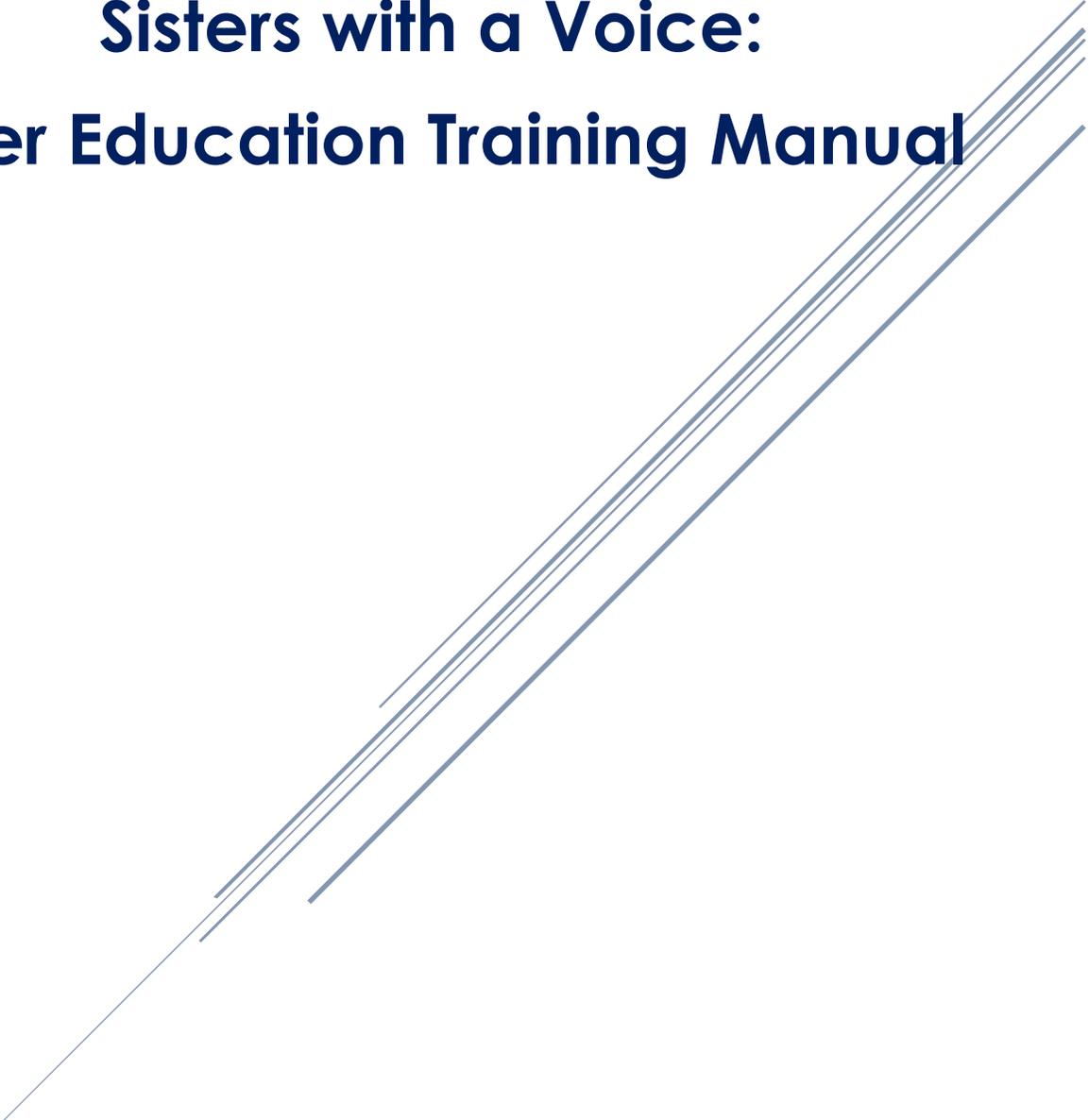


Sisters with a Voice: Peer Education Training Manual



April, 2018
Harare, Zimbabwe
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Introduction

The *Sisters with a Voice* programme (Sisters for short) started in 2009, and was originally called *Vimabanai* or “we trust each other” in Shona. Since then, it has grown to be a programme with 36 fixed and static clinical sites, and has seen over 65,000 sex workers. It continues to support sex workers across Zimbabwe with a range of prevention, treatment, and social services.

Peer education has been at the core of the Sisters programme from its inception. As Sisters started up in new sites, one of the first activities was to identify local sex workers who wanted to take an active role in the programme. Peer Educators play a critical role, without which the programme would struggle. They liaise between programme staff and sex workers, and they promote health and well-being within their peer group. Peer Educators integrate health education, community mobilization, and individual counselling into their work. They are true “frontline” workers and understand the needs and priorities of the sex worker community better than anyone; but they also represent the Sisters programme and help build acceptance and service uptake in the community.

Peer Educator training content has evolved over the years as new components were added to the programme, or to reflect changes in medical knowledge and health policy (such as new ART guidelines, availability of PrEP).

The basic aims of the training have remained the same, which are to:

- (1) Increase knowledge about sex work, health, and services**
- (2) Build skills for community outreach and group facilitation**
- (3) Strengthen collective capacity for action**

Newly recruited Peer Educators undergo an initial 4-day training workshop, which covers all the relevant background knowledge, introduces roles and responsibilities, and familiarises Peer Educators with the various resources they will use in their work, such as the activities in the Peer Educator Manual and data collection forms. Lots of time is devoted to practice and role-plays between trainees to build their confidence in managing situations they may encounter.

Following the initial training, Peer Educators reconvene annually for a shorter, refresher workshop for 2-3 days. During this training, key messages are emphasised, and Peer Educators are provided with any new information or programme materials that may be required. Again, much of the time is devoted to practicing different scenarios, sharing experiences and discussing different ways of addressing common challenges.

This manual brings together the most recent version of Peer Educator training sessions, and includes a sample timetable, notes to trainers, and all teaching slides and activities. Powerpoint presentations can be downloaded separately within the package.

The training package is designed to be interactive, with the inclusion of practice-based individual and group activities. Although a lot of information also must be conveyed during the training (on Sisters services, the legal status of sex work in Zimbabwe, accurate information on sexual and reproductive health, etc), every effort should be made to actively engage participants and encourage group learning. The emphasis throughout the training should be on how peer education can be a basis for action to improve sex workers’ health and well-being.

Overall Goal of the Training Package

To fully prepare Peer Educators for their role and responsibilities within the *Sisters with a Voice* programme so that they are confident and competent in delivering all peer education activities.

By the end of each training workshop, participants should:

- Understand what peer education is and what makes a good Peer Educator
- Be familiar with the structure and services of the Sisters programme
- Demonstrate basic knowledge of sexual health, including HIV, and how to prevent infections and unwanted pregnancy
- Be able to facilitate group activities from the Peer Education Manual
- Appreciate the importance of documentation and reporting, including knowing how to fill out Sisters record-keeping forms
- Display confidence in working with local sex workers and trying to solve problems that emerge

Preparation for the training

Good preparation is required for all training to ensure everything runs smoothly. Below are a few tips for maximizing successful implementation of the Peer Education training package.

Number of Participants: Given the participatory nature of this training package, it is likely to work best for groups of 25-35. A larger group is more difficult to manage, particularly during the small group work and discussion sessions. For refresher training, it may be best to schedule different several smaller workshops or split trainees into 2 conference rooms rather than try to manage all national Peer Educators at once.

Number of Trainers: It is useful to have at least 3-4 facilitators or training assistants to take turns leading sessions and help during the practical exercises. Facilitators can rotate among groups to answer questions or help lead them in the right direction. Roughly 1 facilitator/ training assistant per 8-10 participants is best. For example, a group of 30 trainees is ideally facilitated by 3 trainers. The ratio of Outreach Workers to the Peer Educators they supervise provides a useful guide for trainings.

Venue: The training requires a room large enough for all participants to fit in comfortably, with an unobstructed view of the power point projector. Setting chairs in a semi-circle, so participants can see each other as well as the trainer is better than “classroom style” seating. Space in the middle needs to be available for role plays and dancing! Enough space is also required for small groups to sit together during small group activities, ideally around a table, although chairs can be moved into circles throughout the room. Alternatively, separate spaces can be made available for groups to work in.

The Sisters experience to date suggests that a residential venue for the training (such as a hotel or ZESA training centre) is appropriate. Peer Educators come from all over the country for the training, and staying in the same place offers opportunities for them to socialise outside of the classroom and also makes it more likely that they will arrive on time and attend all sessions.

Materials: Prior to starting the training, it is important to ensure there are enough copies of handouts, materials for small group work, flipcharts and pens, and that the projector is working. It is especially important that you bring enough Peer Education Manuals for each participant to take home.

Equipment: A power point projector, screen (or blank wall) and computer are critical for showing the presentations.

Timing: The sample workshop agenda provided in this manual suggests a 3.5 day training for new recruits, followed by 1.5 days for annual refresher training. Participants will need to arrive at the venue on the evening before the start of training but can depart after lunch at the end.

Sample New Recruit Training Agenda

Date	Time	Session title
		1st day
Day 1	8:30 - 9:15 am	Introduction, Ground Rules, Expectations Training Objectives Exercise #1: We are all equal
	9:15 - 10:00 am	Sisters with a Voice: History, structure and activities
	10:00 -10:30 am	Tea Break
	10:30 -11:30 am	Peer education: Exercise #2: What is peer education? Roles and Responsibilities Exercise #3: What qualities do I need?
	11:30-12:30 pm	Exercise #4: How do Peer Educators reach other sex workers? Peer Education Strategies
	12:30-1:00 pm	Introduction to the Peer Education Manual
	1:00 - 2:00 pm	Lunch
	2:00 - 5:00 pm	Introduction to sessions from the manual: <ul style="list-style-type: none"> • I am unique • My support network • My sisterhood • We are stronger together
Day 2	8:30 – 8:45 am	Day 1 Recap
	8:45 – 9:30 am	Time to Practice
	9:30-10:00 am	Introduction to sessions from the manual <ul style="list-style-type: none"> • High and Low Risk • Knowing My HIV Status
	10:00 -11:00 am	Tea Break
	11:00 – 12.30 pm	Introduction to sessions from the manual <ul style="list-style-type: none"> • Gender norms & HIV transmission • Gender based violence
	12:30 - 1:00 pm	Practicing facilitating group sessions
	1:00 – 2:00 pm	Lunch Break

	2:00 - 3:30 pm	Visit to the Marketplace: <i>Groups circulate among the "stalls" on different sexual health topics</i>
	3:30 - 4:00 pm	Q&A panel from Marketplace Condom practice relay race!
		3rd day
Day 3	8:30 - 8:45 am	Day 2 Recap
	8:45-10:30 am	Introduction to new sessions from the manual: <ul style="list-style-type: none"> • Alcohol and Risk • Safe Spots • Refuse, Delay, Bargain
	10:30 - 11:00 am	Tea Break
	11:00 - 1:00 pm	Practicing facilitating group sessions
	1:00 - 2:00 pm	Lunch Break
	2:00 - 4:00 pm	Exercise 5: Handshake Game Introduction to 4 extra sessions not included in Peer Education Manual (+ Practice) <ul style="list-style-type: none"> • The Tree of Health • Making Something a Habit • Adhering to a Healthy Life • What is PrEP?
		4th day
Day 4	8:30 - 8:45 am	Day 3 Recap
	8:45 - 10:00 am	Reporting forms for M&E Targets and case loads Completing forms correctly
	10:00 – 10:30	Signing contracts Confidentiality Oath
	10:30 - 11:00 am	Tea Break
	11:00 – 12:30	Exercise #6: Problem Solving Challenges of Sex Work and How to Work Together to Reduce Them
	12:30 - 1:00 pm	Closing Remarks Questions Wrap-up
	1:00 - 2:00 pm	Lunch & departures

Sessions & Trainers' Notes

After registration of all participants, you can start with a song!

Then conduct an Introduction Exercise in pairs: ask participants to turn to their neighbour and have a brief conversation to get to know each other. (If there is an odd number of participants, there can be a group of 3). After 2-3 minutes, ask each participant to introduce the other person, stating their name, where they come from, and 1 "fun fact" about them.

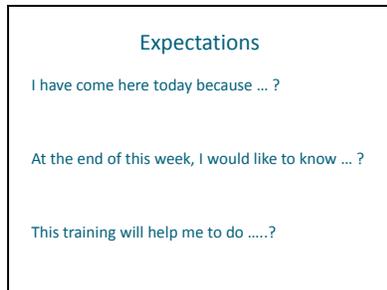
Presentation #1: Introduction to the Training

Slide 1



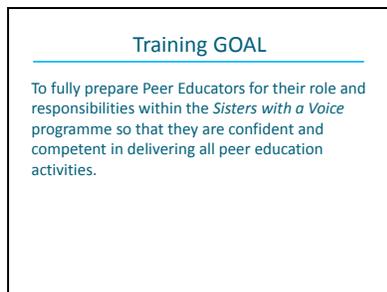
Introduce yourself and give a bit of background, including your role in the Sisters programme and specifically in the training. If you haven't already gone around the room for personal introductions, do so now.

Slide 2



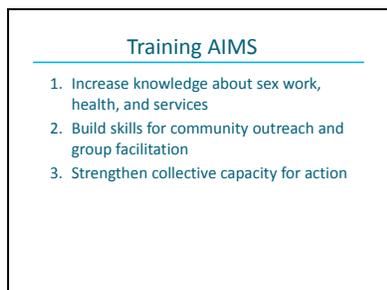
Ask the group to respond to these 3 questions and note down their expectation on a flipchart.

Slide 3



Read out this statement and make sure participants understand it.

Slide 4



Read these out and answer any questions

Slide 5

This means that when you leave,
you will be able to:

- Understand what peer education is and what makes a good Peer Educator
- Explain the structure and services of the Sisters programme
- Demonstrate basic knowledge of sexual health, including HIV, and how to prevent infections and unwanted pregnancy
- Facilitate group activities from the Peer Education Manual
- Fill out all Peer Educator and Sisters record-keeping forms
- Work confidently with local sex workers and try to solve problems that emerge

These summarise the knowledge and skills that participants should gain during the training. As you read them, think to yourself about how well they match the expectations that were mentioned at the start.

Slide 6

What will this training cover?

The next 7 slides provide an overview of what the training will cover.

Slide 7

1. What is a Peer Educator?

- What is peer education?
- What do Peer Educators do?
- How do Peer Educators work within the *Sisters with a Voice* programme?
- What is your role as a Peer Educator?
- What will your regular work be like?
- How will Sisters support you?

Slide 8

2. Peer Educator Manual

- You will receive a Peer Educator Manual
- You will become familiar with its content
- We will show you how to facilitate the sessions and what their purpose is
- You will practice activities with each other

Slide 9

3. Community Mobilisation

- What does community mobilisation mean?
- Planning a session
- Running good sessions
- More practice!

Tell participants that the whole training is going to be interactive and participatory as possible! We can only work for community mobilization among other people if we feel mobilized ourselves as Peer Educators!

Slide 10

4. The Market Stall

- Fun activity to learn about a lot of topics
- We will cover HIV, family planning, and other sexual health topics

Slide 11

5. Other topics

- Gender Norms and HIV
- Gender Based Violence
- HIV Sexual Networks and Confronting Stigma
- Advocacy
- Human Rights

Slide 12

6. Reporting, Monitoring & Evaluation

- You will learn about record keeping for the Sisters programme
- You will practice filling out reporting forms
- We will explain what your targets will be and what a case load is
- We will answer all your questions about being a Sisters Peer Educator

Slide 13

7. Signing Contract & Oath

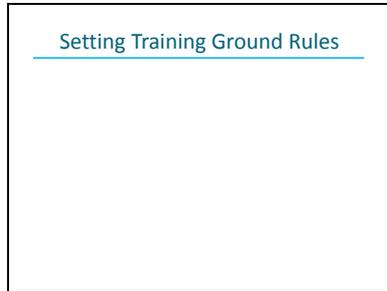
- On the final day, you decide if you want to commit to being a Peer Educator for at least 1 year
- You will be given a job description
- You will sign a contract to be a Peer Educator
- You will promise to keep information related to your work (especially personal information about other sex workers) confidential and private.

Slide 14

Will we meet your expectations?

Refer back to the flipchart with the expectations that you wrote down during the first discussion. Are participants satisfied? Address any unrealistic expectations and clarify what the training can (and can't) offer.

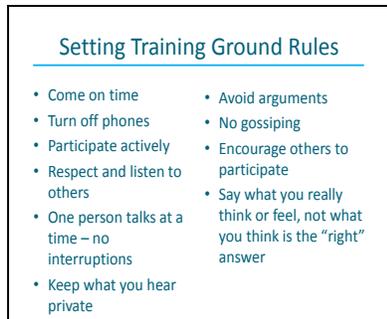
Slide 15



Now ask participants to agree to rules that will be followed during the training. Use another piece of flipchart paper to write these down, and then display the paper somewhere visible for the whole 4 days.

The next slide provides some suggestions in case they haven't already been mentioned.

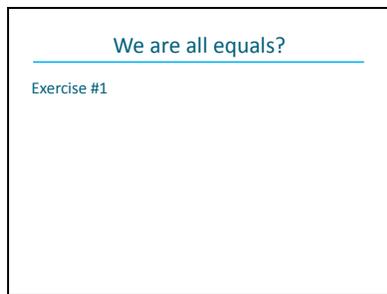
Slide 16



You can add these to the Ground Rules list if they are not already there.

Remember to refer to the agreed rules during the 4-day training and point out if they are being broken!

Slide 17



Conduct Exercise #1 (described below these slides)

Slide 18



Exercise #1: We are all equal

Give each participant a piece of paper and a pen. Ask everyone in the group to write the following on their piece of paper, being careful that no one can see what they write (and say no one will see these):

- Name
- Age
- Education level
- Position in their family

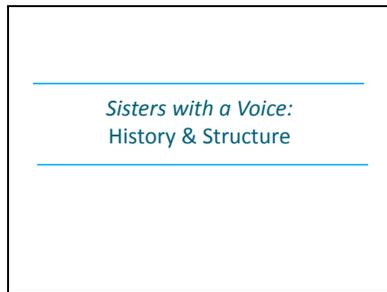
- Position in their community, e.g. councillor, church warden, out of school youth, trader

Ask participants to fold their paper up. Pass around a hat (or another container) and ask each participant to drop their papers into it. Explain that they have given away their titles, education and status and for the purposes of the training, we are all equal. We all have something valuable to contribute, and we all have expertise about our own lives and experiences – no is more of an expert than anyone else. We can share our ideas as equals and learn from each other. No one needs to worry about what others think about them.

Everyone can resume their social status after the training!

Presentation #2: The Sisters with a Voice Programme: History, structure and activities

Slide 1



This presentation will give some background to the Sister programme for those not familiar with it.

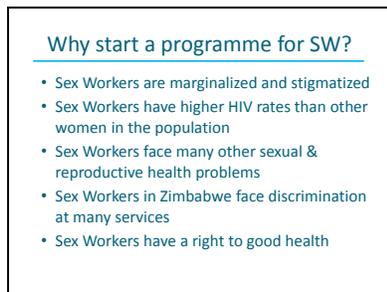
This is a good session for emphasizing that Sisters is a constantly changing and evolving programme, with new activities and services added over time.

Slide 2



Ask the group for their own reasons for why sex workers need their own programme in Zimbabwe?

Slide 3



Are these similar to what the group suggested?

Slide 4

Why start a programme for SW?

- Risky sex is sometimes unavoidable
- Experiencing violence is common
- Sex work is illegal in Zimbabwe, which makes it hard for sex workers to protect themselves
- Working together could help sex workers

Slide 5

'Sisters with a Voice'

- Started in 2009 as Vimbanai
- Part of the National AIDS Council's Behaviour Change Programme
- Started with a focus on HIV to:
 - Reduce HIV acquisition among SWs
 - Reduce HIV transmission to their clients
 - Improve the rights of SWs

Although the Sisters programme is part of the National AIDS Council and the national HIV strategy, it is not just about HIV. It is widely recognized that sex workers' ability to stay safe, avoid or treat HIV, and prevent other health problems relies on their ability to work together and improve their conditions and gain control over their lives.

Slide 6

History of 'Sisters with a Voice'

2009

- Set up two model programmes - one urban (static) and one highway (outreach)
- Harare, and Nyamapanda corridor



Slide 7

The original 2 models

Static sites	Highway sites
Drop-in centre which aims to: <ul style="list-style-type: none"> – Open daily – Venue for socialising / solidarity – Clinical care /Condoms – Outreach through peer educators – Legal advice 	Mobile centres: <ul style="list-style-type: none"> – Key points along highways – One day / 2 weeks – Staffed by nurse and outreach worker – Programme supported by Peer Educators between visits

From the very beginning, there have been some sites within clinics and others that set up regular, but temporary, services on a weekly or every-other-week basis.

Slide 8

History of 'Sisters with a Voice'

2010

- expanded to 16 sites nationally (3 static and 13 'mobile' sites)
- Harare, Mutare and Bulawayo



Slide 9

Rapid Expansion

2013-2018

- Total of 36 sites (6 fixed 30 'mobile') – new activities:
 - LARC - IUD and implants
 - Cervical cancer screening
 - Community mobilization
 - Legal advice (training of SW paralegals)
 - YWSS programmes
 - Involvement in DREAMS initiative
 - Advocacy component
 - District medical staff, police and media

The programme continues to develop, for example, setting up Self Help Groups for sex workers has started in Harare and will be expanded to other sites in the future. Including male and transgender sex workers will also become part of the programme.

Slide 10

We now have 36 sites!



A map of Zimbabwe showing the distribution of 36 sites. The sites are marked with red dots across various districts, including Harare, Bulawayo, and several rural areas. The map is titled 'We now have 36 sites!'.

(This slide may need to be updated in future if there are more or less sites)

Slide 11

Clinical Services Provided

- A friendly clinic with nurses who understand sex workers' needs and issues
- Routine check-up
- Free condoms and contraception
- HIV testing and counseling (including self testing)
- Referral for HIV positive women for ART
- Syndromic management of STIs
- Safer sex counseling
- Cervical cancer screening

Slide 12

Social Services Provided

- Network of Peer Educators
- Community mobilization meetings
- Adherence Sisters (buddy-support)
- Legal advice and referrals

Slide 13

Engagement with Research

- The Sisters programme has been involved in many research studies on how best to deliver services to sex workers
- Many surveys of sex workers conducted across the country contribute to good national data
- Interviews and discussions with sex workers help share their realities and opinions with the public
- Research can bring attention to the needs of sex workers and advocate for better services

Slide 14

Peer Educators

- xxx trained nationally
- Initial 4 days training, 2 day refresher annually
- Community supervision through programme Outreach Workers
- Monthly supervision meetings with nurses and outreach workers
- Monthly stipend

(Please update this slide each time with current figures!)

Slide 15

To date

- Over xx,000 women seen
- xxx visits
- xxx women treated for STIs treated
- xxx HIV tests performed
- Xxx women diagnosed HIV positive and referred for ART services

(Please update this slide each time with current figures!)

Slide 16

Sisters Staff

<p>Staff</p> <ul style="list-style-type: none"> • Programme Director • Coordinators • Social Scientists • Nurse Counselors • Data/ IT 	<p>Staff</p> <ul style="list-style-type: none"> • Outreach Workers • Junior Coordinator • Junior Outreach Workers • Outreach Worker Interns • Drivers, Caretakers • Peer Educators • CAB members
---	--

Sisters requires a very large team working together to deliver all the services across Zimbabwe

Slide 17

Programme Challenges

- “Breaks” in funding, which means clinics do not operate for a few months
- Reaching young sex workers who don’t always identify as sex workers
- Reaching out to police

No programme is perfect, and Sisters also faces challenges. The aim is to try to solve some of these problems every year and constantly improve.

Slide 18

Lessons Learned by Sisters

- It is important to sensitise stakeholders and policy makers so we can work freely
- Partnerships with sex workers are important to make sure we meet their needs
- The media can have misconceptions about sex work in Zimbabwe so we need to publish articles on sex work that are accurate (positive and negative)
- We can learn from experiences in other countries

13/02/2018 18

We are constantly learning.

We depend on sex workers to help us improve.

Slide 19

Learning Visit to India in 2013

- SW is illegal in India like in Zimbabwe, but they have a very active sex workers' rights movement
- Peer Educators allocated a case load each
- Peer Educators are able to reach out to young SW
- Stakeholders actively involved in SW issues e.g. the judiciary and the police

11/02/2018 19

Slide 20

In summary

- National programme has grown from 5 sites in 2009 to 36 in 2018
- Large numbers of sex workers are accessing reproductive health and HIV services
- Many parts of Zimbabwe are covered
- Programme continues to develop in line with national HIV prevention and treatment efforts

Slide 21

Thank you!
Tatenda!

Exercise #2: What is Peer Education

Brainstorming: This is an individual activity. Ask participants to write down some ideas about the following (5-6 minutes):

- What is a peer?
- What is peer education?

In turn, ask each participant to contribute an idea for each question (maybe best to do 1 at a time, and write them up on separate flipcharts). Ensure everyone contributes at least 1 suggestion.

ADD these to the list if they have not been mentioned:

PEER: Someone with a similar background or experience to you. A friend or colleague who lives in a similar way. For Sisters, local sex workers are your peers, even if some of them are quite different to you, or are not your friends. The fact that you share the experience of being sex workers makes you PEERS.

PEER EDUCATION:

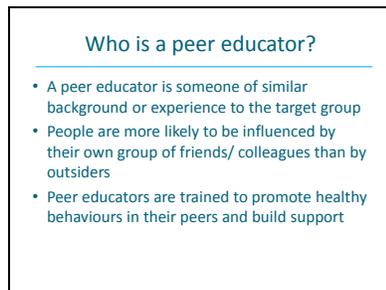
- **Sharing useful information and skills with your peers**
- **Using daily interactions as a way to improve knowledge among peers**
- **Reaching out to your peer group to build social networks and support**

Presentation #3: Peer Education

Slide 1

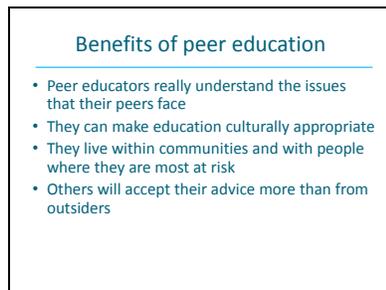


Slide 2



This should be a re-cap of the ideas shared by participants and listed on flipcharts. It is just to serve as a reminder

Slide 3



Peer Education has been shown to work because people prefer learning from others in their social group.

Slide 4

Peer Education is widespread

In addition to sex workers helping each other, here are some other examples of peer education:

- Factory workers giving HIV prevention talks in the cafeteria during lunch hour
- Students meeting in dormitories to demonstrate correct condom use
- Military personnel counseling new recruits
- Experienced mothers reaching out to newly pregnant women to talk about antenatal care and breastfeeding

Peer Education has been used among many groups, not just sex workers. It is a good way to reach many people quickly through their own networks.

Slide 5

What do peer educators do in the Sisters programme?

- Work with all sex workers in communities where they live and work
- Ensure that women starting out in sex work know how to protect themselves and practise safely
- Improve the supply of condoms to SWs
- Work with SW to improve consistency of condom use
- Encourage women to use the clinic for sexual and reproductive health care, including HIV testing
- Support women to stand up for their rights
- Work with Outreach Workers and other staff to update activities and inform sex workers of changes

This is a summary of most of the activities that Sisters peer educators perform as part of their regular work.

Slide 6

Roles and Responsibilities of a Sisters Peer Educator (1)

- Encourage SW to work together and participate in activities
- Provide information about Sisters programme
- Carry out one-on-one or small group discussions
- Provide support and help solve problems
- Distribute female and male condoms, demonstrate their use and advise on condom negotiation skills

Slide 7

Roles and Responsibilities of a Sisters Peer Educator (2)

- Support women going for HIV and STI testing and treatment
- Support women going to the police / lawyers / rape crisis centre
- Provide a link between programme staff and SWs working in the community (can give feedback)
- Refer women to other available services
- Complete monitoring and reporting forms

Slide 8

Exercise #3: What qualities do I need to be a good Peer Educator?

- Divide into small groups of 5-6 people
- Spend 10 minutes discussing what qualities you think a successful peer educator will need
- Be prepared to present your ideas at the end!

STOP on this slide and conduct the small group activity. As each group to present after about 10 minutes of discussion and THEN show the next slide.

Slide 9

Qualities of a good peer educator

- Is a Sex Worker!
- Knows the local community
- Can be a role model
- Has good communication skills
- Understands the issues facing the people with whom she works
- Is accepted and respected by peers
- Wants to help and support all sex workers to stay safe and have a better life

How does this list compare to what the participants came up with? They probably had a longer and more comprehensive list!

Slide 10

A good peer educator is NOT:

- An expert in everything (it's ok to say when you don't know something)
- Better than her peers
- Someone who gossips about the sex workers with whom she is working

Peer educators can't know everything all the time – they should seek clarification if they face a question or problem that is difficult.

Confidentiality is one of the most important aspects of Peer Education and no Peer Educator should ever share personal information of others.

Slide 11

Thank you!
Tatenda!
Siyabonga!

Exercise #4: How do Peer Educators reach other sex workers?

Small group work: Ask participants to get back into the same small groups of 5-6 people

Now that we are all clear on what Peer Educators DO, and what QUALITIES they need, let's think about some of their SKILLS and STRATEGIES. One of the first things a new Peer Educator must do is try to identify as many sex workers as possible throughout the local community. *How can they do this?* Give the group about 15 minutes to discuss. Go around to each group to hear their ideas (no formal presentation is required)

Presentation #4: Peer Education Strategies

Slide 1

Strategies we can use as Peer Educators

Note down the feedback from groups in Exercise #4 on a flipchart

NOTE: This should be a very interactive session. Stop along the way for sharing ideas, participant experiences, and discussion. Ensure there is enough time for the role plays.

Slide 2

How to identify sex workers in public areas?

Ask participants to call out suggestions

Slide 3

Some ways to identify Sex Workers whom you don't know

Observations:

- Go to known "hot spots" for sex work
- Are there lone women wandering around with no clear purpose?
- Can you recognize behaviour meant to attract clients?
- Are there people you can ask in the community?

Do these match what was suggested?

Slide 4

Sources of Information

- Taxi or kombi drivers often know where sex workers hang out
- Street kids can inform you
- Other sex workers in specific locations
- Health or other project staff

Slide 5

Strategies for extending contacts

- Work with sex workers with whom you already have contact
- Visit pubs, truck stops, places for "braai" and streets
- Strike up friendly conversations with vegetable vendors in the markets
- Befriend men in markets and public places who might know them
- Vendors near hotels often know who visits the hotel for sex work
- Pretend you are new to an area and ask around

Slide 6

How do you identify home based sex workers and establish rapport?

Ask participants to call out suggestions

Slide 7

Linking up with home based SW

- Observe women who pick up relatively large numbers of condoms from outlets
- Collect information from clients that we may know
- Ask staff in bars (they sometimes pass on phone numbers of SW to clients)

Do these match what the group said?

Slide 8

How do you educate sex workers in public places without affecting their dignity?

- Go to a park or place that is not crowded
- Talk in public toilets where no one takes notice
- Explain about the programme and its objectives without using any flyers
- Use fingers rather than a penis model for the condom demonstration
- Fold and use a leaf to represent the vagina.
- Carry out a conversation while walking
- Talk in a quieter corner of a busy bar

Slide 9

Story 1

You are having a discussion with a home based sex worker at her home. Then the sex worker's husband arrives.

How can you manage this situation?

Give the group 2-3 minutes to think about this. Ask for volunteers to respond.

Some ideas are:

Say you are from the Dept of health and are giving health info to the wife...e.g. about cholera or some other current problems in the area

Say you are from a self help group and are asking his wife to join

Hide any flyers you are holding

Tell him you are discussing women's issues and he should not be a fifth leg!

Say you are a friend or relative who was just passing through. You need to know some details about all the SW you visit for this kind of situation.

Slide 10

Story 2

You visit the home of a sex worker and her aunt, uncle, brother or other relative answers and comes to the door.
How will you handle such a situation so that you are able to talk to her?

Ask for volunteers.

Similar strategies can be used as above.

You could ask to speak to the SW outside, in private, saying you have a personal problem for which you are seeking advice from her as a friend.

Slide 11

How do you network with hostel based sex workers?

Ask participants for suggestions. Some ideas are:

Meet local lodge owners and get information from them

Promise the owner that you will not talk to the police, try to gain confidence and get information

Befriend lodge boys and get information from them, some even give them tips

Ask a sex worker who is new to the area and send her to gather information or deliver information on our behalf

Slide 12

How do you establish trust and build rapport?

- Introduce yourself as a sex worker, don't mention that you are a peer educator right away
- Share problems and issues with the sex worker as with a friend
- Offer advice on their problems (refer to the drop in centre if it is reproductive health related)
- Keep them informed about the activities of the programme
- Maintain absolute confidentiality and share no information with the police – and make this clear

Ask the group to divide into pairs and practice the skills to talking to a new sex workers to encourage her to join Sisters and share her problems.

After each person has had a chance to play both role, ask 3-4 pairs to act out their role plays to the whole group.

Slide 13

ROLE PLAYS

- Work with one other person – someone you have not worked with yet
- One of you should be the Peer Educator, and the other one is the SW that is being approached for the first time
- Practice introducing yourself and your aims and trying to build trust
- After 5 minutes, switch roles

Slide 14

Teaching Condom Negotiation Ideas

Slide 15

How do you convince men who say condoms reduce their pleasure?

- Casually tell them all SW use condoms: "You will have to wear one wherever you go, so if you feel its interesting here and want to stay, use a condom"
- Appeal to their good sense: "You have a family and this is my livelihood. So wear a condom and protect both our families"
- Be direct: "You have no choice, if you want sex use a condom" OR "I don't need your diseases so wear a condom"
- Take the money in advance, then they are more likely to agree to using a condom without much fuss

Slide 16

Condom negotiating (2)

- Tell them that if they wear a condom they will last longer and be able to have sex with me up to 2hrs!
- For those who take off condom during sex, refuse to let them continue so that next time they will not try the same trick
- Tell them about different condoms like the flavored, ribbed, extra thin kind to make it appealing
- Tell him "if you wear a condom I will make sure I give you pleasure"

Slide 17

Condom negotiating (3)

- Say "if you stay well, you can go to other hundred women like me"
- Try "if I get pregnant, will you give me some money for the abortion?"
- Appeal "if I become pregnant, I cannot do sex work for many months. What will I do for my livelihood then, what will I eat?"
- OR "If I become pregnant, the child will could resemble you and everyone will know that you are the father of my child"

Slide 18

Any other condom negotiating tips you can share?

Participants are experiences sex workers. How do they negotiate condom use? What are the most effective strategies?

Slide 19

Drunk men and condoms

- Avoid any kind of argument with a drunk client
- Talk sweetly "if you want me, use a condom"
- Sometimes try to give them no choice
- Put the condom on him yourself, it's exciting and he won't take it off
- Begin by massaging, fondling or kissing the client to encourage him to agree

Slide 20

Drunk men and condoms

- Pretend to share his drink but pour most for him so he is too drunk to realize that you are putting a condom on him
- Totally drunk men are easier to handle than half drunk
- During oral sex, put the condom in your mouth, unroll it onto the penis without client's knowledge (practice first!)
- Tell him "I have run out of contraceptives that's why we should use a condom"
- Refuse to participate at the last minute. Then they have no choice but to use a condom

Ask participants to share any personal experiences dealing with drunk clients

Slide 21

Role Plays

- Divide into groups of 3
- Take turns playing A Sex Worker, A Client and being an observer
- The Client should try to convince the sex worker not to use a condom (or be drunk and argumentative in general)
- The Sex Worker should try different strategies to convince him
- The observer takes notes and gives feedback at the end (can suggest other strategies the sex worker could have tried)

Give time for more role plays. In this case, ask the participants to group themselves as 3 people so that they each play a sex worker, a client, and an observer who can give feedback at the end.

Slide 22

How to convince SW to visit the Sister Clinic for STI treatment

- Early treatment is good to avoid complications, and it will also keep you in business
- Going to the centre will take care of general aches and pains, you will be able to work harder and earn well
- It is better to go before the symptoms are serious and before they become visible to clients
- Sisters clinics are 100% confidential, no one will know about your STI
- You might infect your partner and any future children if you aren't treated

Slide 23

How to mobilize women who are far away from the clinic?

- Discuss the possible consequences of not treating health problems to emphasise that traveling to the clinic is worth it
- Remind them that they only have to pay bus fare because treatment and medicines are free
- Emphasize that the nurses are sympathetic, understanding and non-judgmental
- Tell them they can also get services for their children
- Suggest they combine the visit to the clinic with work in that area

Slide 24

Any other ways to convince SW to go to a clinic that you know?

What are some of participants' ideas?

Slide 25

How to protect yourself from rowdy elements when alone?

- Share your problems and circumstances of your life with them, so that they feel human towards you
- Avoid confrontation, instead say you have a client after which you will return to them
- Avoid fighting, don't make them angry, just try to convince them to use condoms
- Sometimes pretend to be scared of them, and talk to them nicely so that you escape

Slide 26

How to protect yourself from rowdy elements when alone (2)

- Act as if you are going along with them and run away
- You can fight back physically, yell or scream for help if in a public place
- Maintain good relationships with people in public places (e.g. taxi drivers and street kids) so you can turn to them for help in case of harassment

Ask participants to share any personal experiences getting out of a potentially dangerous situation.

Slide 27

How to deal with criticism from neighbors

- Simply ignore them – your life is your own business!
- Take the bull by its horns and directly explain that SW is a means of livelihood
- Be forceful and say that you are not stealing or lying to anybody: "I am selling my body and sex and don't want interference". Assertiveness can silence many
- Invite the interfering neighbor to join you in sex work (effective silencer)
- Lodge a complaint against them to the police if things get really bad

Ask participants to share any personal experiences they have had of dealing with critical neighbours or family members.

Slide 28

What can you say if a client says this to you?

- If I ejaculate outside you won't get any infection
- I will give you double the amount if we have it without a condom

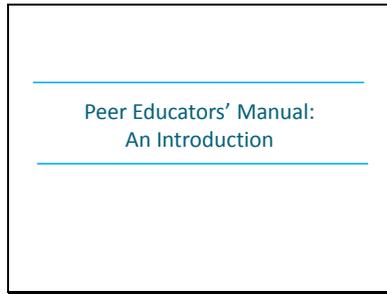
Ask for ideas. Some suggestions:

"That doesn't sound like fun for you!
Put on a condom and you don't have to worry about pulling out in time"

"My health is worth more to me than the money I can earn from you"

Presentation #5: Introduction to the Peer Educators' Manual

Slide 1



Slide 2

Community Mobilisation Sessions

- **Community Mobilisation** is a process that brings people together on **equal terms** in order to **build support** and **participation** and work towards a **common goal**
- Peer Educators help **mobilise the community of sex workers**
- **Participatory activities** are a good way to break down barriers between people and build up their cooperation and support
- The **Manual** is FULL of participatory activities!

Community mobilization is both a process and a result – we try to *mobilise* sex workers so that we have community mobilization for improving our own work, health and lives!

Slide 3

Activities in the Manual

- All peer educators are expected to conduct sessions with their peers on a regular basis, at least monthly
- It is important to know how to facilitate these sessions and practice them
- For the rest of the training, we will spend time practicing facilitating these sessions
- You will become familiar with the content and process of many of the sessions. You can learn the others on your own!

The manual provides suggested ways of bringing sex workers together to discuss issues that are relevant to them.

Slide 4

Take a look through your Manual

- 5-10 minutes for participants to go through the manual and get an idea of what is inside
- Any initial questions?

The slide includes two circular diagrams. The first, titled "Sisterhood", shows a central circle with "Sister" and "Sister" labels, surrounded by "Peer", "Support", and "Empowerment". The second, titled "Partners & Clients", shows a central circle with "Partners & Clients" label, surrounded by "Peer", "Support", and "Empowerment".

Hand out the manuals and give some time for participants to flip through them.

Slide 5

Planning a Session

- Pick a place where you won't be disturbed
- Invite a group of sex workers to attend
- Be aware of your surroundings and possible distractions or interruptions
- Make sure participants are actively engaged – try to encourage them if they are quiet
- Allow enough time for the topic, including questions and discussion
- Be aware of different literacy levels

It will get easier to conduct sessions over time, but at the beginning, some advance thought and planning will make the process easier

Slide 6

Why we play games

- It gives an opportunity for participants to actively practice skills or attitudes taught in sessions.
- Often adults learn better by **DOING** rather than by **HEARING**.
- Practice makes perfect!

Highlight that Peer Educators often come up with their own games, role plays and activities. These are very welcomed!

Slide 7

How to use Posters and Flipcharts

- Place posters with key messages to keep reminding people about about topic being taught.
- Posters should be visible, clear, and neat
- Writing should be legible and easily read by the furthest person from the chart
- Read out what is on the poster so that SW who can't read easily know what is on them

Slide 8

How to facilitate discussion and answer questions

- Let participants ask their own questions
- Ask probing questions
- Ask for action oriented steps
- Don't dominate the session
- Let participants debate issues and ask and answer questions among themselves
- One person should not dominate the session – say "I would like to hear what others think"

Slide 9

Time constraints

- Plan your activities accordingly.
- Don't rush through the session just to finish the topic
- If running out of time, end a little early and keep the next activity until the next session

Most sessions will take 40 minutes to 1 hour, so they should be organized when it will be possible to take the time to really discuss the issues.

Slide 10

Personal Perspectives

- People have own ideas and opinions on issues relating to **sexuality** and **gender** relations – there is no one right answer
- Appreciate that evert participant is unique
- Only correct **FACTS** but allow opinions to be different
- Do not disagree aggressively with participants

Slide 11

Potential Embarrassment

- Materials relating to HIV and AIDS and reproduction can be regarded as sexually explicit for some people
- Talking about body parts could be embarrassing.
- Try to reduce embarrassment by highlighting that sex workers need to be comfortable with their bodies – they are our business assets!
- Speak respectfully about body parts

Slide 12

Potential Embarrassment (2)

- Be sensitive to people's different cultures and religions
- Be sensitive to the feelings of participants
- Deliver messages in a way that makes participants feel safe and secure.

The training agenda provides 2 hours on the first day for the trainer to facilitate 4 sessions from the Peer Educator Manual. The aim is for the trainer to conduct these sessions with participants so that they experience the sessions as participants, but also observe how the activity is delivered.

Each activity should take roughly 30 minutes, including discussion and highlighting the key messages. Instructions can be found in the Manual – you should conduct these as they are written so that participants understand how they have been designed, but you can discuss ways to adapt them to fit with Peer Educators' work environments.

You will need to bring the required materials for the training: flipchart, marker pens, balls of wool, 1-litre bottles of water, printed out & cut cards from the manual. Make sure you talk to Peer Educators about how they will obtain the materials they need to for each activity.

The 4 sessions to be practiced on Day 1 are as follows:

- I am Unique (Session 1, page 18 in manual)
- My Support Network (Session 2, page 20)
- My Sisterhood (Session 34, page 132)
- We are Stronger Together (Session 38, page 142)

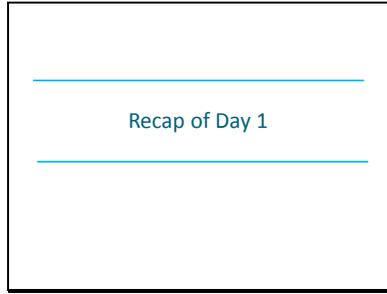
As the sessions are interactive and fun, it should not be too difficult to get through all 4 in one afternoon. You can schedule a short break between each activity for a brief rest. Make sure you cover the discussion questions provided in the manual.

At the end of each activity, ask participants: "How did you feel about this activity? Do you think it is useful? What will it be like to facilitate this session with your peers in your own community?"

They will have a chance to practice these sessions on Day 2.

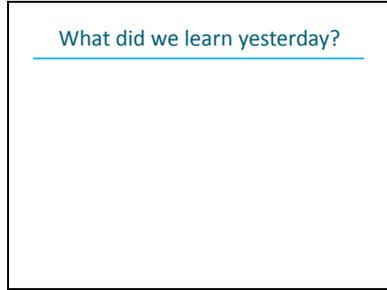
Presentation #6: Recap of Day 1

Slide 1



Start the session with some sort of energizer, maybe a song or dance

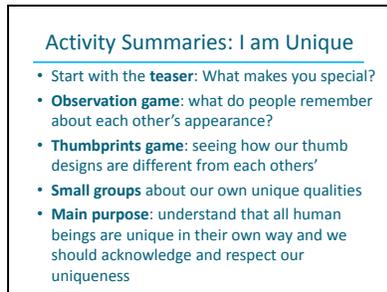
Slide 2



Ask participants to shout out key lessons they learned from Day 1 and write these on a flipchart.

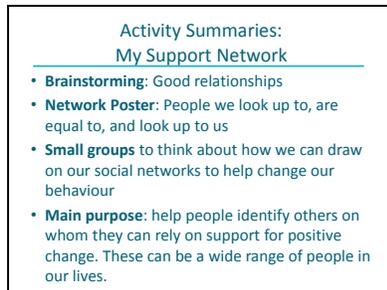
If not mentioned, be sure to probe about peer education, roles and responsibilities, skills and qualities of good peer educators.

Slide 3

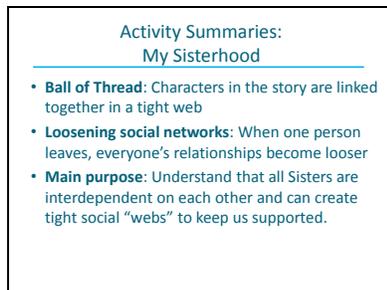


The next 4 slides remind participants of the 4 activities that were conducted, to prepare them for practicing them.

Slide 4



Slide 5



Slide 6

Activity Summaries:
We are Stronger Together

- **Team competition:** 2 teams try to raise a water bottle as high as possible using only the wool
- **Solving a problem:** The wool is likely to break, and will require many strands together to hold the weight of the bottle
- **Groups are stronger than individuals**
- **Main purpose:** To highlight that acting together benefits everyone

Slide 7

Time to PRACTICE

- Divide into 4 groups and separate around the room (or into different rooms) so there is space for conducting the activities
- Ask 1 person in each of the groups to facilitate. Each group should be given one of the 4 activities introduced yesterday.
- Trainers should provide necessary materials and go around the groups to provide feedback.

Ask participants if they have any questions. Then divide them into 4 roughly even groups, and assign 1 of the 4 activities to each. The groups can decide who goes first. Emphasise that this is just practice – it doesn't matter if the participants forget some parts – we are all learning together.

Remind the facilitators in each group that the important part is the discussion and the reflection of each session, not the actual activities.

Time for Practice!

It is very important that as the groups practice, trainers go around the each group to provide encouragement, offer guidance, and check that the facilitators are encouraging the others to engage, discuss, and reflect.

After about 30 minutes, bring participants back together again. Bring the 4 practice facilitators up to the front of the room and ask for a round of applause! Then ask them to briefly describe how they felt facilitating the sessions, what was difficult, and what was easy. Do they have any advice for the others?

After the practice, you should introduce 2 more sessions from the Peer Educator Manual. You have only a half hour for these, but they are both quite short and can be done linked together. This is a good example for the Peer Educators to see how they can conduct a session even if they can only gather their peers together for a short period of time:

- High and Low Risk (session 7, page 44)
- Knowing My HIV Status (session 19, page 86)

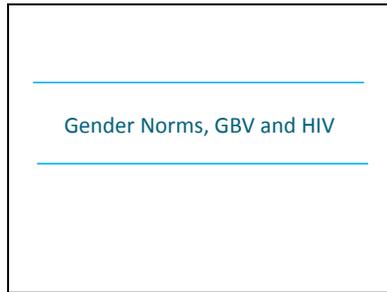
You will need to have the "risk cards" printed out and cut up (or make your own by copying them down on pieces of paper/ cards). You will also need enough space for Sisters to move around freely. If they do not want to run during the activity, they can walk between the piles, but it is good to have some distance between them to keep participants active and energized!

It is very important that you provide accurate information about the risks of each behavior, and also that in some cases, the level or risk might be unknown. Only some of the behaviours have no risk at all (e.g. sitting next to a PLHA, insect bites, sharing plates).

For Knowing My HIV Status, explain that this is an excellent activity to use with other sex workers to generate discussion about anxieties to test. It can be used to initiate conversations about the importance of testing and the friendliness of Sisters Programme clinics. Make sure you go through all the questions for the activity in the manual, and discuss with participants how they can help their peers overcome the challenges of getting tested.

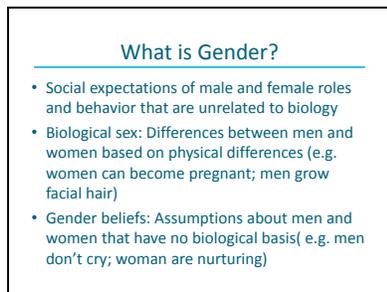
Presentation #7: Gender Norms, Gender Based Violence and HIV

Slide 1



This is a brief presentation designed to provide some background information before practicing 2 more community mobilization activities.

Slide 2

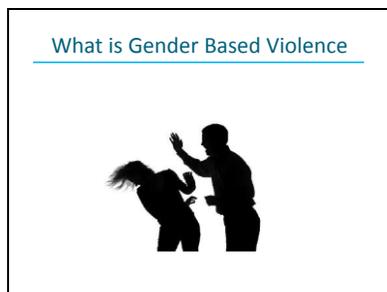


Ask participants if they can think of other examples of men and women's behaviours or characteristics that are related to SEX or GENDER

Slide 3



Slide 4



Ask participants to call out some examples

Slide 5

So what is GBV?

- **Gender Based Violence** – violence that occurs because of the person's gender or because that person has broken gender-based "rules"
- Usually refers to male violence against women (but transgender people or men who have sex with men are also victims of GBV)

Slide 6

Defining Gender-based Violence

Any act of verbal or physical force, coercion, or life-threatening deprivation, directed at an individual woman or girl, that causes physical or psychological harm, humiliation or arbitrary deprivation of liberty and that perpetuates female subordination

-- Heise, 1994

Slide 7

Forms of GBV

- Physical (hurts the body)
- Emotional (hurts feelings)
- Sexual (controls sexuality) and
- Economic (controls access to money, property or resources)
- Violence is not necessarily doing something, but it might also be withholding or NOT doing something.
-

There are 4 main categories of GBV. Ask for examples (not necessarily personal experiences, just ideas for what would fall into each category).

Slide 8

Examples of Gender-Based Violence

- Verbal abuse – shouting, threatening
- Withholding money from a partner, taking their earnings
- Forced sexual contact, including rape
- Sexual humiliation
- Child sexual assault
- Slapping, punching, shoving, kicking, burning etc.

Slide 9

Why is GBV included in Sisters?

- It is a human rights abuse
- Sex workers can be especially vulnerable to violence from both clients and partners
- Women who experience GBV are more likely to abuse substances → risky sex → HIV
- Violence reduces condom use and can make infection more likely

Slide 10



Gender and GBV are important topics for sex workers, and require sensitivity to address. We will not go through 2 related activities that tackle these issues.

You can now lead the following 2 activities from the manual:

- Gender norms & HIV transmission (Session 9, page 54)
- Gender based violence (GBV) (Session 26, page 107)

Read the manual in advance to ensure you bring all the materials required: a bucket (small rubbish bin is OK), cup, small ball (or newspapers rolled into a ball), and the male and female genital pictures from the manual.

The second activity involves small groups developing role plays and acting them out. This can take up too much time, so just ask each group to decide fairly quickly on the situation that represents their category of GBV, and spend no more than 10 minutes developing and practicing a scene to act out for the others. If a group is “stuck” and can’t think of a scenario, you can provide some suggestions (e.g. for economic violence). Be sure to manage the time so that each group has a chance to present!

Conduct the sessions as described in the manual. Note that the session on GBV might lead to participants being reminded of distressing experiences, and some may share some of their own stories. Be prepared to counsel anyone who becomes upset, and also make sure you say to the group that no one needs to share personal information or experiences. You may want to raise the issue of upsetting topics as something that as Peer Educators they may have to handle. They need to think about how to help their peers if they become upset during sessions. It is a good idea for them to refer sex workers to the Sisters clinic, where there are well trained and experienced nurse counsellors.

Time for Practice!

This time, divide the participants into 3 groups. Try to mix them up so participants have a chance to work with new people. Assign High and Low Risk to Group 1, Getting Tested to group 2, and Gender Norms and HIV Transmission to Group 3. Ask for volunteer facilitators – these should be different to those who practiced facilitating last time. Hand out all the materials required to each group.

You may need extra rooms or outdoor space as all 3 of these activities are quite physically active!! There should be time for each activity to be completed in roughly 20-25 minutes. At the end of this time, call the group together, and ask facilitators to come to the front of the room. Again, ask the others to give them a round of applause! Allow for a brief discussion of how the facilitators felt about their practice, and what they feel will make it easy or difficult to conduct the same community with sex workers in their communities.

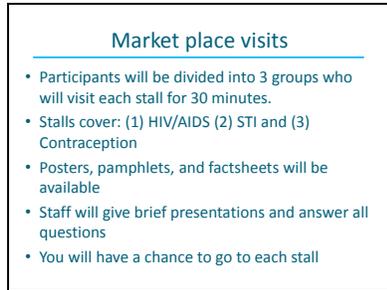
Presentation #8: Introduction to the Marketplace

Slide 1



There is just 1 slide to show before going into the Marketplace activity, which is very important for giving accurate clinical information to participants, including materials to take away so that they can refer to them during their peer education activities

Slide 2



Marketplace:

It is extremely important to prepare for the Marketplace session. There need to be 3 experts available, one for every stall, these can be trainers, but it may be most appropriate to bring in clinic nurses for this activity. Three stalls will be set up in different areas (1) Current knowledge on HIV/AIDS, (2) STI: what you need to know about transmission & treatment and (3) Contraception.

Participants should be divided into 3 groups of “shoppers.” They will rotate between the 3 stalls, 30 minutes for each. The stall “vendor” should start by selling her wares, e.g. give a brief presentation to each group (roughly 10-15 minutes) followed by Q&A between the stall “vendor” and “shoppers” and provision of health education materials (flyers, pamphlets, stickers) that participants can take away and use as reference materials. The stalls should be made as visually attractive as possible i.e. visuals, posters, sexual organ posters, samples of contraceptive methods etc.

At minimum, the following topics should be covered at each stall:

<p>Current knowledge on HIV/AIDS</p>	<ul style="list-style-type: none"> • HIV prevalence in Zimbabwe • How HIV can be transmitted and how it can not • Prevention (including demonstrating male and female condoms!) • HCT at Sisters clinics and other places it is available • ART and how it work, including side effects • PrEP and what it is for and where it can be obtained • Importance of adherence for both ART and PrEP • Common myths about HIV including ways it can be cured
<p>STI: what you need to know about transmission & treatment</p>	<ul style="list-style-type: none"> • Names of different STI • Common symptoms and that infections are often asymptomatic • Pictures of STI symptoms in male and female genitalia

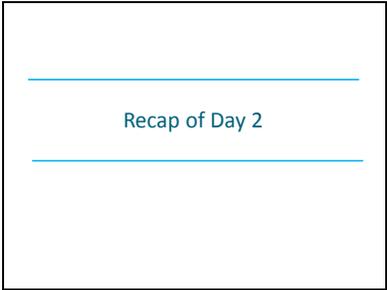
	<ul style="list-style-type: none"> • Long term consequences, i.e. damage to future fertility; health problems for babies including blindness; increased susceptibility to HIV • Different means of transmission, including that STI can be easier to transmit than HIV • How to prevent STI • Testing and treatment procedures (and myths about treatment)
Contraception	<ul style="list-style-type: none"> • All methods available in Zimbabwe (show samples) and how they work • Which methods can be obtained at Sisters clinics • Difference between barrier, hormonal, and permanent (surgical) methods • Easily reversible vs. long acting methods • Safety of modern contraception, including that it does NOT harm future fertility • Importance of using condoms in addition to other forms of contraception to prevent STI and HIV.

After all 3 groups have visited all 3 stalls, reconvene all participants and ask the 3 “vendors” to come up to the front. There is now a half hour for any remaining **questions and clarifications**. Remind participants that they may be asked for sexual and reproductive health advice. They should try to gain as much accurate information as possible to help guide their peers. Materials will be provided for them to give out, in addition to condoms. If they are ever asked a question for which they are not sure of the answer, they should check back with an Outreach Worker or clinic nurse and not guess or make up a response.

Once questions have been asked, hold a **condom demonstration relay race**. Give each of the 3 groups one penis model and one condom for each participant. Ask the group members to stand in a line (there must be an equal number in each group – if there is not, trainees can join groups to even it out). The person at the front of the line receives the penis model. At the shout of GO! the groups should race each other to put on and remove the condom correctly in turn, i.e. the first participant rips open the condom packet, and unrolls it onto the penis model correctly, then carefully removes it (to avoid spillage of semen), and passes the penis model to the next group member who must do the same, and so forth. Trainers should observe each group to check condoms are put on and taken off correctly – if a participant makes a mistake, she must repeat the demonstration. The team in which all members finish a correct condom demonstration first, wins!

Presentation #9: Recap of Day 2

Slide 1



Slide 2

What did we learn yesterday?

Ask one of the participants to come to the front of the room and facilitate a short recap of what participants remember from Day 2 of training (5 minutes max). She should ask the others to call out suggestions and note them down on the flipchart – this is good practice too!

Slide 3

Activity Summaries: High & Low Risk

- Create **3 areas** for Higher Risk, Lower Risk and Not Sure
- **Participants go to the area they think reflects the risk of the card**
- **Share** risk perceptions
- **Main purpose:** understand that some behaviours are riskier than others, but sometimes we don't really know the exact risks. Casual contact doesn't carry any risk!

Slide 4

Activity Summaries:
Knowing My HIV Status

- **Role Plays:** Provider & Sex Worker talk about testing
- **FREEZE!:** Stop the play to discuss the issues
- **Encourage reflection** on barriers to testing in our community and what might help overcome these
- **Main purpose:** explore concerns SW may have about testing and think about how to support peers to find out their status

Slide 5

Activity Summaries:
Gender Norms & Transmission

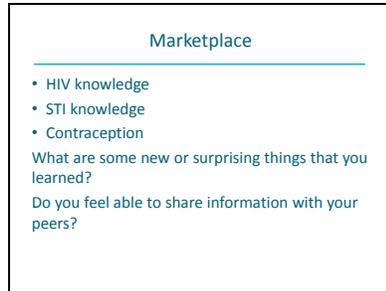
- **Ball of Thread:** Characters in the story are linked together in a tight web
- **Loosening social networks:** When one person leaves, everyone's relationships become looser
- **Main purpose:** Understand that all Sisters are interdependent on each other and can create tight social "webs" to keep us supported.

Slide 6

Activity Summaries:
GBV – What is it?

- **4 types of GBV:** Physical, Emotional, Sexual, Economic
- **Dramas:** Each group acts out a situation that shows one of the 4 types of GBV
- **Sex workers experience a lot of GBV**
- **Main purpose:** To identify GBV as unacceptable for *all* women and work together to find ways to prevent it, protect each other and seek help when necessary

Slide 7



Participants may be concerned that they don't have enough information to educate others. Reassure them that Outreach Workers and other Sisters staff will support them, and will provide them with updated information and materials when necessary.

It is now time to introduce 3 new sessions from the manual. These are:

- Alcohol and Risk (Session 22, page 95)
- Refuse, Delay, Bargain (Session 32, page 125)
- Safe Spots (Session 39, page 144)

As usual, read the manual and conduct the activity as designed. Prepare all the materials you need in advance, and refer to the Hints at the end of some activities to help you get the main points of the session across to participants.

Time for Practice!

After you have conducted these 3 sessions, ask for volunteers who have not yet practiced facilitating a session to gather a group together, and find a place to practice. You should have about 2 hours for this practice session. Depending on the number of participants in total, you may be able to divide into 5-6 small groups, so that more people have a chance to facilitate a group. You will need to balance the training time between showing new sessions and providing practice time – this will partly depend on the number of people being trained! If you have a small group of trainees in total, there may be opportunities for individuals to practice facilitating more than one time.

As before, at the end of the session give a round of applause for the facilitators, and ask them to share their impressions of running the exercise.

Exercise #5: Handshake Game

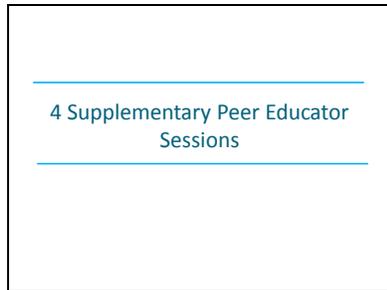
Ask the participants to stand up and walk around the room, greeting each other. They should stop and chat briefly with everyone they pass but the greetings should be verbal only, just smiling and chatting. The rule is DO NOT put your hand out to shake the other person's hand first – only shake hands if the other person initiates it. However, once they have shaken hands with someone, they should also put their hand out to shake hands with everyone else they meet after that.

You (trainer) should join the game, and should initiate hand shaking with everyone you greet. Remind them that they now should start shaking hands. After a few minutes, stop the greetings, and ask everyone who has shaken any hands to go to one side of the room, and those who have not shaken hands at all to stay on the other side. Explain that shaking hands represents having unprotected sex and contracting an HIV! At the beginning, there was just 1 person with an STI, but that person entered a well connected sexual network, and now there are many – maybe even most – participants with an STI. Ask the participants on the "STI" side of the room to tell you approximately how many people they shook hands with. It may be many for some, or a few, or even just 1. That is how transmission works – you just

have to be unlucky that one time! This is why it is advised to use condoms consistently, with all sexual partners, whether they are clients or personal relationships.

Presentation #10: Extra 4 Peer Educator Sessions

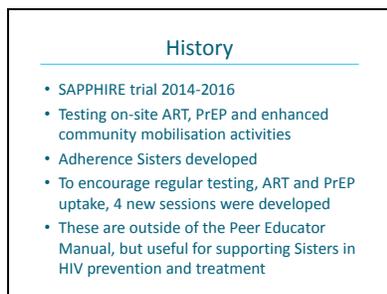
Slide 1



This session introduces the 4 supplementary Peer Education activities that are not included in the manual. It provides some of the background.

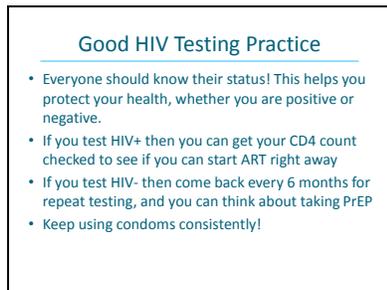
You need to distribute printed copies of the 4 activities to all participants.

Slide 2



- SAPPHERE trial 2014-2016
- Testing on-site ART, PrEP and enhanced community mobilisation activities
- Adherence Sisters developed
- To encourage regular testing, ART and PrEP uptake, 4 new sessions were developed
- These are outside of the Peer Educator Manual, but useful for supporting Sisters in HIV prevention and treatment

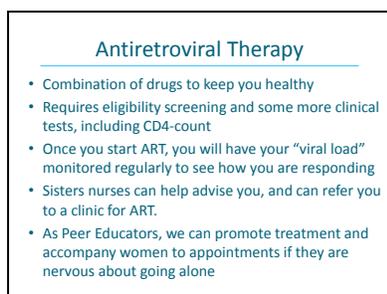
Slide 3



- Everyone should know their status! This helps you protect your health, whether you are positive or negative.
- If you test HIV+ then you can get your CD4 count checked to see if you can start ART right away
- If you test HIV- then come back every 6 months for repeat testing, and you can think about taking PrEP
- Keep using condoms consistently!

This is a reminder for anyone who has not been tested to find out their status. There are specific ways of keeping both negative and positive sex workers safe and healthy!

Slide 4



- Combination of drugs to keep you healthy
- Requires eligibility screening and some more clinical tests, including CD4-count
- Once you start ART, you will have your "viral load" monitored regularly to see how you are responding
- Sisters nurses can help advise you, and can refer you to a clinic for ART.
- As Peer Educators, we can promote treatment and accompany women to appointments if they are nervous about going alone

It is likely that some participants are on ART and will know a lot about it. You can ask participants if they want to add to this description, but no one needs to share their status with the group.

Slide 5

Pre-Exposure Prophylaxis (PrEP)

- The name of the drug is Truvada, and it actually combines 2 medicines (emtricitabine/tenofovir disoproxil fumarate)
- Requires eligibility screening and some more clinical tests, including pregnancy test
- 1 pill taken every day, with or without food
- Some women experience a few side effects at the beginning, but these usually reduce over time
- Reduces the chances of contracting HIV from an infected partner (but does not make it impossible)
- Women on PrEP are tested for HIV every 3 months

Similarly, you can ask if anyone has heard of PrEP and what they know, but there is no need for anyone to discuss personal experiences unless they wish to.

Slide 6

Adherence Sisters

- This is a “buddy” programme where Sisters pick a partner to support them in remembering to take their medicines
- Adherence is important for both ART and PrEP to work, so anyone on these drugs should join
- Peer Educators can be someone’s Adherence Sisters, or can help other sex workers find each other to become “pairs”
- Adherence Sisters don’t have to disclose their status to each other – both HIV+ and HIV- women need help to practice good adherence

Slide 7

Extra Sessions

- Designed to support the addition of ART and PrEP and help encourage good adherence to both
- 4 sessions about overcoming barriers and developing good habits
 - Tree of Life
 - Making Something a Habit
 - Adhering to a Healthy Life
 - What is PrEP
- We will try them out now and you will receive printed copies of the instructions for all of them

Ask participants to refer to the 4 activities that you have just distributed. First give them 10 minutes or so to look through and read the instructions.

There is 1 slide on each activity. Ask participants to look at the activity hand out as you go over the main points

Slide 8

Tree of Life

- Focuses on health challenges faced by sex workers
- Part 1: identifying health problems and risks (these become the leaves of a tree)
- Part 2: What are the consequences of the health risks identified? These become the fruits of the tree
- Part 3: How can we protect ourselves from the health problems and their consequences?
- Part 4: Ways that sex workers can help each other, and ways that the Sisters programme can help

Slide 9

Making Something a Habit

- Emphasises that practicing a new behaviour makes it “stick”
- Part 1: List daily routine activities that we do every day without even thinking about them
- Part 2: Think about less common, rarer activities we do and how we remember to do these
- Part 3: Discuss how doing the same activity regularly transforms it from a rare event to a routine activity (or *habit*)
- Part 4: How can we link taking our ART or PrEP to routine activities so adherence becomes a habit?

Slide 10

Adhering to a Healthy Life

- This activity is about designing our own “top tips” for remembering to take medication each day
- Part 1: What does adherence mean to us? What behaviours do we already “adhere” to?
- Part 2: Brainstorming ways to remind us to take our medications. What are some good tips?
- Part 3: Pair ranking activity – this compares each tip to the others to decide which are likely to be most effective

Slide 11

What is PrEP?

- Supports information and counselling given by clinic nurses about PrEP
- Part 1: identifying what participants know already
- Part 2: ranking statements about PrEP according to whether they are positive or negative
- Discuss facilitators and barriers to using PrEP
- Part 3: If you are working with Adherence Sisters pairs, there is an extra part about working together to maximise the positives of PrEP and minimise the negatives

Time for Practice!

At this point in the training, participants should start to gain confidence in reading the activity instructions and following them independently. They will have to do this for the Manual, as there is not enough time in the training to go through all the activities. So after reviewing the activities and answering questions, divide into smaller groups, find volunteers for each group to be facilitator (someone who has not led a session yet), and assign an activity to them (you can do all 4 activities if you have enough people, or just 2-3). You need enough trainers to observe and provide guidance to each group.

Presentation #11: Day 3 Recap

Slide 1

Recap of Day 3

Slide 2

What did we learn yesterday?

Slide 3

Activity Summaries: Alcohol & Risk

- Put **risk cards** in a circle
- **Each participant spins a bottle in the middle**
- **Answer** the question on the card in front of you & share a story related to alcohol
- **Main purpose:** Think about how alcohol can negatively affect safety at work, and increase risks that sex workers face

Slide 4

Activity Summaries:
Refuse, Delay, Bargain

- **Identifying communication styles:** Role play activity about keeping a discussion on track
- **Strategies for not being persuaded to do something you don't want to:** Refuse, delay or bargain!
- **Dramas** to practice the 3 tactics in different situations
- **Main purpose:** Improving effective communication and matching your building different negotiation skills

Slide 5

Activity Summaries:
Safe Spots

- **Maps:** Sisters are grouped by areas where they live or work and draw a diagram of the area
- **Safe & Unsafe:** The group marks safe places with a **✓**; unsafe places with a **X**; and sources of information with a **?**
- Discussion around what makes a place safe or unsafe, and how to help each other
- **Main purpose:** share information on safety and think about working together to improve it

Slide 6

Activity Summaries:
4 Extra Sessions

- **4 types of GBV:** Physical, Emotional, Sexual, Economic
- **Dramas:** Each group acts out a situation that shows one of the 4 types of GBV
- **Sex workers experience a lot of GBV**
- **Main purpose:** To identify GBV as unacceptable for *all* women and work together to find ways to prevent it, protect each other and seek help when necessary

Some programmatic details (forms, case loads)

This session should be devoted to practical organization of Peer Educators' work, and logistical issues. Data collection and reporting forms change regularly, but should be introduced at this point, including practice filling them out. It may be useful to provide some hypothetical scenarios or role-plays, or ask participants to work in pairs and take turns pretending to be a Peer Educator and one of her contacts, and go through the process of filling out forms based on information provided.

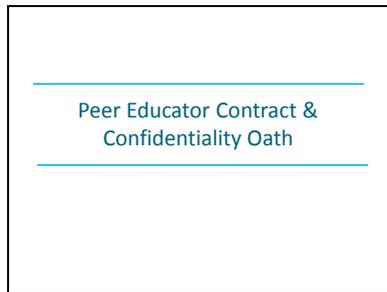
The concept of a **case load** should be explained, and any expectations/targets made clear to Peer Educators for how many sex workers in their community they are expected to contact, and how often.

After this applied training, each Peer Educator should be provided with a contract. It is important for the trainer to go over each part of the contract to make all the roles and responsibilities of both the Peer Educator and the Sisters Programme clear.

A sample contract is included in the package, but would need to be updated to include the legal entity/organization with whom the Peer Educator is entering into an agreement, and to specify the monthly stipend.

Presentation #12: Signing Peer Educator Contracts and Confidentiality Oath

Slide 1



This is a very important part of the training, when after gaining key knowledge about the programme and the expected work, participants decide whether they want to take on the role of Peer Educator.

These slides go over some of the contract details.

Slide 2



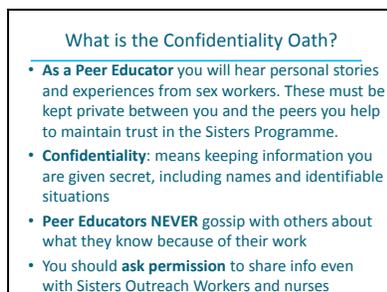
Hand out the blank contracts at this point, so that participants can see the sections as you refer to them.

Slide 3



Answer any questions in case the formal contract language is difficult for participants to understand.

Slide 4



It is important to define confidentiality and what it means, and why it is important to the programme.

Slide 5

What is the Confidentiality Oath?

- **You can seek advice** from Sisters staff, but just describe the situation without naming the sex worker or other individuals
- **The only exception** is if you hear about ongoing abuse or harm, or the threat of harm. Then you should inform the person that you have a legal obligation to seek assistance.
- **The Confidentiality Oath** is part of the contract, and by signing it, you agree to maintain this important part of the Sisters Programme

Provide some examples of how a Peer Educator can discuss a difficult situation without naming the individual. Also provide examples of “abuse or harm”, for example if the Peer Educator learns about physical abuse or sexual exploitation of a child.

Ask the participants if they agree to the Programme contract, and make clear that no one is obliged to sign if they do not want to – it is OK to change your mind about becoming a Peer Educator. Those who wish can now sign, with countersignature/witness signatures provided by peers/ Sisters staff.

A big round of applause for the newly trained Peer Educators!

Exercise #6: Prioritising Problems

Now that the training is almost done, there is time to think about how Peer Educators can help build a bigger movement among sex workers so that over time, the community works to help itself, with less assistance from outside.

Hand out small cards or post-it/sticky notes. Give 2 to each participant. Ask everyone to spend a few minutes thinking about challenges facing the *whole sex workers community*. They can write down 1 challenge/problem per card. When everyone has thought of a problem, go around the room and ask each person to read out their shared problem. Stick it on the wall, or on a flipchart paper. Then ask for the next one. Put similar problems/challenges together or near each other. Many may be related to each other – even if they are worded differently, if the same challenge is being described, then “cluster” them together. (For example, someone may say “we get arrested” and someone else may say “there are police raids” or “police demand free sex” and all those could be grouped under the challenge of “Problems with the Police”.)

After 10 minutes or so, you should have several challenges that sex workers regularly face. Now ask the group to rank each problem as follows: Serious challenge, Medium Challenge, Minor Challenge. They can discuss, but there needs to be group agreement on each challenge. When you have finished this part, go through each challenge/problem cluster again and rank them as Easy to solve, Difficult to solve, Seems impossible to solve.

Take a look at how each problem has been categorised. Which should sex workers think about tackling first? Do you want to tackle Minor Challenges first because these might be easier? Or is there a Medium or Serious challenge that has also been labelled Easy to solve? If something seems impossible, it is probably better not to try to work on it right away – but maybe after a few other things have been addressed, these challenges won’t seem so impossible any more.

Talk to the group about the balance between looking for *easy actions* they could take as a group – these make good practice for working collaboratively together. But over time, it will get frustrating if no Serious or Medium challenges are confronted, because sex workers won’t feel they are improving their lives. This should generate an interesting discussion about the role of Peer Educators in talking to their peers about serious, medium and minor challenges and thinking creatively about how they can work to change these as a community.

Presentation #13: Sex Work Challenges

Slide 1

Challenges for Sex Workers

This presentation builds on the prioritization exercise. It is the last presentation of the training and should generate energy and motivation for Peer Educators to reach out to their community and try to build up community support and activism!

Slide 2

Sex work

- Society does not accept sex work or sex workers
- This makes SW feel inferior and causes low self-esteem
- While sex workers are often abused and vilified, their clients escape this stigma
- SW often feel bad about their profession this can harm their spirit and enthusiasm
- SW can internalize feelings of shame and this becomes self-stigma

It is important to acknowledge the difficulties that many sex workers experience, and that the fact that they have been marginalized in society affects them deeply. Even though this stigma and discrimination are unfair, it is hard to not take negative attitudes to heart.

Slide 3

BUT

- Sex workers share experiences and can create a supportive community
- Sex workers can remind each other of their individual value, skills and worth
- We all have potential to improve our lives, regardless of our work
- Working together generates energy and action
- "Strength in numbers"

The Sisters programme is committed to turning these negative feelings into positive energy. Sex workers contribute to society and are just like anybody else – they can be funny, clever, talented, musical, shy, religious, bossy, grumpy, or anything else. Who we are has nothing to do with what work we do!

Slide 4

Shared Problems

- Let's look at the problems we identified
- Do these affect all or most sex workers?
- Would reducing these problems make our life, work or health better?

However, because of the shared experience of sex work, sex workers may share many of the same challenges and problems. Even if sex workers do not feel they are alike, or always get along, they should recognize that they have something in common and this can be a basis of strength.

Slide 5

Common Problems for SW around the world

- Sexual Harassment
 - Police, clients and society
- Laws that make us more vulnerable
- Violence
- Health related problems (STI, HIV)
- Poverty
- Society stigma and discrimination

How do these compare to the problems identified in the previous exercise?

Slide 6

Finding your hidden potential

- All people have hidden potential
- Many women in sex work don't value their own potential
- The very nature of their profession and attitude of society has demoralized their spirits and robbed them of their identity
- Many women feel like they don't have any options

There is another shared challenge – overcoming stigma and discrimination to realise our hidden potential as an individual and as a community!

Slide 7

Maid from Budidro working in low density area. Found out she was HIV positive and got on ARVs. Realised she had to do something with her life. She got involved with a local church. Decided to set up a support group for orphans. It has been running for several years and is a tremendous help in the community – she has been taken to India to discuss her work. Next month she is a speaker at a conference in Australia called 'Women who have made a difference'. People all around the world have found her story inspiring. She still works as a maid.

Slide 8

Lessons learnt from this story?

- What is self belief and capacity?
- How can we understand and demonstrate our capacities?
- All people have hidden potential. Do you agree? Do you have other examples?
- Any people to show their hidden potentials and how they identified this potential

This part should be an open discussion

Slide 9

Divide into groups of 4-5

Discuss what you could do as peer educators to support each other and improve each others lives and working conditions?

Discuss what you as peer educators could do to improve the lives and working conditions of SWs generally.

Ask participants to get into small groups and think about their new role as Peer Educators, and how they can work together for each other and for the whole community. Ask each group to come up with 4-5 ideas, and present them to the whole training.

At the end of this session, Peer Educators should feel motivated and energised. Finish up by answering any questions and congratulating them on their new skills, knowledge, and responsibilities!

You should remind participants of the next steps: what materials they will need, how they can contact Outreach Workers and other staff, how often they will need to report to the programme, and what to do if they encounter problems.

Also remind Peer Educators that they will be invited to annual refresher training, where they will be able to share experiences and support each other, obtain new information, and practice their skills.

Many thanks and good luck with your work!