>***Distribute and talk through <b>Handout ‘Making Friends and</b></p>	<p><b>Key issue:</b> normalising children’s lives is key to their psychosocial wellbeing as a refugee. This includes attending school. But refugee children can have problems making friends and experience problems such as bullying – parents often give these as reasons they do not send children to school. Facilitator’s task is to help parents to help their children to learn skills to make friends and to handle bullying well.</p>

	<b>Preventing Bullying'</b> which explains what children can do if they are bullied and how to be a good friend.	
20 minutes	<p><b>5. <u>Adjusting to Changes in Gender Roles</u></b></p> <p>EXERCISE IN PAIRS – SAME GENDER (5 MINS)</p> <p><b>For refugees</b></p> <p>Ask the group to break into pairs and to discuss with their pair what kinds of ways their role as a woman or man has changed since they have been refugees</p> <p><b>For host community</b></p> <p>Ask them to discuss ways their gender roles have changed since refugees have entered the community. If there is no change, ask them to think about how it might be for the refugees.</p> <p>Bring the group back together and ask one person from each pair to tell us what ideas they had.</p> <p>In women's groups, spend more time on women's roles, but also spend a little time discussing men's roles changes.</p> <p>Prompt for:</p> <p>Women</p> <ul style="list-style-type: none"> <li>- Some are head of household now with no husband or other male family members with them. This may result in stress and a feeling of pressure at having to do things they are not used to doing</li> <li>- Lack of opportunities to socialise with other women</li> <li>- Some women may find it difficult seeing their husbands not working or seeing their husbands affected emotionally by their refugee status.</li> <li>- etc</li> </ul> <p>Men</p> <ul style="list-style-type: none"> <li>- Many men talk of feeling 'humiliated' or 'emasculated' because they cannot work easily here. Discuss how this may affect men (depressed, no energy, crying, anger – eg.: shouting at family, aggression – eg.: fighting with neighbours or hitting family member).</li> </ul>	<b>Key Issue:</b> tailor these to men versus women's groups by emphasis on one or the other.
	<b>6. <u>Conclusions and close</u></b>	

5 minutes	<p>We're approaching the end of the session....</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	
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Sources: Analysis of Host Community-Refugee Tensions in Mafraq, Jordan, OCTOBER 2012. Mercy Corps.

## Handout (1) Breathing and Relaxation

Relaxation exercises can be helpful in managing stress and worries. Relaxation techniques often combine breathing and focused attention to calm the mind and the body.

### Steps:

1. **Get yourself into as comfortable a position as possible.** , with your legs uncrossed and your arms resting at your sides.
2. **Close your eyes.**
3. **Take deep breaths.** Don't do huge noisy gasps; breath in through your nose for as long as you feel comfortable, hold it (don't carry on holding it when it begins to get hard; 6 seconds will do), and slowly breath out through your mouth. Remember to be quiet.
4. **Tense your left leg as hard as you can, then let go of it completely and consciously relax all muscles of the left leg, feeling that they become heavy; repeat then your with you right leg, left arm, right arm then neck, head and chest.** You don't have to do it in that particular order, but doing the chest bit last often works best. To help you achieve as full relaxation as possible imagine that the joints are completely loose.
5. **Imagine you are really heavy, being pulled down by gravity into your seat.**
6. **Imagine a comfortable scene you like.**
7. **Imagine you are there.** Explore the scene; try to use all of your senses during the imagination experience. All the time you are getting heavier.
8. **Finish your little adventure in a comfortable place, the seat or bed, so heavy you can no longer move anything.** Gradually speed up your breathing and very slowly open your eyes.

Try to practice this exercise at least once or twice a day. Expect your ability to relax to improve as you continue practicing and expect to practice two or three weeks before you become genuinely proficient. Once you learn how to do the exercise, you may use it in situations and times you find it difficult to cope.

*Adapted from: Patel,V. (2010) Where There is No Psychiatrist. Bell & Bain Ltd, Glasgow.UK.*



## Handout (2) Problem-Solving

Problem-solving is a mental process that involves discovering, analyzing and solving problems. The ultimate goal of problem-solving is to overcome obstacles and find a solution that best resolves the issue.

### **Steps:**

1. **Define the problem:** Defining the problem involves “what is really causing the difficulty “or “what is the problem I am facing?” . The more clearly a problem is defined, the easier you’ll find it to complete subsequent steps
2. **Identify as many potential solutions as you can:** Brainstorm creatively – ask lots of questions about the who, what, where, when, and how of the causes to point to various possibilities, and record your ideas.
3. **Choose the best solution:** select the best solution to fix the problem given the circumstances, resources, and other considerations.
4. **Plan of action:** During this step, you determine what steps must be taken, designating tasks where necessary. Decide on deadlines for completing the actions and estimate the costs of implementing them.
5. **Implement the solution:** This is the DO stage. Make sure the solution can be tracked to monitor progress in solving the problem.
6. **Evaluating the results:** This is a careful analysis stage that improves upon the best solution using the information gathered during the DO stage. Did the solution work? If not—why not? What went right, and what went wrong? What adjustments do you have to make to make the solution work better?

Adapted from the following sources:

<http://psychology.about.com/od/problemsolving/f/problem-solving-steps.htm>

<http://nccam.nih.gov/health/stress/relaxation.htm>

## **Handout (3) Making Friends and Preventing Bullying**

### **When Your Child is a Victim of Bullying - What Can Parents Do?**

As a parent, be aware of bullying, and look for it

Encourage child to tell someone – parent or trustworthy teacher

Encourage your child's self-esteem skills (believing they are a good person)

Encourage your child's friendship skills

Encourage your child's assertiveness skills

Encourage your child's conflict management skills

Encourage the school to be aware of bullying and to develop anti-bullying policies

### **What Children Can Do To Stop Bullying**

1. Stand up straight
2. Look the bully in the eyes
3. Walk away without saying a word
4. This might make the bully stop because he or she is bored when you don't react
5. If the bully continues to bother you:
6. Take a deep breath, and say "NO!" very loudly PRACTISE EACH DAY
7. Stand up straight,
8. Make your eyes look stern
9. Say "NO!" really loudly
10. Now practise things you could say to the bully:
11. "GO AWAY!"
12. "LEAVE ME ALONE!"

### **How can Children Make GOOD FRIENDS?**

- Don't play with people who hurt others or make them sad
- Choose friends who are kind, who share, and who listen to you
- Be kind, share, and listen to them, too
- If your friends are sad, look after them and try to help them
- If you know someone is being bullied, get help, tell an adult

(Continued on next page)

## *Handout (page 2)*

### ***Making Friends and Preventing Bullying***

#### **How to be a Good Friend (For Children)**

If you are kind

If you listen to other people

If you try to make people laugh, not cry

You will be a GOOD friend

People will like you

You will feel good

You will feel proud of yourself

#### **How to Stop Children from Bullying Other Children**

Remind them....

- Some of us are tall, some small
- Some of us have dark skin , others have white skin
- Some of us have pimples, or wear glasses; some of us have scars or birthmarks
- Some of us walk with crutches or get around in a wheelchair
- Some of us wear old clothes
- Some of us are good at sports or music or maths
- Some of us come from different countries or dress in different ways
- Some of us have curly hair, others have straight hair
- Some of us have different accents and different religions

It would be boring if we were all the same!

(Adapted from [http://www.kidscape.org.uk/media/77835/ksdon\\_tbullyme-feb13.pdf](http://www.kidscape.org.uk/media/77835/ksdon_tbullyme-feb13.pdf))

# Session 2

## Coping After Distressing Experiences

## **Session2: How to Cope After Distressing Experiences**

### **Introduction**

In this session we aim to help participants cope with their emotional reactions and their children's reactions to distressing experiences. We focus on identifying types and symptoms of distress and how to strengthen positive coping methods and resilience. We also focus on normalizing these reactions after a stressful event.

### **Aim**

Session 2 aims to help participants cope with their emotional reactions and their children's reactions to distressing experiences, helping them build resilience and positive coping strategies in themselves and their children.

### **Objectives**

- Helping participants to identify types and symptoms of distress and strengthen positive coping methods and resilience.
- Helping participants to identify distress -related symptoms in children and young people
- Providing information about positive coping mechanisms
- Teaching participants ways to help their children handle and cope with various types of distress.
- Providing safe space for people to express their thoughts and feelings and together support from people who experienced the same.
- Normalizing reactions after a stressful event.

### **Techniques**

Session 2 uses a large array of techniques to support its aims, including:

- Skills learning: Helping parents learn culturally relevant techniques to help their children handle and cope with various types of distress.
- Psycho-education about normal emotional reactions after war and displacement
- Peer support: talking and sharing about their distressing experiences in Syria and discussing how to support and collaborate with each other
- Life skills training in methods to cope after distress, including problem solving and healthy living among others
- Providing referral information

## Who is this Session Designed For?

Although this session focuses on the experience of adult women and men Syrian refugees, particularly those newly arrived in the country (a few months to 2 years), it is designed to be conducted in groups of mixed refugees and host community members. It can be used in camps and with those in the community.

## Notes for Facilitators

- Materials needed for Session 2. You will need copies of handouts you have chosen to include, flip board or white board, and pens.
- Session 2 has some optional sections. Facilitators should use their knowledge of the group members' needs to decide which sections to include and which to leave out. This will depend on time constraints and the stated needs of the group as well as the facilitator's judgment. For example, facilitators may find that the Section on Anger Management may be useful to provide to groups of men but not so relevant with groups of women. Facilitators should use their judgment and their knowledge of groups' needs.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events. The majority of people will recover over time using their own ways of coping
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and have general psychosocial support skills in humanitarian/

refugee settings and have had specific training on how to implement the sessions involved in this program.

- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups.
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance.

Timing/ Materials	Facilitator Guide	Notes
10 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential. Remind them of the ground rules for the session.</li> <li>• Explain that today's session will be about 'How to cope after distressing experiences'. Give a quick overview of what will be discussed. Explain that we will talk about adults during the first part, then have a break, then talk about children.</li> <li>• Remind them about the ground rules – what is talked about must be kept confidential, everyone should be prepared to listen to others and to share their own experiences if they feel comfortable, no one should make judgments or criticise each other, and everyone must respect every other person's situation. What is right for one person does not have to be right for the others.</li> <li>• Explain that you want the session to be interactive with everyone having a say. Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time. Tell them they can always ask you about something after the session or in the break.</li> </ul> <p><b>Introduction Exercise (to the group)</b></p> <ul style="list-style-type: none"> <li>• <i>First names</i></li> <li>• <i>Are you a refugee or a community member?</i></li> <li>• <i>Where are you from?</i></li> <li>• <i>How long have you been here?</i></li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> Introduction to initiate a discussion, and make participants feel comfortable. If not already known, to understand the composition of the group (whether they are refugees, how long they have been in the community and how long they have been away from Syria)</p>
20 minutes	<p><b>2. <u>Part One: Adults and Distressing Events</u></b></p> <p><b><u>Distressing Events, Feelings, and Symptoms Discussion (5 mins)</u></b></p> <p><i>For all: What kinds of <u>distressing events</u> have you and your family/ friends/ people you know experienced (for Syrian refugees - during the war in Syria? For others – any other distressing events that have led you to fear for your life or cause extreme distress)</i></p> <p>Prompt for incidents that make a person fear for his life or cause him extreme distress, threat to wellbeing, severely distressing events related to the conflict such as the loss of family members, experiencing or witnessing extremely violent acts, physical injury and violence, conflict-induced</p>	<p><b>Key Issue:</b> participants to start talking and sharing about their distressing experiences in Syria and others</p> <p>These are normal reactions to abnormal events.</p> <p>People are naturally resilient (ie have an</p>



	<p>physical disabilities, loss of loved ones, rape, terrorism, etc.).</p> <p><b>Optional:</b></p> <p><i>For refugees:</i></p> <p><i>Would anyone feel comfortable sharing some distressing events that happened to you or to people you know during the Syrian war?</i></p> <p>Note: Sensitively allow one or two people to give some examples. Do not push people to discuss what happened. Allow the group to talk if they need to and if they are supporting each other. Do not prolong this exercise. Keep it brief so you can move to focusing on positive coping mechanisms.</p> <p><i>For refugees:</i></p> <p><i>What kinds of <u>feelings</u> did you have first, and then now, about these things that happened?</i></p> <p>(Prompt for sadness, grief, feeling overwhelmed, shocked, angry, numb, and fearful, etc).</p> <p><b><u>Brainstorming Exercise: Symptoms of Distress in ADULTS (15 mins)</u></b></p> <p><i>All: What kinds of symptoms have you or people you know had after suffering extreme distressing events?</i></p> <p><u>Facilitator should write these up on a white board or flip chart.</u></p> <p>Go through briefly each one of these without offering solutions yet: crying, sleep difficulties, anxiety, feeling helpless and hopeless about the future, feeling tired and lethargic, irritability, nightmares, feeling 'down', difficulty concentrating, no interest in normal activities, not able to enjoy life, conflict with family members – arguing, etc, preoccupation with lost loved ones, easily startled or scared, panic attacks/ hyperventilating, not wanting to leave the house or see other people, avoiding things which remind them of the distressing event, pain in the body that is not caused by physical problems, reliving the distressing event or intrusive memories – nightmares or flashbacks, etc.</p> <p>Reassure that the emotional reactions are normal and are not a sign of going crazy. Let people know that this is a normal reaction to an abnormal set of events and that most people in time will recover on their own and without specialist help.</p>	<p>inner strength to be able to cope), will improve by themselves and with support of others in their community</p> <p><b>Key Issue:</b> here, we begin to help them discover the symptoms of distress in adults</p> <p><b>NOTE:</b></p> <p>If you notice that member of the group seems to be in distress while talking about these issues, listen without pressing the person to talk, suggest talking to them during the break, and then refer them to IMC or another specialist agency if you feel their symptoms may be severe, long-lasting, and interfering in daily life</p>
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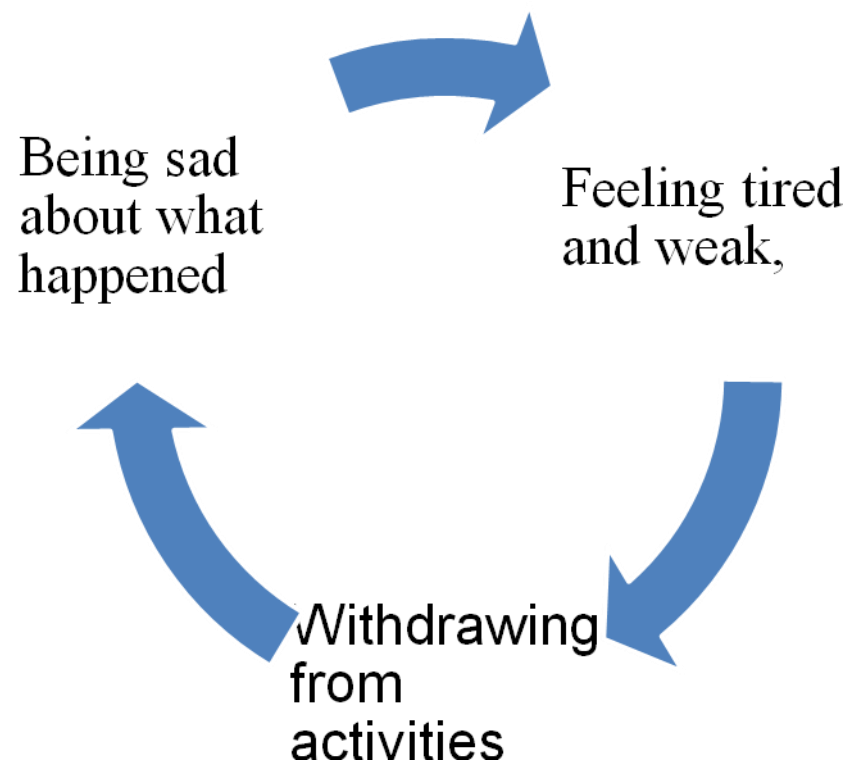
40 minutes	<p><b>3. <u>Teaching: Positive Coping Methods</u></b></p> <p><i>(Ask refugees and host community members who have experienced distressing events...)-</i></p> <p><i>What things have you done to cope with what has happened and with the symptoms and feelings we just talked about?</i></p> <p>Here, probe for things like time helps, support by talking to family members, help from an imam, seeing a doctor, etc.</p> <p>Be sure to maintain a strength-based approach - praise efforts involving self-reliance, family and community support, personal resilience, and self-help by encouraging and praising all these self-directed efforts. Encourage them to continue to do things that have helped in the past.</p> <p><i>What are some other things can help? Here, you have an opportunity to provide some psycho-education about things that can help that they may not have thought of. List those not yet discussed and most relevant to the group and write them up on the white board or flip chart (20 mins). YOU DO NOT NEED TO INCLUDE ALL THESE, ONLY THOSE RELEVANT TO THE GROUP</i></p> <ol style="list-style-type: none"> <li>1. <i>Talking with trusted family members and friends</i></li> <li>2. <i>Social activities and normal routines (important to live as normal life as possible).</i></li> <li>3. <i>Do <u>not</u> avoid situations that remind you of the event</i></li> </ol> <p><i>(Explain why not –vicious cycle that makes you feel worse)</i></p> <ol style="list-style-type: none"> <li>4. <i>Engage in relaxing activities (see optional Handout)</i></li> <li>5. <i>Breathing exercises can help with stress and feelings of panic (Optional Handout Breathing Exercises)</i></li> <li>6. <i>Try to have regular physical exercise</i></li> <li>7. <i>Use a problem solving approach (Optional Handout: Problem Solving)</i></li> <li>8. <i>Try to maintain a regular sleep cycle and avoid sleeping too much (See Optional Handout)</i></li> <li>9. <i>Avoid using drugs (or alcohol) to cope</i></li> </ol> <p><i>(Here, discuss the problems with sleeping pills, etc)</i></p> <ol style="list-style-type: none"> <li>10. <i>Get some specialist help (explain when this would be necessary – see below ‘how do I know if I should get extra help?)</i></li> </ol> <p><u>How do I know if I should get extra help?</u></p> <p>Explain that if they or someone they know has the following kinds of</p>	
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	<p>problems they might need some extra support:</p> <ul style="list-style-type: none"> <li>- If the problems are stopping you from doing your daily tasks (eg a mother who is not able to look after her children any more, who stays in bed all day, etc) AND</li> <li>- If the symptoms are severe</li> <li>- AND if the symptoms are causing lots of distress to the person, AND</li> <li>- If the symptoms have been going on for many months or years after the distressing event</li> </ul> <p><b><u>Optional Discussion about Specific Problems in Adults</u></b></p> <p>If there is time and if mentioned as important by your group, you may choose one or more of the below handouts to discuss in brief or detail.</p> <ol style="list-style-type: none"> <li>1. <b>Tiredness and Fatigue.</b> (See Handout)</li> <li>2. <b>Advice on How to Sleep Better</b> (See Handout)</li> <li>3. <b>Hyperventilation or Panic</b> (See Handout)</li> <li>4. <b>Managing Anger</b> (See Handout)</li> </ol>	
15 minutes	<b>BREAK</b>	
30 minutes	<p><b>4. <u>Part 2: Helping Children Cope with Distressing Experiences</u></b></p> <p><b><u>Brainstorming Exercise: Symptoms of Distress in CHILDREN AND TEENAGERS (10 mins)</u></b></p> <p><i>When children are exposed to war, it can be a cause of great stress to a child or teenager. Different children and different aged children react differently in times of stress. What kinds of symptoms and feelings have your children shown as a result of the war? (For host community members – what kinds of symptoms and feelings have you heard about or have your own children suffered as a result of distressing events?)</i></p> <p>Here, list on a white board or flip chart. Prompt for: feelings – guilt, loss and grief, fear that it will happen again, insecurity, cry easily, become withdrawn, complain of nightmares, headaches and other aches and pains, behave as if they are much younger than they actually are (this is called ‘regression’) such as by children bed-wetting, clinging to their parents, etc., risk taking in teenagers, becoming withdrawn in teenagers – not talking, not wanting to go out, etc.</p> <p>Reassure the family that behavioural and other problems are normal in these situations and are not because the child is ‘bad’.</p> <p><i>Say to refugees</i></p> <p><i>You have clearly done a lot to get your family out of dangerous situation. Ask all - Tell us what kind of strategies did you used to help your child cope with the stresses of war? What do you do now to help your children cope with the effects of war? (Prompt for talking to them, showing them love and</i></p>	<p><b>Key Issue:</b> discussing the effect of parental strategies used to help the children can lead to strengthening competencies.</p> <p>Focus on the war-affected family’s adaptive and successful coping strategies and resiliency processes. Emphasise children returning to normal daily activities and relationships.</p>

	<p>keeping them secure, helping them to do normal things, playing, etc.)</p> <p>Here, be sure to maintain a strength-based approach - praise efforts involving self-reliance, family and community support, personal resilience, and self-help by encouraging and praising all these self-directed efforts. Encourage them to continue to do things that have helped in the past.</p> <p><i>Ask all - What are some other ways we can help our children? (Here opportunity to provide psycho-education)</i></p> <ol style="list-style-type: none"> <li>1- Resume normal daily activities (including school, etc). This creates a feeling of normalcy and creates security and certainty.</li> <li>2- Resume normal relationships. Parents or carers will often need to focus on other things during an emergency but being able to resume attention towards children is important. Activities that recover children's interaction in the community will help build a sense of belonging and self worth and self-confidence.</li> <li>3- Give the child an opportunity to talk about the distressing experiences. Do not try to force a child to talk about anything if they do not want to.</li> <li>4- Recreational play and games are important, as is story telling.</li> <li>5- Sports</li> <li>6- Songs, music and dance</li> <li>7- Give the child the option to express his feelings through drawing or painting the stressful event. Then afterwards, you can gently talk them through what they have drawn or painted, without pushing them to talk if they do not want to. Do not force a child to draw the painful event if they do not want to.</li> <li>8- Discuss with your child any mistaken beliefs he may have about his responsibility for the distressing events, and the likely recurrence of the distressing experience. For example, reassure your child that that what happened is NOT his or her fault.</li> <li>9- Engage the child in activities aimed at restoring normal life (helping adults in daily tasks, looking after younger children, etc).</li> <li>10- Establishing behavioural goals and reward achievements. Explain how – encourage good behaviours and ignore behaviours you don't want to continue.</li> </ol>	
5 mins	<p><b>5. <u>Conclusions and close</u></b></p> <p>We're approaching the end of the session....</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	

**Sources:**

- Assessment and management of conditions specifically related to stress: mhGAP intervention guide module ( version 1) . World Health Organization ,2013.
- Where there is no Psychiatrist: A mental Health Care Manual, Vikram Patel, 2002.
- Toolkit on Child Protection in Emergencies. (Indonesia). Section 5. Psychosocial Support. Unicef.
- Inter-Agency Guidance Note for Mental Health and Psychosocial Support – Jordan Response to Displaced Syrians - November 2012

*Handout (1)**Handling Tiredness and Fatigue*

We know that withdrawing from activities and from seeing friends is not good because it makes things worse.

This makes things worse and leads to a vicious cycle. What is the solution?

Break the vicious cycle by gradually increasing the amount of physical activity you are doing.

## **Optional Handout (2)**

### **Relaxation**

Relaxation exercises can be help in managing stress and worry. Relaxation techniques often combine breathing and focused attention to calm the mind and the body.

#### **Steps:**

- 9. Get yourself into as comfortable a position as possible**, with your legs uncrossed and your arms resting at your sides.
- 10. Close your eyes.**
- 11. Take deep breaths.** Don't do huge noisy gasps; breath in through your nose for as long as you feel comfortable, hold it (don't carry on holding it when it begins to get hard; 6 seconds will do), and slowly breathe out through your mouth. Remember to be quiet.
- 12. Tense your left leg as hard as you can, then let go of it completely and consciously relax all muscles of the left leg, feeling that they become heavy; repeat then your with you right leg, left arm, right arm then neck, head and chest.** You don't have to do it in that particular order, but doing the chest bit last often works best. To help you achieve as full relaxation as possible imagine that the joints are completely loose.
- 13. Imagine you are really heavy, being pulled down by gravity into your seat.**
- 14. Imagine a comfortable scene you like.**
- 15. Imagine you are there.** Explore the scene, try to use all of your senses during the imagination experience. All the time you are getting heavier.
- 16. Finish your little adventure in a comfortable place, the seat or bed, so heavy you can no longer move anything.** Gradually speed up your breathing and very slowly open your eyes.

Try to practice this exercise at least once or twice a day. Expect your ability to relax to improve as you continue practicing and expect to practice two or three weeks before you become genuinely proficient. Once you learn how to do the exercise, you may use it in situations and times you find it difficult to cope.

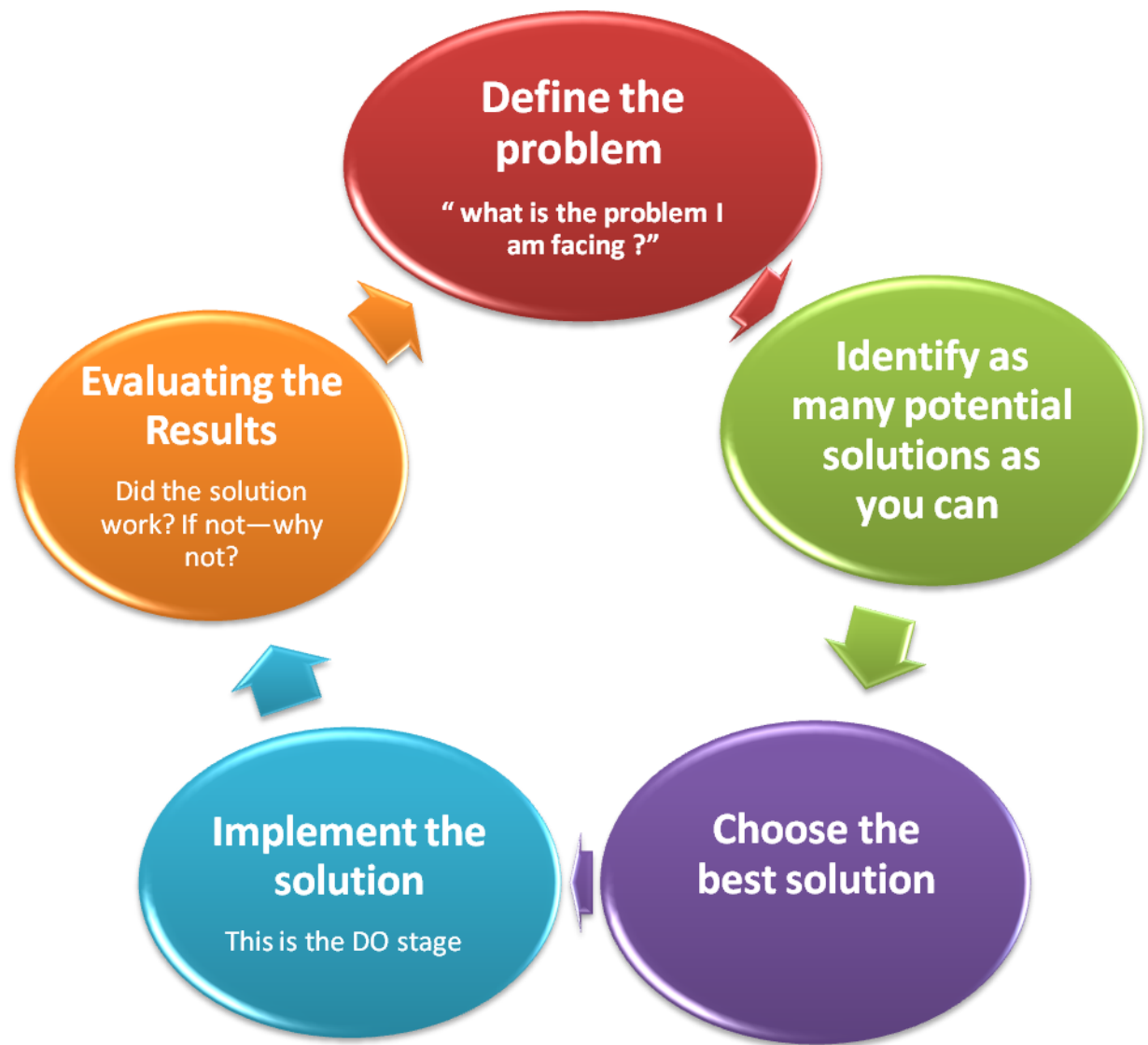
*Adapted from:*

*Patel, V. (2010) Where There is No Psychiatrist. Bell & Bain Ltd, Glasgow.UK.*

### Optional Handout (3)

#### Problem-Solving

Problem-solving is a mental process that involves discovering, analyzing and solving problems. The ultimate goal of problem-solving is to overcome obstacles and find a solution that best resolves the issue.



Adapted from the following sources:

<http://psychology.about.com/od/problemsolving/f/problem-solving-steps.htm>

<http://nccam.nih.gov/health/stress/relaxation.htm>



### **Optional Handout (4)** **Breathing Exercises**

Deep breathing is one of the best ways to lower stress in the body. This is because anxiety is associated with rapid, shallow chest breathing, while focusing on slow, regular, abdominal breathing reduces anxiety.

#### **Steps:**

1. *Lie flat on your back*
  2. *Place your hands palm down on your stomach at the base of the rib cage*
  3. *Take a slow deep breath, your stomach swells up and becomes round.*
  4. *Hold the breath in for a moment, and then begin to exhale as slowly as possible.*
  5. *As the air is slowly let out, relax your chest and rib cage. Begin to pull your belly in to force out the remaining breath.*
  6. *Close your eyes, and concentrate on your breathing as well as your stomach movement.*
  7. *Feel how relaxed and heavy you are now.*
  8. *Your thoughts are fading away; you are starting to feel good.*
- ❖ You can practice this exercise as often as you like, it should help you breathe normally all the time.

Adapted from:

<http://cas.umkc.edu/casww/brethexr.htm>

### ***Optional Handout (5)***

#### **Advice on How to Sleep Better (Insomnia)**

On average, a person sleeps seven to eight hours a day. Sleep gives the body and mind time for rest and makes the person feel fresh in the morning. Insomnia is the word for the most common type of sleep difficulty, in which sleep is no longer refreshing. Some people may have difficulty falling asleep. Some may wake up too early in the morning and cannot get back to sleep. Some may wake up repeatedly throughout the night. Insomnia is one of the most common health complaints. As a result of the excessive use of sleeping pills, many people with insomnia become addicted to them.

- Keep to a regular sleep routine. Go to bed at a fixed time.
- Wake at the same time no matter how much sleep you have had during the night. Use an alarm clock if you have difficulty waking at a fixed time after the night.
- Do not use alcohol or sleeping medicines to help you get to sleep
- Do not smoke before sleeping; coughing can keep you awake
- Empty your bladder just before sleeping
- Avoid tea and coffee in the evening; these are stimulants and can keep you awake
- Try relaxation exercises before sleeping
- Avoid exercise in the evenings but do exercise in the daytime
- Avoid daytime naps
- Worrying about not being able to sleep makes the problem worse
- Make your sleeping environment 'sleep friendly': keep the room dark and quiet
- If you cannot fall asleep, do not lie in bed; get up, read a book or relax for 15 to 30 minutes and then go back to bed

#### **Adapted From:**

**'Where There is No Psychiatrist: A Mental Health Care Manual'. By Vikram Patel (2002). Royal College of Psychiatrists. P. 97 Box 5.6.**

***Optional Handout (6)*****Advice on Hyperventilation and Panic**

Panic attacks are attacks of severe anxiety that result from rapid breathing. Sufferers should be taught the following:

- An attack begins when you start to feel fearful thoughts or the physical symptoms (heart racing, etc.)
- You should immediately remind yourself that you are breathing too fast and take control of your breathing.
- You should breathe in a slow, steady, controlled manner (slow, steady, breaths through the nose). The breathing should continue in this manner until the panic attacks subside.
- You should reassure yourself that the symptoms are due to breathing too fast and that nothing dangerous will happen.

**Adapted From:**

**‘Where There is No Psychiatrist: A Mental Health Care Manual’. By Vikram Patel (2002). Royal College of Psychiatrists. P. 94 Box 5.3.**

### ***Optional Handout (6)***

#### **Advice on Managing Anger:**

#### **(Help for people who have difficulty controlling their temper)**

- Anger is damaging to your health and to your life. Learning how to control it is an important way of improving your life
- Anger can be controlled. Someone who says 'I just cannot control what I do when I get angry' has not tried hard enough.
- The most important step in anger management is recognising the first signs of anger. These may be feeling hot in the head, having angry thoughts and feeling tense all over the body
- As soon as the person notices any of these, he must immediately remove himself from the situation that is making him feel this way. For example, if he becomes furious while talking to his wife, he must leave the room they are in.
- He should wait until his mind feels calm and only then continue what he was doing. He should calmly think about what he wants to say to the person. After the anger has gone away, then he should plan to tell the person his thoughts with a view to reducing the conflict.

#### **3 Steps**

1. Be aware of your feelings of anger
2. Leave the room or place where you are beginning to feel angry
3. Return only when you feel calm and able to solve your difficulty without losing your temper

Adapted From:

'Where There is No Psychiatrist: A Mental Health Care Manual'. By Vikram Patel (2002). Royal College of Psychiatrists. P. 147 Box 7.6.

# **Session 3**

## **Understanding Gender Based Violence**

## **Session3: Understanding Gender Based Violence (GBV)**

### **Introduction**

The following two sessions are focusing on GBV. The first part, session 3, aims to raise general knowledge and awareness about the nature and different types of GBV and SGBV during the different phases of an emergency, and about the consequences to the individual, the family, and the community. We also provide information such as existing services and we aim to teach skills to beneficiaries in how to protect and care for survivors/ victims of violence in their community. In the next session we will continue with speaking about GBV but here we aim to go more deeply into sensitive issues and look into deeper beliefs about violence against women. However session 3 can be used stand-alone without needing to provide the next session, session 4.

### **Aims**

Session 3 aims to raise awareness about sexual and gender based violence issues and to enhance survivor wellbeing in the community.

### **Objectives**

- Raise awareness about the nature and different types of GBV and SGBV during the different phases of an emergency
- Raise awareness about the consequences of GBV and SGBV to the individual (physical, emotional, and social), the family, and the community
- Raise awareness about the availability, confidentiality, and respectfulness of GBV and SGBV services in their community and how survivors/ victims and their families can access them
- Build trust in the community about GBV services which will respect the survivor/ victim and his/ her family, and will treat her and her family with confidentiality and dignity.
- Teach skills in how to protect and care for survivors/ victims of violence in their community
- Help participants see the need for non-judgmental, compassionate, non-rejecting approaches to caring for survivors/ victims of GBV/ SGBV.

## Techniques

Session 3 uses the following psychosocial techniques to achieve its aims and objectives:

- Supportive discussion and peer support for women who have experienced GBV
- Skills training in how to protect and care for survivors/ victims of violence in their community.
- Referral information provision including information about GBV services in specific areas
- Lay counseling techniques in helping participants see the need for non-judgmental, compassionate, non-rejecting approaches to caring for survivors/ victims of GBV/ SGBV.
- Peer to peer work discussing how to support each other

## Who is this session designed for

Session 3 is designed specifically for use in GBV prevention work with Syrian adult refugee women and local adult Jordanian women. This session is not suitable for working with men. This session focuses on GBV against women and teenage girls and does not go into detail about GBV against children (including child abuse) or men. It is suitable for working with abuse survivors and those at risk of abuse and violence, so long as the facilitator has specialist knowledge and training in responding to GBV.

## Notes for facilitators

- This session was written keeping in mind the published assessments of needs identified within the Syrian refugee population in Jordan with respect to GBV in late 2012 (see references below). The session may need to be updated for use with other populations or over time.
- This session is written for women only and is not suitable for use with groups of men. This session focuses on GBV against women and teenage girls and does not go into detail about GBV against children (including child abuse) or men.
- Materials needed for Session 3. You will need flip board or white board, and pens.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression' and 'psychological problems', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist

terms should be used including 'stress', 'distress', 'shock', 'severe distress'.

- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues only where participants want to talk, but they should not push participants to speak about any experiences of GBV where they do not want to.
- For this session, it is vital that the facilitator is very familiar with the appropriate GBV focal point contacts in the geographical location in which you are conducting the session. You can email or telephone the GBV Coordination Group head in Jordan to find an up to date list. You will need to have phone numbers for and names of the correct focal points for GBV in the area to provide to participants in case they need it. It is recommended that you make phone contact with the GBV focal point to introduce yourself prior to conducting the session, and you must find out if they provide safe, confidential, and respectful resources. If there are no services in the area, it is important not to raise expectations in beneficiaries by discussing services where they do not exist. You can leave out section 5 in these cases.
- While it is unlikely that you will have anyone disclose information about personal ongoing GBV to you, you need to be extremely careful if someone does divulge details to you. It is extremely important that you maintain confidentiality as any breaches can result in danger for the beneficiary. Immediate referral (with beneficiary consent) to specialist GBV agencies is required at this point. ARDD-LA will not provide this specialist support role in cases of GBV.
- While it is important to maintain cultural awareness and to be sensitive to cultural conditions, it is also important to be aware of Human Rights conventions related to the right to be free from violence and abuse. In situations where beneficiaries use culture as an excuse for harmful cultural practices, it is important to be sensitive by discussing the impact of these cultural practices on women, and asking participants to make their own choices in light of the negative consequences for women.
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in



front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.

- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program.
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do no harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups.
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance.

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "Gender based violence". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group and general information about themselves.</li> <li>• At the end, each participant introduces her partner to the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>

<p>30 minutes</p>	<p><b>2. <u>Identifying Gender Based Violence</u></b></p> <p>Tell them that we will be talking about violence and things that may have happened to them personally. Explain that we do not expect them to talk about their own personal experiences today. Explain that if they wish to they can call you or talk to you later about it if they want to talk confidentially. Tell them you will also be providing the telephone number of a GBV focal point in their area in case they want trustworthy, confidential help.</p> <p><b><u>Discussion:</u></b></p> <p>Clarify that GBV means violence involving men and women, in which the woman is usually the victim (can be women or girls); and which is derived from gender norms and roles as well as from unequal power relations between women and men.</p> <p>Violence is specifically targeted against a person because of his or her gender and it affects women disproportionately. It includes, but is not limited to, physical, sexual, and psychological harm (including intimidation, suffering, coercion, and/or deprivation of liberty within the family or within the general community). It includes violence perpetuated by the state.</p> <p>For all</p> <p><i>Divide into three groups and ask each group to come up with some examples of GBV:-</i></p> <p><u>Pre-conflict or general community phase.</u> Here we would include DV, rape, and sexual harassment</p> <p><u>During conflict and flight phase</u> (for refugees – in Syria during the conflict before they became refugees). Ask them if they have seen or know of anyone experiencing some of these things – neighbour, friend.</p> <p>Some examples might be: During conflict - rape, fear of rape, abduction of women in order to get information, etc by both sides in the conflict) in humiliating circumstances for example in front of her own family. During flight – as above but also rape by border guards in exchange for safe passage, ‘survival sex’, etc.</p> <p>Explain two reasons – first, that during times of conflict normal systems break down leaving people vulnerable to violence, and second, sexual violence is commonly used as a weapon of war</p>	<p><b>Key Issue:</b> Increase knowledge about the meaning and the many different types of GBV.</p>
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by both sides.

*In camp or host community*

Again, ask if they have heard of any of these and give examples

Examples: domestic violence (define this and point out that stress of being a refugee on men makes them more likely to be violent), sexual harassment (define this as unwanted sexual touching or words), sexual exploitation (define this including prostitution or survival sex, trafficking at camp border or in the camp), rape, sexual exploitation, some participants may offer examples which are not GBV, such as child abuse without gender as a cause; take a moment to review the definition of GBV.)

*Types of gender-based violence.* If it helps, explain the differences between the following:

- *Physical violence*: use of physical force with the potential to cause death, disability, injury or harm. Physical violence includes, but is not limited to: scratching, pushing, shoving, throwing, grabbing, biting, choking, shaking, poking, hair-pulling, slapping, punching, hitting, burning, use of a weapon (gun, knife or other object), and use of restraints or one's body, size, or strength against another person.
- *Sexual violence*: Use of physical force to compel a person to engage in a sexual act against his or her will, whether or not the act is completed.
- *Psychological-emotional violence* : distress to the victim caused by acts, threats of acts, coercive tactics and it may include humiliating a person; controlling what the person can and cannot do; withholding information from the person; getting annoyed if the person disagrees; deliberately doing something to make the person feel diminished (e.g. less smart, less attractive); deliberately doing something to make the person feel embarrassed; isolating the person from friends and family; prohibiting access to transportation or telephone; denying access to money and other resources .

25 mins

**3. After – Effects of GBV/ SGBV**

Ask all :

*Give me examples of some of GBV consequences, divided into the following categories: HEALTH, EMOTIONAL, SOCIAL. Use different coloured markers for each and write it on flip charts in table like this:*

**Key Issue:** describe the potential consequences and after effects of various types of gender-based

*After effects:*

violence .

<i>Health</i>	<i>Emotional</i>	<i>Social</i>

*Discuss each below.*

6. Health Impacts: injury, shock, diseases, infection, suicide, self-harm, unwanted pregnancy or abortion
7. Psychosocial Impacts: shame, guilt, self-blame, sadness, not wanting to go out, stress, distress, difficulty sleeping and eating, fear of stigma, suicide or suicidal thoughts, nightmares about the incident, flashbacks, etc.
8. Social impacts: stigma, tendency to blame the victim, family rejection (can be thrown out of house, divorced, etc), family pressure, social rejection which cause shame, self-hate, isolation, loss of ability to function in daily life, unable to marry as a result of the stigma, or forced marriage can result as a way to 'end the matter'.

**Discuss wider impacts of GBV and SBGV on:**

**Family** of survivor/ victim (eg how are children affected?)

**Wider community** of survivor – fear of going out of the home is a big one, in camps fear of using public toilets, kitchens, for fear of sexual assault, etc. Ask what impact there is on women of not being able to go out of their own home? (social isolation, etc), early marriages are another way of keeping women 'safe'.

**Discuss the issue of the 'culture of silence'** and whether people talk about GBV. Do they report to the police? Do they talk to each other? Why/ Why not? Etc. Here, recognise the cultural, social and religious pressures on women not to talk out about these issues. Do not judge, but ask how does the 'culture of silence' impact on the survivor/ victim?

**15 minutes**

	<b>BREAK</b>	
20 mins	<p><b>4. <u>How to take care of a survivor/ victim</u></b></p> <p>Ask them what kind of help they think survivors need. Talk to them about how to care for someone who comes to them in this situation. Maybe use some examples they have given as case studies to discuss. Here, you want to encourage compassionate and non-judgmental attitudes.</p> <ul style="list-style-type: none"> <li>- Let the survivor/ victim know that it is not their fault and that violence is always the fault of the person who is violent</li> <li>- See if they need medical, legal or other help, tell them that they can get confidential, respectful support from the GBV focal point, and if they agree, help them to call it.</li> <li>- Show support and do not reject or judge or blame her in any way</li> <li>- Make sure she is not taking any drugs to help her (like sleeping tablets as these can get addictive)</li> <li>- Respect her coping mechanisms</li> <li>- Reassure her that her feelings are normal and she is not going crazy</li> <li>- Listen without forcing her to talk about details</li> <li>- Make sure she is safe and secure so that no more harm will come to her, possibly work out a 'safety plan' with her so she has a plan for what she will do if she feels at risk of violence again</li> <li>- Provide for her basic needs. Ask her what she needs and listen to what she is worrying about, try to help her with these.</li> <li>- Make sure you do not tell people and reassure her you will be confidential unless she gives you permission</li> </ul>	<p><b>Key issue:</b> identifying skills they can use to help survivors. Here, you are trying to encourage compassionate and non-judgmental approach to survivors and victims.</p>
15 minutes	<p><b>5. <u>Response Services in Jordan Section.</u></b></p> <p>Here, you need to tell them the details about whatever local GBV focal points are available to them, and explain that this person and this organisation are trustworthy and confidential (so long as you are confident of this), and provide phone numbers here. Explain that the person may need health/ medical/ legal/ security and other help and that the GBV focal point can provide these things if needed. Also explain that if they are unsure they can always call you for advice. See also guidelines above for facilitators.</p> <p>Note, only include this section if you are confident you know which services to include here. If no services are available, leave this section out and suggest they call you</p>	<p><b>Key Issue:</b> help participants identifying response services locations in Jordan.</p>

	if they need any further assistance.	
5 Minutes	<p><b>6. <u>Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	

#### Sources

- 2002. *'Guidelines for Gender-based Violence Interventions in Humanitarian Settings Focusing on Prevention of and Response to Sexual Violence in Emergencies'* Contact: The IASC Taskforce on Gender in Humanitarian Assistance
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- 2007. *'WHO Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies, WHO'*.
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# Session 4

## Beliefs About Gender Based Violence



## **Session 4: Beliefs About Gender Based Violence**

### **Introduction**

This session is the continuation of Session 3 and should not be used without Session 3. This session continues discussing GBV, but this time goes more deeply into sensitive issues and looks into deeper beliefs about violence against women. We will help women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions and we aim to teach women that violence is not a good way to interact with each other or solve problems.

### **Aim**

Session 4 aims to go more deeply into GBV issues through discussing underlying causes and contributing factors.

### **Objectives**

- Aiming to go more deeply into sensitive issues, look into deeper beliefs about violence against women.
- Helping women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions.
- Teach women that violence is not a good way to interact with each other or solve problems
- Helping women to clarify myths and realities about GBV
- Helping women to increase their knowledge about the roots and causes of GBV

### **Techniques**

Among others, Session 4 uses the following techniques:

- Psycho-education about the psychological consequences of GBV
- Supportive peer to peer discussion to help women to understand their own beliefs and to question their cultural beliefs in light of human rights laws, religion and traditions, and aim to teach women that violence is not a good way to interact with each other or solve problems.

### **Notes for facilitators**

- This session was written keeping in mind the published assessments of needs identified within the Syrian refugee population in Jordan with

respect to GBV in late 2012 (see references below). The session may need to be updated for use with other populations or over time.

- This session is written for women only and is not suitable for use with groups of men. This session focuses on GBV against women and teenage girls and does not go into detail about GBV against children (including child abuse) or men.
- Materials needed for Session 4. You will need a flip board, or white board, and pens.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression' and 'psychological problems', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress'.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues only where participants want to talk, but they should not push participants to speak about any experiences of GBV where they do not want to.
- For this session, it is vital that the facilitator is very familiar with the appropriate GBV focal point contacts in the geographical location in which you are conducting the session. You can email or telephone the GBV Coordination Group head in Jordan to find an up to date list. You will need to have phone numbers for and names of the correct focal points for GBV in the area to provide to participants in case they need it. It is recommended that you make phone contact with the GBV focal point to introduce yourself prior to conducting the session, and you must find out if they provide safe, confidential, and respectful resources. If there are no services in the area, it is important not to raise expectations in beneficiaries by discussing services where they do not exist.
- While it is unlikely that you will have anyone disclose personal ongoing GBV to you, you need to be extremely careful if someone does divulge details to you. It is extremely important that you maintain confidentiality as any breaches can result in danger for the beneficiary. Immediate referral (with beneficiary consent) to specialist GBV agencies is required at this point. ARDD-LA will not provide this specialist support role in cases of GBV.
- While it is important to maintain cultural awareness and to be sensitive to cultural conditions, it is also important to be aware of Human Rights conventions related to the right to be free from violence and abuse. In situations where beneficiaries use culture as an excuse for harmful

cultural practices, it is important to be sensitive by discussing the impact of these cultural practices on women, and asking participants to make their own choices in light of the negative consequences for women.

- Remember that the purpose of this session is not to provide counselling or therapy, but to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do no harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance

Timing/ Materials	Facilitator Guide	Notes
10 minutes	<p><b><u>1. Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "Gender Based Violence". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group, general information about themselves.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>

25 minutes	<p><b>2. <u>Views and beliefs about GBV</u></b></p> <p><b>Activity 1: “Vote With Your Feet”</b></p> <p>Start with a warm up exercise and ask participants to give you feedback about the good things/ helpful things gained from last session, to get them talking and let them feel comfortable.</p> <ol style="list-style-type: none"> <li>1. Explain that, as a group, participants will discuss some violence against women -related statements.</li> <li>2. Explain that, in this next activity, they are going to explore their own views and beliefs about violence against women through an interesting exercise.</li> <li>3. Ask the group to stand in the center of the room. Explain that you are going to call out a statement. Tell the participants to step to the right if they agree with the statement or step to the left if they disagree. Tell them that there are no right or wrong answers.</li> <li>4. Read each statement twice to ensure everyone heard it. After the participants choose whether they agree or not, ask 2 or 3 participants from each side to explain why they voted the way they did. Generate responses and probe further with additional questions. Then ask the same question of the other response group. Ask participants if anyone wants to change their vote.</li> </ol> <p><b>Statements</b></p> <ol style="list-style-type: none"> <li>1. <i>Violence against women is too sensitive in our culture to talk about.</i></li> <li>2. <i>In certain circumstances, women provoke violent behavior, by the way they dress, walk, talk, etc.</i></li> <li>3. <i>Men sometimes have a good reason to use violence against their wives (Domestic Violence).</i></li> </ol> <p><b><u>Discussion:</u></b></p> <ul style="list-style-type: none"> <li>• Sex violence is not about sex but about violence and power.</li> </ul>	<p><b>Key Issue:</b> identifying participants’ own views and beliefs about Gender-Based Violence. The aim of this activity is also to teach participants that violence is not a good way to handle problems</p>
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25 minutes	<ul style="list-style-type: none"> <li>• Ask participants whether they have any further questions or comments.</li> <li>• Close with a statement that violence is not a good way to handle problems.</li> </ul> <p><b>3. <u>Myths and Realities of Gender-Based Violence</u></b></p> <p><b>Activity 2: “raise your hand ”</b></p> <p>Read the statements loud, one at a time, and ask whether it’s true or false. Have participants raise their hand for the response they choose. Do the same with the next statement, facilitating a brief discussion around participants’ responses.</p> <p><b><u>Statements</u></b></p> <ol style="list-style-type: none"> <li>1. <i>Men who are violent have responsibility for their own behaviour, have control, they cannot say ‘you made me do it’</i></li> <li>2. <i>Poverty or war leads to attacks on and abuse of women.</i></li> <li>3. <i>Alcohol causes violence against women.</i></li> <li>4. <i>Violence against women is a normal part of a husband-wife relation.</i></li> <li>5. <i>Violence against women is normal for boys and men</i></li> <li>6. <i>It is natural for men to have strong sexual urges.</i></li> </ol> <p>As the discussions around each response develop, clarify the misperceptions and beliefs about each myth with the facts detailed after each myth below.</p> <p><b><u>Discussion:</u></b></p> <ul style="list-style-type: none"> <li>• Violence is socially and culturally learned behavior.</li> <li>• Poverty and war may increase the levels of violence. But there are many individuals living in poverty or war who are <i>not</i> violent toward women, and there are many individuals in higher economic quintiles or non-conflict settings that <i>are</i> violent toward women.</li> <li>• Violence against women is unacceptable under all circumstances. And it is important to recognize that neither alcohol nor drugs nor the victim should be blamed in these situations.</li> </ul>	<p><b>Key Issue:</b> clarifying the myths and realities about GBV and SGBV .</p>
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	<ul style="list-style-type: none"> <li>Disagreements are parts of husband – wife relations. However, violence is not the way to resolve those disagreements and arguments.</li> <li>Male violence is not genetically based; it is our culture that encourages men to be aggressive. It is up to us as individuals, communities, and society to change these gender norms so that violence against women is not accepted or tolerated.</li> </ul> <p>Explain that all of these statements are actually myths about Gender-Based Violence that attempt to explain it or justify it and try to make connections where possible to statements and comments made during the - Vote With Your Feet - exercise.</p>	
15 minutes	<b>BREAK</b>	
30 minutes	<p><b>4. Causes and Contributing Factors</b></p> <p>Ask the participants to work in small groups to identify causes and contributing factors that perpetuate violence against women.</p> <p>Clarify for everybody that in order to deal with violence against women and sexual violence against women, we must understand the causes and contributing factors that perpetuate violence against women or increase risk of the violence against women, and influence the type and extent of violence against women in any setting. Contributing factors do not cause violence against women although they are associated with some acts of GBV. Some examples:</p> <p>Root Causes of Violence against women:</p> <ul style="list-style-type: none"> <li>Male attitudes of disrespect towards women.</li> <li>Lack of belief in equality of human rights for everyone.</li> <li>It is normal in this culture for boys and girls to be treated in different ways with boys favored.</li> <li>Lack of value of women and women's work – it is</li> </ul>	<p><b>Key issue:</b> increase knowledge of the root and causes of all forms of violence against women and increase awareness of potential contributing factors and risks that may be present in individual settings.</p>

	<p>women's duty to look after men.</p> <p>Things that can make it worse:</p> <ul style="list-style-type: none"> <li>• Being poor</li> <li>• Lack of food, fuel, toys for children</li> <li>• Men and women being confined to the home</li> <li>• Men without work</li> <li>• Lack of services, activities, programs</li> <li>• Collapse of traditional society and family supports in war times</li> <li>• Religious, cultural, and/ or family beliefs and practices</li> <li>• Design of services and facilities</li> <li>• General lawlessness</li> <li>• Alcohol/drug abuse</li> <li>• Geographical location/ environment (high crime area)</li> <li>• Lack of laws against forms of Gender-Based Violence</li> <li>• Lack of police protection</li> <li>• Legal justice system/ laws accept gender violence</li> <li>• Loss of male power/ role in family and community; seeking to assert power</li> <li>• Political motive, weapon of war, for power/ control/ fear/ ethnic cleansing</li> </ul> <p>Camps issues:</p> <p><u>Optional Section.</u></p> <p>Ask them: Where do you feel unsafe now? Then discuss the following issues. Come up with solutions. What could you do about this? Who could you tell?</p> <ul style="list-style-type: none"> <li>• Camp leadership predominantly male; women's security issues not considered in decisions</li> <li>• Design and social structure of camp (overcrowded, living with strangers)</li> <li>• Design of services and facilities.</li> <li>• Lack of identity cards/registration cards for each individual refugee</li> <li>• Lack of UNHCR presence in camp</li> <li>• Retaliation: Refugees may be considered materially privileged compared with the local population</li> </ul>	



<p>25 minutes</p>	<p><b>5. <u>Early and forced marriage</u></b></p> <p>Ask the group :</p> <p><i>What do you think early marriage means?</i></p> <p>Talk to them about the definition of early marriage. This is the marriage for girls under the age of legal consent, arranged by the family. Most countries in the Middle East region have laws on the minimum age for marriage, ranging from age 13 in Iran to age 20 in Tunisia for females, and from age 15 in Yemen to age 21 in Algeria for males. What is it in Syria? What is it in Jordan?</p> <p>Note that in Syria the general legal age in personal status law is 17 for females, however with the permission of the male legal guard a judge can give special approval to marry at the age of 13 for girls. This will be under special circumstances (if the girl is vulnerable, family needs money, family needs protection, orphan, rape victim, etc). Many marriages are held with the presence of Imam without documentation in the court. Note that in Jordan the age is 18. A marriage document is required.</p> <p>Early marriage is widespread in many developing countries, and in some countries, more than half of the girls are married before they turn 18. In Jordan 13.6% of the marriages in 2013 has involved children.</p> <p>Ask the group :</p> <p><i>What do you think forced marriage means?</i></p> <p>Forced marriage is arranged marriage for girls under the age of legal consent or women family members against their wishes. Often a dowry is paid to the family; if she refuses, there are violent and/or abusive consequences.</p> <p>(Legally, such unions would not be considered marriage because of age and/or force).</p> <p><b>Activity 3 : Positives and Negatives of Early Marriage</b></p> <p>Divide the board into two parts, one part for the positive effects, and the other part for negative effects for the early marriage. Then ask the participants to share their thoughts about the positive and the negative effects of early marriage.</p>	<p><b>Key Issue:</b> raise participants' awareness about early and forced marriage and encourage them to help eliminate it in their societies. Aim is to teach women to be less likely to marry their daughters early</p>
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	<p><b>Facilitator note:</b> be sensitive and avoid any judgmental attitudes.</p> <p>Here you may discuss opinions like marriage is the best for the girl, family knows what is the best for its members, marriage protect the girl from rape, and marriage will make the girl live in better condition especially if the husband is rich because many (Syrian) families are reliant on dwindling resources and are lacking economic opportunities.</p> <p>Others may provoke opinions like: early marriage compromises girls' development, and often results in early pregnancy, social isolation, and/or domestic violence. Child marriage also reinforces the cycle of early marriage, low education, high fertility, and poverty. And it is harmful for the reputation of (Syrian) girls, who can be seen as 'easy and cheap'.</p> <p><b><u>How we can help:</u></b></p> <p>Ask the group:</p> <p>How we can help discourage early marriage?</p> <p>Discourage early marriage by:</p> <ul style="list-style-type: none"> <li>• Encouraging parents to keep their daughters in school until they finish high school. It is important to stay in school to get educated and to get a job, and then she will have money to look after herself and make her own decision about who to marry.</li> <li>• Remember the negative things about early marriage.</li> </ul>	
5 minutes	<p><b>6. <u>Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	

## Sources

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# Session 5

## How Families and Communities Can Help Children Cope

## **Session 5: How Families and Communities Can Help Children Cope**

### **Introduction**

Sessions 5, 6, and 7 address issues concerning children and are aimed at parents, caregivers, families and communities. Session 5 provides some basic information about children's problems specifically in times of war and displacement and how parents can help building resiliency in children. Module 6 discusses development stages of children and how war and displacement affects these stages. Module 7 focuses specifically on teenagers.

### **Aim**

Session 5 aims to help parents to better care for their children, assist them in coping, and guide them to deal positively with their children's behaviours.

### **Objectives**

- Share common problems they are experiencing with their children and children in their communities.
- Understand the kinds of problems children experience living in refugee settings & kinds of hardships children endure during times of conflict.
- Understand how to help support children in our families and communities.
- Understand the basic rights of children.
- Understand the problems with physical force as a punishment technique and providing alternative approaches
- Understand resilience and protective factors when it comes to children coping with the aftermath of war and displacement.

### **Techniques**

Among others, Session 5 uses the following techniques:

- Supportive peer-to-peer discussions sharing ideas about children's problems, how to cope, and war, conflict, and displacement affect children.
- Lay counselling skills in how to help support children in our families and communities.
- Psycho-education about parenting and the consequences of violence to children.
- Skills teaching in providing positive discipline with children.

## Who is this session for?

- This session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.
- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for both in camp and in urban and rural community settings

## Notes for Facilitators

- The child modules (5,6,7) can be used as stand alone sessions however they are better conducted as a group of three
- Hand outs should be printed and handed out to participants
- Facilitators respect parents' and caregivers' experiences and styles as parents and help them share their knowledge and experiences without being judgemental.
- Facilitators should know basic children's rights.
- Facilitators should know the development stages of children.
- Facilitators should keep in mind that the vast majority of parents and caregivers have good intention but may face obstacles. Facilitators should focus on positive values and practices that parents are already doing.
- Facilitators should have knowledge about available child protection referral pathways in specific locations.
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant or their child cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to

incorporate the Koran and other Islamic and religious factors into facilitating the groups.

- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events the majority of people will recover over time using their own ways of coping

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "Helping Children Cope". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality: explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group, general information about themselves and how many children do they have.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul> <p><b>Facilitator note:</b></p> <p>Explain to the participants that everybody can benefit from this session even if they don't have children themselves, because we interact with children all the time and in many places.</p>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>



10 minutes	<p><b>2. <u>Identifying children's problems</u></b></p> <p>Divide the participants into small groups. And ask each group to define what problems they are having with their children or are seeing with the children in their community.</p> <p>Prepare flip chart to record the answers.</p> <p>Answers may include anxieties, misbehaviour (non-compliance in younger children), aggression, social withdrawal/ depression, risk taking, and educational problems.</p> <p>Facilitator note:</p> <p>Show your empathy and do not discuss dealing methods here, and tell the group that you will discuss these problems in details later on. Do not diagnose or label problems; use the participants' own words when discussing.</p> <p>Ask the group:</p> <p>How are your communities helping to cope with and solve these problems? How are you as families and parents helping to cope with these?</p>	<p><b>Key Issue:</b> this is a gentle introductory exercise to increase empathy and rapport their experiences, all to have their turn, across a variety of ages from babies to teenagers.</p>
20 minutes	<p><b>3. <u>Experiences of children in war, flight, and refugee settings</u></b></p> <p>Divide participants into three groups – pre-conflict/ flight/ refugee setting - ask each group to discuss what kinds of difficult experiences their children or others they have heard of went through.</p> <p>Get a big range here. Be sensitive; do not get into political argument, just empathy and understanding development (e.g. death of loved ones, exposure to combat, having to live as a refugee, long term separation, and many losses – friends, home, toys, family, environment, culture, etc.)</p> <p>The group may also mention exposure to violence as a witness, exposure to violence as a victim, suffering physical injuries, poverty, and grave violations such as abduction or rape.</p>	<p><b>Key Issue:</b> armed conflict and forced migration are likely to have a particularly serious impact on children's development which may have long-term consequences</p>

*Discuss each below:*

- Wholesale loss of the child's home, familiar circumstances, people, possessions etc.
- Crowded accommodation, lack of health services, lack of clean water and adequate sanitation can conspire to pose particular threats to the health of the growing child.
- Chronic poor health can affect the child's natural inclination to explore and learn from the environment and opportunities for taking part in school and other social activities.
- Physical injuries can also be associated with armed conflict and result in physical disabilities and psychological threats. For example, bomb blasts can lead not only to shock and anxiety but to hearing loss, which in turn may affect school performance.
- Loss of educational opportunities can have far-reaching effects on children's development. Children whose primary education is disrupted often find it difficult to return to schooling later in their childhood. Girls are particularly likely to be disadvantaged educationally. The absence of basic education violates the rights of children and often proves to be a life-long handicap.
- Lack of opportunities for play: play is an essential and universal feature of childhood through which children explore, learn, co-operate, cope and adjust. Through play, children not only develop skills and competencies, but also handle and re-enact difficult life experiences and express their feelings about them.

15 minutes

**4. How have war, conflict, and displacement affected children?**

Divide the group into age groups according to their children's developmental stage (babies – 18 months, toddlers and early school, middle school, adolescents and teenagers). Ask them to discuss both social effects and psychological effects and explain the differences between each.

- Social effects include overcrowding, loss of extended family, difficulties accessing school, bullying and prejudice, lack of peer group, child labour, increased family violence, etc.
- Psychological effects include crying, shouting, fear, clinging behaviour, passivity or helplessness, regressive behaviours (thumb-sucking, bed-wetting, fear of darkness), feeling that danger is still there, confusion, not talking as much as usual, separation fears, attributing magical qualities to reminders of distressing events, anxiety over separation from family, grief and loss, insomnia, nightmares, withdrawal, misbehaviour,

**Key Issue:** refugee children are children first and foremost, and as children, they need special attention.

	stealing, stomach-aches, bullying others, depressed, aggression, self-destructiveness, etc.) (here we discuss how these reactions are normal and common after distressing events).	
15 minutes	<b>BREAK</b>	
20 minutes	<p><b>5. <u>7 things to do instead of SPANK</u></b></p> <p>Start this section explaining that Children who are spanked learn that might makes right, that hitting is okay (such as when you are bigger), and that people who supposedly love you may hurt you.</p> <p>Ask participants to complete this sentence (spanking children teaches children that.....).</p> <p>Write the different impact of <b>physical discipline</b> identified by the participants on the flip chart.</p> <p>Some examples may be we communicate through hitting; hitting is acceptable response to anger, etc.</p> <p><i>(See Handout 1).</i></p> <p>If you give attention to good behaviour, you will get more of it; notice when children try – not just when they do it right; avoid shaming, threats, and belittling. Provide examples of shaming, threats and belittling. Talk about the negative effects on children of these</p>	<p><b>Key Issue: children who are physically disciplined are more aggressive toward other children, more rebellious as teenagers, and more prone to depression and violent acting out as adults.</b></p>

	<p>behaviours.</p> <p>Divide the group into groups. Ask them to discuss both social effects and psychological effects and explain the differences between each.</p> <p><b>6. <u>Psycho education</u></b></p> <p>7 things to do instead of SPANK (skill teaching):</p> <ul style="list-style-type: none"> <li>- Reinforcement (<i>See Handout 2</i>).</li> <li>- Planned Ignoring (<i>See Handout 3</i>).</li> <li>- Response cost (<i>See Handout 4</i>).</li> <li>- Token economy (<i>See Handout 5</i>).</li> <li>- Grandma's rule (<i>See Handout 6</i>).</li> <li>- Modelling (<i>See Handout 7</i>).</li> <li>- Time out (<i>See Handout 8</i>).</li> </ul>	
15 minutes	<p><b>7. <u>Children's rights and protection</u></b></p> <p>Ask participants to complete this sentence (children have the right to...).</p> <p>Write the different children's rights identified by the participants on the flip chart.</p> <p>Some examples of children's rights may be the right to education, right to health care, right to be treated fairly and right to childhood. (<i>See Handout 9</i>).</p>	<p><b>Key Issue:</b> both parents share responsibility for bringing up their children and should always consider their rights because it is for the best for each child.</p>

	<p>Discuss:</p> <ul style="list-style-type: none"> <li>✓ Rights are things every child should have or be able to do.</li> <li>✓ All children have the same rights.</li> <li>✓ These rights are listed in UN Convention on the Rights of the Child.</li> <li>✓ All rights are connected to each other, and all are equally important.</li> <li>✓ It's our responsibility as parents, and community members to ensure that we respect and promote children's rights.</li> </ul> <p>Facilitators should highlight that the refugee children should be protected.</p> <p>Ask participants what do you think child protection means? And when do we need to protect the child?</p> <p>Discussion:</p> <p>Child Protection consists of reducing risks to children's holistic well-being, making children's rights a reality, restoring hope and a dignified living where abuse has occurred and creating an enabling environment that supports children's positive development and that includes:</p> <ol style="list-style-type: none"> <li>1. Preventing abuse.</li> <li>2. Children's rights.</li> <li>3. Restoring hope and a dignified living (or well-being).</li> <li>4. Protective environment.</li> </ol>	
20 minutes	<p><b>8. <u>How parents can build Resiliency in children.</u></b></p> <p>Ask participants to work in pairs to define what is resilience?</p>	<p><b>Key Issue:</b> help participants identify ways to build resiliency</p>

	<p>Definition of resilience: “The resources one uses to cope with difficult times and the ability to bounce back from these hard situations, overcoming challenges, and developing strength through suffering.”</p> <p>Encourage participants to provide their thoughts about the ways that may help build resiliency in children</p> <p><b>1. ADULTS AS MODELS</b></p> <ul style="list-style-type: none"> <li>• Provide interactions and modeling skills of meeting challenges, teach coping skills, stress management, and decision-making.</li> </ul> <p><b>2. OPTIMISM</b></p> <ul style="list-style-type: none"> <li>• Children should have hope for the future, and willingness to let others hold that hope for them</li> </ul> <p><b>3. COURAGE</b></p> <ul style="list-style-type: none"> <li>• They act even when they are afraid or unhappy.</li> <li>• They often overcome their fears to work for a helpful cause.</li> </ul> <p><b>4. REALISTIC GOALS</b></p> <ul style="list-style-type: none"> <li>• Facing goals realistically</li> <li>• Choosing options that coincide with self-knowing of strengths and weaknesses.</li> </ul> <p><b>5. HUMOR</b></p> <ul style="list-style-type: none"> <li>• See humor in themselves and sometimes in difficult situations surrounding them.</li> <li>• The ability to laugh during challenging times can help lighten them.</li> </ul>	in children
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	<p><b>6. SELF-CONFIDENCE</b></p> <ul style="list-style-type: none"> <li>• Willing to experiment with new ideas</li> <li>• Allow new experiences into their life that breed self-confidence</li> </ul> <p><b>7. APPRECIATION OF SELF</b></p> <ul style="list-style-type: none"> <li>• Draw from good self-concept to create change in their lives.</li> <li>• Learn from their mistakes to develop new coping strategies.</li> </ul>	
5 minutes	<p><b>9. <u>Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	

## Sources

- *A Training and Capacity-Building Initiative- On Behalf of Refugee Children and Adolescents*. International save the children& UNHCR 2012.
- *BUILDING RESILIENCY IN CHILDREN;A Guide to Helping Children Cope with Trauma in Today's World*.Mei Lin Koh, I.
- *Refugee Children: Guidelines on Protection and Care* . UNHCR Executive Committee in October 1993.
- *Where There is No Child Psychiatrist: A Mental Health Care Manual'*. By Eapen, Graham& Srinath(2012). Royal College of Psychiatrists
- 2012, Child Protection Sessions for parents & caregivers.
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- <http://www.unhcr.org/3bb81bad4.pdf>
- [http://www.keepkidshealthy.com/parenting\\_tips/discipline/](http://www.keepkidshealthy.com/parenting_tips/discipline/)
- [http://www.bbc.co.uk/parenting/kids/primary\\_discipline2.shtml](http://www.bbc.co.uk/parenting/kids/primary_discipline2.shtml)
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- <http://cecp.air.org/familybriefs/docs/PlannedIgnoring.pdf>
- <http://www.nemours.org/content/dam/nemours/wwwv2/filebox/service/health/parenting/tips/13plannedignoring.pdf>
- [http://raisingchildren.net.au/articles/encouraging\\_good\\_behaviour.html](http://raisingchildren.net.au/articles/encouraging_good_behaviour.html)
- <http://www.interventioncentral.org>



## **Handout (1)**

### **The impact of physical punishment on children**

- ✓ Its effects are temporary. That is, it stops the child's behavior only briefly, so that the same behavior will crop up again once the punishment is lifted or the punisher is not around.
- ✓ Punishment doesn't teach the child any new behaviors.
- ✓ Punishment leads aggression to escape conditioning, whereby the child looks for any means to avoid the punishment.
- ✓ Children build up a tolerance to pain that can cause punishment to escalate to the point of becoming abusive (name-calling, slapping, hitting).
- ✓ Spanking teaches children that it's okay to hurt people and this can lead them to believe you solve problems by hitting.
- ✓ Physical punishment has an impact on cognitive development that children who were spanked were less able to keep up with the cognitive development level expected for their age. It can even lower their IQ.
- ✓ Physical punishment that is considered child abuse can lead to low self-esteem, brain damage, attention disorders and substance abuse, It can lead to poor social skills, anxiety and depression when children reach adulthood.

Adapted from:

Child Protection Sessions for parents & caregivers. (2012)

## **Handout (2)**

### **Child Reinforcement**

Reinforcement will make the behavior becomes more likely to occur because of the pleasant consequence which followed the behavior. The child becomes confident and proud, and wants to be praised again.

- 1- When your child does something that you like, reward her by smiling or nodding to let her know that you are pleased. Hugs are good rewards, too.
- 2- Praise your child immediately.
- 3- Praise your child for good behavior. Be very specific. Tell him exactly what behavior, actions and words you liked. Examples:

“Thank you for cleaning up your room.”

- 4- When you praise your child, try to focus on your feelings instead of judging how good or bad she is.
- 5- Remember to compare your child’s behavior to his own past behavior when you praise. Then he can learn how he is growing. Avoid comparing one child with other children.
- 6- Use praise regularly when monitoring a good behavior that you want to encourage.

Adapted from:

- 1- Keep Kids Healthy (2003). Discipline Guide. Retrieved November 2003 from [http://www.keepkidshealthy.com/parenting\\_tips/discipline/](http://www.keepkidshealthy.com/parenting_tips/discipline/)
- 2- BBCi Parenting Site. Changing Discipline. Retrieved November 2003 from [http://www.bbc.co.uk/parenting/kids/primary\\_discipline2.shtml](http://www.bbc.co.uk/parenting/kids/primary_discipline2.shtml)

### **Handout (3)**

#### **Planned Ignoring**

Paying attention to misbehavior can accidentally reward your child and can encourage him to misbehave again. Planned ignoring means to intend and act as if the child and what he is doing is not there.

- 1- Identify the inappropriate behavior
- 2- When the child starts doing the inappropriate behaviour, ignore him. You should act as if he is not there.
- 3- Do not look at or talk to him.
- 4- Do not laugh at him if he is being cute or funny. These actions are considered accidental rewards.
- 5- Be patient.
- 6- Remember that paying attention to misbehavior can accidentally reward your child and can encourage him to misbehave again.
- 7- You might have to leave the room. It also helps sometimes if you pick something up like a magazine and start looking at it.
- 8- Praise your child directly when he start to behave in a positive way.

Adapted from:

- 1- <http://cecp.air.org/familybriefs/docs/PlannedIgnoring.pdf>
- 2- <http://www.nemours.org/content/dam/nemours/wwwv2/filebox/service/health/p parenting/tips/13plannedignoring.pdf>

## **Handout ( 4 )**

### **Response Cost**

Response Cost is the term used for removing reinforcement for an undesirable or disruptive behavior.

1. Identify major problem behaviors that need to be suppressed immediately.
2. Determine the most appropriate replacement behavior for the identified environment.
3. Introduce the response cost system. For example say to your child, "Because there are certain behaviors that are never tolerated, these behaviors will immediately result in the loss of ten points. They are arguing, fighting, stealing, and lying."
4. Immediately following the occurrence of an inappropriate behavior that is subject to a response cost, implement the punishment in a calm, matter-of-fact tone of voice.
5. Be consistent with both the timing and implementation of a response cost system.

Adapted from:

<http://www.interventioncentral.org>

## Handout ( 5 )

### Token economy

Young children often need something to motivate them. A **Token Economy System** allows a child to earn tokens for acting positive behaviors. Once a child has collected a set number of tokens, he turns them to you to receive an item or activity that he really enjoys. The tokens themselves have no real value, but over time, they become associated with the end reward and help to keep the child motivated to be successful.

- 1- Start by selecting the behaviors to be rewarded (e.g., playing cooperatively for 15 minutes).
- 2- Explain to the child your token system to get him motivated (e.g., if you collect 10 tokens you can replace them with cone of ice cream).
- 3- Decide where and when to monitor the behaviors.
- 4- Select your tokens: You can use lots of different things as tokens including coloured dots or printed cards.
- 5- Deliver the tokens and the exchange process consistently.
- 6- Review and adjust your token economy system.

Adapted from:

[http://www.tdsb.on.ca/Portals/0/Leadership/Ward12/AutismHandout\\_Token%20Economy%20System.pdf](http://www.tdsb.on.ca/Portals/0/Leadership/Ward12/AutismHandout_Token%20Economy%20System.pdf)

## **Handout (6)**

### **Grandma's rule**

Grandma's rule is the general guidelines used by parents, grandparents, and teachers to motivate children towards correct behavior.

- 1- Grandma's rule is most effective when you have time to wait for the child to complete the task.
- 2- Instead of saying, "You can't have dessert unless you eat everything on your plate," Grandma's rule means saying, "If you finish your dinner, you can have dessert." It sounds nicer, gives kids extra motivation and can reduce arguing.
- 3- It also works best when you have a lot of structure and routine.
- 4- Grandma's rule won't be effective if you give in to your child.
- 5- Grandma's rule also won't work if you start offering large, extravagant rewards.
- 6- Grandma's rule is a great way to teach children self-discipline. It provides them with an incentive to really manage their own behavior.

Adapted from:

- 1- <http://www.urbandictionary.com/define.php?term=Grandma's%20Rule>
- 2- <http://discipline.about.com/od/decreasenegativebehaviors/a/Grandmas-Rule-Of-Discipline-Teach-Kids-Privileges-Can-Be-Earned.htm>

## **Handout ( 7 )**

### **Modelling**

Your child watches you to get clues on how to behave in the world. You're their role model, so use your own behaviour to guide them.

1. **Show your child how you feel.** Tell him honestly how his behaviour affects you. This will help him see his own feelings in yours, like a mirror.
2. **Catch her being 'good'.** This simply means that when your child is behaving in a way you like, you can give her some positive feedback.
3. **Get down to your child's level.** Kneeling or squatting down next to children is a very powerful tool for communicating positively with them. Getting close allows you to tune in to what they might be feeling or thinking.
4. **Keep promises.** Stick to agreements. When you follow through on your promises, good or bad, your child learns to trust and respect you.
5. **Choose your battles.** Before you get involved in anything your child is doing – especially to say 'no' or 'stop' – ask yourself if it really matters. By keeping instructions, requests and negative feedback to a minimum, you create less opportunity for conflict and bad feelings
6. **Whining- be strong.** Kids don't want to be annoying. By giving in when they're whining for something, we train them to do it more – even if we don't mean to.
7. **Keep it simple and positive.** If you can give clear instructions in simple terms, your child will know what is expected of him.
8. **Responsibility and consequences.** As children get older, you can give them more responsibility for their own behaviour. You can also give them the chance to experience the natural consequences of that behaviour.

Adapted from:

[http://raisingchildren.net.au/articles/encouraging\\_good\\_behaviour.html](http://raisingchildren.net.au/articles/encouraging_good_behaviour.html)

## **Handout ( 8 )**

### **Time out**

Time out removes misbehaving children from all sources of positive reinforcement, especially adult attention.

1. Inform and enforce: Always begin by telling your child what he did that is unacceptable, such as hitting, noncompliance and destructive behaviors, Give him a warning where possible and tell him in a firm, calm voice to go to time out.
2. Choose the right time out location: Preferably, this should be a dull, boring but safe room for a child to be alone in. If you have no choice but to use the children room, you should remove the toys and games. For younger children between ages of four and eight, a "time out chair" in an empty corner of a room or hall away from all family activities can be a substitute.
3. Determine time out length: As a rule of thumb, three minutes for three-year-old, four minutes for four-year-old and five minutes for five and older.
4. Repeat the command: When time out is used because of the child did not do something he was told to do, parent should repeat the original command once timeout is over. If the child still refuses to obey, then the entire time out sequence would have to be repeated.
5. Be prepared to handle child leaving timeout: If the misbehaving child comes out of timeout prematurely, calmly return him with a warning of lose of privilege (e.g. no television for the evening, bike locked up for 24 hours). For younger child who gets off a timeout chair, there should be a warning too, e.g. "If you get off the chair again, you will go to timeout room."
6. Apology: Ask your child to say that he is sorry for misbehaving and accept the apology if it is offered in a civil tone of voice. If it's not, give your child a warning and give another time out if he doesn't give you a gently spoken apology.

Adapted from: [http://EzineArticles.com/?expert=Heather\\_Higgins](http://EzineArticles.com/?expert=Heather_Higgins)



### **Handout (9)**

#### Some of the UN convention on the rights of the child



Adapted from: The simplified version of the United Convention on the Rights of the Child.

# Session 6

## Violence Against Children

## **Session 6: Violence against Children**

### **Introduction**

Session 6 follows on from Session 5 by providing more in depth discussion of developmental stages and the impact of war on development, and it then moves to a discussion of violence against children and a discussion of how communities can use their wisdom to work together to promote the wellbeing of children.

### **Aim**

Session 6 aims to help parents better protect children and to clarify that violence against children is unacceptable in all settings including home, school, and the community.

### **Objectives**

- Understand normal developmental stages (babies through to teenagers).
- Understand how conflict, flight and displacement can impact on development.
- Understand the role of psychological wellbeing of carers on children's wellbeing.
- Understand the different types of violence against children (physical, neglect, sexual and the different contexts in which these can take place).
- Appreciate how communities can use their wisdom to work together to promote the wellbeing of children.
- Use problem solving to come up with community solutions to community-level problems with children.

### **Techniques**

Among others, this session uses the following techniques:

- Psycho-education about child development (different stages) and information about the consequences of war and displacement on these stages. These can disrupt the normal growth and development of children.
- Self help using problem solving to come up with community solutions to community-level problems with children.

### Who is this session for?

- Like Session 5, this session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.
- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for both in camp and in urban and rural community settings

### Notes for Facilitators

- The child modules (5,6,7) can be used as stand alone sessions however they are better conducted as a group of three
- Hand outs should be printed and handed out to participants
- Facilitators respect parents' and caregivers' experiences and styles as parents and help them share their knowledge and experiences without being judgemental.
- Facilitators should know basic children's rights.
- Facilitators should know the development stages of children.
- Facilitators should keep in mind that the vast majority of parents and caregivers have good intention but may face obstacles. Facilitators should focus on positive values and practices that parents are already doing.
- Facilitators should have the knowledge about available child protection referral pathways in specific locations.
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant or his/her children cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to

incorporate the Koran and other Islamic and religious factors into facilitating the groups.

- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events the majority of people will recover over time using their own ways of coping

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If Session 6 is combined in the same training with Session 5, begin the training session with a quick review of Session 5 to ensure all participants understand the basic information to help their children cope and be resilience. Explain that today's session will be about "Violence against Children ". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs, each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group, general information about themselves.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>
5 minutes	<p><b>2. <u>Recap on Children's rights</u></b></p> <p>Ask the participants to recall some of the children's rights you discussed with them last session.</p> <ul style="list-style-type: none"> <li>• Some examples of children's rights may be the right to education, right to health care, right to treated fairly, right to childhood, right to play, right to have a name, and the</li> </ul>	<p><b>Key Issue:</b> a quick reminder about children's rights, to have their turn.</p>

	right to get and to share information.	
35 minutes	<p><b>3. <u>Child Development, Conflict and Displacement</u></b> <b><u>Basic Developmental Stages</u></b></p> <p>Ask all</p> <p><i>When we talk about development, what skills developed in childhood comes to your head?</i></p> <p>Using the white board facilitator should categorize the mentioned answers under:</p> <p><b>Large/Gross motor skills:</b> Using large groups of muscles to sit, stand, walk, run, and keep their balance, etc.</p> <p><b>Small/Fine motor skills:</b> Using hands to be able to eat, draw, dress, play, write, and do many other things.</p> <p><b>Language skills:</b> Speaking, using body language and gestures, communicating, and understanding what others say.</p> <p><b>Cognitive skills:</b> Thinking skills: including learning, understanding, problem solving, reasoning, and remembering.</p> <p><b>Social/Emotional skills:</b> Interacting with others, having relationships with family, friends, and teachers; cooperating, and responding to the feelings of others.</p> <ul style="list-style-type: none"> <li>Development in each area occurs in a relatively ordered sequence, but the time in which children acquire specific skills varies. For example, some children learn to walk at 9 months and some learn to walk at 12 months; some children say their first word at 8 months, some at 10 months, etc (see <i>Handout 1</i>).</li> </ul> <p>Ask all</p> <p><i>What general factors do you think can affect the development process?</i></p> <p>Discuss factors as health and nutrition, security level, intellectual</p>	<p><b>Key Issue:</b> increase parents and families awareness about their responsibility of rearing healthy children who are in the position of being capable of developing to their best potential.</p>

stimulation, quality of interactions with caregivers, etc.

### **Effects of War, Flight and Displacement on Child Development**

Facilitator here provides psycho-education about the typical reactions of children exposed to war and displacement at different ages:

- ✓ Discuss how for babies it is more about the emotional state of the mother and other adults around the child that is most important influence on a baby's psychosocial development.

**What to do:** being securely attached to the caregiver is one of the most important steps in child development. From this early experience of trust and love, children learn communication skills that they will use for the rest of their lives.

- ✓ Very young children often show no outward effect but this does not mean they have not been affected.

**What to do:** social support from family and neighbors to the mother and child, and encourage the infant to engage in activities that make him look, listen, reach for things, talk to people and think about what is happening.

- ✓ Preschool children elements of distress and trauma often show up in a children's play – e.g. drawing and role play, young children – going back to an earlier stage of development, nightmares, hyperactivity or behaving in a way that the family cannot control, aggressive towards other, and difficulties in learning.

**What to do:** help to eliminate the effects through playing, singing, strengthen the child safety feelings, and emotional supports.

- ✓ Adolescents are often severely stressed in emergency situations. They can engage in risky behaviours, self harming, become withdrawn, become angry and aggressive, and have difficulties trusting, always thinking that bad things will happen in the future (ie feel hopeless about the future).

### **Key Issue:**

When children and their parents become refugees they face separation, loss, uncertainty, stress and hardship. These can disrupt the normal growth and development of children.



**What to do:**

Encourage them to share their experiences with peers, help them identify their own beliefs about the conflict, help them to be involved in activities that help repair the community, discuss with them ways they can rebuild the community when peace comes, remember how important school is in providing the stability they need, reassure them that their reactions are normal, help them gain a sense of control by expressing their experiences (eg drawing the worst thing that happened to them that week), initiate discussions on moral issues, promote their involvement in extracurricular activities, stress the importance of trying to resolve problems without violence.

20 minutes

**4. Violence Against Children**

1. Create a line across the room or the line should be long enough to extend across the entire room/space.
2. On one end of the line place the sign —Strongly Agree
3. On the opposite end of the line place the sign —Strongly Disagree
4. In the middle of the line create a small line intersecting the line and indicate that this is the middle (You can create another sign that says —I don't know or —Maybe Agree/Disagree)
5. Ask all participants to stand up and come over to the line.
6. Explain to participants that you will read aloud a statement. If participants Strongly Agree that the statement, they should stand by the side of the line that indicates —Strongly Agree. If participants strongly disagree that the statement read is not a child protection issue they should stand on the opposite side of the line that reads —Strongly Disagree. Participants that do not know or who think it could be both should stand in the middle.
7. Explain to participants that you will read a statement out loud and they should think about the issue individually and make their own decision. Explain that at this point there are no right or wrong answers and that you are only exploring how individuals think.
8. Once participants have decided where they stand, ask a few people in each section to explain why they are standing in this spot. Allow one or two people to speak and then move to the

15 minutes	<p>next group. Allow this group to speak and then go back to the group before to see if anyone has additional information to say.</p> <p>9. Continue to go back and forth between the different groups to start a small debate among participants and to get them thinking through the topic.</p> <p>10. After you have explored one topic for some time proceed to another statement.</p> <p><b>Example Statements:</b></p> <ul style="list-style-type: none"> <li>• It is better for a parent to stay silent if there is violence toward a child in their family,</li> <li>• It is better to stay silent if a more powerful member of society such as an employer is violent towards a child in your family</li> <li>• It is better to stay silent if a more powerful member of society such as a police officer or a community leader is violent towards someone in your family.</li> <li>• Disciplining a child through physical punishment, or humiliation, or through bullying and sexual harassment are all normal in this culture</li> </ul> <p><b>BREAK</b></p>	
20 minutes	<p><b>5. <u>Types of Violence Against Children</u></b></p> <p>Give out cards to participants. On them have written some examples of types of violence (injuries, bruising, burns, bone fractures, slapping, torture, threats of extreme punishment, rejection, criticism, blame, being stopped from making friends, not providing basic necessities for living, being left alone for a long time, talking in a sexual way, touching genitals, asking for</p>	<p><b>Key Issue:</b> no violence against children is justifiable; all violence against children is preventable</p>

genitals to be touched).

Write the main types on the white board (physical violence, emotional abuse, neglect, sexual abuse) and ask each one to read his card out loud and then together you each decide which main group these go under.

➤ The types of violence

- Physical abuse (injuries, bruising, burns, bone fractures, slapping and torture).
- Emotional abuse (threats of extreme punishment, rejection, criticism, blame, being stopped from making friends and its results),
- Neglect (not provided with the basic necessities of life, when they are left alone for long stretches of time plus signs of this, not taking a child to the doctor when they need medical attention).
- Sexual abuse (contact/ touching abuse, non-contact abuse – examples talking in a sexual way, touching genitals or asking to be touched)

Discuss:

- ✓ Children need protecting from all forms of abuse.
- ✓ No violence against children is justifiable; all violence against children is preventable.
- ✓ Violence against children takes a variety of forms; however, much violence against children remains hidden for many reasons. One is fear: many children are afraid to report.
- ✓ Incidents of violence against them. In many cases parents, who should protect their children, remain silent if the violence is perpetrated by other family member, a more powerful member of society such as an employer, a police officer, or a community leader.
- ✓ In particular, rape or other forms of sexual violence can lead to further violence or death.
- ✓ Societal acceptance of violence is also an important factor: both children and perpetrators may accept physical, sexual and psychological violence as inevitable and normal.
- ✓ Discipline through physical and humiliating punishment, bullying and sexual harassment are frequently perceived as normal, particularly when no “visible” or lasting

	physical injury results.	
<b>25 minutes</b>	<p><b>6. <u>What We and Our Communities Can Do</u></b></p> <p>Divide the participants into two groups. One of them focuses on the family role. The other group focuses on the community role.</p> <p>Family role in protecting the children from abuse:</p> <ul style="list-style-type: none"> <li>✓ Believe them.</li> <li>✓ Tell them it is not their fault.</li> <li>✓ Encourage talking and tell them what the person did was very wrong.</li> <li>✓ Provide emotional support.</li> <li>✓ Report the violence.</li> </ul> <p>Community role in protecting the children from abuse:</p> <ul style="list-style-type: none"> <li>✓ Speak out against all forms of violence.</li> <li>✓ Support children who have experienced violence in getting help.</li> <li>✓ Avoid stigmatizing children who are victims of violence.</li> </ul> <p>Facilitator provide some psychosocial education about some parents' actions to prevent violence :</p> <ol style="list-style-type: none"> <li>1- Be a role model: treat others with respect and without violence. Your children will learn to do the same.</li> <li>2- Discipline your children without violence.</li> <li>3- Teach your children how to resolve conflicts without violence.</li> <li>4- Teach your children about how others should treat them and make it clear for them what is acceptable behaviors from others, including what kind of touches are okay, and what are not. Explain 'good touch' and 'bad touch'</li> <li>5- Talk with your children and encourage them to confide in you.</li> <li>6- Supervise and guide your children</li> <li>7- Protect children from violence in the media and internet.</li> </ol>	<p><b>Key Issue:</b> children grow best in a loving family environment. Normally, parents are best suited and are responsible for building a protective and loving home environment</p>

	How to recognise a child who might need extra or specialised help and <b><u>referral information</u></b> provision (recap)	
5 Minutes	<p><b>7. <u>Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	

#### Sources

- UNHCR/WHO (1996), MENTAL HEALTH OF REFUGEES.
- *Where There is No Child Psychiatrist: A Mental Health Care Manual'. By Eapen, Graham& Srinath(2012). Royal College of Psychiatrists*
- Inter –Agency emergency standard operating procedures for prevention o and response to gender- based violence and child protection in Jordan.
- *A Training and Capacity-Building Initiative- On Behalf of Refugee Children and Adolescents. International save the children& UNHCR 2012.*

## Handout 1

### Some of the UN convention on the rights of the child



# Session 7

## Positive Skills for Caring for Children and Teenagers

## **Session 7: Positive skills for Caring for Children and Teenagers**

### **Introduction**

Session 7 assists parents in identifying common problems of childhood, along with ways to manage them, and also assists families and communities in dealing with teenagers.

### **Aim**

Session 7 aims to help parents use positive discipline approaches in dealing with children's common problems, and to increase their capacity to deal with their teenage children.

### **Objectives**

- Understand positive parenting approaches.
- Understand the signs of a number of common difficulties experienced by children (especially refugee children), and learn some practical ways of coping with them.
- Understand life with teenagers and how to help refugee teenagers manage their emotions.
- Discuss the ways to manage children's most common problems.
- Appreciate how communities can use their wisdom to work together to promote the wellbeing of children.
- Understand how to help support children in our families and communities.

### **Techniques**

Among others, Session 7 uses the following psychosocial techniques:

- Supportive discussions about common problems of children.
- Skills building to increase the capacity of parents in dealing with their children's problems.
- Skills building to increase the capacity of caregivers in dealing with the behaviour of teenagers.

### **Who is this session for?**

- Like Session 5 and 6, this session is designed for all Syrian and other refugees, local Jordanians, men and women, parents, families and community members.



- This module is appropriate for parents and caregivers; it could be mixed gender groups.
- It is appropriate for both in camp and in urban and rural community settings

### **Notes for Facilitators**

- The child modules (5,6,7) can be used as stand alone sessions however they are better conducted as a group of three
- Hand outs should be printed and handed out to participants
- Facilitators respect parents' and caregivers' experiences and styles as parents and help them share their knowledge and experiences without being judgemental.
- Facilitators should know basic children's rights.
- Facilitators should know the development stages of children.
- Facilitators should keep in mind that the vast majority of parents and caregivers have good intention but may face obstacles. Facilitators should focus on positive values and practices that parents are already doing.
- Facilitators should have the knowledge about available child protection referral pathways in specific locations.
- Remember that the purpose of this session is not to provide counselling or therapy, but to provide non-specialist support in a group context. If a participant or his/her children cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.

- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events. The majority of people will recover over time using their own ways of coping

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "positive skills for caring for children and teenagers." Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality: explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group, general information about themselves.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>
15 minutes	<p><b>2. <u>Identifying the differences between discipline and abuse</u></b></p> <p>Remind the participants that being a parent can be challenging, and we all make mistakes. The purpose of this session is not to make them feel guilty, but to help them to deal with their children daily behaviors using healthy strategies.</p> <p>Ask each participant to write <i>down the behavior which they would like</i> from their children.</p>	<p><b>Key Issue:</b> Identify positive behavior in children and positive discipline.</p>

Facilitator note:

Discuss the kinds of things we want in the list. Make sure that the participants are writing measurable actions like “playing with siblings” not a general description like “behaving nicely”. Other examples include: speaking in an even tone of voice, doing what mummy asks straight away, only being asked once to do something, going to the toilet by themselves, speaking nicely to their sisters, etc.

Discuss the followings:

- Was it easy for them to fill the list? We can find it difficult because we usually only catch our children behaving badly, and we don't notice their good behaviours. We need to start catching them doing their 'good' behaviours and commenting on this. Give examples: 'Well done, I saw you were speaking nicely to your sister.'
- Our reactions often are affected by our own circumstances at that moment, which will make it difficult to us to notice the positive behaviour if we have had a stressful day.
- Positive discipline means to deal with your children's behaviours by focusing on the positive rather than the negative. Encouraging them when they do well rather than punishing them when they do poorly. This encouragement will make them more likely to do the positive behaviours. This works better than punishing bad behaviours.
- Discipline is not punishment, not shame, not guilt, but it helps a child to think, and helps child to learn. Provide definition of shame and guilt. Explain examples of shaming children or making them feel guilty.
- Discipline has nothing to do with physical punishment. *Physical punishment* is imposing something physical – hitting, slapping, etc. There are other ways of punishing that do not involve doing something physical.

	<p>Facilitator note:</p> <p>Discuss the kinds of things we want in the list. Make sure that the participants are writing measurable actions like “playing with siblings” not a general description like “behaving nicely”. Other examples include: speaking in an even tone of voice, doing what mummy asks straight away, only being asked once to do something, going to the toilet by themselves, speaking nicely to their sisters, etc.</p> <p>Discuss the followings:</p> <ul style="list-style-type: none"> <li>○ Was it easy for them to fill the list? We can find it difficult because we usually only catch our children behaving badly, and we don't notice their good behaviours. We need to start catching them doing their 'good' behaviours and commenting on this. Give examples: 'Well done, I saw you were speaking nicely to your sister.'</li> <li>○ Our reactions often are affected by our own circumstances at that moment, which will make it difficult to us to notice the positive behaviour if we have had a stressful day.</li> <li>○ Positive discipline means to deal with your children's behaviours by focusing on the positive rather than the negative. Encouraging them when they do well rather than punishing them when they do poorly. This encouragement will make them more likely to do the positive behaviours. This works better than punishing bad behaviours.</li> <li>○ Discipline is not punishment, not shame, not guilt, but it helps a child to think, and helps child to learn. Provide definition of shame and guilt. Explain examples of shaming children or making them feel guilty.</li> <li>○ Discipline has nothing to do with physical punishment. <i>Physical punishment</i> is imposing something physical – hitting, slapping, etc. There are other ways of punishing that do not involve doing something physical.</li> </ul>	
45 minutes	<p><b>3. <u>Common Child Problems</u></b></p> <p>Here are 10 common child problems; facilitator should discuss the ones that participants have highlighted as important.</p> <ul style="list-style-type: none"> <li>• Dealing with loss and grief (see handout 1).</li> <li>• Clinging behaviours (see handout 2).</li> <li>• Bed-wetting or soiling (see handout 3).</li> <li>• Sleep problems (nightmares, insomnia, night terrors) (see handout 4).</li> <li>• Anxieties (see handout 5).</li> </ul>	<p><b>Key Issue:</b> Increase the capacity of parents in dealing with their children's problems.</p>

	<ul style="list-style-type: none"> <li>• Misbehaviour (non-compliance in younger children) (see handout 6).</li> <li>• Aggression (see handout 7).</li> <li>• Social withdrawal/ depression (see handout 8).</li> <li>• Risk taking (see handout 9).</li> <li>• Aches and pains (see handout 10).</li> </ul>	
15 minutes	<b>BREAK</b>	
25 minutes	<p><b>4. <u>Practical solutions</u></b></p> <p>Divide the participants up into groups. Ask each group to write practical solutions about how they as communities can help encourage healthy behaviours in their children.</p> <p>Write the different solutions identified by the groups on the flip chart and discuss with them if each option is applicable for them or not.</p> <p>Focus on things like:</p> <p>1- Setting up play opportunities for children.</p> <p>2- Providing informal education.</p> <p>3- Sport with children.</p> <p>4- Set up child friendly spaces and teach children to use them.</p> <p>5-Encourage access to art and play materials using materials from own environments.</p> <p>6-Set up and facilitate groups for teenagers.</p>	<p><b>Key Issue:</b> Increase the capacity of community in managing children's problems.</p>
25 minutes	<p><b>5. <u>Issues with Teenagers</u></b></p> <p>Ask participants what are the difficulties and problems your teenagers or other teenagers you know are facing.</p>	<p><b>Key Issue:</b> Many of the challenges parents face are because of "how" they approach and define their</p>

Write these difficulties and problems on the flip chart.

Some examples may be violence and aggression, overuse of internet, addiction to gaming, risk taking, isolation, etc

Tell participants that parents, teenagers and communities across many countries are concerned with these issues, which are caused by a number of social, cultural, communal, economic, familial and individual factors. Wars have a very big impact on teenagers, and often they are forgotten with humanitarian services. Children get more attention and teenagers are left out.

Remind them briefly of the developmental tasks of being a teenager (identification with peer group, greater cognitive ability, learning about morality etc) and how war and displacement interferes with these developmental tasks

#### **Make a group discussion on the following Facts:**

- Younger generations, unlike their parents' generations, often socialize, hang out, and communicate online, rather than in person. And that this is developmentally appropriate. Teenagers are learning independence and must separate from parents a bit to lead an adult life.
- Some young people spend much too much time in front of a computer screen, spending up to 20 hours a day, seven days a week.
- Children when confronted by concerned parents often feel misunderstood and alienated by their parents.
- Some teenagers spend so much time away from people that it affects their friendships and schoolwork. Isolation can be a symptom of an underlying problem, though it can also be part of the child's personality. Uncovering the reasons behind your child's withdrawn behavior can help end your teenager's isolation.
- When parents resort to yelling or reacting negatively to tough situations, it creates distance in their relationship where communication lines breakdown.

#### **How Parents Can Deal with Teens** (*see handout 11*):

Provide some psychosocial education about:

- **Finding Balance.**

relationships with their teenager. Once parents learn to establish relationship by changing “how” they relate with their child, the parent-teen dynamic will unfold in a much healthier manner.

	<ul style="list-style-type: none"> <li>• Rules.</li> <li>• Talking With Your Teenager.</li> <li>• Energy &amp; Exercise.</li> <li>• Leading By Example.</li> </ul> <p><b>Note:</b></p> <p>Facilitator should discuss the problems that mostly mentioned from participants.</p> <ul style="list-style-type: none"> <li>✓ Teen aggression (see <i>handout 12</i>).</li> <li>✓ Teen games and internet addiction (see <i>handout 13</i>).</li> <li>✓ Teen risk taking (see <i>handout 14</i>).</li> </ul>	
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## Sources

- *A Training and Capacity-Building Initiative- On Behalf of Refugee Children and Adolescents*. International save the children& UNHCR 2012.
- 2012, Child Protection Sessions for parents & caregivers.
- *Refugee Children: Guidelines on Protection and Care* .UNHCR Executive Committee in October 1993.
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- Melvin D. Oatis, M.D., child study centre volume 6 , number 3, 2002.
- *By Eapen, Graham& Srinath(2012). Royal College of Psychiatrist*
- <http://life.familyeducation.com/teen/anger/39357.html?page=1>
- <http://www.devon.gov.uk/fostering-info-cdc0to11.pdf>
- <http://www.zurinstitute.com/teenviolence.html>.
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- <http://parentingteenagersacademy.com/technology-addiction/>
- [http://greatergood.berkeley.edu/raising\\_happiness/post/deal\\_with\\_misbehaving\\_kids](http://greatergood.berkeley.edu/raising_happiness/post/deal_with_misbehaving_kids).
- <http://parentsabcs.com/2012/06/19/tips-to-handle-misbehavior-in-children/>



## **Handout 1 (optional)**

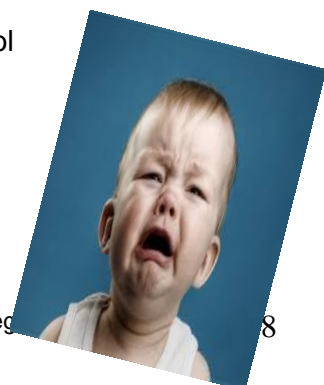
### **Dealing with Loss**

- 1- Give children the opportunity to tell their story and be a good listener.
- 2- Don't assume that every child in a certain age group understands death in the same way or with the same feelings.
- 3- Parents and schools need to allow adequate time for each child to grieve in the manner that works for that child. Pressing children to resume "normal" activities without the chance to deal with their emotional pain may prompt additional problems or negative reactions.
- 4- Don't lie or tell half-truths to children about the tragic event; children are often bright and sensitive. They will see through false information and wonder why you do not trust them with the truth.
- 5- Give the child information at the level that he/she can understand. Loss and death are both part of the cycle of life that children need to understand.
- 6- Adults need to be less anxious about not knowing all the answers. Treat questions with respect and a willingness to help the child find his or her own answers.
- 7- We all grieve in different ways and there is no one "correct" way for people to move through the grieving process.
- 8- Sometimes children are upset but they cannot tell you what will be helpful. Giving them the time and encouragement to share their feelings with you may enable them to sort out their feelings.
- 9- The more losses the child or adolescent suffer, the more difficult it will be to recover.



Adapted from: 2003, National Association of School Psychologists

[http://www.nasponline.org/resources/crisis\\_safety/griefwar.pdf](http://www.nasponline.org/resources/crisis_safety/griefwar.pdf)







## **Handout 2 (optional)**

### **Dealing with Clinging Behavior**

- 1) **Do not ignore, or punish clingy behavior:** When young children exhibit clingy behavior, it is generally viewed as a positive sign that your child feels close and secure in your care and seeks you out for comfort when they are feeling distress. Responding to clingy behavior by ignoring or punishing it may make your child less likely to come to you when s/he is feeling scared or vulnerable.
- 2) **Be responsive to your child's needs and feelings:** Try to identify what might be causing the clinginess and describe his/her feelings so s/he begins to understand it.
- 3) **Make a daily routine:** Try to make things more predictable for your child by making the schedule or routine as concrete as possible.
- 4) **Create tasks that your child can help you with at home:** Children build self-confidence through mastering new tasks and contributing to their environment in a helpful way. Such as setting the table, cooking, or cleaning up their toys.
- 5) **Praise steps towards independence:** Praise your child for tasks or activities that they are able to do independently.
- 6) **Schedule special playtime:** Schedule 5 to 10 minutes every day when you can to provide your child with undivided attention.
- 7) **Separations and saying good-bye:** Use a consistent phrase when saying goodbye. Be brief, do not linger, and do not overreact if your child gets upset after saying goodbye.
- 8) **Don't sneak out when you leave:** this will only increase your child's anxiety and clinginess because they will be scared to engage in any activity too long for fear that you may sneak out and disappear at any moment.
- 9) **Increase social activities with children of the same age.**
- 10) **Stay with your child during social activities:** Play with your child and their friends until they are comfortable playing on their own.

*Adapted from:* <http://www.mommyshorts.com/2011/07/10-ways-to-encourage-independence.html>

### **Handout 3 (optional)**

#### **Dealing with Bedwetting**



**Note:** In children who have been wetting their bed from birth till 3 years, visit the doctor to make sure that there is no physical problem.

**1- Focus on the problem (bedwetting):** Avoid blaming or punishing your child. Remember, your child cannot control the bedwetting, and blaming and punishing them just makes the problem worse.

**2- Be patient and supportive.** Reassure and encourage your child often. If you or your spouse wet the bed as a kid, remind your child that mommy or daddy had the same issue and eventually outgrew it.

**3- Enforce a "no teasing" rule in the family.** No one is allowed to tease the child about the bedwetting. Do not discuss the bedwetting in front of other family members.

**4- Encourage responsibility.** Reassure your child that you want to help him or her overcome the problem. In addition, have your child help in the clean-up process.

**5- Make clean up easy.** To increase comfort and reduce damage, use washable sheets, plastic mattress covers, and room deodorizers.

**6- Reduce evening fluid intake.** Do not give your child anything to drink in the two hours before bedtime, especially drinks such as tea or sodas that contain caffeine.

**7- Have your child go to the bathroom before getting into bed.**

**8- Set a goal for your child of getting up at night to use the toilet.** Instead of focusing on making it through the night dry, help your child understand that it is more important to wake up every night to use the toilet.

**9- Make sure the child has easy access to the toilet.** Clear the path from his or her bed to the toilet and install night-lights.

**10- Reward your child for remaining dry.** A system of stars charts and rewards works for some children. The child gets a star on the chart for every night of remaining dry. A certain number of stars earn a reward.

Adapted from:

'Where there is No Child Psychiatrist: A Mental Health Care Manual'. By Eapen, Graham & Srinath (2012). Royal College of Psychiatrists. P. 34.

### **Handout 4 (optional)**

#### **Dealing with Sleeping Problems (unwillingness to go to bed)**



**1- Make bedtime a special time:** spend some special time with your child. Be firm and go through a certain bedtime routine that your child is used to. At the end of that routine the lights go off and it is time to fall asleep.

**2- Look for your child's ideal bedtime:** it is when your child really is starting to slow down and getting physically tired.

**3- Keep to a regular daily routine:** the same waking time, meal times, nap time and play times will help your child to feel secure and comfortable, and help with a smooth bedtime.

**4- Use a simple, regular bedtime routine:** it should not last too long, it may include a few simple, quiet activities, such as a light snack, bath, cuddling, saying goodnight, and a story.

**5- Make sure the sleep routines you use can be used anywhere:** so you can help your baby get to sleep wherever you may be.

**6- Make sure your kids have interesting and varied activities during the day:** including physical activity and fresh air.

**7- Never use sending your child to bed as a threat.**

**8- Don't give your child foods and drinks with caffeine in them, like hot chocolate, tea, cola, chocolate, etc.**

**9- Don't let your child watch more than one to two hours of TV during the day.**

Adapted from: 'Where there is No Child Psychiatrist: A Mental Health Care Manual'. By Eapen, Graham & Srinath (2012). Royal College of Psychiatrists. P. 40.

### **Handout 5 (optional)**

#### **Child Anxiety**

- 1) Encourage your child to face his/her fears, not run away from them.
- 2) Tell your child that it is okay to be imperfect.
- 3) Focus on the positives.
- 4) Schedule relaxing physical activities.
- 5) Model and reinforce self-care, and positive thinking.
- 6) Reward your child's brave behaviors.
- 7) Encourage good sleep habits.
- 8) Encourage your child to express his/her anxiety.
- 9) Help your child to problem solve.
- 10) Stay calm.
- 11) Practice relaxation exercises with your child.
- 12) Never give up!



*Adapted from:* <http://www.psychologytoday.com/blog/dont-worry-mom/201302/12-tips-reduce-your-childs-stress-and-anxiety>

### **Handout 6 (optional)**

#### **Dealing with child misbehavior**



- 1- Identify the reason.
- 2- Avoid criticizing and nagging.
- 3- Do not use physical punishment.
- 4- Set your rules and stick to them.
- 5- Forget their past mistakes.
- 6- Make a list of the privileges your kids enjoy regularly, and would miss if they misbehaved.
- 7- Pick something that you can easily enforce—one standard, predictable consequence.
- 8- Be very, very consistent on the rules you settled before. As consistent as humanly possible.

#### **Adapted from:**

- 1- [http://greatergood.berkeley.edu/raising\\_happiness/post/deal\\_with\\_misbehaving\\_kids](http://greatergood.berkeley.edu/raising_happiness/post/deal_with_misbehaving_kids).
- 2- <http://parentsabcs.com/2012/06/19/tips-to-handle-misbehavior-in-children/>

### **Handout 7 (optional)**

#### Handling aggression in children



1. **Watch for triggers:** It can be as simple as children regularly arguing and becoming aggressive over what television program to watch.
2. **Be careful how you react:** If you react to any problems in the home by shouting or hitting out, your children will learn from you that this is acceptable behavior at stressful times.
3. **Discuss appropriate and inappropriate behavior:** when you are calm discuss your child's actions with them in a peaceful way. Explain to them the likely results of their actions.
4. **Give attention and show affection:** All children need attention and affection. This is especially true for older children with younger siblings.
5. **Monitor TV programs and play:** there could be a link between your child's aggression and what they watch on television.
6. **Monitor the influence of friends:** the introduction of a new friend can have an impact on the way your child behaves.
7. **Give warning time:** Most children get frustrated and can show aggression if they are busy playing and you suddenly tell them it is time to go. Although it is not always possible try to give them warning that it is nearly time to stop playing.
8. **Provide alternative toys and stimulus:** A child who is trying to do something they find very difficult may run out of patience and lose their temper.

*Adapted from:* <http://www.parenting.co.uk/help/Aggressive-Behaviour.cfm>

### **Handout 8 (optional)**

## **Dealing with Social Withdrawal**



1. Develop your child's social skills: To help your child, get them involved in play groups and facilitate their play with others by going with them to introduce themselves, or joining in on the activity.
2. Make sure to talk to your child and find out the reason they don't want to play with the other children. The solution may be discovered here.
3. Allow your child to warm up to a situation and don't push them too hard.
4. Model and praise outgoing behavior: any time your child exhibits socially appropriate behavior, praise them and let them know you are proud of them.
5. Do not speak for your child.
6. Teach positive self talk: Have your child list the things s/he can do, what s/he is good at, what s/he likes, and friends and family that love him/her. Have him/her practice saying all of this to him/herself.
7. Never let yourself or others (teachers included) label your child as shy.
8. Send safe messages: Be careful that you don't give your child reactions or even subtle messages that reinforce their fears. For example, don't tell your shy child to "be careful" or "call if you need anything" unless it is necessary.

### **Adapted from:**

- 2003, National Association of School Psychologists
- [http://www.nasponline.org/resources/crisis\\_safety/griefwar.pdf](http://www.nasponline.org/resources/crisis_safety/griefwar.pdf)



## **Handout 9 (optional)**

### **Dealing with Risk taking**



- **Help your child learn to assess risk.** . For example, 'If he hadn't been speeding, he wouldn't have lost his license. Now he's going to lose his job as well'.
- **Work out some agreed ground rules with your child.** Explain to him/her that your role is to keep him/her safe, and decide together on what the consequences should be if the rules are broken. You'll need to be flexible and adapt the ground rules as your child grows and shows s/he is ready for more responsibility.
- **Talk about values** – the earlier the better. Knowing what's important to your family will help your child develop a sense of responsibility and personal values.
- **Keep an eye on your child.** Knowing whom s/he is with and where s/he is can help you prevent some risk-taking behavior.
- **Keep the lines of communication open.** Strong connections with parents reduce the chance of risky teenage behavior.
- **Be a good role model.** Teenagers are guided by how their parents behave.
- **Encourage a wide social network.** Give your child the chance to make friends through sport, mosque or family activities. Make your child's friends welcome in your home – you'll know where s/he is at least some of the time.
- **Give teenagers a way out.** If your child feels pressured to take risks to fit in, you could help him/her think of ways to opt out without losing credibility. For example, s/he could tell his/her friends that smoking gives him/her asthma. Let him/her know s/he can send you a text message anytime she needs to be picked up, without worrying that you'll be angry.

Adapted from:

Arnett, J. (1992). Reckless behavior in adolescence: A developmental perspective. *Developmental Review*, 12.



**Handout 10 (optional)**  
**Dealing with aches and pains**



- 1- Take your child's complaints seriously.
- 2- Encourage your child to express his/her pain verbally. Reassure him/her that you are aware that the pain is real and that ways can be found to alleviate it.
- 3- Understand that the perception of pain is affected by a variety of factors, including the age of the child as well as his/her basic temperamental style, psychological state and individual experience.
- 4- Try to pinpoint potential causes. Your child may be experiencing academic pressure, family conflict, a change in school, a move, the illness or death of a family member or friend, or physical or sexual abuse.
- 5- Devise ways to give the child a sense of control. For some children, keeping a log will help identify the specific situations which cause stress and those which result in relief.
- 6- Be careful not to inadvertently reinforce the behavior by becoming visibly alarmed.
- 7- Be a good role model. Examine your own ways of dealing with stress to see if you also tend to express emotional conflicts through physical complaints and take steps to change this pattern of response.
- 8- If improvement does not occur, and your child is getting appropriate medical treatment, consultation with a mental health professional is warranted.

**Adapted from:**

- Melvin D. Oatis, M.D., child study centre volume 6 , number 3, 2002.

### **Hand out (11)**

#### **How Parents Can Deal with Teens**

- **Finding Balance:** This is about “how” your teenagers are acting. Are they doing what they like but are also excited about the next thing they’re going to do afterwards with family? Or, are they depressed and trying to avoid a life they’re not enjoying? Helping your teenager to find their balance is going to be crucial especially as the gap between the generations is becoming bigger.
- **Rules:** By making and enforcing rules, you’re giving them some structure, but you need to be consistent in enforcing it. Parents have to tell the reason why teens have to follow the rules and, empower them to be excited about life so they will naturally make right decisions.
- **Talking With Your Teenager:** It’s also very important that you have an open and honest talk with your teenager about your rules and why you want them to follow them. Don’t just say, “Because I said so” as that will get you nowhere. It’s imperative that they understand the good you are trying to do for them by establishing rules.
- **Energy & Exercise:** When your child has a lot of energy, it needs to go somewhere. If you don’t help them discover somewhere they can put their energy, by default it will be directed to things you may not approve. Make sure your teen is getting at least 60 minutes a day of physical exercise. Make sure they’re in the sun for at least an hour a day as well because it helps to create a positive mood.
- **Lead By Example:** Make sure you’re leading by example, and try to share with them as much as you can by getting involved in their conversations, activities and concerns.

Adapted from:

<http://parentingteenagersacademy.com/technology-addiction/>

## **Hand out (12)**

### **Dealing with Teen Aggression**

#### **1- Encourage Appropriate Communication**

The most effective way to deal with anger and rebellious behaviour is to have teenagers appropriately communicate their feelings of disapproval and resentment.

#### **2- Avoid Excessive Negative Attention**

It's a mistake to pay more attention to what the child is doing wrong—his failures, mistakes, misbehaviors—than to what he is doing right—his successes, achievements, good behaviors.

#### **4- Don't Get into a Power Struggle**

Don't put rules that you know that you can't apply on, and try to keep calm during your discussions with your teen; so you will be his positive model. Remember, it is not a battle to see who is going to win.

#### **5- Look for Ways to Compromise**

In many situations with adolescents, you should try to treat them the way you would one of your friends or another adult. It may be better to create a situation where a compromise is reached.

#### **6- Provide Appropriate Models**

Children learn a great deal from modelling their parents' behavior.

#### **7-Stabilize the Environment**

Teenagers who experience environmental change—especially divorce, separation, or remarriage—may develop underlying anger.

Adapted from:

<http://life.familyeducation.com/teen/anger/39357.html?page=1>

### **Hand out ( 13 )**

#### **Teen games and internet addiction**

- Learn about the meaning of the Internet for your children.
- Observe your children with open eyes & open heart.
- Do not diminish the importance of the Internet & other advanced technology as this is the world they are growing up in.
- Be genuinely curious about draws them to the game.
- Figure out what actual games are played, how these games played, how much time they spend playing, when and where they play, and with whom they play.
- Learn how Internet and online games serve your child. What does s/he like about the games? What are the emotional and psychological allures of the games? What might s/he be trying to avoid by playing the game?
- Try to agree on time limits with your child rather than coming up with your own limits.
- Discuss balance between online and offline activities, weekend vs. weekdays, etc.
- Learn about rating of games for violence and offensive content.
- Install parental control when and if necessary.

Adapted from:

<http://parentingteenagersacademy.com/technology-addiction/>

## **Hand out ( 12 )**

### **Teen risk taking**

- **Help your child learn to assess risk.** You can talk about other people's behavior and its consequences (for instance, in movies or on the news). For example, 'If he hadn't been speeding, he wouldn't have this accident. Now he's going to lose his job as well'.
- **Work out some agreed ground rules** with your child. Explain to him that your role is to keep him safe, and his job is to experiment. Decide together on what the consequences should be if the rules are broken. You'll need to be flexible and adapt the ground rules as your child grows and shows she is ready for more responsibility.
- **Talk about values** – the earlier the better. Knowing what's important to your family will help your child develop a sense of responsibility and personal values.
- **Keep an eye on your child.** Knowing who he is with and where he is can help you prevent some risk-taking behavior.
- **Keep the lines of communication open.** Try to stay connected to your child. Strong connections with parents reduce the chance of risky teenage behavior.
- **Be a good role model.** Teenagers are guided by how their parents behave. If your child sees you applying double standards – from speeding or aggressive behavior –he might not respect your rules.
- **Encourage a wide social network.** You probably can't stop your child from being friends with a particular person or group – but you can give him the chance to make other friends through sport, mosque or family activities. Make your child's friends welcome in your home – you'll know where he is at least some of the time.

Adapted from:

[http://www.carrsq.qut.edu.au/publications/corporate/adolescent\\_risktaking\\_fs.pdf](http://www.carrsq.qut.edu.au/publications/corporate/adolescent_risktaking_fs.pdf)

# Session 8

## Personal Empowerment for Women: Self- Esteem and Assertiveness

## **Session 8: Personal Empowerment for Women: Self-Esteem and Assertiveness**

### **Introduction**

Session 8 focuses on increasing women's personal self-confidence, self-esteem, and teaching them basic assertiveness skills. The aim is to provide the personal empowerment skills (assertiveness, importance of self-esteem) that can form the basis for more involvement in an active community and social change. The session invites participants to think about cultural and personal barriers to women communicating assertively, it investigates aggression vs passive communication, finds culturally relevant ways to overcome negative self talk, and helps participants move towards making active changes in their personal lives in light of what they learned in the session.

This session is incompatible with Session 9 as it covers many of the same topics. Session 9 is developed specifically to follow a legal empowerment session. Program planners should choose either Session 8 or Session 9.

### **Aim**

Session 8 aims to improve women's assertiveness and self-esteem.

### **Objectives**

- Help participants see that self-esteem and self-confidence along with assertiveness are values that already exist in their culture for women
- Help participants find ways to overcome the cultural and personal barriers to being assertive and to having high self-esteem
- Assist participants to understand negative self-talk and to find ways of finding alternative positive self-talk
- Encourage women to be motivated to make personal changes in their lives as a result of the session

### **Techniques**

Session 8 uses a variety of techniques including supportive discussion and skills teaching in assertiveness.

### **Who is this module for?**

This module is suitable for women only, both refugees and Jordanian women. It is suitable for use in urban, rural and camp settings. This session works well taken after the GBV sessions.



## General notes for facilitators

- Facilitators can adapt the style and tone of the session to suit different types of participants – for example older women and more traditional women may have more resistance to embracing assertiveness whereas younger women and more educated women may be more open to the idea. Facilitators must be skilled and experienced at working sensitively with these different groups, providing a balance between respecting cultural traditions and values, and encouraging participants to value women's assertiveness and women's rights.
- Facilitators should be trained in human rights and equity, community participation, the do no harm principle, aim to build upon existing community resources and capabilities, etc
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance

- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events the majority of people will recover over time using their own ways of coping

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "Women's Empowerment". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group and general information about themselves.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>

30 minutes	<p><b>Introduction to <u>بالنفس الثقة</u>: (Assertiveness/ Self-Confidence)</b></p> <p>Small Group Exercise.</p> <p>As a large group, discuss the word <u>بالنفس الثقة</u>: (assertiveness/ self-confidence). Ask the group: Can you think of any Islamic women who show self-confidence and strong communication? Write these on the flip chart. Here you may discuss good Islamic female role models such as the Prophet's first wife, Khadija bint Khuwaylid, the women who argued with Prophet Mohamad about her husband, Rofedah the first nurse in Islam.</p> <p>Then emphasize that self-confidence comes from the inside and is not related to wealth, background, looks etc.</p> <p>Then break the participants into groups of 2 or 3 and ask them to discuss each saying or verse. Allocate one saying or verse to each group. Ask them to discuss the meaning of it in terms of <i>communication</i> – how can we be more confident <i>communicators</i>? :</p> <ul style="list-style-type: none"> <li>- Being able to stand up for yourself</li> <li>- Communicating with strength</li> <li>- Making sure your opinions and feelings are considered</li> <li>- Actively going after what you want and need rather than being passive</li> <li>- Not letting other people always get their way, and being confident and direct in dealing with others</li> <li>- Confidence in ability to think and to cope with the basic challenges of life</li> <li>- Confidence in your right to be happy and feel worthy and deserving of good things</li> <li>- Entitled to assert your needs and wants and to enjoy the fruits of your efforts</li> <li>- Communicate with the belief that you have the right to have and express your opinion.</li> </ul> <p>Then, you want to let them know that what they are there to discuss - <u>بالنفس الثقة</u> - is already something that exists in their culture, their values, their beliefs, and their codes for living.</p> <p>Often some women will say that they find it difficult to manage these things and live them in their day-to-day lives, and then you can suggest that you spend the rest of the session talking about how to do this.</p>	<p><b>Note:</b> in Arabic, the word 'assertiveness' is a technical term <u>الذات توكيد</u> and is not easy for beneficiaries to understand. So, we use the word <u>الثقة</u> <u>بالنفس</u>: which in Arabic is translated to mean personal confidence. This is the closest non-academic Arabic word to 'assertiveness.'</p> <p><b>Key issue:</b> by this point in the session, you want the women to feel that it is in their culture and in their beliefs to have a high self-esteem and to communicate with strength to get their legitimate needs met. It is important you established have this before going any further.</p>
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15 minutes	<p><b>Discussion: Aggressive and Passive Communication</b></p> <p><b>1. Aggressive Communication</b></p> <p><b>Ask the group: How is self-confident communication different from aggressive communication and losing our temper?</b> Self-confident communication is <b>not</b> the same as aggressiveness. You can be assertive without being forceful or rude. Instead, it is stating clearly what you expect and insisting that your rights be considered.</p> <p><b>Ask: What are the negative outcomes of aggression?</b> (e.g. Possible feel guilty/ ashamed, unfairly blame others, self-confidence lowers, others will resent you. Sometimes there are short-term benefits, but long-term it can cause problems, and doesn't always help you get your needs met.</p> <p><b>2. Passive Communication</b></p> <p><b>Ask: How is self-confident communication different from passive communication? Ask for and provide examples.</b> Does your culture encourage your women to be passive? Discuss some of the negative outcomes.</p> <p><b>Ask: What are the negative outcomes of passive communication?</b> (e.g. Don't get your legitimate needs met, taken advantage of and exploited by others, can lead to violence and abuse, loss of self-esteem, increased internal tensions leading to stress, anger and depression).</p> <p><b>3. Reasons Women Don't Get Their Needs Met</b></p> <p><b>In our culture, what are some reasons women communicate in a passive or aggressive way and in a way that does not get their needs met?</b></p> <p>Make it clear that our assertiveness ability depends in somehow on our self-esteem; Self-esteem is what you think of yourself. We all have self-esteem whether good or bad (it is on a continuum).</p> <p>We all have an opinion of ourselves and that is based on many things like how you were brought up by our families, our religion, our Arabic culture, how we were treated as children, how we did at school, our relationships with other people (friends, family, partner), the job we have, where we live, how successful we think we are, or can be, our strengths</p>	<p>Key issue: here you want to emphasize that assertiveness is not the same as aggressive communication</p>
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	<p>and weaknesses, and what we believe others think of us.</p> <p>Ask the group:</p> <p>Do you think it would be good or bad to communicate with more strength for what you want? And when it is okay to be assertive (in what situations)?</p> <p>Answers here may vary according to the culture, education, and the age of participants.</p>	
15 minutes	<p><b>Overcoming Barriers to Women Communicating with Strength</b></p> <p>Ask the group:</p> <p>Is it possible for women in our culture to communicate with more strength for what we want? What are the barriers? And when it is okay to be assertive (in what situations)?</p> <p><b>Cultural barriers</b></p> <p>Some of the women may mention that it is a part of their religion that women should obey her husband and follow his orders, or that it is mentioned in the holy Quran that the husband can beat his wife. Here, the facilitator should be sensitive, and where appropriate clarify issues including:</p> <ul style="list-style-type: none"> <li>✓ Islam gives you the right to be a full human, you have rights and responsibilities, even as women</li> <li>✓ In the marriage relationship you have the right to choose your husband and you should be asked for your approval.</li> <li>✓ You have the right to work and have your income (Prophet Mohamed worked for his first wife).</li> <li>✓ It is the husband's responsibility to pay for your needs and the home's needs - this is what Quran says.</li> <li>✓ It is not a man's right to beat his wife. He should treat his wife with kindness, and this is the way Prophet Mohamed treated his wives.</li> <li>✓ It is your right to get a divorce if you cannot live with your husband, and this is what Prophet Mohamed did for the woman who told him that she couldn't love her husband.</li> </ul> <p><b>Personal Barriers</b></p>	<p>Key issue: Give some space for women to talk about the barriers they could face and help them to overcome these barriers.</p>

	<p>e.g. Negative Self-Talk. Examples:</p> <ul style="list-style-type: none"> <li>▪ I am bad and awful</li> <li>▪ I am not capable</li> <li>▪ I can't do it</li> <li>▪ I am a burden on others.</li> <li>▪ I am not worthy</li> <li>▪ I am stupid</li> </ul> <p>As a group, come up with one or more daily verses or sayings that they can say to themselves each day that is the opposite of the above negative self-talk. (See Handout 2)</p>	
15 minutes	<b><u>BREAK</u></b>	
15 minutes	<p><b><u>Life Skills: Basic Assertive Communication Techniques</u></b></p> <p>How do we communicate with strength to get our needs met? And without punishing, threatening, or putting down the other person? Ask the group to generate a problem in their personal life that would be helped by being assertive. Choose one problem and use it as a role-play. Teach the skills below and then divide them into groups of 2-3 to practice the skills.</p> <p><b><u>Technique 1:</u></b> Make clear "I" statements</p> <p>About how I feel and what I think. For example,</p> <p><i>"I feel very uncomfortable with your decision".</i></p> <p><b><u>Technique 2:</u></b> Broken record</p> <p>Here you rehearse what it is you want to say by <b>repeating over and over again</b> what it is you want or need. During the conversation, keep returning to saying the same thing, stating clearly and precisely exactly what it is you need or want. Do not be put off by clever arguments or by what the other person says.</p> <p><b><u>Technique 3:</u></b> Saying "No"</p> <p>Many people find that saying "No" seems to be one of the hardest words to say. We can sometimes be drawn into situations that we don't want to be in because we</p>	<p><b>Key Issue:</b> Assertiveness is being able to express feelings, wishes, wants and desires appropriately and it is an important personal and interpersonal skill</p>

	<p>avoid saying this one simple word. The images we associate with saying "no" may prevent us from using the word when we need it. We may be scared of being seen as mean and selfish, and of being rejected by others. Saying "no" can be both important and helpful</p> <p>Be straightforward and honest but not rude so that you can make your point effectively.</p> <ul style="list-style-type: none"> <li>• Tell the person if you are finding it difficult.</li> <li>• Don't apologise and give lots of reasons for saying "no." It is your right to say no if you don't want to do things.</li> <li>• Remember that it is better in the long run to be truthful than breed resentment and bitterness within yourself.</li> </ul>	
20 minutes	<p><b><u>Self-esteem and Taking Action Towards Personal Change</u></b></p> <p><b>Ask the participants to write their individual answers to the following questions on a piece of paper:</b></p> <ul style="list-style-type: none"> <li>• <i>What I want</i></li> <li>• <i>What I want to change in my personal life</i></li> <li>• <i>What I am proud of in my personal life</i></li> <li>• <i>What steps can I take</i></li> </ul>	<p><b>Key Issue:</b> explain how assertiveness is related to having a good self-esteem</p>
5 minutes	<p><b><u>Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> </ul>	



## Sources:

- (2012), *Self-esteem of Adolescent School Girls: Empowerment Lessons from U.S. Distinguished Fulbright Award in Teaching*. Dr. Divya Rathore
- (2013), *Empowering Women in the Middle East by psychosocial Interventions*. Hamideh Addelyan Rasi
- (2012), *Empowerment and Health & Well-being: Evidence Review*. Centre for Health Promotion Research, Leeds Metropolitan University.
- *Counseling Training Manual Trauma, Guilt and Self Esteem*.
- International Planned Parenthood Federation South Asia Regional Office.



## Handout 1

### Responding Types

#### **Elements of passive behaviour:**

Passive behaviour is **not** expressing your *feelings, needs, rights* and *opinions*. Instead there is an over-consideration for other's feelings, needs, rights and opinions.

**Feelings:** Bottling up your own feelings or expressing them in indirect or unhelpful ways.

**Needs:** Regarding the other person's needs as **more important** than your own. Giving in to them all the time.

**Rights:** The other person has rights but you do not allow yourself the same privilege.

**Opinions:** You see yourself as having little or nothing to contribute and the other person as always right. You may be frightened to say what you think in case your beliefs are ridiculed.

The aim of passive behaviour is to **avoid conflict** at all times and to **please others**.

#### **Effects of passive behaviour.**

On you: short-term:

- Reduction of anxiety.
- Avoidance of guilt.
- Martyrdom.

On you: long-term:

- Continuing loss of self-esteem.
- Increased internal tensions leading to stress, anger and worsened depression.

There are immediate positive effects of being passive but the longer lasting effects may be detrimental to your own health and cause others to become increasingly irritated by you and to develop a lack of respect for you.

### **Elements of aggressive behaviour:**

Aggression is the opposite of assertion. Aggression is expressing your own feelings, needs, rights and opinions with **no respect** for other people's feelings, needs, rights and opinions.

**Feelings:** Expressing your feelings in a demanding, angry and inappropriate way.

**Needs:** Your own needs are seen as being more important than others and theirs are ignored or dismissed.

**Rights:** Standing up for your own rights, but doing so in such a way that you violate the rights of other people.

**Opinions:** You see yourself as having something to contribute and see other people as having little or nothing to contribute.

The aim of aggression is to **win**, if necessary at the expense of others. Try to think of a time when someone else has been aggressive to you and ignored your opinions. How did it make you feel about them and yourself?

### **Effects of aggression**

Aggression has both short-term and long-term consequences.

Short-term:

- Release of tension.
- The person feels more powerful.

Long-term:

- Feelings of guilt and shame.
- Place responsibility for anger onto others.
- Decreasing self-confidence and self-esteem.
- Resentment in those around the aggressive person.

Although the short-term effects may be rewarding, the longer lasting effects of using aggression may be less beneficial and cause problems for the person and others.

### Elements of assertive behaviour.

In contrast to aggression and passivity, assertion is expressing your **own** feelings, needs, rights and opinions while maintaining respect for **other people's** feelings, needs, rights and opinions.

**Feelings:** In assertion, you are able to express your feelings in a direct, honest and appropriate way.

**Needs:** You have needs that have to be met otherwise you feel undervalued, rejected, angry or sad.

**Rights:** You have basic human rights and it is possible to stand up for your own rights in such a way that you do not violate another person's rights.

**Opinions:** You have something to contribute irrespective of other people's views.

Assertion is not about winning, but it is concerned with being able to walk away feeling that you put across what you wanted to say. Try to think about a time when someone else has been assertive with you and respected your opinion.

### The benefits of assertion

Assertiveness is an **attitude** towards yourself and others that is helpful and honest. In assertiveness you ask for what you want:

- Directly and openly.
- Appropriately, respecting your own opinions and rights and expecting others to do the same.
- Confidently without undue anxiety.

Adapted from:

- (2002) *Being assertive*. Chris Williams. Williams and University of Leeds Innovations Ltd.

## **Hand out 2**

### **Self-Confident and Assertive Behaviours**

Examples of Self-Confident and Assertive Behaviors:

- ✓ Liking yourself
- ✓ Taking actions to improve yourself.
- ✓ Practice positive thinking
- ✓ Accept compliments and believe them
- ✓ Identify your goals
- ✓ Be honest in expressing your strengths, talents, and skills
- ✓ Learn from constructive criticism
- ✓ Write down your accomplishments everyday
- ✓ Give yourself credit every day
- ✓ Take action on ideas you believe in
- ✓ Forgive those who have hurt you
- ✓ Make time for self development every day
- ✓ Seek counseling through difficult times.

Adapted from:

Self-esteem of Adolescent School Girls: Empowerment Lessons from U.S.

# Session 9

## Assertiveness Training for Women (Following Legal Empowerment Training)

## **Session 9: Assertiveness Training For Women (To Follow Legal Empowerment Training)**

### **Introduction**

Session 9 is designed to follow legal empowerment training for women, and it focuses on assertiveness training and self-esteem. (Legal awareness trainings provide information about family status laws in Jordan including laws regarding domestic violence, child custody and their rights regarding divorce and alimony). The aim is to provide personal empowerment skills, which can form the basis for more active community and social change. Assertiveness skills can be used in their personal lives and can be used in public life, for example when engaging with the legal system.

The session invites participants to think about cultural and personal barriers to women communicating assertively, investigates aggression vs passive communication, finds culturally relevant ways to overcome negative self talk. Participants role-play real life situations to practise assertive behaviour.

This session is incompatible with Session 8 as they cover many of the same topics. Session 9 is developed specifically to follow a legal empowerment session. Program planners should choose either Session 8 or Session 9.

### **Aim**

Session 9 aims to improve women's assertiveness and self-esteem. This session aims to empower women through skills teaching to be able to make practical use of the legal rights information. It aims to allow participants to translate the information they have been given in the awareness raising session into action (no matter how small) in their daily lives.

### **Objectives**

- Help participants see that self-esteem and self-confidence along with assertiveness are values that already exist in their culture for women
- Practice assertiveness skills in real life role play situations (e.g. using 'I' statements, broken record technique, and saying 'No')
- Teaches non-verbal communication skills in assertiveness
- Helping participants to identify those occasions when it might be useful to use assertiveness skills – i.e. in order to meet their valid needs
- To help raise self esteem by assisting them in identifying things they like about themselves

- Encouraging women to take on empowering values which underpin assertiveness – self-respect, recognising their own needs, ask for what they want, and to not be overly responsible for others, etc.
- Teach women how to use common problem solving techniques to raise the likelihood that they consider all their options before taking on a particular course of action
- For those women who are resistant to the idea of the benefits of women being assertive - to try to shift their perspective even if the shift is subtle. For example, to shift these women's views so that even if they feel they cannot change themselves, to ask them to consider whether they would like their own daughters to be more assertive.

### **Who is this module for?**

This module is suitable for women only, both refugees and Jordanian women. It is suitable for use in urban, rural and camp settings. This session is designed to be used after the legal empowerment session.

### **Notes for Facilitators**

- Other sessions last 2 hours, but Session 9 lasts 3 hours.
- These sessions will not stand alone but will be incorporated into a larger number of sessions with groups covering other issues including human rights awareness raising, information provision, etc.
- Facilitators can adapt the style and tone of the session to suit different types of participants – for example older women and more traditional women may have more resistance to embracing assertiveness whereas younger women and more educated women may be more open to the idea. Facilitators must be skilled and experienced at working sensitively with these different groups, providing a balance between respecting cultural traditions and values, and encouraging participants to value women's assertiveness and women's rights.
- Facilitators must be trained in human rights and equity, community participation, the do no harm principle, aiming to build upon existing community resources and capabilities, etc.
- In addition to the Discussion Guide below, facilitators should rely on their knowledge of psychosocial processes in the communities they are working in, their local knowledge, and their common sense in running the groups and offering assistance.
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you



should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.

- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program.
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups.
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and their common sense in running the groups and offering assistance.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events the majority of people will recover over time using their own ways of coping.

Timing/ Materials	Facilitator Guide	Notes
10 mins	<p><b><u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• Explain you are a psychosocial support worker/ social worker and you will be conducting a session to follow the lawyer session about legal rights.</li> <li>• Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about assertiveness for women. Give a quick overview of what will be discussed.</li> <li>• Throughout this session, if you find participants to be resistant to change, you might find that discussing with the group the idea that even if they feel that they cannot personally benefit from this training (if their values are different, etc.), then even so perhaps they can consider using some of the ideas to raise their own daughters to be more assertive in their lives.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time</li> <li>✓ Active listening</li> <li>✓ Turn off cell phones</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul>	<p>Total 3 hours</p> <p><b>Key issue:</b> Introduction to initiate a discussion, and to relate the session to the legal rights session. Here, we want to obtain general reactions to the legal rights training along with their feelings about barriers to using those rights.</p>
10 mins	<p><b>Large Group Discussion: Reflection on the legal rights training session</b></p> <ul style="list-style-type: none"> <li>• As a group, ask them what their reactions were to the legal awareness raising session. What did they think? Did they enjoy it? Did they learn anything they didn't know?</li> <li>• Ask them if they think many women they know would ever use this information? Why/ why not?</li> <li>• What about them personally – do they think they would ever use any of the information provided in the legal rights sessions? Why/ why not?</li> <li>• What do they think prevents women from claiming their rights in this country? (External factors: cannot leave marriage because nowhere to go, shame, stigma of telling people about problems, honour, women's roles, too expensive, lawyers/ courts are unfriendly or no women work there, etc. Internal Factors: lack of confidence, don't know how to negotiate, etc)</li> </ul>	

30 mins	<p><b><u>Introduction to بالنفس الثقة (Assertiveness/ Self-Confidence)</u></b></p> <p>Small Group Exercise.</p> <p>As a large group, ask each one to talk about the word بالنفس الثقة (assertiveness/ self-confidence). Ask the group: Can you think of any Islamic women who show self-confidence and strong communication? Here you may discuss good Islamic female role models such as the Prophet's first wife, Khadija bint Khuwaylid, the women who argued with Prophet Mohamad about her husband, Rofedah the first nurse in Islam.</p> <p>Then emphasize that self-confidence comes from the inside and is not related to wealth, background, looks etc.</p> <p>Then break the participants into groups of 2 or 3 and ask them to discuss each saying or verse. Allocate one saying or verse to each group. Ask them to discuss the meaning of it in terms of <i>communication</i> – how can we be more confident <i>communicators</i>?</p> <ul style="list-style-type: none"> <li>- Being able to stand up for yourself</li> <li>- Communicating with strength</li> <li>- Making sure your opinions and feelings are considered</li> <li>- Actively going after what you want and need rather than being passive</li> <li>- Not letting other people always get their way, and being confident and direct in dealing with others</li> <li>- Confidence in ability to think and to cope with the basic challenges of life</li> <li>- Confidence in your right to be happy and feel worthy and deserving of good things</li> <li>- Entitled to assert your needs and wants and to enjoy the fruits of your efforts</li> <li>- Communicate with the belief that you have the right to have and express your opinion.</li> </ul> <p>Then, you want to let them know that what they are there to discuss - بالنفس الثقة - is already something that exists in their culture, their values, their beliefs, their codes for living.</p> <p>They may say that they find it difficult to manage these things and live them in their day-to-day lives, and then you can suggest that you spend the rest of the session talking about how to do this.</p> <p>Some of the women may mention that it is a part of their religion that women should obey her husband and follow his orders, or that it is mentioned in the holy Quran that the husband can beat his wife. Here, the facilitator should be sensitive, and where appropriate clarify issues</p>	<p><b>Note:</b> in Arabic, the word 'assertiveness' is a technical term الذات تأكيد and is not easy for beneficiaries to understand. So, we use the word بالنفس الثقة which in Arabic is translated to mean personal confidence. This is the closest non-academic Arabic word to 'assertiveness.'</p> <p><b>Key issue:</b> by this point in the session, you want the women to feel that it is in their culture and in their beliefs to have a high self-esteem and to communicate with strength to get their legitimate needs met. It is important you have this buy in before going any further.</p>

	<p>including:</p> <ul style="list-style-type: none"> <li>✓ Islam gives you the right to be a full human, you have our rights and responsibilities, even as women</li> <li>✓ In the marriage relationship you have the right to choose your husband and you should be asked for your approval.</li> <li>✓ You have the right to work and have your income (Prophet Mohamed worked for his first wife).</li> <li>✓ It is the husband responsibility to pay for your needs and the home needs - this is what Quran said.</li> <li>✓ It is not a man's right to beat his wife. He should treat his wife with kindness, and this is the way Prophet Mohamed treated his wives.</li> <li>✓ It is your right to get a divorce if you cannot live with your husband, and this is what Prophet Mohamed did for the woman who told him that she can't love her husband.</li> </ul>	
20 mins	<p><b>Discussion: Aggressive and Passive Communication</b></p> <p><b>1. Aggressive Communication</b></p> <p><b>Ask the group: How is self-confident communication different from aggressive communication and losing our temper?</b> It is <b>not</b> the same as aggressiveness. You can be assertive without being forceful or rude. Instead, it is stating clearly what you expect and insisting that your rights are considered.</p> <p><b>Ask: What are the negative outcomes of aggression?</b> (e.g. Possible feel guilty/ ashamed, unfairly blame others, self-confidence lowers, others will resent you. Sometimes there are short-term benefits, but long-term can cause problems, don't always get your needs met. (see Handout 1).</p> <p><b>2. Passive Communication</b></p> <p><b>Ask: How is self-confident communication different from passive communication? Ask for and provide examples. What are the negative outcomes of passive communication?</b> Does your culture encourage your women to be passive? Discuss some of the negative outcomes.</p> <p>(Don't get your legitimate needs met, taken advantage of and exploited by others, can lead to violence and abuse, loss of self-esteem, increased internal tensions leading to stress, anger and depression).</p> <p><b>3. Reasons Women Don't Get Their Needs Met</b></p> <p><b>In our culture, what are some reasons women communicate in a passive or aggressive way and in a way that does not get their needs met?</b></p> <p>Make it clear that our assertiveness ability depends in somehow on our self-esteem; Self-esteem is what you think of yourself. We all have self-</p>	<p><b>Key issue:</b> here you want to emphasize that assertiveness is not the same as aggressiveness.</p>

	<p>esteem whether good or bad (it is on a continuum).</p> <p>We all have an opinion of ourselves and that is based on many things like how you were brought up by our families, our religion, our Arabic culture, how we were treated as children, how we did at school, our relationships with other people (friends, family, partner), the job we have, where we live, how successful we think we are, or can be, our strengths and weaknesses, and what we believe others think of us.</p> <p>Ask the group:</p> <p>Do you think it would be good or bad to communicate with more strength for what you want? And when is it okay to be assertive (in what situations)?</p> <p>Answers here may vary according to the culture, education, and the age of participants.</p>	
10 mins	<p><b>Self-Esteem Exercise</b></p> <p>Ask the group:</p> <p><i>Write 5 good things you know about yourself in 2 minutes.</i></p> <p>Facilitator should support women during this exercise, as there are likely to be many who cannot think easily of five things they like about themselves. Offer support to these women and ensure they think of five things. Do not share these answers around the group. The aim is to encourage women to like themselves.</p>	<p><b>Key Issue:</b> explain how assertiveness is related to having a good self-esteem</p>
10 mins	<p><b><u>Group Support and Psychoeducation: Can assertiveness make you unsafe?</u></b></p> <p>Start this section by addressing the fact that <i>we can learn how to be assertive, but we have to be strong, accept our selves, and pay effort to change</i>. At first people around us might not like this change, but eventually they will accept it, and we will feel happier and able to get more of our rights as women. Note that in some cases it is dangerous for a woman to be more assertive and the section below explains how to manage this.</p> <p>Make it clear that in cases where violence or abuse will result if a woman is more assertive, then the woman needs to be careful in her behaviours.</p> <p><b>Discuss as a group:</b> <i>How should women handle assertiveness if they have a violent husband?</i></p> <p>Note, here, you need to acknowledge that safety is important. But tell them it is also not okay to be violent towards women. It is important you give them the details about whatever local GBV focal points are available to them (including the ARDD-Legal Aid PSS Unit), and</p>	<p><b>Key issue:</b> raising awareness about GBV services &amp; SOP's.</p>

	<p>explain that this person and this organisation are trustworthy and confidential (so long as you are confident of this), and provide phone numbers here. Explain that the person in danger may need health/ medical/ legal/ security and other help and that the GBV focal point can provide these things if needed. Also explain that if they are unsure they can always call you for advice. See also guidelines above for facilitators.</p> <p>Note: only include this section if you are confident you know which services to include here. If no services are available, leave this section out and suggest they call you if they need any further assistance</p>	
15 mins	<b><u>BREAK</u></b>	
45 mins	<p><b><u>Life Skills: Basic Assertive Communication Techniques</u></b></p> <p>How do we communicate with strength to get our needs met? And without punishing, threatening, or putting down the other person? Ask the group to generate a problem in their personal life that would be helped by being assertive. Choose one problem and use it as a role-play. Teach the skills below and then divide them into groups of 2-3 to practice the skills.</p> <p><b><u>Technique 1:</u></b> Set up self rules or 'values'</p> <p>I have the right to:</p> <ol style="list-style-type: none"> <li><b>1. Respect myself</b> - who I am and what I do.</li> <li><b>2. Recognize my own needs as an individual and as women</b> - that is separate from what is expected of me in particular roles, such as <i>wife, daughter, mother, sister, refugee</i>.</li> <li><b>3. Allow myself to make mistakes.</b> Recognizing that it is normal to make mistakes.</li> <li><b>4. Change my mind</b>, if I choose.</li> <li><b>5. Ask for "thinking it over" time.</b> For example, when people ask you to do something, you have the right to say "<i>I would like to think it over and I will let you know my decision by the end of the week</i>".</li> <li><b>6. Allow myself to enjoy my successes</b>, that is by being pleased with what I have done and sharing it with others.</li> <li><b>7. Ask for what I want</b>, rather than hoping someone will notice what I want.</li> <li><b>8. Recognize</b> that I am not responsible for the behavior of other adults.</li> <li><b>9. Respect other people</b> and their right to be assertive and expect the same in return.</li> </ol> <ul style="list-style-type: none"> <li>• Give participants some time to think about these rules/ values and ask them currently, <b>how much do you believe each of these rules, and put them into practice?</b> (Distribute handout 2 and leave it with them for self reflection).</li> </ul>	<p><b>Key Issue:</b></p> <p>Teaching participants some culturally relevant assertiveness techniques in the context of legal issues and problems, so that they can use the skills they have learned both in their daily life and in dealing with their legal issues.</p>

**Technique 2:** Make clear "I" statements

About how "I" feel and what "I" think. For example,

*"I feel very uncomfortable with your decision".*

Role play:

*"Ahmed asked for Hana's hand in marriage but he wanted her to quit her job and devote her full time to the household and family. However, Hana' wanted to continue her work to maintain a measure of autonomy yet she also wanted to get married to Ahmed. She discussed the matter with Ahmed and tried to persuade him to allow her to work outside the house. He agreed but Hana' was not really sure he was fully convinced. Hana' wanted to ensure her right to work after marriage by stipulating the same as a condition in the marriage contract but she is hesitant about telling Ahmed in fear of his reaction. What can she do?"*

**Technique 3:** Broken record

Here, you rehearse what it is you want to say by **repeating over and over again** what it is you want or need. During the conversation, keep returning to your prepared lines, stating clearly and precisely exactly what it is you need or want. Do not be put off by clever arguments or by what the other person says.

Role play:

*"Fawziya got married to Firas and they lived in a small house in the early years of their marriage. After several years and having three children, Fawziya began to feel uncomfortable with the lack of privacy the small house afforded her and her husband. The noise the younger kids make hinder the eldest daughter's efforts to concentrate and study for school. Therefore, Fawziya wants to move to a larger house, knowing that Firas can afford it. She wants to raise the issue with Firas and ask him to move to a house allowing them and the children a certain level of privacy. How would the scenario go?"*

**Technique 4:** Saying "No"

Many people find that saying "No" seems to be one of the hardest words to say. We can sometimes be drawn into situations that we don't want to be in because we avoid saying this one simple word. The images we associate with saying "no" may prevent us from using the word when we need it. We may be scared of being seen as mean and selfish, and of being rejected by others. Saying "no" can be both important and helpful

Be straightforward and honest but not rude so that you can make your point effectively.

- Tell the person if you are finding it difficult.
- Don't apologise and give lots of reasons for saying "no". It is your right

	<p>to say no if you don't want to do things.</p> <ul style="list-style-type: none"> <li>Remember that it is better in the long run to be truthful than breed resentment and bitterness within yourself.</li> </ul> <p>Two role plays</p> <p><i>"Mamdouh got married to Rou'a and they lived in the house she inherited from her father. Roua's financial situation was excellent, as she works as a manager in a major company and has considerable savings in the bank. After marriage, Rou'a assumed the responsibility of paying for household expenses and children needs, such as clothing, food and school fees. Mamdouh was extremely happy with this arrangement. After a while, Rou'a fell sick and she was hospitalized for ten day. Upon her discharge from the hospital, Mamdouh brought her the treatment bill, saying: "Rou'a, I believe the amount is reasonable. where is your ATM card so that I can withdraw the amount and pay?" Rou'a was hurt and felt exploited and so she decided that she wouldn't pay for expenses anymore. She wants to ask her husband to pay the treatment costs and start to contribute to the household expenditure in addition to her right to have a budget for herself and the children. How would that go?"</i></p> <p><i>"Abed got married to Narjes who has always been a housewife. They are undergoing a financial hardship especially after having two kids who are in the fourth grade now. In addition, Narjes feels bored and neglected as she stays home alone all day. She wants to try to seek employment outside the house for a change but she is worried about Abed's reaction; how would she discuss the matter with him?"</i></p>	
10 mins	<p><b><u>Life Skills: Assertive Communication (optional)</u></b></p> <p>How do we communicate with strength to get our needs met without punishing, threatening, or putting down the other person? Ask for their ideas and then explain:</p> <p><u>It involves:</u></p> <ul style="list-style-type: none"> <li><u>Direct eye contact:</u> You should be staring at your listeners' eyes when speaking. But this should not be a 'staring contest'. Breaking eye contact during unimportant parts during a conversation presents a natural environment with you and your listener.</li> <li><u>Body postures:</u> Think of yourself as stretching from your head to your toes, sitting or standing. Pay attention to the neck, shoulder and upper back regions. Keep your back upright and your shoulder pushed back naturally. You should not be tense, but you should be mindful of your body and its composure.</li> <li><u>Voice tone:</u> If you are too soft, the other person will think you are trying to hide yourself and may ignore you. If you are too loud, the other person may become scared or vexed by your voice.</li> <li><u>Non-verbal communication:</u> pay attention to the process of</li> </ul>	<p><b>Key Issue:</b> Increase the capacity of women in communication.</p>



	<p>communication through sending and receiving wordless messages. Use gestures that give a sense of warmth and openness on your behalf—open palms, circular arm movements, smiles, wrinkles of the nose, hugs, etc.</p> <ul style="list-style-type: none"> <li>• <u>Use appropriate language.</u> Do not swear or talk rudely. Obscenities do not show assertiveness—it shows crude behavior and irresponsibility.</li> <li>• <u>If you feel tears or anger coming on,</u> breathe very deeply from the stomach—you should be able to see your stomach rise out and pull back in. This deep breathing will calm you in as little as four to five breaths.</li> </ul>	
10 mins	<p><b><u>Life Skills: Problem solving (Optional)</u></b></p> <p>Problem solving is one of the most essential skills in life. Regardless of who you are or what you do, you will face obstacles. How you deal with such challenges will often be a determining factor in how successful you are at life.</p> <p><b>Don't</b> turn away from your problems. It will come back sooner or later and it will be more difficult to solve.</p> <p>Facilitator could ask the group to give an example of a problem they would like to work on, or the facilitator could give one herself.</p> <p>Provide psychosocial education about this method's steps (distribute hand out 3).</p> <ol style="list-style-type: none"> <li>1. <b>Define the problem:</b> This involves “what is really causing the difficulty” or “what is the problem I am facing?” The more clearly a problem is defined, the easier you'll find it to complete subsequent steps</li> <li>2. <b>Identify as many potential solutions as you can:</b> Brainstorm creatively – ask lots of questions about the who, what, where, when and how of the causes, and record your ideas.</li> <li>3. <b>Choose the best solution:</b> select the best solution to fix the problem given the circumstances, your resources, and other considerations.</li> <li>4. <b>Plan of action</b> – During this step, determine what steps must be taken, designating tasks where necessary. Decide on deadlines for completing the actions and estimate the costs of implementing them.</li> <li>5. <b>Implement the solution:</b> This is the DO stage, Make sure the solution can be tracked to monitor progress in solving the problem.</li> <li>6. <b>Evaluating the Results:</b> This is a careful analysis stage that improves upon the best solution using the information gathered during the DO stage. Did the solution work? If not—why not? What went right, and what went wrong? What adjustments do you</li> </ol>	<p><b>Key Issue:</b> increase the women's capacity to deal with their problems using problem solving.</p>

	<p>have to make for the solution work well?</p> <p><b>Facilitator note:</b> if you practise this method on any woman in your group, make sure not to make any choices (step 3) from your point of view, and highlight that this is only an example.</p>	
<p>11</p> <p>5 Minutes</p>	<p><b><u>5.Conclusions and close</u></b></p> <p>We're approaching the end of the session.</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain how follow up and further support will be provided to participants.</li> </ul>	

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## Handout 1

### Responding Types

#### **Elements of passive behaviour:**

Passive behaviour is **not** expressing your *feelings, needs, rights* and *opinions*. Instead there is an over-consideration for other's feelings, needs, rights and opinions.

**Feelings:** Bottling up your own feelings or expressing them in indirect or unhelpful ways.

**Needs:** Regarding the other person's needs as **more important** than your own. Giving in to them all the time.

**Rights:** The other person has rights but you do not allow yourself the same privilege.

**Opinions:** You see yourself as having little or nothing to contribute and the other person as always right. You may be frightened to say what you think in case your beliefs are ridiculed.

The aim of passive behaviour is to **avoid conflict** at all times and to **please others**.

#### **Effects of passive behaviour.**

On you: short-term:

- Reduction of anxiety.
- Avoidance of guilt.
- Martyrdom.

On you: long-term:

- Continuing loss of self-esteem.
- Increased internal tensions leading to stress, anger and worsened depression.

There are immediate positive effects of being passive but the longer lasting effects may be detrimental to your own health and cause others to become increasingly irritated by you and to develop a lack of respect for you.

### **Elements of aggressive behaviour:**

Aggression is the opposite of assertion. Aggression is expressing your own feelings, needs, rights and opinions with **no respect** for other people's feelings, needs, rights and opinions.

**Feelings:** Expressing your feelings in a demanding, angry and inappropriate way.

**Needs:** Your own needs are seen as being more important than others and theirs are ignored or dismissed.

**Rights:** Standing up for your own rights, but doing so in such a way that you violate the rights of other people.

**Opinions:** You see yourself as having something to contribute and see other people as having little or nothing to contribute.

The aim of aggression is to **win**, if necessary at the expense of others. Try to think of a time when someone else has been aggressive to you and ignored your opinions. How did it make you feel about them and yourself?

### **Effects of aggression**

Aggression has both short-term and long-term consequences.

Short-term:

- Release of tension.
- The person feels more powerful.

Long-term:

- Feelings of guilt and shame.
- Place responsibility for anger onto others.
- Decreasing self-confidence and self-esteem.
- Resentment in those around the aggressive person.

Although the short-term effects may be rewarding, the longer lasting effects of using aggression may be less beneficial and cause problems for the person and others.

### Elements of assertive behaviour.

In contrast to aggression and passivity, assertion is expressing your **own** feelings, needs, rights and opinions while maintaining respect for **other people's** feelings, needs, rights and opinions.

**Feelings:** In assertion, you are able to express your feelings in a direct, honest and appropriate way.

**Needs:** You have needs that have to be met otherwise you feel undervalued, rejected, angry or sad.

**Rights:** You have basic human rights and it is possible to stand up for your own rights in such a way that you do not violate another person's rights.

**Opinions:** You have something to contribute irrespective of other people's views.

Assertion is not about winning, but it is concerned with being able to walk away feeling that you put across what you wanted to say. Try to think about a time when someone else has been assertive with you and respected your opinion.

### The benefits of assertion

Assertiveness is an **attitude** towards yourself and others that is helpful and honest. In assertiveness you ask for what you want:

- Directly and openly.
- Appropriately, respecting your own opinions and rights and expecting others to do the same.
- Confidently without undue anxiety.

Adapted from:

- (2002) *Being assertive*. Chris Williams. Williams and University of Leeds Innovations Ltd.

## Handout 2

### The rules of assertion

<b>I Believe I have the right to....</b>	<b>Do I believe this rule is true?</b>	<b>Have I applied this in the last week?</b>
<b>Respect myself</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Recognise <b>my own needs</b> as an individual independent of others.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>. Make clear "I" statements</b> about how I feel and what I think. For example, " <i>I feel very uncomfortable with your decision</i> ".	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Allow myself to make mistakes</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Change my mind</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Ask for "<i>thinking it over time</i>".</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Allow myself to enjoy my successes</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Ask for what I want</b> , rather than hoping someone will notice what I want.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Recognise that I am not responsible for the behaviour of other adults.</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Respect other people</b> and their right to be assertive and expect the same in return.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Handout 3****Problem solving**

Problem solving is a mental process that involves discovering, analyzing and solving problems. The ultimate goal of problem solving is to overcome obstacles and find a solution that best resolves the issue.



Adapted from the following sources:

<http://psychology.about.com/od/problemsolving/f/problem-solving-steps.htm>

<http://nccam.nih.gov/health/stress/relaxation.htm>



# Session 10

## Managing Stress for Couples

## **Session 10: Managing Stress in Couples**

### **Introduction**

This session aims to provide individuals with better ways of communicating and handling conflicts in their couple relationships. We help participants to see the link between stress (such as the stress of war, displacement, etc.) and family problems including violence. We aim to teach skills such as communication and conflict management.

### **Aim**

Session 10 aims to provide individuals with better ways of communicating and handling conflicts in their relationships, so as to reduce stress.

### **Objectives**

- Help participants see the link between stress (such as the stress of war, displacement, etc) and family problems including violence and couple problems including increased arguing, etc.
- Help participants see that improving the way they manage conflict will be important in helping them be happier.
- Help participants realise that they cannot change their partner; they can only change themselves and their own behaviour. Encourage participants to learn to focus on how they can change, not just on how their partner should change.
- Teach participants basic communication skills, which will help in their relationships (how to be a good listener, how to talk effectively, etc.).
- Teach participants basic conflict management skills that they can use themselves in their couple relationships.
- Help participants have a sense of what their 'bottom line' requirements are in a marriage – what would they not accept in their partner's behaviour? What would they do if this happened in their relationship?

### **Techniques**

This session uses a variety of techniques including:

- Psycho-education
- Life skills training (communication and conflict resolution)

## Who is this Session For?

4. This session is suitable for couples who are married or who are engaged to be married.
5. This session is suitable for and for refugee and Jordanian couples.

## Notes for Facilitators

- It is important that facilitators do not communicate blame towards women for such relationship problems as violence. It should be communicated that violence should not be tolerated in any way.
- Remember that the purpose of this session is not to provide counselling or therapy, but is to provide non-specialist support in a group context. If a participant cannot tolerate the suffering, has prolonged symptoms (longer than a few months), and their daily functioning is severely impaired, you should offer in private (not in front of the group – but during the break or at the end) to refer them to a specialist support agency for more assistance.
- Facilitators must be trained in how to provide basic emotional and practical support and general psychosocial support skills in humanitarian/ refugee settings and have had specific training on how to implement the sessions involved in this program
- Where possible, facilitators should be similar in background and religious values, have a deep understanding and appreciation of the sociocultural values of Syrian refugees and poor and marginalised Jordanians, particularly women (including the Koran and Islam).
- Facilitators must be trained by the ARDD-Legal Aid Capacity Building Unit in topics including effective adult learning techniques and how to incorporate the Koran and other Islamic and religious factors into facilitating the groups.
- Facilitators must be trained in the core principles of the IASC Guidelines – grounded in human rights and equity, community participation, a do-no-harm principle, and aiming to build upon existing community resources and capabilities, among others.
- Facilitators should be trained in and understand the GBV and CP referral pathways and SOPs available from the Jordan GBV and CP working groups
- In addition to the guides below for each individual session, facilitators should rely on their knowledge of psychosocial processes in humanitarian settings, their local knowledge, and

their common sense in running the groups and offering assistance

- In line with Inter-Agency Guidelines (Jordan, November 2012) it is important in this session that care is taken to avoid the use of specialist terminology as terms such as 'PTSD', 'trauma' and 'depression', as using these terms can lead to disempowerment and stigmatization. Rather, non-specialist terms should be used including 'stress', 'distress', 'shock', 'severe distress', 'psychological problems' etc.
- In line with Inter-Agency Guidelines (Jordan, November 2012) it is also important that facilitators avoid eliciting emotional material in discussion group settings as group facilitators are unable to guarantee provision of follow up care. Therefore, facilitators should allow participants to talk about their emotional issues where participants want to talk, but should not push participants to speak about traumatic experiences or grief where they do not want to.
- An important message to give group members is that their symptoms and feelings are common and normal reactions to such abnormal events the majority of people will recover over time using their own ways of coping

Timing/ Materials	Facilitator Guide	Notes
5 minutes	<p><b>1. <u>Introductions and background</u></b></p> <ul style="list-style-type: none"> <li>• If this is the first time you have met the group or facilitated a session, introduce yourself and why you are here. Explain you are a psychosocial support worker and you will be conducting a number of sessions with them over the next weeks. Explain that what they say will be confidential.</li> <li>• Explain that today's session will be about "couple counselling". Give a quick overview of what will be discussed.</li> <li>• Explain that you want the session to be <ul style="list-style-type: none"> <li>✓ Interactive with everyone having a say.</li> <li>✓ Explain that sometimes you may have to move them on to talk about the next topic, because you only have a little time.</li> <li>✓ Active listening.</li> <li>✓ Turn off cell phones.</li> <li>✓ Confidentiality – note that this is very important for this session. Let them know you will be confidential and explain what this means and ask them to be confidential and explain what this means.</li> <li>✓ Tell them they can always ask you about something after the session or in the break.</li> </ul> </li> </ul> <p><b>Introduction Exercise (if the group is new to each other):</b></p> <ul style="list-style-type: none"> <li>• Ask the group to work in pairs; each pair should spend 2 minutes to know each other. Information that can be shared includes name, nationality, why they are attending this group, are they married, do they have children, general information about themselves.</li> <li>• At the end, each participant introduces their partner in the group.</li> </ul>	<p>Total 2 hours</p> <p><b>Key issue:</b> introduction to initiate a discussion, and make participants feel comfortable.</p>

30 minutes	<p><b>2. <u>General discussion on the effects of stress (including war and displacement) on male and female family roles</u></b></p> <p>Depending on the audience (whether predominantly Syrian refugee or predominantly Jordanians), choose 3 of the following questions to discuss.</p> <p>For Syrian refugees</p> <p><i>How has war and displacement affected the roles of men and women in their families?</i></p> <p><b>MEN</b></p> <p>Here you want to discuss how many men have lost their traditional role of provider.</p> <p><i>Ask: how does this impact on men? What do they feel? How do they act differently? (here, you want to discuss feelings of humiliation, powerless, and how this can lead to anger, depression, arguing with family, shouting, alcohol, family violence, etc)</i></p> <p><b>WOMEN</b></p> <p>Here you want to talk about – pressure to fulfil traditional mother, childcare, housework duties and role but without traditional source of support they usually have. If male family members are absent, women may be the head of the family, and make more decisions including financial decisions.</p> <p><i>How does this impact on women? What do they feel? How do they act differently? Here, discuss impact of stress and anger on the family, but also ‘suffering in silence,’ and early marriage for daughters. Discuss any issues that arise.</i></p> <p><b>2. <u>General discussion on experiences of women in ‘female headed households’.</u></b></p>	<p><b>Aim:</b> The aim here is to show them how stress has a negative effect on couple relationships. Talk about the specific types of stress they have experienced lately and how it can impact on their relationship.</p> <p><b>Key point:</b> in this section, encourage free and open discussion. Allow participants to complain at this point (in the next section, we will ask participants to focus on themselves)</p> <p><b>Key point:</b> stress in men can lead to alcohol problems and family violence (e.g. in times of war)</p>

ASK: *What are the problems that might face a woman if she is the head of her household?*

Hold a general discussion here about:

- Money problems
- Problems with children.

Ask: *What kinds of problems would children experience in these households?*

- Children deprived of seeing father
- Children deprived of seeing mother due to increased workload
- Children may experience lack of supervision.

Discuss

- What affect would this have on boys (being without male role models)? You would discuss things such as lack of supervision, risk taking, deprived of a male role model, and compromises their ability to become responsible husband and father. Discuss this.
- Ask: what can we do about this effect on boys?

Provide a list of services in the area for children and boys.

Discuss: What can we do as mothers in these situations where so much is expected of us?

Ask them for their ideas or break into groups to discuss. Each group to report back to the whole.

You are looking for them to generate ideas such as:

- Prioritize roles and duties. What is most important in your life? Do this first and make this your goal for the day. Feel good when you have achieved just this
- Have realistic expectations of yourself – i.e. don't expect too much of yourself. Do less and feel good about achieving less.
- Take good care of yourself even as you care for your children (take time out for yourself).
- Ask: Should we take good care of ourselves as mothers and household leaders? Generate answers – say that if we do not look after ourselves, we will have nothing left for our children. How can we look after ourselves? Generate ideas.
- Support from friends and family if this is possible

	<p>- Financial planning and budgeting is important.</p> <hr/>	
15 Minutes	<b>3. <u>Break</u></b>	
20 minutes	<p><b>4. <u>Focus point</u></b></p> <p>Explain that it is natural to want to blame the other person in the relationship for any problems. But explain that in this session, <i>we will focus on trying to changing our own behaviour, not our partner's behaviour.</i> This is very important. Take some time to discuss this with participants, making sure they understand that we cannot change our partners; we can only change ourselves, so there is no need to focus on trying to change our partner.</p> <p>(5 minutes)</p> <p>However, at this point it is also good to talk about what would be your 'bottom line' requirement in a relationship. I.e. what would your partner need to do in order for you to decide that you needed to leave the marriage? We all need boundaries and we need to think about them and what our options are if our boundaries are crossed. (here, perhaps just get them to reflect to themselves, give examples such as abuse, fighting every time you talk, spend no time together, no sex, etc as possible reasons you might want to leave your partner).</p> <p>Ask them to think to themselves and talk to you in the break if they need any more advice.</p>	<p><b>Key point.</b> You want to teach them to look at their own behavior and how they can change, not their partner.</p> <p><b>Key point:</b> you need to have them reflect on what would be unacceptable to them in their partner's behavior.</p>



10 minutes	<b>BREAK</b>	
1 hour	<p><b>5. <u>Conflict in couples: Discuss each in turn asking for examples.</u></b></p> <p><b>Do not:</b></p> <ol style="list-style-type: none"> <li>1. Criticize or blame the other person (instead, look for positive things about them).</li> <li>2. Expect too much (things can never be perfect in a couple, couples will never be happy all the time).</li> <li>3. Refuse to listen when your partner wants to discuss a problem</li> <li>4. Mind-read (do not think you know what the other person is going to say or is thinking. Ask them and listen to what they say)</li> <li>5. Over-generalise (when something happens you do not like do not blow it out of proportion (e.g. 'You always come home late!' Or 'You never do what I want to do!' etc.)</li> <li>6. Always have to be right.</li> <li>7. Roll your eyes, think about what you are going to say instead of listening</li> </ol> <p><b>Try to:</b></p> <ol style="list-style-type: none"> <li>1. See the other person's point of view.</li> <li>2. Look for a compromise, remember two points of view can both be valid</li> <li>3. Listen carefully</li> <li>4. Solve the issue rather than always being 'right' or 'winning'</li> <li>5. Use 'I' statements</li> <li>6. Focus on the present, do not focus on the past</li> <li>7. Be willing to forgive the other person</li> <li>8. Be willing to say sorry!</li> <li>9. Know when to let something go/ when to pick your battles</li> <li>10. Don't give up.</li> </ol> <p><b>Role play:</b></p> <p>Divide the participants into groups of three, one of them</p>	<p><b>Point to remember:</b> good communication can improve relationships, increasing intimacy, trust and support. The inverse is also true: poor communication can weaken bonds, creating mistrust and even contempt!</p>

	<p>will be the husband, the other will be the wife, and the third one is the observer.</p> <p>In each scenario turns change, and the observer should use the checklist for feedback (see handout 1).</p> <p>Ask the participants to practice “I” message, listening skills, trying to solve the problem not to win, be willing to say sorry, etc. (facilitator should list the requirements in simple language on the white board to help the participants remember them).</p> <p><u>First scenario:</u></p> <p>Abed got married to Narjes who have always been a housewife. They are undergoing a financial hardship especially after having two kids who are in the fourth grade now. In addition, Narjes feels bored and neglected as she stays home alone all day. She wanted to try to seek employment outside the house for a change but she was worried about Abed's reaction; how would she discuss the matter with him?”</p> <p><u>Second scenario:</u></p> <p>Saad is used to solely take family decisions, whether significant or insignificant, without conferring with Lamiaa. Even in matters of household needs, he buys things by himself without asking Lamiaa about what she thinks to be suitable. She wants him to share the shopping task for the house and kids with her, how would she act?</p> <p><u>Third scenario:</u></p> <p>Abeer is upset with her husband Kaled because he is always shouting at her and the children. Last night he spanked their 7 year old daughter because she was playing loudly with her sister. Abeer want to have a peaceful conversation with Kaled like she used to do before he lost his job, how can she do that?</p>	
5 Minutes	<p><b>6. <u>Conclusions and close</u></b></p> <p>When approaching the end of the session....</p> <ul style="list-style-type: none"> <li>• Sum up discussion.</li> <li>• Clarify most important points.</li> <li>• Explain what will be discussed in the next session.</li> </ul>	.



## Sources

- *Children in Female-Headed Households: Interrogating the Concept Of An 'Inter-Generational Transmission Of Disadvantage'* .Sylvia Chant.(2007).
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- *Parenting Through Crises: Group Counseling With Single Mothers.* Catherine Power Doyle. (1997).
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- <http://stress.about.com/od/relationships/tp/conflictres.htm>
- [http://www.helpguide.org/mental/eq8\\_conflict\\_resolution.htm](http://www.helpguide.org/mental/eq8_conflict_resolution.htm)
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## Handout (1)

### Observer checklist

#### Effective couple communication skills

<u>Skill</u>	<u>What does it mean</u>	<u>Yes</u>	<u>No</u>
<b>Stay focused on the present.</b>	Try not to bring up past hurts or other topics. Stay focused on the present, and your feelings.		
<b>Listen carefully</b>	Don't start thinking about what you're going to say next when the other person stops talking.		
<b>See the other person's point of view.</b>	Try to really see the other side, and then you can better explain yours.		
<b>Use "I" messages</b>	Begin statements with "I", and make them about yourself and your feelings, like, "I feel frustrated when this happens."		
<b>Look for compromises</b>	Instead of trying to 'win' the argument, look for solutions that meet everybody's needs.		
<b>Be willing to forgive.</b>	Resolving conflict is impossible if you're unwilling or unable to forgive.		
<b>Be willing to say sorry!</b>	Realize that personal responsibility is strength, not a weakness. Admit when you're wrong and say sorry.		
<b>Know when to let something go/ when to pick your battles</b>	If a conflict is going nowhere, you can choose to disengage and move on.		
<b>Don't give up.</b>	While taking a break from the discussion is sometimes a good idea, always come back to it. Don't give up on communication.		