



IGDS

INSTITUTE FOR GENDER
AND DEVELOPMENT STUDIES

ST. AUGUSTINE UNIT



Break the Silence:
end child sexual abuse

BREAK THE SILENCE TEACHER TOOLKIT:

**RAISING AWARENESS ABOUT GENDER,
CHILD SEXUAL ABUSE AND IMPLICATIONS FOR HIV
IN TRINIDAD AND TOBAGO**

INSTITUTE FOR GENDER AND DEVELOPMENT STUDIES
THE UNIVERSITY OF WEST INDIES
ST. AUGUSTINE CAMPUS

APRIL 2017



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It is a compilation of existing materials and outputs developed for the 2008-2012 action-research project: *Breaking the Silence: A Multidisciplinary Approach to Preventing and Responding to Child Sexual Abuse and Incest* ([see page 6](#)), which was spearheaded by the IGDS at The UWI, St. Augustine, with the support from UNICEF and United Nations Trust Fund to End Violence Against Women (managed by UNIFEM, now UN Women).

Sessions and activities in this toolkit have been compiled and adapted from existing manuals and curricula and are all referenced and noted throughout the toolkit and in the [Bibliography](#). Most activity content in this toolkit was adapted from the *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf, and *Doorways III: Teacher Manual on School-Related Gender-Based Violence Prevention and Response* accessed at https://www.usaid.gov/sites/default/files/documents/1865/Doorways_III_Teachers_Manual.pdf

Both manuals were developed for USAID's Office of Women in Development by the Safe Schools Program.

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The University of the West Indies, St. Augustine Campus

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LIST OF ABBREVIATIONS

AiA	Arts in Action
BTS	Breaking the Silence and/or Break the Silence
CBO	Community-Based Organisation
CHRC	Caribbean Health Research Council
CSA	Child Sexual Abuse
CADV	Coalition against Domestic Violence
FBO	Faith-Based Organisation
HIV	Human Immunodeficiency Virus
IGDS	Institute for Gender and Development Studies
NGO	Nongovernmental Organisation
PAT	Project Advisory Team
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
STI	Sexually Transmitted Disease
TOR	Terms of Reference
TT	Trinidad and Tobago
UNSVAC	United Nations Study on Violence Against Children
UWI	The University of West Indies
UN	United Nations
UNICEF	United Nations Children Fund
UNIFEM	United Nations Development Fund for Women
U.S.	United States

BACKGROUND

In an attempt to push forward the BTS Campaign ([see page 8](#)) and its main goal to strengthen gender-sensitive prevention and response approaches to CSA and implications for HIV risk among youth, in November 2016 the IGDS, UWI, St. Augustine launched a new annual outreach initiative titled *The Break the Silence Student Art Contest: Raising Awareness about Gender, Child Sexual Abuse and Implications for HIV in Trinidad and Tobago*. This new initiative is spearheaded by the IGDS, UWI, St. Augustine with support from The U.S. Embassy, Port of Spain with support from the PEPFAR Small Grants Program.

BTS TEACHER TRAINING WORKSHOP

The IGDS outreach initiative includes implementation of a full-day teacher training workshop at The UWI St. Augustine campus in January/February every year. The initial workshop in January 2017 was held at The UWI, St. Augustine campus and included 10 teachers from eight secondary schools throughout Trinidad. IGDS plans to engage teachers in Tobago in future years. The purpose of the teacher training workshop is to provide teachers with a comprehensive understanding about the intersection between gender, CSA and high risk behaviour that leads to HIV. Specific workshop objectives are to:

- increase participants' knowledge about CSA and HIV in Trinidad and Tobago, effective gender-sensitive CSA prevention strategies, and the outcomes/impact of the *Break the Silence (BTS) Gender and Community Empowerment Model*;
- strengthen participants' understanding of gender and the relationship between CSA and gendered behaviours and attitudes;
- identify the role of teachers in challenging gender stereotypes and promoting gender-sensitive behaviours and attitudes that reduce the risk of CSA and HIV infection;
- share experiences of the BTS Campaign and the campaign's art-based tools used to engage communities throughout Trinidad and Tobago;
- brainstorm on how best to raise students' awareness of gender, CSA and HIV and express their knowledge and emotions through art-based methods; and
- create a school-specific work-plan for art contest implementation in classrooms between March– April 2017 in commemoration of Child Abuse Awareness Month in April.

During the initial teacher training workshop in January 2017, participating teachers provided critical feedback on how IGDS could best support teachers' efforts to sensitize their students about gender, CSA and implications for HIV. Coming out of these discussions, IGDS has compiled this teacher training toolkit to assist teachers in their classroom advocacy efforts related to gender, CSA and HIV.

BTS CAMPAIGN STUDENT ART CONTEST

Along with a teacher training workshop, the annual IGDS outreach initiative will support participating teachers to implement BTS student art contests in their classrooms/schools during April (Child Abuse Awareness Month), aimed at raising student and community awareness about the BTS Campaign and CSA, gender and implications for HIV.

As part of this annual outreach initiative, the IGDS will collaborate with the BTS Support Network ([see page 8](#)) to organize a panel of judges that will select contest winners and finalists. Funding for individual student and school prizes during the 2017 contest were provided by the U.S. Embassy Port of Spain, PEPFAR Small Grants Program. IGDS hopes to collaborate with willing funders/sponsors to support providing similar prizes annually. All contest winners, finalists and participating schools will be recognized at an annual awards ceremony at The UWI, St. Augustine Campus in May/June every year.

BREAKING THE SILENCE: A MULTIDISCIPLINARY APPROACH TO PREVENTING AND RESPONDING TO CHILD SEXUAL ABUSE AND INCEST

The Breaking the Silence (BTS) Project sought to break the silence on the taboo subject of CSA and childhood incest and its implications for HIV throughout Trinidad and Tobago. The long-term goal of the Project was to reduce the prevalence of CSA and childhood incest and its implications for risky sexual behaviour and HIV. *(To achieve this goal, the Project produced new research findings and a best- practice intervention model to prevent and respond to CSA).* The Project was led by Rhoda Reddock, Professor of Gender, Social Change and Development and Deputy Principal of The University of the West Indies (UWI), St. Augustine Campus and Dr. Sandra Reid, Deputy Dean (Clinical) and Senior Lecturer in the Department of Psychiatry, Faculty of Medical Sciences, The UWI, St. Augustine. It was achieved in collaboration with: the Trinidad and Tobago (TT) Coalition Against Domestic Violence (CADV); ChildLine, Arts in Action (AiA), the Department of Creative and Festival Arts, UWI; The Caribbean Health Research Council (CHRC); the Toco Foundation and the Tobago House of Assembly.

The BTS Project was initiated in response to concerns expressed by a wide range of stakeholders throughout Trinidad and Tobago – service providers in governmental and nongovernmental organizations (NGOs); community organizers; women’s movement activists; representatives of various government ministries, national family services and the national medical facility for the treatment of sexually transmitted infections about an increasing prevalence of CSA in the country. Stakeholders acknowledged the taboo nature of the subject, identified regional differences in CSA prevalence, and noted the emergence of incest as a particularly challenging practice in the context of CSA. They also noted inaction, suggesting the tolerance of CSA in certain communities, which demanded that this situation be unearthed and addressed with new lenses. Despite the reported significant prevalence, there were no reports on the understanding, impact or prevention of CSA in the country, and stakeholders expressed feelings of inadequacy when treating with CSA victims. The BTS Project was therefore established to understand the socio-cultural meanings associated with CSA within the sexual cultures in Trinidad and Tobago, and its diverse character in different ethnic, religious, class and geographical contexts.

METHODS AND OUTPUTS OF THE BTS PROJECT

Key methods and outputs of the BTS project included:

- ◆ **National/community stakeholder meetings**
- ◆ **Literature review**
- ◆ **Legislative review of legislation related to children**
- ◆ **National study of service providers**
 - 68 interviews completed;
 - qualitative quantitative data collected;
 - assessed service providers' awareness, knowledge and perceptions of CSA; gender and HIV; and institutional CSA protocols/policies;
- ◆ **National service provider workshop/training**
 - findings from the national study of service providers' circulated;
 - gender sensitization training implemented; and
 - youth-friendly, gender-sensitive institutional protocols created to respond to CSA produced.
- ◆ **Ethnographic case studies implemented in three communities for three months**
- ◆ **Action Research**
 - one-year of 65 community-directed interventions implemented
 - 1,236 participants total
 - workshops focused on education, skills-building, service provision, and gender sensitization
 - ethnographic data collected during interventions, including gender analysis
 - *Gender and Community Empowerment Intervention Model* produced for replication throughout the Caribbean
- ◆ **Media content analysis conducted examining how CSA is presented in the TT media;**
- ◆ **Policy roundtables with relevant stakeholders implemented;**
- ◆ **Regional conference to disseminate knowledge and share data gained throughout the project; and**
- ◆ **National communications awareness campaign created: [The BTS Campaign](#).**

The project received ethical approval from the Ethics Committee of the Faculty of Medical Sciences, The University of the West Indies, St. Augustine. All participants were voluntarily recruited and provided written informed consent. Confidentiality was ensured throughout the study.

THE BREAK THE SILENCE (BTS) CAMPAIGN

The BTS Campaign has three specific objectives:

1. to increase public awareness about CSA, gender, and implications for HIV;
2. to increase public awareness about existing resources for preventing and responding to CSA and HIV; and
3. to influence leaders and service providers to increase their commitment to gender sensitive, evidence and human rights based policies and interventions that prevent and respond to CSA and its implications for HIV.

The campaign symbol—a blue teddy bear with a plaster on its heart—has been highlighted throughout Trinidad and Tobago and is available for use by communities, specifically for the cause. In 2012, UNICEF adopted the BTS Campaign symbol and collaborated with community partners to roll-out the initiative in several countries and territories across the Caribbean Region.

With successful mobilization and outreach, BTS Campaign community champions have emerged throughout Trinidad and Tobago and the region. Between 2010-2017 BTS campaign advocacy and outreach was achieved through the development and distribution of a number of outputs, including posters and information cards that feature information about CSA and implications for HIV, as well as existing national and community resources; branded merchandise such as buttons, magnets, lapel pins and T-shirts, community signs, painted walls and digital billboards. Other notable multi-media outputs of the BTS Campaign have included 1) a documentary that discusses the BTS model; 2) five webisodes (mini 5-minute films designed for the web) that discuss key issues related to gender, CSA and implications for HIV; 3) a radio programme created by community members that raises awareness of the link between gender, CSA and HIV; and 4) a BTS website and social media pages that feature links, articles and tools related to gender, CSA and implications for HIV, as well as ongoing BTS Campaign outreach activities. The BTS campaign has implemented marches/demonstrations in various communities, flash mobs in public places, and advocacy events promoting awareness about the link between gender, CSA and HIV by primary, secondary and tertiary students throughout the country.

BREAK THE SILENCE SUPPORT NETWORKS

Out of the above noted actions two Break the Silence support networks (one in Trinidad and one in Tobago) were created in 2011 where communities have created a groundswell of support and activism to take the BTS campaign to their various publics and to sustain the message through the formation and coordination of BTS events and activities. Members of the networks represent a diverse mix of people who are passionate, committed and driven, and include community workers, NGOs, community-based organizations (CBOs), service providers, sponsors, individuals and activists. It is a collaborative initiative, which brings together members' experience and expertise to the mission. IGDS continues to provide BTS Network members with support and resources when available. The BTS Campaign also continues to collaborate with numerous committed individuals, community groups and organizations across Trinidad and Tobago.

OUTCOMES OF THE BTS PROJECT AND BTS CAMPAIGN

The 2013 BTS Project evaluation report concluded that members of Trinidad and Tobago communities provided a highly positive response to the BTS model, in terms of its delivery of the community needs, as well as the engagement of community actors in the achievement of model outputs. The evaluation also concluded that the BTS Campaign was of major significance leaving a lasting impression on not only project participants, but also the general public. Four months after implementation of the *BTS Gender and Community Empowerment Intervention Model*, the following project outcomes and outputs signified increased knowledge, capacity building and motivation to act, as it relates to CSA:

- ◆ Ethnographic case studies and a study of service provision provided an understanding of community members' perceptions and attitudes toward CSA, and their understanding of its meaning and significance in three communities, which represented the diversity of the Trinidad and Tobago population.
- ◆ One community developed a seven-episode radio programme about CSA as an output from one skills building workshop. The soap opera has been aired on national and community radio stations, and is available for use in classrooms, workshops, trainings, and other relevant spaces.
- ◆ As a result of skills building workshops, community members were motivated to establish and sustain a parent support group in one project community, two support groups for CSA survivors in another community, and a homework centre run by a teacher to provide parents and youth relevant information on CSA in a third community.
- ◆ School principals and teachers who participated in the BTS project workshops used knowledge gained to host six youth-friendly CSA educational workshops for approximately 400 primary and secondary school children.
- ◆ A key output of the BTS Project was the creation of an ethnic and gender-neutral symbol people could associate with CSA. As a direct result thousands of community members from geographically separate communities in Trinidad and Tobago held marches/walks highlighting the blue teddy BTS child sexual abuse symbol to raise awareness of CSA and to call for the government to improve programmes and policies. BTS Support Networks were also established, which spawned further marches and awareness raising events.
- ◆ The BTS Campaign generated interest from government ministries throughout Trinidad and Tobago to integrate components of the *BTS Community and Gender Empowerment Intervention Model* into relevant programming related to child protection.
 - In 2011 the Ministry of National Security, Citizens Security Program provided support to continue the production of BTS Campaign tools to raise greater awareness of CSA in 24 communities throughout the country;
 - In 2012, the Ministry of Gender and Youth and Child Development provided support for IGDS staff to re-enter communities to ensure CSA survivor and parenting support group sustainability;
 - In 2013/2014 the Ministry of Gender and Youth and Child Development hosted a series of training workshops with NGO and governmental organizations throughout the country aimed at highlighting the BTS model and campaign and improving child protection services and policies;
 - Continued interest from different child protection agencies in the country to adopt IGDS policy

and programme recommendations that resulted from the project findings;

- In 2012, UNICEF adopted the BTS teddy symbol and collaborated with IGDS to launch the BTS Campaign at the *Sub-Regional Meeting for Follow-up to the UN Study on Violence Against Children in the Caribbean* in Kingston, Jamaica, and at the *Sub-Regional Conference on Child Sexual Abuse to Advance the UNiTE Campaign* in Barbados; and
- In 2013, UNICEF collaborated with IGDS to create a toolkit to guide interested individuals and agencies in implementing components of the BTS model in their various communities. Two-day in-depth toolkit training workshops were held with relevant stakeholders in Belize, Guyana and Suriname.

BTS PROJECT: QUANTITATIVE FINDINGS

Of 1,236 participants in BTS project activities, all reported a clearer understanding of CSA and had increased awareness of available community resources to prevent and respond to CSA. Seventy four percent of 221 participants (60% female) in a random sample of 10 education and skills building workshops had an increase in knowledge of CSA; and 82% of 317 participating teachers reported increased knowledge of accurate definitions of CSA, and presenting signs and ability to identify CSA. Eighty-two percent of teachers also reported an improved ability to build assertiveness in young persons' sexual decision making and to talk about sexual issues in a youth-friendly manner. Among 303 youth attending primary and secondary schools, 89% had greater knowledge/understanding of CSA and the link between CSA, gender and HIV.

BTS PROJECT: QUALITATIVE FINDINGS

Analysis of focus group findings and data from structured interviews identified the main theme of sustained gain in knowledge about CSA as a direct result of the BTS model community activities in Trinidad and Tobago. The following comments from the communities where the BTS model interventions were implemented support this:

- ♦ **Community 1:** *"I can say that I learnt a lot from this project about child abuse. I always knew it was wrong but this project helped me to really understand what qualifies as abuse and that it is not just men who abuse girls but women also abuse boys. It goes both ways."* [49-year old Afro-Trinidadian female]
- ♦ **Community 2:** *"This project definitely increased my knowledge of child sexual abuse and all types of abuse of children for that matter. I did not have these details before the project. I am happy I participated. The project should continue 'cuz people will forget."* [39-year old Indo-Trinidadian female]
- ♦ **Community 3:** *"For me personally, the project helped me to understand a lot of things about child abuse that I did not know before. Not only that, I understand now, what I should do if a child in my village tells me he or she is abused"* [42-year old Afro-Trinidadian female]

INTRODUCTION

CSA is prevalent in the Caribbean. In a survey of 15,695 students 10 to 18 years, Halcon et al. (2003) found that 34.1% of children in nine Caribbean countries were sexually active. Of these 92.3% had their first sexual intercourse before the age of 16 years; 42.8% before the age of 10 years, and by age 16-18 years, 32.5% of males and 9.9% of females had more than 5 sexual partners. Most alarming however, is that 47.6% of females and 31.9% of males described their first intercourse as forced or somewhat coerced, and attributed blame to family members or persons known to their family.

CSA is defined as any activity between a child before the age of legal consent (18 in Trinidad and Tobago) and an older, more powerful adult¹ or substantially older child, in which the child is used for a sexual or erotic purpose.²

Incest is defined as any such interaction with a close relative or anyone perceived as a close relative, which is committed to secrecy.

In the English-speaking Caribbean, incest is more popularly used to describe relationships between older relatives, including step relatives and children under the legal age of sexual consent. (Barrow, 1999).

The United Nations Convention on the Rights of the Child, and the Trinidad and Tobago Children Act 2012 defines a: **Child as a person under the age of eighteen years.**

CSA is a traumatic experience, with significant potential for psychopathology, dysfunctional relationships and increased HIV risk. This has been documented in Trinidad and Tobago (Reid, 2006; Reid, Nielsen Reddock, 2010) and other Caribbean countries (Lowe, Gibson Christie, 2008). The social context for rape and other forms of sexual abuse against young women and girls in the Caribbean involves several interconnecting factors such as gender inequality, social norms based on patriarchal values, domestic violence, the economic dependence of many women on men, and a limited appreciation of children's rights. Though less prevalent, boys are not immune from CSA (Jones Trotman-Jemmott, 2011).

The Caribbean has very few studies evaluating child abuse prevention programmes. Jamaica, Barbados and Trinidad and Tobago have a network of parenting education initiatives, which include components on preventing child abuse and neglect. These programmes are promising, but their coverage is generally inadequate and only a small percentage of persons in need access them (UNICEF, 2006). Most official data on CSA in the Caribbean come from government agencies and NGOs, which provide the necessary

¹ Adults or older children in power could include persons who are older than the child, in a higher status or class in society than the child, persons who have more financial resources than the child, persons who are more educated and have more networks and access to resources than the child, etc.

² This definition was adapted from the commonly used definition by Johnson (2001) to emphasize the power dynamics between victim and perpetrator.

preventive, supportive and remedial social services to the children and their families. Less attention has been given to trend analysis of these rich data sources in relation to evidence-informed policy development and strategic planning, which would facilitate the protection of children. Consequently, most studies concentrate on looking at risk factors for CSA rather than the root causes (Barclay, 2011). Shifting from the risk factor focus, Jones and Trotman-Jemmott (2009) examined CSA in six eastern Caribbean countries suggesting a prevalence rate of 20-45% for the Sub-Region. To combat this growing social issue, the *Bridgetown Declaration and Agenda for Action to Combat Child Sexual Abuse in the Caribbean* was adopted in Barbados on the 21st of November 2012, which reaffirmed the commitment of government representatives and civil society organizations to end CSA in the Region. The documents were developed in accordance with country agencies and governments to review progress made since the *United Nations Study on Violence Against Children 2006* and to identify lessons learnt and key challenges, thereby committing themselves to implementing the goals and targets contained in the document.

CHILD SEXUAL ABUSE IN TRINIDAD AND TOBAGO

While under-reporting is rampant, CSA and childhood incest are significant problems in Trinidad and Tobago. During the first nine months of operation between May 2015 - February 2016, the Children's Authority of Trinidad and Tobago received 915 reports of child sexual abuse, 86.8% of which were female sexual abuse cases (Trinidad and Tobago Children's Authority, 2016). This statistic was further supported by the reports of community members and front line service providers who participated in the multi-method BTS action research project from 2008 –2012. This study, which investigated attitudes and perceptions surrounding CSA and childhood incest of a wide range of stakeholders, revealed the socio-cultural, economic and gender ideologies in communities that maintained the practice of CSA and childhood incest, and protected the perpetrators of these acts.

GENDER AND CHILD SEXUAL ABUSE

Gender is important when discussing CSA because it shapes constructions of masculinity and femininity and the ways in which human beings understand and express their sexuality. Gender ideologies are characterized by unequal power relations which have implications for vulnerability to violence, including CSA and childhood incest; economic dependency; silencing; bodily harm; public shame; fear, and lack of access to help and support. Despite the link between gender and CSA, few services, systems or direct service providers in Trinidad and Tobago consider gender in their policies and practices that aim to prevent and/or respond to CSA and incest. In Trinidad and Tobago as elsewhere, characteristics stereotypically associated with masculinity and exercised by men, include power. Men are thought as naturally "dominant" and expected to be sexual predators. The onus is on women and girls to make themselves unavailable to men and not for men to refuse them. In homes, mothers are made unequally responsible for sexual morality; and for young girls, managing their sexuality becomes a double-edged sword. On the one hand, it is shameful for girls to be sexually active, while on the other there is a strong social imperative to be highly sexualized in appearance and behaviour. Society also teaches girls to more easily accept domination and discipline by authority figures, parents and school teachers. In this context, women and girls become more vulnerable, more easily subordinated and silenced, and less likely to feel

they have the right to resist. Thus, many do not speak up about abuse, incest, rape or sexual assault. In fact, girls are often blamed for having been raped or exploited, are stigmatized as promiscuous and are ostracized if they become infected with HIV. In some instances, marriage was used as one response to CSA due to the young age marriageable allowed in four Marriage Acts of Trinidad and Tobago.³ The Miscellaneous Provisions (Marriage) Bill 2016, which was passed in the Trinidad and Tobago Senate on 18, January 2017, establishes 18 as the legal age that an individual can enter marriage in Trinidad and Tobago. At the time of this toolkit publication the Bill was being debated in the House of Representatives. Reports from social workers in the country state that police have in the past encouraged CSA victims to marry their perpetrators. Further gendered expectations of females to manage a household even when men are physically and emotionally absent lead to increased risk of CSA and childhood incest as children of working or migrated mothers remain unsupervised, and step-parents, partners and relatives claim rights to sexual relations with children. Mothers dependent on their partners are disempowered from speaking out about sexual abuse and incest. They also lack the power for negotiation of condom use and are themselves at increased HIV risk, as unprotected sex is often demanded by the male as an expression of fidelity within a relationship. Similar risks occur when sexual relationships with older men are accepted by school-aged females who see these relationships as a symbol of maturity and an opportunity for sexual-economic exchange without fear of being exposed (IGDS, 2011).

Boys on the other hand, socialized to perceive sexual relations with older women as a symbol of their manhood, are constrained to report sexual abuse or incest for fear of losing their masculine status and sense of belonging, particularly in the eyes of other males. Even worse is the societal pressure that silences reports of sexual abuse of young males by adult men, an experience that is not only inconsistent with the gendered societal norm of male sexual dominance, but creates unjustified fears of homosexuality in a homophobic society. Help seeking is further deterred by the gendered belief that strong males remain silent. Homophobia also leads to hyper-heterosexuality as a way of proving manhood. Young men may feel pressured into the societal expectation of hyper-heterosexuality, which may lead to forced sexual relationships with female friends and alcohol/drug use to facilitate performance. These in turn increase the vulnerability to HIV infection (IGDS, 2011)

Despite all these gender ideologies that make youth in Trinidad and Tobago more vulnerable to CSA, childhood incest and HIV, only 28% of agencies that participated in the 2008 IGDS BTS study of CSA and incest service provision in Trinidad and Tobago offered any kind of gender awareness training for their staff. These findings resulted in the following programme and policy recommendations from IGDS related to gender and CSA in the country:

- ◆ Mainstream gender-informed policy and programming at all levels of the education system – early childhood, primary, secondary and university- in age-appropriate ways. To facilitate this, the topics of gender and education must be part of the curriculum of teacher education programmes at the

3 1. **The Marriage Act Chap.45:01:** Under this Act, males can contract a marriage at age 14 while females can enter into marriage at age 12 (which are the minimum ages for marriage at common law). This applies to Christian and to civil marriages.

2. **The Muslim Marriage and Divorce Act, Chap. 45:02:** The age at which a person, being of the Muslim faith, is capable of contracting a marriage under this Act is 16 years in the case of males and 12 in the case of females.

3. **The Hindu Marriage Act, Chap.:45:03:** The age at which a person, being of the Hindu faith, is capable of contracting a marriage under this Act is 18 years in the case of males and 14 years in the case of females.

4. **The Orisha Marriage Act Chap.45:04:** The age at which a person, being of the Orisha faith, is capable of contracting a marriage is 18 years in the case of males and 16 years in the case of females.

University of the West Indies and The University of Trinidad and Tobago. Curricula should include information on children's sexual rights and HIV testing and prevention, and should empower children and youth to challenge gender stereotypes and not to be afraid to do so. Additional recommendations for inclusion in the curriculum include education on the constructions of masculinity and femininity and the concept of 'gender'; the ways in which gender ideologies and cultural understandings and underpinnings surrounding sex and sexuality shape social and sexual behaviour; the role of alcohol and other drugs in predisposing to risky sexual behaviour; the recognition and reporting of CSA and childhood incest; and the role of CSA as a risk factor for HIV.

- ◆ The Division of Gender Affairs of the Ministry of Gender, Youth and Child Development⁴ and the Division of Health and Social Services of the Tobago House of Assembly must be more visible and proactive in working with other ministries and divisions in addressing issues of CSA and HIV and the establishment of gender-sensitive education programmes at all levels of society.
- ◆ Gender analysis must be part of the training of all social workers, psychologists, medical and nursing students and other caring professions.
- ◆ Government should expand parenting and life skills programmes in the country to focus on greater gender sensitization and education and how related psychological and physiological factors shape their child's development. Part of this initiative should include consideration and adoption of curricula that was used during parenting workshops implemented for the action research project entitled, *Breaking the Silence: A Multi-Sectoral Approach to Preventing and Addressing Child Sexual Abuse in Trinidad and Tobago* (IGDS, 2011).

CONSEQUENCES OF CHILD SEXUAL ABUSE

CSA is a worldwide problem with serious implications for the educational attainment, health and well-being of all children. CSA has short- and long-term consequences on educational performance and health outcomes. It has resulted in school children being unable to concentrate, attaining lower grades, losing interest in school, transferring to different schools and even leaving formal schooling altogether. Reproductive health manifestations include risk-taking behaviours, unintended pregnancy, abortion and sexually transmitted infections (STIs), including HIV. Equally harmful are the psychological outcomes of CSA, which range from symptoms of anxiety and depression to suicide attempts (USAID, 2009)

⁴ Starting in October 2015, this Ministry was changed to the Division of Gender and Child Affairs in the Office of the Prime Minister.

CHILD SEXUAL ABUSE AND HIV IN TRINIDAD AND TOBAGO

The relationship between CSA and the risk of HIV infection is widely acknowledged. For example, unequal power dynamics in relationships between older men and younger women can lead to sexual coercion and violence, making girls more vulnerable to HIV infection. Addressing gender norms is now recognized as an important strategy to prevent the spread of HIV (USAID, 2009).

One of the main factors put forward as contributing to the spread of HIV infection among women and girls in Trinidad and Tobago is early onset of sexual activity, which often is associated with gender socialization practices and crimes of child sexual abuse, predominantly against the girl child. Service providers and community members who participated in the BTS project between 2008-2012 reported the high prevalence of CSA and childhood incest in Trinidad and Tobago (This was interpreted in the context of the epidemiology of HIV among children in Trinidad and Tobago, where the majority of paediatric infections occur through mother-child transmission, a small proportion through other modes of transmission and almost a quarter of infections were due to unknown causes. Findings suggested that child sexual abuse and childhood incest may be the source of HIV infection in some of these unknown cases and is therefore a significant risk factor for HIV infection among children, a position that was supported by frontline service providers and community members who participated in the BTS project (IGDS, 2012).

The consequences of CSA and childhood incest in Trinidad and Tobago have not been fully explored. Stakeholders who participated in the IGDS study reported high prevalence of not just CSA and childhood incest, but also the associated behavioural consequences that put adult survivors at greater risk for HIV infection, such as alcohol abuse, psychiatric illness and commercial sex work or transactional sex. There were fewer reports of a perceived association between CSA and HIV infection. In 2010, 69% of service providers who provided direct service to children at risk of CSA and incest regarded CSA/incest as a potential HIV risk factor (IGDS, 2012).

Investigation of the policies and procedures of agencies providing care and treatment for CSA and childhood incest victims, showed that few agencies recommended HIV testing for victims of CSA and incest as a policy. Recommendations for HIV testing were often left to the discretion of the frontline staff, who in spite of having received HIV training, did not always make the recommendation. Further, not all agencies in Trinidad and Tobago that provide HIV treatment and prevention assessed children for CSA and incest, and there were no specialized services for children, and families of children who were sexually abused and HIV positive. This stark gap in the service provision and referral system in the country has clear implications for HIV prevalence in the nation, especially among young children (IGDS, 2012).

A school culture that encourages stereotypical masculine and feminine behaviour reinforces the norms that make girls and boys vulnerable to CSA and HIV infection. Teachers can support HIV prevention messages by being good role models themselves. Integrating the activities in this toolkit into existing broader strategies or complementary programmes on HIV prevention can contribute to creating an enabling environment in which young people are better protected against the virus (USAID, 2009). As a result of the BTS project findings, IGDS established key programme and policy recommendations for schools and other institutions in Trinidad and Tobago that included:

- Curricula for health and HIV education for all children, parents, teachers, and other stakeholders involved in the education of children, must include awareness and prevention of CSA and incest, CSA and incest as a risk factor for HIV infection, and the procedure for the management of CSA and incest.
- Children must be made more aware of their rights as outlined in the Convention of the Rights of a Child.
- Social marketing campaigns such as the Break the Silence Campaign developed by IGDS, UWI, St. Augustine campus must be supported and extended throughout the country.
- National HIV programming should expand to contradict socio-cultural and gender ideologies that promote acceptance of CSA and incest and bring into focus the relationship between CSA, incest and HIV infection (IGDS, 2012).

ROLE OF SCHOOLS IN CSA PREVENTION AND RESPONSE IN TRINIDAD AND TOBAGO

Young people in Trinidad and Tobago are negotiating an increasingly complex and confusing social, technological, sexual and gendered space where a globalized media presents powerful hyper-sexual visual and musical messaging. This occurs in a context where education about gender, sexuality and sexual rights is limited; and messages about sex and sexuality are received, understood and addressed in challenging ways. The response of the education system in the country to issues that negatively impact individuals' fundamental social and sexual experiences such as rape, CSA and incest is generally inadequate and specifically fails to address the relationship between sexual violence and HIV risk (IGDS, 2011). Appropriate education is a powerful primary prevention tool, which can reduce the risk of a range of psychological and physiological impacts, stigma, discrimination, disempowered sexual decision-making all of which may impair the ability of young persons to reach their full academic potential (USAID, 2009).

Formal education of students about sex and sexuality is important to provide young people with an understanding of their bodies and sexualities, and empower them to make informed decisions about their social and sexual lives. They should be informed as to how to deal with sexual abuse and incest. Teachers also need to be educated. Many young persons obtain their sex education from similarly uninformed peers, and the mass media including television, cinema and the Internet (Reddock, 2006). One 2004 pilot study conducted with students at The University of West Indies, St. Augustine campus who were aged 18-25 found that no one spoke to males about sex and instead they learned from their peers, watching pornography, and through viewing print and electronic media (Douglas, Reid and Reddock, 2004). Teachers should be equipped to fill the gap when children are unable to speak to parents about sex and sexuality. They should be skilled in the early intervention for child sexual abuse and incest, since they are often the ones to whom child victims of sexual violence turn (USAID, 2009).

Teachers and principals in Trinidad and Tobago, however, acknowledge that despite the normality of early sexual activity among youth in schools and the prevalence of youth disclosing CSA and incest in the school setting, there is no specific or standardized training available on how to conduct sexuality education for children and young people, or how to treat with disclosures of CSA and incest. Many teachers and principals report a lack of knowledge and awareness of the signs and symptoms of CSA and incest, and the legal statutes surrounding related issues. Specifically, teachers are either unaware of an official school policy or protocol on what they should do if children disclose child sexual abuse or incest, or if they are aware, they were never trained to use it or find the policy and/or protocol grossly limited (IGDS, 2011).

Children in Trinidad and Tobago have the ability to access school guidance counsellors to report incidents of CSA or incest without an accompanying adult; however, many schools do not have guidance counsellors on staff and/or they are only available for limited times and days during a week or month. Most teachers report that if a child discloses to them, they must report the incident immediately to the principal, who in turn is required to call the child's parents, and the police. This protocol deters many children from making official reports, as they do not want their parents or caregivers to know they are reporting them, and they do not have trust in the police. Further, the very persons the child originally

trusted to disclose the information to (teachers) are not allowed to accompany the child when they are reporting to the police. Another deterrent in children making official reports in schools is that most institutions do not require teachers or principals to sign confidentiality agreements, and anonymity is generally not assured. Teachers themselves report that they fail to report many situations where they suspect CSA or incest in fear of their own safety and security from the perpetrator (IGDS, 2011). These findings resulted in IGDS making several key education recommendations related to CSA prevention and response in Trinidad and Tobago including:

- Sexuality education and ways of teaching about gender and sexualities, including the recognition and management of CSA and incest, and the underlying legal framework, must be compulsory components of all teacher education programmes at The University of the West Indies and the University of Trinidad and Tobago. For teachers, principals and guidance officers who have already been trained, compulsory follow-up workshops are proposed.
- Introduce gender-sensitive sexuality education into schools, possibly through the Health and Family Life Education (HFLE) or Life Skills curriculum for primary and secondary school children, to inform on children's sexual rights; empower children and youth to challenge gender stereotypes, promote sexual efficacy and HIV testing, and educate on HIV risk factors including child sexual abuse/incest, and alcohol/drug use. Part of this initiative should include consideration and adoption of curricula that was used during education workshops implemented in select primary and secondary schools in Trinidad and Tobago for the action research project entitled, *Breaking the Silence: A Multi-Sectoral Approach to Preventing and Addressing Child Sexual Abuse in Trinidad and Tobago*.
- Teachers should be formally trained to include media literacy in the curriculum for students at all educational levels. Students highly influenced by media messaging and imagery need to learn to critically evaluate the sexual messages and stereotypes with which they are bombarded.
- The Ministry of Education should revisit the national school policy on CSA and incest with an aim to revising and adopting more detailed, uniform, gender-sensitive and child-friendly protocols for reporting and interviewing. Part of this initiative should include consideration and adoption of protocols created by key Trinidad and Tobago stakeholders at a 2009 workshop at UWI, St. Augustine and the Division of Education, Youth and Sport in Tobago related to CSA and incest, as well as recommendations included in the 2010 Study of Service Provision spearheaded by IGDS, UWI, St. Augustine. Teacher training and monitoring sessions are recommended during and after implementation of new policies/protocols (IGDS, 2011).



Break the Silence:
end child sexual abuse

TOOLKIT

PURPOSE OF TOOLKIT

This toolkit was designed to provide support to teachers seeking to enhance students' knowledge and awareness of gender, and how gender affects CSA and HIV. The toolkit also aims to support teachers' efforts to prevent and respond to CSA and HIV. The activities in this toolkit also provide students an opportunity to participate in activities that will assist them in new knowledge and skills to use in school, and in their outside lives.

This toolkit focuses on students in upper primary and secondary school. Education at this age can help children protect themselves from adults who may try to take advantage of the physical and emotional changes these young people are experiencing. At this still-formative time, educational programmes can help develop healthy relationships between boys and girls to help them avoid the high-risk sexual behaviours that gender stereotypes encourage as they get older. Many children in this age group are least likely to be infected with HIV, and exposure to prevention programmes before becoming sexually active can help them maintain their HIV-negative status throughout their lives.

TOOLKIT LEARNING OBJECTIVES

The overall goal of the toolkit is to help students become empowered to prevent and respond to CSA and implications for HIV, and increase their self-efficacy through enhanced knowledge, attitudes and skills regarding healthy relationships, CSA and HIV prevention.

By the end of activities in this toolkit, students will:

- (1) **Be empowered to prevent and respond to CSA and other forms of gender violence;**
- (2) **Strengthen their resiliency if they are abused;**
- (3) **Develop healthy relationships with peers and adults;**
- (4) **Understand the linkages between CSA, gender and HIV/AIDS.**

MATERIALS NEEDED FOR TOOLKIT TRAINING SESSIONS

- Paper for each student to use during training;
- Writing utensils and markers; and
- Large pieces of flipchart paper or chalkboard for teachers/facilitators to record information.

TIME NEEDED TO IMPLEMENT TOOLKIT TRAINING ACTIVITIES

Combined, activities in this toolkit equals **five hours** of training time. Each activity ranges from 30 minutes to 1 hour.

Teachers are encouraged to select a total of 3 activities (one from each of the three sessions in this toolkit) to implement so that students gain a comprehensive understanding of the relationship between gender, CSA and HIV.

However, if time is constrained, implementing one activity from just one session for 1 hour will provide students with a foundation of knowledge that they can later build on to effectively prevent and respond to CSA and implications for HIV in their homes and communities.

NOTE: Since the toolkit follows a logical sequence, with each session building upon the knowledge and skills gained in previous ones, it is most effective if teachers deliver one activity from each session in its entirety in sequential order. The activities can be done during class time or after school in a community setting.

STRUCTURE OF THE TOOLKIT

The structure of this toolkit was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

This toolkit includes three sessions. Resources are listed throughout the manual in the [How Can You Learn More?](#) section at the beginning of each session and in the **Bibliography** at the end. The three sessions include:

SESSION 1: GENDER

SESSION 2: CHILD SEXUAL ABUSE AND GENDER






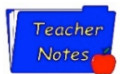




SESSION 3: CHILD SEXUAL ABUSE, GENDER AND HIV

Each session begins with an introduction that includes:

- a brief explanation of the session content;
- a brief description of each activity within the session;
- a list of resources, including organizations, books, websites and other documents to learn more about the content in the session.

OUTLINE OF SESSIONS

All three sessions consist of one to three activities to choose from. All sessions are outlined as follows:

	TIME	The estimated time it will take to facilitate each activity.
	LEARNING OBJECTIVES	Specific skills and abilities the students will gain from the session.
	METHODS USED	Participatory-education methods used throughout the session
	MATERIALS	Materials needed to complete the session.
	FACILITATOR PREPARATION	Any preparation needed prior to the session.
	TEACHER / FACILITATOR NOTES	Special notes for the teacher/facilitator on the session
	ACTIVITIES	Step-by-step instructions to facilitate activities in the session.
	DISCUSSION QUESTIONS	Step-by-step instructions for group discussion about the activity.
	SESSION WRAP-UP	Points to review with students at the end of the session, including the "take-away" messages.
	SESSION HANDOUTS	Information and handouts needed to facilitate the session and distribute to students.

TEACHER / FACILITATOR INSTRUCTIONS AND TIPS

The teacher/facilitator should have some prior training in participatory teaching methods, such as brainstorming, role-plays, and open-ended questions, to use this toolkit effectively. Familiarity with the concepts of gender, and experience working with young people are required. The teacher/facilitator should also be able to discuss sexual health issues in public, with an unembarrassed, but sensitive, approach. An ability to relate well to young people in an understanding, nonjudgmental manner is also necessary. Good facilitators of these sessions should create a safe space and learning experience in which all students teach each other through sharing, discussion and feedback. Key points to remember when creating this type of environment include:

- see the students as experts with information and skills to share, rather than seeing yourself as the only expert in the room;
- think of everyone as a student and teacher, all learning from each other, and think of yourself as guiding the process rather than thinking of the students as needing knowledge from you;
- most people learn by doing, experiencing, practicing and feeling, rather than memorizing, repeating and recording information;
- there are many possible answers to a situation or question rather than only one right answer;
- it is more important for all to participate and be involved in the learning process rather than thinking control is better (USAID, 2009);
- develop a response plan in the event a student discloses abuse to you during or after sessions (see *Actions that Comfort Students* above for tips).

For more information about **how to create a safe space in a classroom**, you can refer to *Teaching Tolerance: Classroom Culture*, accessed via <http://www.tolerance.org/publication/classroom-culture>

For more information about **participatory teaching methods**, you can refer to *Institute of Development Studies: Participatory Methods* accessed via <http://www.participatorymethods.org/task/facilitate>

WARM-UP/ICEBREAKERS

Warm-up exercises or icebreakers are games to help participants relax, have fun and (re)connect with each other. If time allows at the beginning of each session, lead students in a warm-up. Games can also be used at the end of the day or between sessions and activities to lighten the mood and give participants an opportunity to relax after a difficult or intense session/day. For sample games and icebreakers, see *100 Ways to Energise Groups: Games to Use in Workshops, Meetings and the Community* in the **Bibliography** (USAID, 2009).

ADAPTING TOOLKIT SESSIONS TO BE COMMUNITY SPECIFIC

Teachers/facilitators are encouraged to provide students with the most up-to-date and community-specific organization/resources in Trinidad and Tobago for students to use in the event they experience CSA or want to discuss it further with someone. (BTS information handouts are available at IGDS, St. Augustine). Teachers/facilitators should also prepare a list of telephone numbers, names and organizations close to their communities for students to use if they experience CSA such as guidance officers, counselors, nurses, or doctors **with experience in responding to CSA and gender violence**, or referral to a psychiatrist or psychologist. (USAID, 2009).

SESSION IMPLEMENTATION

This section contains tips and suggestions that can contribute to a smooth and successful implementation of the sessions and activities in this toolkit.

TALKING TO YOUNG PEOPLE ABOUT SENSITIVE / TABOO TOPICS

- ◆ **Accept slang terms.** Even if a question includes slang terminology or incorrect terms, accept the question and then restate or paraphrase using more accurate terminology.
- ◆ **If a question arises during the session and you are not sure** if it is true or false, recognize that the question is valid, promise to find out more information on that topic, and report back to the students with a response by the next meeting.
- ◆ **Keep it simple.** Do not try to impress or intimidate the students. Explain in terms that they will understand.
- ◆ **The real question.** Sometimes questions call for opinions rather than answers. Instead of making statements that are hard to verify or perhaps are untrue, try to answer the underlying question with a fact. For example, if someone asks if sex always feels good, you may say that it is normal to be curious about sex and issues surrounding sex.
- ◆ **Stress that sexual relations are:**
 - *Between two people who are mature and ready* to deal with the implications (young people may be curious about sex, but they are not ready to act on these feelings).
 - *Consensual.* Both people should agree and freely choose to participate. There should be no force.
- ◆ **Point out that even if a person under the age of 18 consents to sex with someone 18 years or older, that it is against the law in Trinidad and Tobago.** It is also against the law in Trinidad and Tobago for a person 18 years or older to engage in any type of sexual touching with someone under the age of 16. If they do, it is considered child sexual abuse and it is a crime (Trinidad and Tobago Children's Authority, 2012).

Note that there are certain instances where sexual activity between children/youth under 21, who are between 2-3 years close in age to each other, may not attract a criminal charge.⁶ This is important to convey so children don't become more close-lipped or fearful of telling an adult about sexual activity. However, in instances where a person becomes aware that children are engaging in sexual activity with each other, there is still a mandatory duty to report on reasonable grounds for believing that a sexual offence has been committed (Children's Authority of Trinidad and Tobago, 2012).

- ◆ **Be nonjudgmental.** Keep your opinions and values to yourself. Do not imply guilt or shame when answering questions, no matter what the question is.

⁶ For details about legislation related to child sexual abuse in Trinidad and Tobago and teachers' rights and responsibilities to report please refer to the [Children's Authority of Trinidad and Tobago's A Teacher's Guide to the New Child Protection Legislation accessed via www.ttchildren.org](http://www.ttchildren.org)

- ◆ **Do not answer personal questions.** It is not appropriate to discuss your own sexual experiences with students.
- ◆ **Be comfortable.** If you are uncomfortable or express unease through nonverbal communication, students can sense your discomfort. If this subject is challenging for you to discuss, be honest. Tell students that sometimes the topic of sex and sexuality can be difficult to openly discuss, but it is important that they receive information that is factual. Answer “what if” questions. Students are curious about the opposite sex and the changes that are going on in their bodies. Therefore, many will have “what if” questions. For example, “What happens if I feel aroused when an adult touches me?” These questions are valid, and it is important to respond to them (USAID, 2009).
- ◆ **Make it known that everyone is allowed to speak, but that they would not be forced to do so.**

SUPPORTING PARTICIPANTS WHO HAVE EXPERIENCED CSA

Some students who participate in the session activities will have a very personal connection to CSA. Some may have observed or experienced CSA, but have never spoken about it with anyone or have accepted it as normal. Others might have experienced sexual harassment or violence in some form, but never identified it as CSA. Since CSA is so prevalent in many societies, participating in these sessions may bring up deep-rooted pain and suffering. Below are strategies to comfort students. In addition, have a mechanism in place to support and assist students in their healing process, such as access to guidance officers, social workers, nurses, or doctors **with experience in responding to CSA and gender violence**, or referral to a psychiatrist or psychologist. (USAID, 2009).

CHILDLINE: DIAL 131 OR 800-4321

Childline is an anonymous helpline in Trinidad and Tobago dedicated to children, adolescents and young adults. It aims to ensure that children in Trinidad Tobago live in an environment free from physical, emotional, sexual and psychological violence. It aims to provide access to quality and confidential psychosocial counseling, life skills information, including sexual reproductive health and HIV, as well as referral to specialized services. ChildLine provides outreach services to primary and secondary schools, youth groups, PTAs and other institutions, which are offered free of charge, to sensitize the public, especially the target group of children and young people, to the availability of the helpline. Outreach officers conduct workshops with children, young people, teachers and parents to empower them with the knowledge necessary to cope, overcome and avoid certain difficult situations, as well as get help. Topics covered in workshops include self-esteem, conflict and anger management, respect, bullying, exam stress, motivation, HIV/AIDS, parenting styles, rights of the child and child abuse, among many other topics.

ACTIONS THAT COMFORT STUDENTS

1. **Be available immediately** to provide the student with assistance and support.
2. **Bring the student to a safe place outside the room**, away from his or her peers. Make sure the place is safe and is not seen as a threat to the student.
3. **Focus on the student.** Ask what the student would like to do at that moment (e.g., go home, not participate in the session but remain in the room, not participate in the session and sit outside or in another location within the room, talk to a counselor or supportive person immediately or the next day, etc.). Help the student follow through with whatever he or she decides.
4. **Be nonjudgmental.** Provide support and information to the student regardless of personal feelings, beliefs or attitudes.
5. **Do not overwhelm the student** with information, questions or advice. Do not assume the student is ready for all the resources or help.
6. **Listen to what the student is saying.** Provide the student with understanding, support and assistance. Do not attempt to tell the student how he or she feels. Assure the student that it is normal to feel upset.
7. **Be flexible to meet the student's needs.** Be prepared to call in a backup facilitator, call for an extra-long break or call on a co-facilitator should a student need immediate emotional support.
8. **Always follow up with the student.** Following up shows the student you care and are dedicated to his or her recovery and well-being.
9. **Always have a counselor or qualified person available** to help students talk privately about their feelings.

Reference: Adapted from Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

ACTIONS THAT DO NOT COMFORT STUDENTS

1. **Do not interrupt, ridicule or shame the student**
2. **Do not criticize or blame the student.**
3. **Do not interrogate the student.**
4. **Do not judge the student.**
5. **Do not ignore the student.**
6. **Do not minimize or ignore the student's feelings.**
7. **Do not put the student in a threatening setting.**
8. **Do not try to distract or divert the student's attention from his or her feelings.**
9. **Do not tell the student how to feel.**
10. **Do not discuss the student's situation with others**

Reference: Adapted from Doorways I: Student Manual on School-Related Gender- Based Violence Prevention and Response accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

TAKING CARE OF YOUR OWN EMOTIONAL HEALTH

Listening to young people who are in distress or have experienced CSA can take an emotional toll on anyone. It is important that you take care of your own emotional/psychological health so you can best serve young people (USAID, 2009).

Here are a few ideas for taking care of yourself:

- Keep an attitude of hope.
- Make sure an opportunity exists for you to get support, either from colleagues or other facilitators.
- Develop and use a response network for support and assistance.
- Seek support from a friend, family member or professional counselor when needed.
- Engage in self-assessment and, when feeling overwhelmed, talk to someone or get help (USAID, 2009).

COLLECTING FEEDBACK

Self-reflection and feedback from others are useful to help improve your facilitation skills and the training overall. You should conduct an evaluation after each session. There are several different ways to find out how the training went (USAID, 2009). Here are some suggestions:

SELF-ASSESSMENT: QUESTIONS TO ASK YOURSELF

- What went well?
- What was difficult?
- Did I achieve the objectives of the session?
- How will I do it differently next time?
- What did I learn from today's session that I can apply in the upcoming sessions? (USAID, 2009).

OBSERVATION

If you are working with another person, take turns observing how the group is working together and responding to the activities and discussions. If you are facilitating the sessions alone, you can still observe how the group is reacting and working together. Be sure to observe the following:

- Are all the students attending the training?
- Who is actively participating? Are there any students who are remaining quiet?
- Who talks the most and who talks the least? Are students listening to each other?
- Are students working together or splitting up into smaller groups?
- What is the mood of the group? Do students seem bored or interested in the activities?
- Does anyone seem upset or embarrassed by the activities?
- How do students respond when others voice their opinions?
- Are students giving feedback to each other and the teacher/facilitator during the sessions? (USAID, 2009).

FEEDBACK FROM PARTICIPANTS

Invite participants to share their views on the sessions. You could go around the room and ask everyone to say something, or you could invite participants to volunteer to share one thing they liked about the day's session and one suggestion for improvement.

Here are some questions for gathering feedback:

- What is the most important thing you learned in this session?
- What did you enjoy most about this session?
- What did you find difficult about this session?
- What suggestions do you have for improving the next session?
- Are there any questions or issues we did not cover that you would like to discuss?

You can also ask participants to respond with their body language. For example, to ask participants how interesting they found a session, tell them to put their hand up in the air and wave it if they found the session interesting. If they found it neither interesting nor boring, they could put their hands in their laps. If they found it boring, they could put their thumb down. If they found it very boring, they could put their thumb down and wiggle it (USAID, 2009).

You can also use the "Vote with Your Feet" technique and make a sign that says: "Very Interesting" and another one that says "Not Interesting." Ask people to stand along the line according to how they feel about the session. Another option is providing a "Suggestions for the Facilitator" box and asking participants to write their suggestions on pieces of paper and put them in the box at the end of each day.

SUMMARY OF SUGGESTIONS FOR A SUCCESSFUL SESSION

- Be familiar with the entire toolkit before beginning session activities.
- Be familiar with all the sessions before delivering them and have materials prepared ahead of time.
- Anticipate any issues that might arise during more emotionally demanding sessions, such as sessions that discuss CSA. See the section **Supporting Participants Who Have Experienced CSA** on page 23 for more information.
- Review the objectives with students at the beginning of each session.
- Always try to provide local examples and make the activities relevant to students' daily lives and concerns.
- When possible, work from the known to the unknown and from easy to difficult subjects.
- Create a "parking lot" for issues that arise during a session, but are not relevant to the session objectives. These issues can be discussed at another time or linked to other activities or sessions.
- Plan for icebreakers and energizing activities. They can be a great transition from one activity to another or used when energy in the group is low.
- Capture the important points during discussions. Clearly list them on flipchart paper or chalkboard for use during the summary and wrap-up activities. Consider asking a student to assist.
- Connect new content or information to what students already know and explain its relevance to their current situation, both individually and as a collective group.
- Be sure to end sessions on a positive note, with a clear take-away message. When appropriate, identify next steps or possible solutions to challenges.
- Encourage students to answer each other's questions. Open questions up to other students by saying, "Does anyone have an answer to that question?"

Reference: Adapted from Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf



SESSION ONE: GENDER

Reference: Content and format in this session was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

INTRODUCTION

Gender is a cross-cutting theme throughout this toolkit. Most young people are unaware of the effect of gender norms on their lives because gender roles are created by society and they can be changed. Understanding that gender roles are socially constructed and can change is a key factor in social change and vital to preventing child sexual abuse (CSA). In this session, students examine gender expectations placed on them by their peers, themselves, their families and society. Students also use critical thinking and decision-making skills in role-plays and in examining case studies to change gender roles. They will discuss what they can do to support one another.

WHAT IS IN THIS SESSION?







INTRODUCTION TO GENDER	EXAMINING GENDER
Students discuss their experiences of being girls and boys, what is expected of them, and how that can limit or expand their life choices. They are then introduced to the concepts of gender and sex.	Building on what students learned about gender and sex, they examine gender attitudes, stereotypes and practices in their surroundings. They also discuss how their lives can be less limited by gender expectations and stereotypes.

HOW CAN YOU LEARN MORE?

- Inter-Agency Network for Education in Emergencies, INEE Toolkit: Pocket Guide to Gender Implementation Tools. Accessed 28, February 2017 via http://toolkit.ineesite.org/pocket_guide_to_gender/implementation_tools
- Institute for Gender and Development Studies, The University of West Indies, St. Augustine. (2011). Breaking the Silence: A Multi-Sectoral Approach to Preventing and Addressing Child Sexual Abuse in Trinidad and Tobago: Policy Brief- Gender. Accessed 28, February 2017 via https://sta.uwi.edu/igds/breakthesilence/documents/UWI_IGDS_BTS_2011_PolicyBrief_GENDER.pdf
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- World Health Organization. (2017). Gender, equity and human rights. Accessed 28, February 2017 via <http://www.who.int/gender-equity-rights/en/>

SESSION ONE: INTRODUCTION TO GENDER

Please select at least one of the three **ACTIVITIES** presented below to implement.

	TIME	2 hours total Activity One: 30 minutes Activity Two: 1 hour Activity Three: 30 minutes
<i>Learning Objectives</i> 	LEARNING OBJECTIVES	By the end of the activities in this session, students will be able to: <ol style="list-style-type: none"> 1. Examine beliefs about being a boy or girl in their culture in general, and as it relates to sex. 2. Describe the differences between sex and gender. 3. Describe gender attitudes, stereotypes and practices for boys and girls.
	METHODS USED	<ol style="list-style-type: none"> 1. Discussion 2. Visualization 3. Vote with Your Feet
	MATERIALS	<ol style="list-style-type: none"> 1. Chalkboard or flipchart 2. Chalk, markers, pens or pencils 3. Masking tape 4. Pieces of paper marked "Agree" or "Disagree" 5. Session Handout: Gender Terms
	TEACHER / FACILITATOR PREPARATION	<ol style="list-style-type: none"> 1. Review gender definitions and be prepared to explain them in student-friendly terms. 2. Be familiar with cultural norms and gender expectations in your community. 3. Make two signs, one with the word "Agree" and one with the word "Disagree." Place them on the wall on different sides of the room.
	TEACHER / FACILITATOR NOTES	<ol style="list-style-type: none"> 1. It is important that you consider the age of the students you are working with when explaining gender and sex. The gender terms are provided, but you should be prepared to explain the terms using student-friendly language (see Session Handouts below). 2. The activities in this session will give you an idea of the students' understanding of gender and sex. Changes in attitudes about these issues may not happen at this point, but this may be the first opportunity that students start thinking about these issues critically.

ACTIVITY 1: BEING A BOY, BEING A GIRL⁵

(30 MINUTES)



ACTIVITIES

1. Pair boys with boys and girls with girls. Ask students to complete the following sentences:

- I'm happy that I am a girl because _____.
- I'm happy that I am a boy because _____.
- I wish I were a girl because _____.
- I wish I were a boy because _____.

2. After students complete the sentences, ask for volunteers to share their answers.

3. Write answers on the chalkboard or flip chart paper, and ask students which of the roles can be changed. Then ask which of the roles cannot be changed. For example, "I wish I were a boy so I could leave the house whenever I wanted to lime with my friends" (gender). Or, "I wish I were a girl so I could have a baby." (sex).

4. Explain that some of these examples refer to gender stereotypes, attitudes and practices and some refer to sex (or biological differences between males and females). Define sex and gender using examples students gave. (see **Session Handouts** below for definitions).

5. Look at the sentences students shared and discuss which ideologies and practices can be changed, and which cannot.

ACTIVITY 1: BEING A BOY, BEING A GIRL⁵ (30 MINUTES)

⁵ Adapted from International HIV/AIDS Alliance, *Our Future: Sexuality and Life Skills Education for Young People, Grades 4–5*; see Bibliography for full citation.

ACTIVITY 2: GENDER BOX

(1 HOUR)



ACTIVITIES

1. Draw a picture of a boy on a chalkboard or flip chart paper. Ask students what they would like to name the boy. Write the answers to the following questions on the chalkboard or flip chart paper around the drawing:

- What messages does your community send to this boy when he is told to “act like a man?”
- What messages does your community send to this boy when it comes to sex or being in relationships?
- What is he expected to do?
- How is the boy encouraged to act?

2. Now draw a picture of a girl on a separate chalkboard or sheet of flip chart paper. Give the girl a name. Repeat the same questions.

- What messages does your community send to this girl when she is told to “act like a lady?”
- What messages does your community send to this girl when it comes to sex or relationships?
- What is she expected to do?
- How is the girl encouraged to act?

3. Draw a box around the messages, drawings and answers from the students; explain that this is a **gender box**. This is how we expect people to act, depending on society’s idea of what is considered masculine or feminine behaviour.

4. On the outside of the box write the answers to the following question:

- What is the child (she or he) discouraged from being or doing?

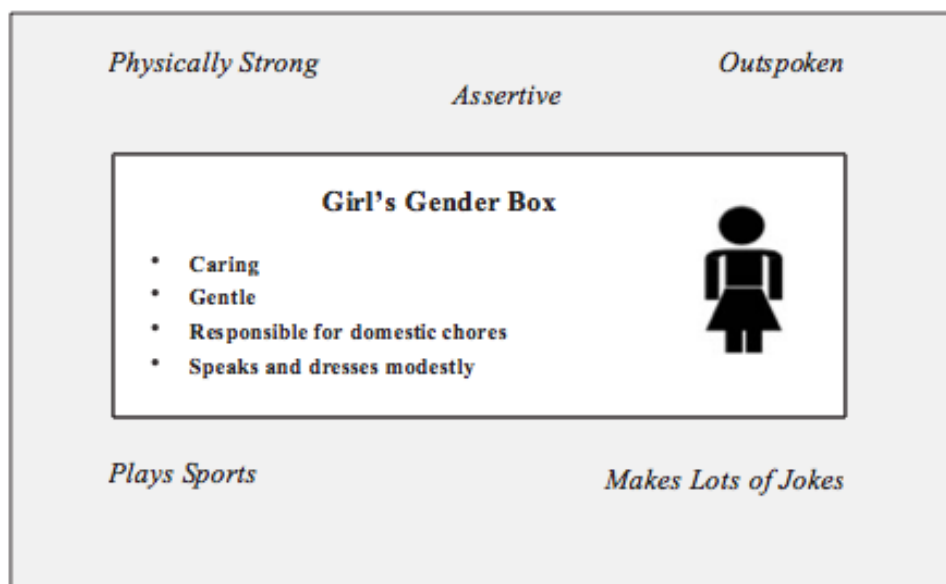


DISCUSSION QUESTIONS

Use the following questions to guide the discussion:

1. What qualities are girls supposed to have? For example, are girls supposed to be quiet?
2. What qualities are girls supposed to have related to sex and relationships? For example, are girls supposed to not wear too revealing clothes so they don't give boys or men the wrong impression?
3. What qualities are boys supposed to have? For example, are boys supposed to be tough and not cry?
4. What qualities are boys supposed to have related to sex and relationships? For example, are boys encouraged to have multiple partners or have sex early?
5. What if a boy or girl acts out in a way that is outside the gender box? What happens to them? How are they treated by their families, peers and the community?
6. What are some things girls are told they cannot do? For example, can a girl be a mechanic? What are some things boys are told they cannot do? For example, can a boy be a nurse?
7. Do you know any girl or woman who behaved differently than the expectations in the gender box? Do you know a boy or man who behaved differently? How did they do it? What was the community's or society's reaction to them?
8. How can these expectations influence your goals and dreams for the future? How can you handle these expectations and still achieve your goals?
9. Have you ever treated anyone badly because he or she was acting differently than expected?

EXAMPLE: GENDER BOX



ACTIVITY 3: SEX OR GENDER

(30 MINUTES)





1. Explain that you will read some statements out loud. If students agree, they should go to the "Agree" side of the room. If they disagree, they should go to the "Disagree" side of the room.
2. Read out the statements below or create your own, **no more than six**. Some examples are provided, but you may want to choose some of your own.

SAMPLE STATEMENTS

BOYS/MEN	GIRLS/WOMEN
Boys are physically stronger than girls.	Girls are physically weaker than boys.
Boys should not walk away from a physical fight.	Girls should not participate in a physical fight.
Boys don't need to dress a certain way to attract girls.	Girls should dress sexy to attract boys.
Boys should not be inside the house too much.	Girls should not be outside the house too much.
The most important role for a father is provide money to support his children.	The most important role for a mother is to care and nurture her children.
Boys are less emotional than girls.	Girls are more emotional than boys.
Boys don't care about marriage as much as girls do.	Girls want to get married more than boys do.
Sports are more important to boys than girls	Sports are less important to girls than boys.
Boys need money to attract girls.	Girls don't need money to attract boys.
The most important thing for boys' futures is to find a good job.	The most important thing for girls' futures is to find a good husband.
A man who enjoys housework and looking after children is not a real man.	A women who does not enjoy cooking or looking after children is not a real woman.
Men must control their women.	Women should ask their boyfriends/ husbands for permission to make important decisions.

3. After students have time to stand in the spot that demonstrates whether they agree or disagree, ask them to give the reasons for their choices. (If possible, call on people who have different answers.) Tell them they can change their minds and move after hearing other students' reasons.
4. When you have gone through all the statements, bring the group back together for the **Discussion Questions** outlined below.

	<h2>DISCUSSION QUESTIONS</h2> <p>Use the following questions to guide the discussion:</p> <ol style="list-style-type: none">1. Did the boys choose different sides of the room from the girls?2. Where do we get our ideas about gender practices from?
	<h2>SESSION WRAP-UP</h2> <ol style="list-style-type: none">1. Girls and boys are restricted in their behaviours, responsibilities and life choices because of culturally assigned roles and expectations.2. Gender describes the differences in the way that men and boys, and women and girls are expected to behave: their dress, the work they do, the way they speak and their status. Gender also refers to the unequal power relations that are culturally allowed between women and men/ girls and boys. These differences are created by our culture and not nature, and we can change them. Boys and girls should be free to develop to their fullest potential and not be limited and constrained by societies' ideas of gender inequality.3. Sex refers to the biological or bodily differences between men and women. There is nothing wrong with these differences. The values placed on women's and men's bodies however are different and often unequal.

SESSION HANDOUT: GENDER TERMS



Gender refers to a set of qualities and behaviours expected from males and females by society. It shapes what it means to be feminine and what it means to be masculine.

Gender attitudes and behaviours are socially determined and can be affected by factors such as family socialization, education or media. They vary widely within and between cultures and often change over time.

STUDENT-FRIENDLY LANGUAGE

Gender describes the differences in the way that men and boys and women and girls are expected to behave: their dress, the work they do, the way they speak and their status. These differences are created by our culture and not nature, and we can change them.

Gender roles describe what men and boys and women and girls are supposed to do in their culture. For example, in some cultures, a man is expected to cut down trees and a woman is expected to cook and take care of the children.

Gender equality refers to a state where there is no discrimination on the basis of a person's sex in the allocation of resources and in the access to various services in a society. In other words, when men and women are valued equally and they have equal access to and control of resources, opportunities and benefits despite their differences, there is gender equality.

Gender equity refers to the strategies or processes used to achieve gender equality. It involves fairness in representation, participation and benefits afforded to males and females. **This does not mean that boys and girls should necessarily receive the same treatment, as individual differences among them demand different interventions, or that one group should receive preferential treatment.** Both boys and girls should have a fair chance of having their needs met and have equal access to opportunities for realising their full potential as human beings. Equity is the means; equality is the result.

Gender norms refer to standard patterns of behaviour for males and females that are considered normal in a society. Narrowly defined gender norms can often limit the rights, opportunities and capabilities of females resulting in discrimination, exploitation or inequality. Males can also be restricted in some decision-making and choices because of how society expects them to behave.

Sex refers to the biological differences between males and females. Sex differences are concerned with males' and females' physiology. Sex tells us about the differences between men and women in their bodies.

Reference: Content in this handout was reproduced from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf



SESSION TWO: CHILD SEXUAL ABUSE AND GENDER

Reference: Content and format in this session was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

INTRODUCTION

This session addresses the main issue of this training toolkit – child sexual abuse. In particular, this session gives students an opportunity to discuss what constitutes CSA and examines the different forms and types of CSA, and how gender norms contribute to it. In this session students, will define CSA, draw examples of CSA they have seen in their communities and discuss how they can respond if CSA happens to them or a friend.

WHAT IS IN THIS SESSION?

ACTIVITY 1: TYPES OF CSA THAT AFFECT YOUNG PEOPLE (1 HOUR)	ACTIVITY 2: WHOM CAN STUDENTS TELL? (30 MINUTES)
Students are introduced to the definition of CSA and examine types of CSA and consequences of it through looking at different case studies that affect young people. Students also discuss what they can do if they or a friend experience CSA.	Students discuss how to identify trusted adults and report incidents of CSA.







HOW CAN YOU LEARN MORE?

- ChildLine. (2017). *Domestic Abuse*. Accessed 24, February 2017 via <http://childlinett.org/cms/teens-and-young-adults/domestic-violence/>
- Children's Authority of Trinidad and Tobago. (2015). Accessed 24, February 2017 via <https://www.ttchildren.org/>
- Children's Authority of Trinidad and Tobago. (2017). *A Teacher's Guide to the New Child Protection Legislation*. Accessed via <http://ttchildren.org/images/pdf/EDUCATOR'S%20GUIDE%20TO%20NEW%20CHILD%20PROTECTION%20LEGISLATION.pdf>
- Government of the Republic of Trinidad and Tobago: Office of the Prime Minister (Gender and Child Affairs). *Break the Silence*. Accessed on 24, February 2017 via <http://www.opm-gca.gov.tt/Child/Child-Initiatives/Break-the-Silence>
- Institute for Gender and Development Studies, The University of West Indies. *Break the Silence*. Accessed 24, February 2017 via <http://sta.uwi.edu/igds/breakthesilence/index.asp>
- Mirsky, J. (2003). *Beyond Victims and Villains: Addressing Sexual Violence in the Education Sector*. London, U.K.: The Panos Institute. <http://www.panos.org.uk/?lid=250>.
- National Child Trauma Stress Network. (2008). *Child Trauma Toolkit for Educators*. Accessed 28, February 2017 via http://www.nctsn.org/sites/default/files/assets/pdfs/Child_Trauma_Toolkit_Final.pdf
- Sexual Violence Research Initiative. (2015). Accessed 28, February 2017 via <http://www.svri.org/>
- Stop It Now (2017). Accessed 28, February 2017 via <http://www.stopitnow.org/>
- UNESCO. (2016). *Connect with Respect: Preventing Gender-Based Violence in Schools, Classroom Programme for Students In Early Secondary School (ages 11-14)*. Accessed on 28 February, 2017 via <http://www2.unwomen.org//media/field%20office%20eseasia/docs/publications/2016/04/243252e-connect-with-respect.pdf?vs=4450>
- UNESCO UN Women. (2016). *Global Guidance: School-Related Gender-Based Violence*. Accessed 28, February 2017 via <http://www2.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2016/04/243252e-connect-with-respect.pdf?vs=4450>
- UNICEF America Latina y el Caribe. *Break the Silence Initiative: Communication and Advocacy Package*. Accessed on 24, February 2017 via https://www.unicef.org/lac/overview_24532.htm
- USAID. (2015, June). *Beyond Access: Toolkit for Integrating Gender-Based Violence Prevention and Response Into Education Projects*. Accessed 28, February 2017 via http://www.ungei.org/srgbv/files/USAID_ADVANTAGE_GBV_Education_Toolkit-Final.pdf

SESSION TWO: CHILD SEXUAL ABUSE AND GENDER

Please select **ACTIVITY ONE** to implement.

You are strongly encouraged to implement **ACTIVITY TWO** as well, if time allows.



	TIME	1.5 HOURS <ul style="list-style-type: none"> Activity One: 1 hour Activity Two: 30 minutes
 <i>Learning Objectives</i>	LEARNING OBJECTIVES	By the end of this session, students will be able to: <ol style="list-style-type: none"> 1. Recognize different CSA scenarios that young people face. 2. Recognize the effects of CSA on young people. 3. Discuss how to help someone who has experienced CSA.
	METHODS USED	<ol style="list-style-type: none"> 1. Large-group discussion 2. Role-play
	MATERIALS	<ol style="list-style-type: none"> 1. Chalkboard or flip chart 2. Chalk or markers, pens or pencils 3. Session Handouts: <ul style="list-style-type: none"> • Scenarios of Child Sexual Abuse (CSA) • Tips for Students to Report CSA • Tips for Supporting a Friend Who Has Experienced CSA
	TEACHER/FACILITATOR PREPARATION	<ol style="list-style-type: none"> 1. Have chalkboard or flip charts available. 2. For Activity One, use the scenarios in the Session Handouts below. Prepare copies of the scenarios for each group. 3. Write the Discussion Questions for Activity One on the chalkboard or flip chart paper. 4. Make copies of Session Handouts: Tips for Students to Report CSA and Tips for Supporting a Friend Who Has Experienced CSA and distribute to students during the activity. You can also copy the tips on the chalkboard or flip chart paper and ask students to copy them into their notebooks.
	TEACHER/FACILITATOR NOTES	<p>A trusted adult can be a parent, guardian, coach, teacher, aunty, uncle, or anyone a student can go to who is willing to listen and help. You should be prepared to discuss what a trusted adult is. In Activity 2, students will identify adults to whom they can go for help.</p> <p>A tattletale or informant is an informal term used for a person, especially a child, who tells others about another person's secrets or bad behaviour. Use the equivalent word in your local dialect. It is important for students not to be afraid to speak up and tell someone when they or someone they know is in danger. This session uses scenarios to examine CSA so that students may talk about it in the abstract rather than through their own personal experiences with CSA. Be aware that some of the students may have experienced CSA, and this discussion could be uncomfortable for them. Refer to the section Supporting Participants Who Have Experienced CSA above in the Introduction of the toolkit.</p>

ACTIVITY 1: CSA SCENARIOS

(1 HOUR)






1. Ask students to form small groups of three to five people.
2. Give each group one scenario from Scenarios 1-5.
3. In addition, give each group either Scenario 6 or Scenario 7.
4. Ask students to have one person in the group read the scenarios out loud for the other members of the group.
5. Ask students to answer the **Discussion Questions** outlined below based on what is happening in the scenario.
6. After the groups have finished, they should present a summary of their two scenarios to the class.
7. Students should not have trouble coming up with possible consequences of CSA, but be sure to mention the following in your wrap-up:
 - Students can have trouble concentrating, either in school or in their daily lives.
 - Student can feel guilty or think the CSA they experienced was their fault.
 - Students can quit eating or sleeping.
 - Students may not want to go to school.
 - Students can feel confused and tricked when an adult abuses them, especially if it is a relative, teacher or someone they trusted.
 - Students can feel afraid to be alone with certain adults.
8. Tell students that when they see acts of CSA being perpetrated, they can help by telling a trusted adult. Ask students when they think speaking up and telling a trusted adult is necessary. Point out that it is necessary any time they or someone they know has experienced CSA or is in danger.
9. Explain that sometimes it may be difficult to tell and they may be afraid of getting called a "tattletale" or "informant," or scared of experiencing violence themselves due to telling someone. Any time someone is in danger or is being hurt, students can help by having the courage to tell a trusted adult or help the person tell a trusted adult.
10. Review the *Tips for Supporting a Friend Who Has Experienced CSA* in the **Session Handouts** below.

	DISCUSSION QUESTIONS FOR SCENARIOS 1 – 5 Use the following questions to guide the discussion: <ol style="list-style-type: none">1. Describe why the young person in your scenario is experiencing CSA.2. Do you think he or she is experiencing CSA because of being a boy or girl? (What are the gender aspects of this incident?2. Is force being used in this situation?3. Who has the power in this situation?4. What are the effects of CSA on the student in the scenario? What are some possible consequences of the difference scenarios if they are not addressed?5. Has this ever happened to anyone you know? What did he or she do?6. How could you support the student in the scenario if he or she were your friend?
	SESSION WRAP-UP Use the following questions to guide the discussion: <ul style="list-style-type: none">• What do you think is happening there?• How would you feel?• What would you do?

ACTIVITY 2: WHOM CAN STUDENTS TELL?

(30 MINUTES)

	<ol style="list-style-type: none"> 1. Using the same scenarios, ask the different groups to come up with a plan for the student or person in the scenarios they were given. Their plan should include whom the student or person could tell, where the student or person should go for help, who could go with the student or person and how the student or person can tell a trusted adult. 2. Ask students to create a role-play, acting out the plan and demonstrating how to tell a trusted adult what happened to the student in their scenario. Tell students to think of any obstacles the student might face and include suggestions to help the student overcome them. For example, in Scenario 2, Shenaka told a female teacher what happened to her, but the teacher did not believe her or make her feel better. The solution is that Shenaka should go to another teacher or tell another trusted adult until someone helps her. 3. Make sure each scenario is acted out as a role-play, and then come back together as a whole group for the Discussion Questions. 4. After the discussion, review the <i>Tips for Students to Report CSA</i> (see Session Handouts below).
	<h3>DISCUSSION QUESTIONS</h3> <p>Use the following questions to guide the discussion:</p> <ol style="list-style-type: none"> 1. Whom did the student go to for help? Was the person helpful? Why or why not? 2. Did anyone go with the student? 3. Did the students in the scenarios show courage when they told what happened to them? 4. What can we do to help someone who has experienced CSA or is afraid to tell someone what happened to him or her? 5. Is there ever a time when you would be afraid that telling will cause you more harm? What could you do?
	<h3>SESSION WRAP-UP</h3> <ol style="list-style-type: none"> 1. Tell students that now they should be able to recognize some different types of CSA they or their friends may face. Some of the behaviours they may have previously considered normal should be recognized as CSA if the behaviours make them feel bad or have negative consequences. 2. Tell students that they do not have to keep their feelings to themselves. It is always better to tell a trusted adult if they think they have experienced CSA. 3. There are people students can go to who can help them if they experience CSA. It is also important for them to help a friend or classmate if they experience CSA. 4. Remind them of the <i>Tips for Students to Report CSA</i> and <i>Tips for Supporting a Friend Who Has Experienced CSA</i>. Tell students that reporting CSA takes courage and resiliency, but they can support one another to prevent and respond to it.

SESSION HANDOUT: CHILD SEXUAL ABUSE SCENARIOS



SCENARIO 1

My name is Sarah. I walk the same way to school every day. It's the only way I can walk to school safely, because in the fields there are sometimes bandits and I am afraid to walk through the fields alone. So, each day I walk past the maxi stop and bar to get to school, and each day I am approached by an older man offering to buy me a drink. He says he'll buy me whatever I want and that a schoolgirl needs a special treat from time to time. One day he gave me a pretty perfume bottle, and I took it. Last week, he asked me to go on a walk with him after school. I said no, but every day he asks me the same thing, and he is getting more and more persistent. Sometimes he gets close to me, and it's hard for me to get away from him without stepping into the traffic. Tomorrow, I am going to walk through the fields even though I am scared of the bandits, because I am also scared of the man who has been harassing me.

SCENARIO 2

My name is Shenaka. My favorite subject is math. My math teacher has taken an interest in me because I am so smart. Last Tuesday, my teacher offered me extra tutoring if I agreed to carry his briefcase home for him. Honestly, I was uncomfortable with this, but I really didn't want to anger the teacher of my favorite subject, so I agreed. The first day he thanked me, but inappropriately brushed his hand against my breast when I left his yard. I was relieved that that was over and I didn't have to do it again. The next day, Wednesday, the teacher asked me again to carry his briefcase home. I agreed, but this time he pressured me into entering his home. When I said no, he started calling me rude and ungrateful for declining a cold drink. He was so angry that I finally agreed. Once inside, the teacher pulled me into his bedroom, and forced himself on me. I tried to fight, but he told me that I was a stupid girl and threatened that if I screamed or told anyone he would fail me. After that, I ran all the way home, feeling sick and bruised. I feel so stupid and that what happened was my fault. The next day at school, all my friends made fun of me and called me the teacher's girlfriend. I am thinking about quitting school and going to live with my aunt in another village.

SCENARIO 3

My name is Jason. I am 16 years old and really close with my stepmother. Since I was young, I have always felt comfortable talking with her about what was bothering me. I trust her a lot, and she has always been nice to me and treated me like family. I used to confide in her and she helped me talk things out. I also helped her a lot around the house, especially since dad works so hard and is often working late hours or taking two-day trips for his work. Last year, she confessed her feelings had grown for me and we developed a sexual relationship. I always felt conflicted a bit as I wonder how this would affect Dad if he found out, but she assures me that he won't and we just need to be silent about it. But now I have started to date a girl in my class that I really like and have feelings for. I told my stepmom that I wanted to stop having sex with her because I love my new girlfriend, but she got very angry and told me that she was just a schoolgirl and how could I compare the love she and I had with her. She even threatened to tell Dad that I forced myself on her.

SESSION HANDOUT:

CHILD SEXUAL ABUSE SCENARIOS



She told me that him learning about that would put so much pressure on Dad. I don't want to upset Dad or make him have to choose sides, so I am continuing to have sex with my stepmom from time to time even though I don't really want to, and feel guilty because I love my new girlfriend.

SCENARIO 4

Renuka is 14 years old and really enjoys school. Lately, she has been having trouble in science, and her uncle offered to give her extra help one day after school by his shop. When they were studying he grabbed her breast and told her she is turning into a beautiful young woman. Renuka feels very uncomfortable, but is afraid to speak up against her uncle and tell anyone. He is her mom's favorite brother and he often helps out her parents with rent money, and lends them his car so that they can run errands. She has decided that she won't tell anyone and just not ask her uncle for help anymore and just fail science.

SCENARIO 5

Mr. Daniel is a teacher who is 30 years old and is having a sexual relationship with one of his students named Grace who is 16 years old. Grace says that she and Mr. Daniel have a special relationship and he cares and loves her deeply and she likes to have sex with him. She knows that her parents would not understand and the other teachers in the school would not understand because of the age difference. She gets frustrated sometimes that they have to keep their relationship secret because she really does love him and feels she is old enough and mature enough to make her own decisions about sex. When she turns 18, she will be able to tell everyone and Mr. Daniel says that he is going to leave his wife and marry her. Grace can't wait until she turns 18.

SCENARIO 6

6a. Imagine that you are the brother/sister of a 11-year old **girl** and you pass by her room and find **your** 20-something year old sibling peeping at her when she is changing her clothes. Your sister tells you it is not the first time.

6b: Imagine that the person who was peeping was **non-blood related uncle or auntie**, would your opinion change?

SCENARIO 7

7a. Imagine that you are the brother/sister of a 11-year old **boy** and you pass by his room and find **your** 20-something year old sibling peeping at him when he is changing his clothes. Your brother tells you it is not the first time.

7b. Imagine that the person who was peeping was **non-blood related uncle or auntie**, would your opinion change?

Reference: Content for this handout was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

SESSION HANDOUT

TIPS FOR STUDENTS TO REPORT CHILD SEXUAL ABUSE



- If you have been abused or experience violence, **never blame yourself**. It is not your fault. You should talk to a counselor or trusted adult to help you with your feelings.
- Keep a record of incidents. For example, if anyone harasses you on the way to school, write down where it happens, the time and the date.
- If a friend has experienced CSA, you can support him or her by going with the friend to tell a trusted adult.
- Sometimes adults might dismiss you when you tell them you have been abused. That might make you feel bad, but you should keep trying to tell different trusted adults until someone helps you. This can take resiliency and courage.
- No one should ask you to look at nude or “sexy” pictures (or movies, tapes, etc.). If anyone asks you to look at anything that makes you uncomfortable, tell a trusted adult.
- If a teacher, principal or anyone at school asks you to come to meet them after school or when no one is around, make sure you tell someone where you are going. You should tell your parents, another teacher, a trusted adult or a classmate.
- Be careful when accepting gifts or favours from teachers or other adults. Sometimes teachers or other adults could use this to attract you, and it could lead to sexual violence or abuse.
- If you or another student has experienced violence, you should tell someone. You do not have to keep it a secret.
- You should always speak up when you feel that you are in danger or someone you know is in danger.

Reference: Content for this handout was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf

SESSION HANDOUT

TIPS FOR SUPPORTING A FRIEND WHO HAS EXPERIENCED CSA



If a friend tells you that he or she has experienced violence or abuse:

- Believe your friend.
- Offer support.
- Try not to appear shocked.
- Encourage the friend to tell an adult he or she trusts and offer to accompany him or her.
- Don't keep it to yourself—tell a trusted adult. It is an unsafe secret. It is important that your friend is made safe and that the abuse does not continue to happen.
- Help your friend continue looking for an adult who will listen and help.

Reference: Content for this handout was adapted from *Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response* accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf



SESSION THREE:

CHILD SEXUAL ABUSE, GENDER AND HIV/AIDS

Reference: Session content and format adapted from *Doorways III: Teacher Manual on School-Related Gender-Based Violence Prevention and Response* accessed at https://www.usaid.gov/sites/default/files/documents/1865/Doorways_III_Teachers_Manual.pdf

INTRODUCTION

This session brings together what participants have learned about gender norms and CSA to demonstrate their impact on HIV/AIDS. Participants will identify the importance of promoting healthy gender norms that decrease the risk of CSA and exposure to HIV. A key message of the session is that addressing harmful gender norms is an important strategy in preventing the spread of HIV infection.





WHAT IS IN THIS SESSION?

ACTIVITY 1:
GENDER BEHAVIOURS THAT INCREASE RISK OF CSA AND
HIV/AIDS
(1 HOUR)

WHERE CAN YOU LEARN MORE?

- Department of Health and Human Services, Office of the Assistant Secretary of Health, Office on Women's Health. (2016). HIV Prevention Toolkit: A Gender-Responsive Approach. Accessed 28, February 2017 via <https://www.aids.gov/pdf/owh-gender-responsive-hiv-prevention-toolkit.pdf>
- Interagency Youth Working Group (IYWG). (n.d.). Website. Accessed 28, February 2017 from the Information and Knowledge for Optimal Health (INFO) Project Website via <https://www.iywg.org/>
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- Reddock, Reid, Cooper Nickenig. (2011). Trinidad and Tobago: Sexual Culture and HIV Research Brief. UN Women: Caribbean. Accessed on 28, February 2017 via <http://www2.unwomen.org/-/media/field%20office%20caribbean/attachments/publications/trinidadtobagobrief.pdf?vs=4343>
- Salamander Trust. (2017). Stepping Stones. Accessed 28, February 2017 via <http://steppingstonesfeedback.org/>
- UNAIDS. Global Initiative on Education and HIV and AIDS (EducAIDS): Overviews of Practical Resources. (2008, January), Paris, France: United Nations Educational, Scientific and Cultural Organization (UNESCO). Accessed on 28, February, 2017 via <http://unesdoc.unesco.org/images/0015/001584/158428e.pdf>
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SESSION THREE: CHILD SEXUAL ABUSE, GENDER AND HIV/AIDS

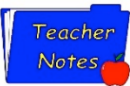
	TIME	1.5 HOURS
<i>Learning Objectives</i> 	LEARNING OBJECTIVES	By the end of this session participants will be able to: <ul style="list-style-type: none"> • recognise the relationship between child sexual abuse, gender and HIV/AIDS.
	METHODS USED	<ol style="list-style-type: none"> 1. Brainstorming 2. Group discussion 3. Role-play
	MATERIALS	<ol style="list-style-type: none"> 1. Chalkboard, chalk and eraser or 2. Flipchart and markers 3. Session Handouts: <ul style="list-style-type: none"> • What Is AIDS? What Is HIV? • HIV/AIDS in the Caribbean. Accessed via http://www.avert.org/professionals/hiv-around-world/caribbean • Trinidad and Tobago: HIV/AIDS Estimates. Accessed via http://www.unaids.org/en/regionscountries/countries/trinidadandtobago • Key Messages on the Linkages Between Gender Violence and Gender Norms and HIV/AIDS



TEACHER/FACILITATOR PREPARATION

1. Print out the four handouts listed above and distribute to students during this session. Alternatively, you can copy and write key points from the handouts onto a chalkboard or flip chart paper for students to copy in their notebooks. Be sure to take at least 30-45 minutes to read aloud and review key points and statistics in the handouts that are relevant to HIV/AIDS in the Caribbean prior to implementing the activity in this session
Note: The 1st and 4th handouts are provided in the [Session Handouts](#) section below. The 2nd and 3rd handouts are provided via hyperlinks (above) and provide important statistics and information related to the HIV/AIDS epidemic in the Caribbean and Trinidad and Tobago.
2. A key point to mention to students is that HIV/AIDS in Trinidad and Tobago is considered a **“generalizable epidemic,”** which means it affects the whole population, not just certain sub-populations. **Another key point to make is that HIV/AIDS in Trinidad and Tobago is primarily spread through heterosexual sex.** This may dispel some common myths that the virus is spread only by certain sexual behaviour or in certain populations such as men who have sex with men or sex workers.
3. This session makes the link between gender norms, child sexual abuse and HIV/AIDS. You will need to refer back to the issues discussed in previous sessions (gender and child sexual abuse) to effectively make the connection.
4. Another key point to make to students is people living with HIV or AIDS are just like anyone else, but they living with a chronic condition. Review the handout [What is AIDS? What is HIV](#), in the [Session Handout](#) section below, and be sure to point out the sections on how HIV can be transmitted and how it can't be transmitted. Many people still believe many myths about HIV transmission that leads to stigma and discrimination. Discrimination against people living with HIV is widespread throughout the Caribbean region due to ignorance and fear of HIV and AIDS. Emphasize to students there is nothing to fear and that they should not stigmatize against people living with the condition. It is important that you give accurate and up-to-date information and are able to reinforce information that is factual and dispel myths. If necessary and available, call in an expert to help you facilitate this discussion.
5. [HIV/AIDS in the Caribbean](#) referenced in the [Session Handouts](#) section above and accessed via <http://www.avert.org/professionals/hiv-around-world/caribbean> gives regional statistics and information on HIV/AIDS. While these statistics provide a regional overview, it is important for participants to understand the HIV/AIDS pandemic in the local context as well. Refer to [Trinidad and Tobago: HIV/AIDS Estimates](#), accessed via <http://www.unaids.org/en/regionscountries/countries/trinidadandtobago> for some local statistics on the epidemic. Providing a global and regional and local summary prepares participants for the realization that HIV/AIDS is a global pandemic and they have a role in helping to reduce and prevent the spread of the virus.

	<h3>TEACHER/FACILITATOR PREPARATION continued</h3> <ol style="list-style-type: none"> Participants should also be familiar with sexual culture issues surrounding HIV/AIDs in the Caribbean region and in Trinidad and Tobago. Be sure to reinforce information that is factual and dispel myths surrounding HIV/AIDs. For more information related to sexual culture and HIV in Trinidad and Tobago refer to Trinidad and Tobago: Sexual Culture and HIV Research Brief. UN Women: Caribbean. Accessed via http://caribbean.unwomen.org/en/materials/publications Be familiar with the Key Messages on the Linkages Between Gender Violence and Gender Norms and HIV/AIDS in the Session Handouts section below. Use the information to guide the activities and discussions. Identify sources of information on HIV and AIDs prevention and education. This is a great opportunity to share resources such as people living with HIV/AIDs groups, teacher support groups, health care centres, where to get antiretroviral drugs and voluntary counseling and testing clinics. Refer to the <i>Break the Silence</i> information cards (available at IGDS, St. Augustine) to hand out with national resources and related phone numbers. You may want to add to this list to make it more community specific if you can.
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	<h3>TEACHER / FACILITATOR NOTES</h3> <ol style="list-style-type: none"> Society expects certain behaviours from men and women that can contribute to violent behaviour and exposure to HIV infection. Addressing these expectations, or gender norms, is recognized as an important strategy for HIV prevention. Some schools may already be contributing to HIV prevention by teaching life skills classes or incorporating HIV education prevention messages in their lessons. It is important for them to know that all teachers can assist in preventing the spread of HIV by encouraging healthy, respectful relationships among students and between students and teachers. The issues of sexuality and HIV/AIDs can be sensitive. In some cultures, sex and sexuality are regarded as taboo subjects and can cause feelings of embarrassment or even shame when openly discussed. You should be aware of these issues, and remind students that being change agents to support and protect one another will sometimes require them to discuss subjects they may find uncomfortable. Be sure to point out that factors that contribute to HIV/AIDs are often related to behavioural practices that can be changed. Some forms of behaviours that put people at risk of HIV/AIDs have cultural and economic origins (e.g., relationships with older men, early marriages, forced marriages and forced sex). Be aware that some students could be living with HIV or may have been impacted by HIV and AIDs. Be sure to use language that is inclusive and not isolating. For example, "those of us who have been affected by HIV," not "people with HIV" with a negative connotation.
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ACTIVITY 1: GENDER BEHAVIOURS THAT INCREASE RISK OF CSA AND HIV/AIDS

(30 MINUTES)



Activity content reproduced from *Doorways III: Teacher Manual on School-Related Gender-Based Violence Prevention and Response* accessed at https://www.usaid.gov/sites/default/files/documents/1865/Doorways_III_Teachers_Manual.pdf

1. Refer back to Session One, Activity 2, [Gender Box – Act like a Man, Act like a Women](#), and ask participants to review the qualities that they listed as masculine and feminine. Go around the room and ask for examples. *For example:*

Feminine

Passive
Soft Spoken
Dependent
Weak

Masculine

Aggressive
Adventurous
Independent
Forceful

2. After participants give examples, go around the room and assign each person one of the feminine or masculine stereotypes.
3. Ask them how this feminine/masculine stereotype or behaviour could put people at risk of HIV infection. Give an example using one of the examples below.
4. They should also know that these are stereotypes and that not all women and not all men conform to these stereotypes.

FEMININE

Passive: Allowing others to make decisions about sex and accepting them.

Soft Spoken: afraid to say “no” to sex or takes more of a passive role in relationships.

Dependent: Is financially or emotionally vulnerable.

Weak: Unable to defend their position or their decision.
Finds it difficult to fight back

MASCUINE

Aggressive: Dominates female partners, using force to exert control and to get others to do what he wishes.

Adventurous: Has many sexual partners. Takes risks and does not consider the consequences.

Assertive: Makes unilateral decisions about sex (e.g., whether or not to use protection). Exerts their will over others.


Forceful: Uses physical and emotional violence to express feelings and thoughts


5. Using [Key Messages on the Linkages Between Gender Violence and Gender Norms and HIV/AIDS](#) found in the [Session Handouts](#) section below, walk around the room and help participants make the links, if necessary.
6. After everyone has had time to come up with a risk linked to a gender stereotype, share with the larger group.
7. Conclude the session by asking what would happen if people chose to step out of gender roles or stereotypes. Ask what support they would need.



SESSION WRAP-UP

1. Gender violence, including CSA, puts children/youth more at risk for contracting HIV.
2. Gender, gender inequalities and gender stereotypes contribute to the spread of HIV.
3. Gender equity and respect for the human rights of all is essential to help stop the spread of HIV.

	<h2>SESSION HANDOUT: WHAT IS AIDS? WHAT IS HIV?</h2>
<p>Reference: Content reproduced from <i>Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response</i> accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf</p>	<p>AIDS (acquired immunodeficiency syndrome) is a human viral disease that ravages the immune system, undermining the body's ability to defend itself from infection and disease. Caused by the human immunodeficiency virus (HIV), AIDS leaves an infected person vulnerable to opportunistic infections— infections by microbes that take advantage of a weakened immune system. Such infections are usually harmless in healthy people but can prove life threatening to people with AIDS. Although there is no cure for AIDS, new drugs are available that can prolong the life spans and improve the quality of life of infected people.</p> <p>Transmission of HIV—the AIDS-causing virus—occurs most commonly as a result of sexual intercourse. HIV also can be transmitted through transfusions of HIV-contaminated blood or by using a contaminated needle or syringe to inject drugs into the bloodstream. Infection with HIV does not necessarily mean that a person has AIDS. Some people who have HIV infection may not develop any of the clinical illnesses that define the full-blown disease of AIDS for 10 years or more. Physicians prefer to use the term AIDS for cases where a person has reached the final, life-threatening stage of HIV infection.</p> <p>HIV (human immunodeficiency virus) is the virus that causes AIDS. HIV is transmitted through blood, semen, vaginal fluid and breast milk. HIV infection can be prevented and is not transmitted through casual contact (hugging, sharing an apartment, playing basketball, etc.).</p> <p>How HIV is transmitted:</p> <ul style="list-style-type: none"> • Vaginal, anal or oral sex with an infected partner. • Man to woman, woman to man, man to man, woman to woman. • Through contact with blood, blood products or bodily tissues of an infected person. • Sharing needles: Intravenous drug use, steroids, ear and body piercing, body art, and insulin and blood sugar testing equipment. • Mother to infant: During pregnancy, birth or through breast milk. • Transfusion of HIV-contaminated blood, blood products and body tissues. Since 1985, screening of all donors and blood and blood products has reduced the risk. <p>HIV is a medical condition which can be prevented. They have to make the right decisions. It is not a curse.</p> <p>How HIV is not transmitted:</p> <ul style="list-style-type: none"> • Talking, shaking hands or other casual contact. • Hugging or kissing (there is a minimal risk that deep kissing — “French kissing” or tongue kissing — could lead to infection, if open sores are present on the lips, tongue or mouth). • Touching walls, doorknobs, writing utensils, restrooms, computers, telephones, etc. • Being bitten by mosquitoes, fleas or other insects. <p>The only way to know if one is HIV infected is to receive an HIV test. The test will effectively assess whether the person is infected or not. It takes the body approximately three to six months to develop enough antibodies to be detected on the HIV antibody test. For this reason, it is important to be tested three to six months after the risky behaviour (sharing needles of any kind, unprotected sex, etc.) in order to receive an accurate test result. It is also important to avoid high-risk behaviours whenever possible.</p>

	<h2 style="color: blue; text-align: center;">SESSION HANDOUT:</h2> <h1 style="color: blue; text-align: center;">KEY MESSAGES ON THE LINKAGES BETWEEN GENDER VIOLENCE AND HIV/AIDS</h1>
<p>Reference: Content reproduced from <i>Doorways I: Student Manual on School-Related Gender-Based Violence Prevention and Response</i> accessed at http://pdf.usaid.gov/pdf_docs/Pnado240.pdf</p>	<ol style="list-style-type: none"> Sexual relations put students at higher risk of contracting HIV. Rape and sexual gender-based violence make girls more susceptible to HIV infection. Sexual relationships that girls have with older men also make them more vulnerable to HIV infection. Research shows that risk of infection with HIV increases with the age of the partner, and HIV prevalence is higher in young women whose partner is five or more years older compared with young women whose partner is less than five years older. Unequal power dynamics in relationships between older men and younger women can lead to sexual coercion and physical violence, making girls more vulnerable to HIV infection. Educating girls about risks in sexual relationships with older men helps girls make healthy decisions that reduce HIV transmission. Inequitable gender norms contribute to both gender-based violence and HIV infection. Early socialization of girls and boys that promotes inequitable gender practices as the norm encourages risky behaviours in young adulthood. Expectations of men are often based on power, independence and control. <p>“real men” are expected to:</p> <ul style="list-style-type: none"> • Take risks • Use violence to resolve conflict • Use coercion to obtain sex • Dominate their female partners • Begin sexual activity early in life • Have multiple sexual partners <p>“real women” are expected to:</p> <ul style="list-style-type: none"> • Be passive • Allow others to make decisions for them • Accept violence committed against them as normal • Put others’ needs above their own • Remain abstinent until married • Submit to partners’ sexual requests • Lack information concerning sexual reproductive health <p>During adolescence, boys and girls begin to establish patterns of sexual behaviour and interactions with each other that will continue into their adulthood. The attitudes and behaviours resulting from the gender norms listed above make young women more at risk of pregnancy and STIs, including HIV. Research also shows a relation between HIV infection and the degree of physical violence reported by young women.</p>

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APPENDIX A

CREATING YOUR BTS COMMUNITY-DRIVE CAMPAIGN

The Break the Silence (BTS): end child sexual abuse campaign is driven by the need to share the vision of de-silencing discussions surrounding CSA and childhood incest. On the one hand it aims to reach victims and their families with a message to speak out and break the stigma and shame that surrounds this issue as a first step to seek assistance. The campaign is also an advocacy platform directed at policy makers and service providers to push prevention and treatment services forward. The overall goal of the BTS Campaign is to change the attitudes and behaviours of the public, key institutional actors and policymakers.

THE SYMBOL



A key achievement of the BTS model is an ethnic and genderless symbol that brands the campaign with a visual symbol that people can associate with CSA and childhood incest. The symbol – a blue teddy bear with a bandage over its heart — was designed specifically to raise awareness of CSA and childhood incest and the implications for HIV/AIDS. It is a call for solidarity with victims and survivors of CSA, and those connected to or affected by CSA, as well as those who wish to raise awareness of the issues. It symbolises security, love, care, comfort and relationships. The plaster across its heart was designed to offer a sense of hope and healing. Blue underlines the popular idiom for “feeling blue”, or feelings of hurt, sadness and despair.

INCORPORATING BTS CAMPAIGN TOOLS INTO LESSONS/INTERVENTIONS

Advocacy is a critical component of implementing the BTS Campaign in order to motivate the country and communities to care about CSA and childhood incest. With successful mobilization and outreach, community champions emerge. An obvious way to introduce community members to the BTS symbol is by incorporating it into intervention workshops that aim to prevent and respond to CSA and childhood incest. Allocating some time and resources to creating tools can pay off in the long run.

PROMOTIONAL MATERIALS

Create posters and/or information cards that feature the teddy symbol and tag line along with national and community resources that persons can access to prevent and respond to CSA and childhood incest. Card handouts are a first step in assisting persons who may be affected, may know someone who is affected, or who may disclose. Posters make it easy for teachers, principals, health workers, police officers and all service providers that come to a workshop, to go back into their communities and quietly raise awareness by putting it up on the wall. *Note: if there is a lack of financial resources you can design an information card handout to also act as a poster.*

- Feature the teddy symbol on all invitations, flyers advertising for workshops, presentation slides, handouts and other materials. During workshops, briefly discuss what it symbolizes.
- Hang a banner with the teddy symbol and tag-lines at workshops and interventions.

INTERACTIVE TOOLS

Introduce the symbol and its meaning during workshop and art-based initiatives, choosing the appropriate tools for the target group.

- Create a puppet teddy to engage primary school children in discussions about CSA and childhood incest. Ask them to draw the teddy, write a poem or tell a story about the teddy and CSA and how they feel. The teddy puppet can also be used for performance workshops and games.
- Create art cards/boards for children and youth to colour in the teddy and make posters.
- Create teddy-shaped cut-outs that persons can write advocacy messages about CSA and childhood incest on and then hang cut-outs on highly visible walls in classrooms, schools and office buildings; and on fences and trees. The act of drawing the symbol and writing an advocacy message will allow the symbol to seep into the consciousness of persons (who will begin to associate it with CSA and childhood incest when they see it).
- Create stencils (these can be the off cuts of the teddy cut-outs) in the shape of the teddy symbol that children, youth and adults can use to outline and draw/paint on paper, banners, walls, etc. This will give them a starting point to communicate their own feelings and messages about CSA and childhood incest.
- Create postcard type questions and answer cards, for teachers and community workers to express their own feelings, views and suggestions on how to treat with CSA. This can give workshop leaders a way in to get all participants to express themselves. It can also give much insight into a group's understanding and connection to the issue of CSA and incest.
- Create a box with a slot for dropping card cutouts or other activity cards. This works extremely well at large workshops and events. Participants can write on the cards and drop them into the box, symbolically taking an action towards speaking out and breaking the stigma and shame that surrounds this issue.

INCREASING COMMUNITY MEMBER INVOLVEMENT ON A NATIONAL SCALE

Once you establish a level of awareness in the communities where you implement your interventions and you have built a base of community leaders, you can begin to think about how to spread the BTS advocacy campaign to communities nationwide – even those that you weren't able to include in interventions. A good way to do this is by collaborating with other agencies, groups and individuals in the country to hold an awareness raising walk/march on a common issue such as child abuse or domestic abuse.

Collaborating with others who are well connected in the particular community where the walk/march will be held is vital. This will likely lead to a greater number of persons participating in the walk/march, and stronger commitment to the cause. The larger the March the more media coverage it will gain, which is key to promoting the BTS Campaign and teddy symbol on a national scale. Holding a successful march/walk, however, is not something that you can just plan a week before. It takes a least a month of solid organizing and planning in order to implement one successfully (*see Calls To Action below*).

METHODS TO SPREAD THE CAMPAIGN NATIONALLY

- Large outdoor high visibility events such as walks, festivals with a theme (i.e. kite flying festivals that can feature kites with the teddy symbol on them), public wall painting events and health fairs.
- Persons who can commit can form a BTS Support Group in their community or school to bring people together and plan further advocacy.
- Once a group establishes in a community and has gained experience in BTS Campaign advocacy, they can mentor a neighbouring community on how to successfully plan and implement awareness raising activities.
- High School teachers and principals can be instrumental in spreading awareness of the BTS Campaign. There is huge potential for schools to hold BTS Teddy Awareness days, featuring wall painting and other outdoor activities. Similarly to the adult community groups, students who show commitment to the cause can be entrepreneurial, starting their own websites, designing fliers, creating songs and performances and making posters.
- Support networks in schools/universities, companies, religious organizations or communities can create a groundswell of awareness. Networks tend to form naturally when the time is right in a particular environment and they tend to have their own driving forces and methods of communicating and carrying out messages. It is vital to allow them to use their own methods, rather than impose something foreign.

GAINING MEDIA ATTENTION

A key method to gain the media and public attention in the midst of all the other social justice messages that agencies and individuals promote is to make the BTS Teddy Symbol highly visible. In addition, it is vital to have key individuals in society who can champion the cause and speak effectively to the media and public with the correct information and messages.

METHODS

1. The first awareness raising march/walk that you plan can commemorate a relevant UN or internationally recognized Advocacy Day or Month. (i.e. International Day for the Elimination of Violence Against Women on November 25 or Universal Children's Day on November 20). By holding the event on a relevant internationally-recognized day, the press/media will be more likely to cover the event and promote it in print, radio and television news shows. Teams should try to choose a date, however, that doesn't compete with another planning activity/event in the country that may be more note-worthy or attract press.
2. Send out press releases to all relevant media outlets (print, radio and television) informing them about the BTS Campaign and symbol, as well as relevant information about the upcoming March/Walk. Attaching photographs of past events can stimulate interest from the media.
3. Keep in communication with all Editors to find out what they are looking for, as well as emailing and calling specific journalist contacts personally the night before an event to encourage them to come. It is sometimes better to also send the marketing information through other organizations, as well as the planning organization.
4. Create large-scale banners featuring the BTS symbol and "end child sexual abuse" tagline that advocates can hold during an outreach event and the media can easily photograph and capture;
5. Purchase/print up to 100 T-shirts that feature the teddy symbol and tagline for key Team members and community advocates to wear during outreach events and to sell.

In Trinidad and Tobago, team members distributed approximately twenty BTS t-shirts to key stakeholders to wear during outreach events; the remaining t-shirts were sold (see How to Raise Funds). This strategy entailed budgeting money for t-shirts when creating a budget for the Campaign. While initially it may seem like a frivolous way to spend funds, this was actually the key to the T&T team promoting the BTS blue teddy symbol on a large national scale. When other persons at outreach events saw the teddy t-shirts they were eager to purchase their own.

The result: The BTS blue teddy symbol stood out about all other images in photographs and news clips in the media. This led to other community members throughout the country, including business owners, to become aware of the Campaign and eager to become involved in awareness raising events.

6. In any press interview, Team members should be sure to state that there are many opportunities for community members to become involved and make it clear where/who to contact for more information.

HOW TO INVOLVE COMMUNITY MEMBERS IN ADVOCACY EFFORTS

Once the BTS Campaign symbol gains public visibility through a large event such as an awareness raising march/walk and gains press coverage, some concerned philanthropists in the country will likely come forward with a desire to become more involved in the advocacy campaign. Team members should also be sure to contact relevant, charitable business owners and agencies that they believe may be interested in assisting to further the cause. Once your Team finds interested persons/agencies you may want to consider following the recommendations (below) when planning further advocacy efforts with them.

METHODS

- Meet with them and find out exactly what they are interested in and how they can best offer support. Every individual/agency will have their own outreach ideas and you should try to work with them as best your Teams can, while still maintaining the integrity of the Campaign.
- Provide a brief presentation that educates them about the BTS Campaign, overall programme and advocacy options that they can choose from to help promote the campaign in their community.
- Provide them with the *BTS Call To Actions* (see below). You may need to or wish to edit and reorganise the *Calls to Action*, or even make major changes to suit the needs of your particular community, environment and culture. The community members will know best what sort of activities and events their members would most gravitate to and what would be most successful. Always keep the Campaign message, tag line, and aims in mind.
- Make connections and grow relationships with leaders in the community that can speak out on the issues at events. Leaders may include community social workers, mental health professionals, community activists, gender experts, or community or NGO leaders. Remember to also engage speakers that already have support networks.
- Reach out to high profile individuals in the community that can become faces of the Campaign or sponsors.

CALLS TO ACTION

1. Organize a [Break the Silence Wall Painting Event](#) bringing children and community members together to paint and write on a wall—to raise awareness of the issues and campaign.
2. Organize a [Break the Silence Walk](#) to publicize the campaign, hand out information and raise awareness of the issues and campaign. T-shirts are a great way to get a message out in the public.
3. Organize the [installation of a Break the Silence Community Sign](#) in a high visibility location in your community and an occasion to hand out information on the issues and the campaign. Your Team can provide the sign, communities organize the materials and labour for installation.
4. [Take the Break the Silence Pledge](#). Commit to take action. a.) Print out the pledge, get a photo of yourself/your group holding the pledge and share widely via Facebook, or online. Read the pledge and supporting information to your class/group and put up a poster in your school/community space.
5. Join the [Break the Silence: end child sexual abuse Page and Cause on Facebook](#) and share with your friends.

Page: <http://www.facebook.com/breakthesilenceendCSA>

Cause: <http://www.causes.com/causes/523954-break-the-silence-end-childsexual-abuse/about>

6. Advocate in your community. Start a [Break the Silence Group](#) in your school or community and organize with the group to achieve the Break the Silence Calls to Actions one at a time.
7. If you are able to contribute professional expertise, or be a spokesperson or leader for this campaign, join the [Break the Silence Network](#). *(contact IGDS, The UWI, St. Augustine for more information)*
8. Become a [Break the Silence Sponsor or Partner](#) and show your support for your community, country and the campaign.

HOW TO RAISE FUNDS FOR THE BTS CAMPAIGN

While you may be able to budget some programme funds toward BTS campaign promotional items such as pamphlets, pencils and/or other relevant items, you likely won't have the type of budget that is necessary to really promote the Campaign and symbol on a large scale. Fundraising, therefore, becomes a vital component to campaign management. As with any other nonprofit campaign, team members should continuously research for possible funding opportunities with nonprofit, governmental and private organizations. Along with these more traditional methods, team members can continuously raise funds for the Campaign by selling Teddy merchandise. Selling merchandise (vs. giving it away) is effective for two main reasons:

1. You can sell the items at the same cost you buy them for so that they are very reasonably priced. All money can go back into purchasing more merchandise to further the BTS Campaign visibility.
2. When community members purchase the low-cost items vs. receiving free handouts they report feeling a sense of ownership to the BTS Cause.

METHODS

1. The key to selling merchandise is to strategically consider which items to purchase and sell. The Trinidad and Tobago team members decided an excellent item to sell would be teddy awareness raising pins (similar to HIV/AIDS red ribbon pins). The Teams launched these pins in Trinidad and Tobago in 2010 during awareness raising campaign activities. UNICEF launched the BTS Campaign, Symbol and pins to the Caribbean Region in 2012 at the *Sub-Regional Caribbean Meeting – Follow up to the UN Study on Violence against Children and Adolescents* in Jamaica and at the *Sub-Regional Conference on Child Sexual Abuse to Advance the UNITE Campaign*, in Barbados.
2. To purchase the pins for selling and distribution during your own CSA and incest awareness raising initiatives, you can visit the website of the supplier- The Pin People – at <http://www.thepinpeople.com/child-sexual-abuse-awarenes-pins-blue-teddy-bear-pins/>
3. To learn more about other merchandise that you could possibly sell during awareness raising and fundraising efforts, and/or for ideas access <http://sta.uwi.edu/igds/breakthesilence/btsmerchandise.asp>

end



**Break the Silence:
end child sexual abuse**

ChildLine Trinidad and Tobago

Dial 131 or 800-4321

The ChildLine helpline service is available 24 hours a day, every day of the year, including weekends and public holidays. It is a free, anonymous and confidential, telephone helpline and listening service for children and young persons in trouble or danger or who simply need someone to talk to.

Children's Authority T&T

Dial 996 or 800-2014

The Children's Authority of T&T is a specialised agency with the responsibility for the care and protection of children, especially those who are at risk or have been victims of abuse or neglect. The Authority advocates for the rights of children.

Other ways to make a report:

Send a fax: 625-4986

Email a report: Registry@ttchildren.org

Mail a report: Children's Authority T&T,
35A Wrightson Road, Port-of-Spain, Trinidad

Police: 999

National Family Services Division:
624-8218 or 627-1163
