

BAKASHANA TWAMPANE

Girls Group on Sexual and Reproductive Health



Africa KidSAFE
Project Concern International, Zambia
June 2007



A Report on
Bakashana Twampane
Girls Group
on
Sexual and Reproductive Health

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**With thanks to the courageous and spirited girls of Bakashana
Twampane**

*- Susan, Tika, Sharon, Karen, Bridget P, Anna, Mary, Mary, Nelly, Promise,
Natasha, Eliza, Florence, Prisca, Peggy, Margaret P., Ruth, Nelly, Chileshe,
Veronica, Rai, Eleanor, Mercy, Bridget, Maggie, Lizzie and Margaret K.*

*And to the tireless facilitators Eve Jackson, Mildred Muzhile and Chitalu
Lizzy, and our respected literacy teacher Monica Maipambe Lee*

Photos: Sue Gibbons with the group's permission

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1. Background

In June 2006, a group of women working with girls on the streets expressed their concern about this group of girls and started to meet to discuss recommendations as to how this group could be better catered for by services. This group met periodically and became the KidSAFE Girls working group. In addition to assessing the current situation and making recommendations for the future, it was felt important to begin to do something positive with the girls, partly to provide the most vulnerable girls with some support, and partly as a form of action research – to get to know the girls and their specific needs. So, the idea of a group about reproductive and sexual health for girls living on the streets was agreed upon.

2. Plan for the Group



Washing Clothes

The plan was for a 12 session group, one morning a week, where the girls living on the streets could wash their clothes, bath, learn about sexual and reproductive health, and have a nutritious meal. The group was named 'Bakashana Twampane' meaning 'girls together' in Bemba, demonstrating our hope that this would be a place where the girls could come together and support each other. Attendance at the group would be entirely voluntary. As the group progressed it became clear that not all the topics planned for could be covered adequately in 12 sessions, so the group was extended to 18 sessions.

During the sessions the girls asked repeatedly to learn to read, so at the seventh session, a literacy component was added to the programme, extending the group for another

hour and a half up to 1530.

3. Main Aims of the Group

We had many hopes about how the group might be beneficial to the girls, but the main aims were:

- To educate girls living on the streets about sexual and reproductive health.
- To act as bridge to services.
- To create a safe, supportive and trusting environment for the girls.
- To begin to identify the various unmet needs of girls on the streets.

4. Format of the Group

The format of the group was the same each Tuesday, as follows:

Time	Activity
0800	Girls meet group facilitators at Main Post Office in Town. Facilitators ensure all sticka is left behind.
0830	Girls and workers take hired minibus to Scouts Hall at Longacres
0900	Arrive Scouts Hall
0905	Warm up exercise / song
0915	Go over the ground rules and any questions or announcements
0930	Girls change into chitenges, then wash their clothes and themselves.
1030	Break: Tea and bread
1100	Learning programme – for topics see below.
1245	Evaluation of the day
1300	Change into clean clothes and return chitenges to facilitators. Lunch
1400	Literacy and numeracy class ¹
1530	Clean hall Minibus arrives and girls and facilitators return to town.

5. Participants



*Learning about our bodies
–‘pin the organ on the body’ exercise*

A total of 26 girls attended the group at least once throughout the 18 weeks of the group. The girls were aged between 14 and 18 years old and all except one were sleeping on the street the first time they came to the group.

Each week between 5 and 15 girls attended the group, with an average attendance of 7 girls per group and a mean of 8.5.

Girls attended between 1 and 18 of the sessions, with an average of 6 attendances per girl.

¹ Literacy classes were added to the programme from 20th March at the girls’ request

14 girls attended between one and 5 sessions, whilst a core group of 11 girls attended between 7 and 18 sessions. Outreach workers attempted to follow up girls who missed sessions to try to find out reasons for non attendance and encourage them to return.

6. Facilitators

The facilitators were all female, and drawn from different areas of the KidSAFE network, they were:

Mildred Muzhile

- Chisomo Volunteer and nurse

Eve Jackson

- Mobile Health Team and New Horizon Centre

Lizzie Chitalu

- Outreach Worker

Sue Gibbons

- Community Clinical Psychologist (coordinator)



Facilitator Eve Jackson explains the female anatomy

7. Content of Sessions

Topic / Activity	Aim	References Date
Session 1: INTRODUCTION TO THE GROUP & PUBERTY (1)		6.2.07
Icebreaker – introductions to each other	<ul style="list-style-type: none"> To foster a friendly environment 	
Introduction to Bakashana Twampane	<ul style="list-style-type: none"> Clarity about the purpose and aims of the group 	
Developing the Ground Rules	<ul style="list-style-type: none"> Clarity about expectations of girls and facilitators Clarity about what is acceptable behaviour and what is not 	
Words we use about the body - writing words on flipcharts around the room	<ul style="list-style-type: none"> To develop a shared language about the body To show the group some of the things we will discuss and that we will discuss openly To help everyone feel relaxed about discussing intimate issues 	'My Changing Body' p 13
Changes females go through in puberty - drawing self at 10 and 16	<ul style="list-style-type: none"> To give accurate information on female maturation To give an opportunity to ask questions and clarify misunderstandings about their bodies and experiences 	'My Changing Body' p 14
Session 2: PUBERTY (2)		13.2.07
QUIZ on reproductive health - in teams	<ul style="list-style-type: none"> To find out how much the group knows about reproductive health 	
Changes in puberty in males	<ul style="list-style-type: none"> To give accurate information on male maturation To give an opportunity to ask questions and clarify misunderstandings 	'My Changing Body' p 14
Session 3: PUBERTY (3)		20.2.07
Changes in feelings with puberty - small group discussions	<ul style="list-style-type: none"> To normalise and develop a greater understanding of the emotional roller coaster of puberty To provide accurate information To allow an opportunity to discuss and ask questions 	'My Changing Body' p 17
Talking about puberty - role plays	<ul style="list-style-type: none"> To rehearse the information about puberty learnt so far 	'My Changing Body' p 18

Session 4: FERTILITY (1)		27.2.07
DISCUSSION: What do we mean by fertility?	<ul style="list-style-type: none"> Ensure a basic understanding of the concept of fertility 	'My Changing Body' p 31
Pin the organ on the body (female) - using body outline and stick on diagrams	<ul style="list-style-type: none"> Give accurate information about the female sexual & reproductive anatomy 	PCI 2004 Tool 8, p15
Session 5: FERTILITY (2)		6.3.07
Pin the organ on the body (male) - using body outline and stick on diagrams - participants make their own anatomy drawings	<ul style="list-style-type: none"> Give accurate information about the male sexual & reproductive anatomy 	PCI 2004 Tool 8, p15
Reproductive system story - in small groups, put the drawings about reproduction in order	<ul style="list-style-type: none"> To understand the physiological processes in males and females which lead to pregnancy. 	PATH P28
Session 6: PERIODS		13.3.07
Difficulties of having periods - discussion	<ul style="list-style-type: none"> To share the challenges of having periods To brainstorm solutions to problems 	
Sanitary protection - demonstrations and experimentation	<ul style="list-style-type: none"> To give accurate information and demonstration about different types of sanitary protection and how to use it. 	'My Changing Body' p. 37
Hygiene during periods - teaching & discussion	<ul style="list-style-type: none"> To give accurate information about prevention of infections 	
Session 7: STIs		20.3.07
Transmission & Symptoms of STIs - teaching with questions	<ul style="list-style-type: none"> To give accurate information about STIs 	
STI role plays	<ul style="list-style-type: none"> To develop a deeper understanding of dangers and prevention of STIs 	
Session 8: HIV & AIDS		27.3.07
What is HIV? Transmission, prevention, living with HIV - insert the missing words quiz	<ul style="list-style-type: none"> To give accurate information about HIV Ensure girls have the knowledge to protect themselves from HIV or care for selves or others if HIV+ 	Street Life, Section 7.

Session 9: USING CONDOMS CORRECTLY		3.4.07
Male and female condom demonstrations - practice in small groups - questions and answers	<ul style="list-style-type: none"> to ensure correct use of condoms to practice using condoms to give accurate information about condoms 	Street Life, Section 7
Session 10: UNWANTED SEXUAL ADVANCES		10.4.07
Sexual advances, rape & prostitution - Case discussion and problem solving in small groups	<ul style="list-style-type: none"> To raise awareness and promote discussion about rape and sexual abuse To brainstorm ways to help selves or others in dangerous and abusive situations 	See Appendix 1 for case discussion scenarios
Session 11: PREGNANCY		17.4.07
How we get pregnant – recap – Large group brainstorm	<ul style="list-style-type: none"> To ensure all know the mechanism by which pregnancy occurs 	
Things to think about before getting pregnant - in small groups, draw points on flipchart	<ul style="list-style-type: none"> to raise awareness about the implications of pregnancy 	'My Changing Body' p67
Prevention of pregnancy	<ul style="list-style-type: none"> To give accurate information on prevention of pregnancy 	
Session 12: GIRLS VIEWS ON SERVICES		24.4.07
Good and bad things about services - large group brainstorm and discussion	<ul style="list-style-type: none"> To find out strengths and difficulties of existing services 	
Our ideal services - small group drawing and creative exercise	<ul style="list-style-type: none"> To find out the girls' ideas and suggestions for service development 	
Session 13: LOVE AND SEX		8.5.07
What is love without sex? What is sex without love? - small group discussions	<ul style="list-style-type: none"> To develop a deeper understanding of intimate relationships and sex To explore the problems associated with sex without love 	
Session 14: BE ASSERTIVE!		15.5.07
Assertive, aggressive and passive behaviour - teaching and role plays	<ul style="list-style-type: none"> To understand and practice different ways of responding to pressure. To equip girls with the skills to be able to state their needs and say NO. To highlight assertiveness as a 	Street Life Ex 2.2 p21

	positive way of behaving in certain contexts, and help understand the drawbacks of passive or aggressive behaviour.	
Session 15: PREGNANCY AND ABORTION IN TEENAGERS		22.5.07
Dr. Kaseba – Gynaecologist, UTH Pregnancy, Teenage Pregnancy & its dangers, contraception and abortion	<ul style="list-style-type: none"> To give accurate information about teenage pregnancy and its prevention. To establish a link between Dr Kaseba and the girls. 	
Session 16: THE EFFECTS OF STICKA		29.5.07
Good and bad things about sticka - drawing exercise	<ul style="list-style-type: none"> To explore the positive and negative effects of taking sticka or Bostik (inhalants) 	
Effects of sticka - sticking captions and pictures on body outline	<ul style="list-style-type: none"> To alert the girls to the dangers of taking sticka. 	
Session 17: SEX AND SEXUALITY		5.6.07
Ways of being intimate or sexual - small groups drawing exercise - sticking pictures on large body outline	<ul style="list-style-type: none"> To develop a broad view of intimacy and sexuality with a partner 	
Safe and unsafe practices - putting stickers on group picture	<ul style="list-style-type: none"> To impart accurate information about safe and unsafe practices 	
Choosing ways to be intimate or sexual - putting stickers on group picture	<ul style="list-style-type: none"> To enable the girls to make their own choices (where possible) about ways of being intimate or sexual. 	
Session 18: EVALUATION OF THE GROUP		12.6.07
Evaluation questions and discussion - small groups	<ul style="list-style-type: none"> To facilitate reflection on information learnt so far To collect evaluation material from the girls To plan future groups 	
Ending quiz - 10 questions to each girl, individually and verbally.	<ul style="list-style-type: none"> To measure amount learnt by girls To identify gaps in knowledge for further teaching 	

8. Successes of the Group

The information below on the group's successes and challenges is taken from discussions at the facilitators meetings, facilitators' feedback forms and evaluations with the girls at the end of each session.

8.1 Girls making a decision to give up street life

One of the greatest successes of the group has been when girls asked the facilitators to help them go back to their families or into a centre, and the facilitators were able to assist with this. This happened on three or four occasions throughout the group.

8.2 A regular point of reference for the girls

The group has allowed us to monitor the girls' well-being. E.g., if a girl was sick or injured, it came to the attention of the group and action was taken; or the girls would approach the facilitators for help with medical or other problems.

8.3 Girls learning about Reproductive Health

It was apparent that the girls had learnt from the teachings as at the beginning their knowledge was minimal, and as we went through the curriculum, they were able to build on their knowledge and tell newcomers information learnt in previous sessions.



Exercise
– sort the stages of the reproductive cycle

8.4 Clear Ground Rules

This was one of the things girls mentioned in the evaluation that they particularly appreciated about the group:

- *The ground rules – at least we are being guided*
- *Have enjoyed encouragement from facilitators to behave*
- *Less fighting among fellow girls – has brought us closer together*

8.5 Attendance

Considering the transient nature of the girls and the difficulties they face living on the streets, the level of attendance is taken as an indicator that they appreciated the group and were keen to come, particularly for the 11 girls who attended between 7 and 18 sessions. One girl managed to attend all 18 sessions.

8.6 Peer Pressure

There was a core group of girls who came to the group regularly, who were keen to learn and who spoke up when their peers were disruptive to their learning.

8.7 Group Cohesion – ‘Bakashana Twampane’ (Girls Together)

A sense of belonging and caring for each other developed amongst the group members. The girls reported looking out for each other more on the streets and supporting each other to take the right decisions based on what they had learnt in the group. When a girl was sick or absent the group members followed her up or advised the facilitators on her whereabouts and whether she needed help.

8.8 Nutrition and Hygiene

Bathing, washing their clothes and eating a good meal raised the girls’ self esteem and motivation to learn.

8.9 Literacy Class

The girls asked repeatedly for a literacy class and throughout every class the girls worked hard and there were minimum disruptions.

8.10 Facilitators

A definite strength of the group was having the same facilitators working with the girls each week. This helped in building relationships, it gave the girls some continuity – something hugely lacking in most of their lives, and allowed the building of trust. (However, unfortunately at session 15 one facilitator had to leave the group to begin another programme with her centre.)

8.11 Facilitation techniques used

The following facilitation techniques worked particularly well:



- Asking the group to reinforce and agree the ground rules at the start of every session
- Small group work with a facilitator in each group
- Participative learning, i.e., looking for answers and ideas from the girls rather than just teaching.
- Facilitators using drawings, diagrams or models to show what they are teaching (rather than writing or only speaking)

Girls give a presentation on unwanted sexual advances

- Exercises involving the girls in drawing
- Frequent energisers or physical activities such as ball games, songs, dancing

- Keeping the girls involved all the time e.g. role plays, quizzes,
- Discussing problems and agreeing solutions with the girls rather than just imposing rules
- When a question is asked, give it back to the group, they can find the best answers
- Girls enjoyed giving presentations to the group and this seemed to lift their self esteem. One girl said:
'I didn't know in town that I could stand in front of my friends and be like I'm teaching'
- Good preparation for each exercise by the facilitators

9. Challenges Faced

As time progressed we found that the challenges faced within the group became less, due to:

- girls knowing the expectations placed upon them in the group
- peer pressure
- the facilitators developing relationships with the girls and finding the best ways to tackle difficulties

Challenges faced within the group:

9.1 A Venue

An initial challenge was finding an appropriate venue for the group as none of the existing centres offered the appropriate facilities. This took some time until we were welcomed by the Scouts Association on Lubu Road. We had hoped for somewhere within walking distance of town, but we did not find this. The Scouts hall has plenty of space inside and outside. Its drawbacks are the location – necessitating a minibus to transport the girls; only one shower cubicle – resulting in a lot of time being spent on waiting for everyone to wash; lack of privacy for washing and learning – people would pass by and stare at the girls and listen to their discussions; and poor hygiene in the toilets and shower – not modelling good hygiene to the girls. On occasions there was no water at the hall also.

9.2 Sticka / Inhalants

A regular challenge was that the girls arrived each week high or 'drunk' on sticka (inhalants).

What helped?

- On boarding the bus in town the girls were expected to leave behind any bottles of sticka, which they mostly did.
- On arrival at the hall, facilitators checked again for sticka and any material soaked in sticka was also removed or washed.
- Washing themselves refreshed the girls helping the effects of sticka to wear off more quickly.



Girls draw 'the good and bad aspects of sticka' while a facilitator holds one girl's baby.

- Washing their clothes and their bodies also removed any residue of sticka, and helped the girls to 'sober up' through a physical and straightforward activity.
- Tea and bread at 1030 further helped the girls to 'sober up'.

9.3 Disruptive Behaviour

The girls were clearly not used to functioning in a learning environment, so there was a lot of disruptive shouting out, laughing, fighting, mocking each other, getting up and down etc. during the sessions.

The girls commented on their disappointment with this themselves when asked which things they did not like about the group, they said:

- *Our bad behaviour*
- *Not respecting elders & making noise when being taught*
- *Being disruptive and not observing ground rules*

What helped?

- Keeping everyone involved by doing exercises in small groups and keeping them busy with different activities,
- Keeping each activity short and focussed.
- Reinforcing the ground rules
- Peer pressure
- Regular energisers

Girls experiment with different types of sanitary protection



Example: Taking Chitenges

At the first group we gave out t shirts and chitenges for the girls to wear whilst they were washing. At the end of the group the girls refused to return them and some took them away.

Part of the problem was that they did not have clean clothes to put on as we had been unable to wash their clothes due to lack of buckets. After discussion with the girls the following week, this problem did not occur again and each week everyone returned the chitenges and left in their clean clothes. One week we lent the girls chitenges and t shirts to wear on leaving the group as their clothes did not dry due to the rain. All were returned the following week.

9.4 Sleeping in Sessions

Girls would often sleep during the sessions, particularly if they had not had much sleep the previous night.

What helped?

- Facilitators or peers rousing the girls
- Giving them a drink of water
- Taking girls to walk around outside to wake up
- Asking them to sleep outside so as not to disrupt the group wishing to learn

9.5 Picking on Each Other and Bullying

At times the group would pick on one member, or two or three would bully someone.

Girls commented on this in the evaluation regarding things they didn't like about the group: - *Bullying, sometimes during washing*

What helped?

- Facilitators intervening
- Discussing the issue of bullying at the start of a group and adding it to the ground rules
- Peer pressure

Challenges faced within the system:

9.6 Girls unable to attend the group

Where girls made the positive decision to move into a centre, sometimes as a result of being in the group, some centres were reluctant to allow the girls to attend the group. The reasons for this were well founded, they were concerned that the girls in the centres would be tempted back to the street by their friends, or that their friends in the centre would also want to attend the group, causing disruption to their settling into the centre.

However, some of the girls were disappointed not to be able continue their learning on reproductive health and literacy, and missed being part of a supportive peer group.

In addition, these girls who had made positive choices about their own well being were a loss to the group as possible role models to their peers.



*Pin the Organ on the Body Exercise:
Male changes in puberty*

9.7 Returning Girls to the Street

A significant challenge was working with the girls every week, helping them build their self esteem, teaching good hygiene, discussing with them the dangers of street life, then after the group leaving them back on the streets where they are extremely vulnerable. However, it was judged better to be offering them something which may help them make a positive choice in the future, than offering no education or support because of this dilemma.

9.8 Lack of Appropriate Places for Girls to Stay

Even more challenging, was when a girl seemed willing to go into a centre, but there was apparently no appropriate place for her. Reasons for this were: centres being mixed boys and girls and the girl wanting to be in a girls only place; or centres not accepting girls older than 12 years; or centres not taking girls directly from the streets for fear of leading their existing girls astray; or because the girl refused to go to a particular centre because of a previous bad experience there.

9.9 Delays in the Referral System

Another challenge was that when a girl asked to go into a centre, the referral system took time and with a certain lack of clarity about who was responsible for what, that delays often meant that by the next day or later, high on sticka, the girl had changed her mind about going to a centre.

9.10 Breakdown in interventions

One group member was physically unwell and requested reintegration with her family during the group. This was initially achieved, then after about 3 weeks the girl was back on the streets. A second reintegration was organised, which also subsequently broke down.

The same girl was also attended to by the Mobile Health Team for her illness, but despite numerous attempts, her treatment also broke down. This girl's situation is a poignant example of the extensive needs of some of the girls and despite many good attempts, the system's failure to adequately meet the needs. It is open to question whether with more preparation of the family and the girl for reintegration, and more intensive health support, the placement might have succeeded.

9.11 Organisational Communication and Understanding

It was important for the Bakashana Twampane team to communicate clearly about the aims of the group, its progress, and any particular issues about the girls to the other agencies working with them, i.e. the outreach team, the mobile health team, Social Welfare Dept., the centres, etc. Although we tried to achieve good communication through the mix of facilitators from different agencies, this was not always achieved, at times leading to misunderstandings, miscommunications, rumours and suspicion. It would be important to ensure clearer communication when launching a new venture such as this in future, or if this programme continues.

10. Evaluation

10.1 Ending Quiz

At the last group (number 18), only six girls attended. We were able to complete an ending evaluation quiz covering puberty, HIV, periods, hygiene, 'sticka', pregnancy and condoms, with five of the girls. See appendix 2 for questions asked.

Out of a possible total score of 22, the five girls scored between 9 ½ and 18 ½. The three girls who had attended the group on more than 13 occasions all scored over 16 (see scores on table below in italics). While the girls who had attended the group less often scored 11 and 9 ½ respectively. From this we can tentatively deduce that those attending regularly had learnt a number of things from the group and therefore had greater knowledge about sexual and reproductive health matters.

Results of Ending Evaluation Quiz

Quiz score (max 22)	No. of sessions of the group attended		
	1 – 6	7 – 12	13 – 18
18-22			<i>18½</i>
13-17			<i>17½</i> <i>16</i>
8-12	<i>11</i>	<i>9½</i>	

n = 5 girls

However, we can also see from the quiz scores that the girls are still lacking a lot of knowledge and would benefit from further learning in this area. For example, two girls thought it was safer to use two condoms rather than one.

10.2 Feedback from the Girls

At the end of each session there was a brief evaluation, asking:

- 1) What did you learn or like about today?
- 2) What did you not like about today? And
- 3) What else would you like to do or learn about?

And in the final session there was a longer evaluation with the girls.

Each evaluation was overwhelmingly positive, with girls stating numerous things they had liked or learnt and very little that they had not liked.

For a full list of responses from the ending evaluation see appendix 3.

Some of responses from the girls were as follows:

10.2.1 Things liked or learnt in the group

➤ **Puberty**

- *Changes in puberty*
- *Feelings*

➤ **Periods**

- *That having a period is not an illness. You don't have to go to the clinic.*
- *That it's ok to eat spicy food or take cold drinks when having one's period*
- *That it's important to look after yourself and be clean when having one's period.*
- *If we don't bath the germs will breed and go inside*
- *Not to use anything dirty for a sanitary pad*
- *Change pad often*
- *Most of us didn't know much about our periods and how to care for our bodies*



Literacy Class

➤ **The reproductive system**

- *That an erection can be released without having sex*
- *What happens for a man to make a woman pregnant*
- *Today I learnt things I never knew about so I'm very happy*

➤ **Literacy**

- *It's not just about having lunch, it's more important to learn to read*

➤ **HIV & STIs**

- *If you sleep with a man you can get HIV from the semen*
- *How a baby can get HIV from the mother*
- *Learnt about HIV & STI s, how you get infected, and ARVs*
- *Learnt how to use condoms – male and female*
- *Various ways of acquiring HIV/AIDS e.g. using sharp tools*

➤ **Pregnancy and abortion**

- *Dr Kaseba - the dangers of pregnancy when young*
- *Types of family planning*

➤ **Unwanted Sex**

- *That if a man rapes you what you can do, you have to go to the police and to the hospital*
- *It's wrong for men to force us and we should always learn to say no*

- *Not to sleep around for nshima or Bostik or K1500, just say no, they may have infections*
- *Cant go to the police, they might want to have sex with you*
- **Love and Sex**
 - *Things that are safe, like touching, hugging, using a condom*
 - *I would like a hard working, committed and caring mate*
 - *That its not only sexual intercourse to show a man you love him*
- **Assertiveness**
 - *Not to be a bully / boss*
 - *How to say NO*
 - *Making a choice – not getting involved in dangerous activities*
 - *Assertiveness, aggressive and passive*
- **Bostik**
 - *When on Bostik cant see the men coming so may get infected*
 - *want to stop*
- **Literacy**
 - *To write our names*
- **General**
 - *We've learnt a lot of good things and we can teach our friends*
 - *All the things I learnt today I didn't know so I've learnt a lot*

10.2.2 Things Not Liked About the Group

Dislikes were few and mostly related to the girls' situation or their behaviour.

They included:

- *Street life is bad, but I don't like my sisters, they shout at me*
- *Our bad behaviour, e.g. sleeping, fighting, grabbing*
- *If a friend says do something, saying 'yes', - being passive*
- *Telling lies that one is sick*
- *Bullying*
- *I slept too much, my behaviour was not good today*
- *Everything we were happy with*

10.2.3 Requests for Future Activities or Learning

(See also section 11.1 below for learning topics)

- **Behaviour** - *Help us change our bad behaviour,*
- **Education** - *I would like to continue with school*
- *I want to learn how to speak English and get an education and to be somebody in the future*
- **Items** - *pants and sanitary pads, shoes*

- **To Leave the Street** - *to come out of the street*
 - *Build a centre so it can help change our lives, e.g. we will go to school, bathe, eat, shelter, other girls on the streets can also come to the centre and be encouraged to change*
 - *A place to sleep*
- **Bostik** - *to stop Bostik, and dagga*
- **To Continue Bakashana Twampane** - *for this programme to continue*
 - *Wish what's happening on Tuesdays could be on a daily basis*
 - *Once a week is not enough, daily*

11. Recommendations

At the time of writing, a new centre for girls has been opened by the Ministry of Community Development and Social Services and the majority of the girls from the group are now staying in the centre.

11.1 Recommendations Regarding Bakashana Twampane

Recommendation: To continue the group for girls in the centres and girls on the streets.

This information is so vital for them

- Group facilitator

The group was judged to have such a positive impact in numerous ways that it is recommended the group continue. At this stage, it has been advised not to mix the girls who are still on the streets with those in the centres, for fear of tempting the latter back onto the streets. Therefore it is recommended that two groups be run – one for girls on the streets and the other for those in the centres. Every girl, whether on the streets or in the centres, should be offered the opportunity to learn about sexual and reproductive health, literacy and other essential topics.

11.1.1 Recommendations from the Girls

The girls had numerous requests for future learning topics, activities and other interventions.

Learning topics:

- **Cookery** - *To prepare traditional dishes*
- **Health** - *how to look after my body so I don't get sick*
 - *how to look after a patient*
 - HIV testing
 -
- **Alcohol and drugs** - *dagga, alcohol/ kachasu and cigarettes and cocaine.*
 - *To give up Bostik*

- **Vocational studies** - *How to do something positive in life e.g. get a good job.*
 - *To do more than just read and write, to be a nurse or teacher*
 - *tailoring*
 - *Agriculture*
- To speak **English**
- **Literacy** - *to read and write so we can look after our families, To continue learning how to write, to write a letter*
- **Parenthood** - *how to look after a baby*
- *To be **focussed** and know what I want to do in the future*

Activities:



- **Sports** - Include sports like netball, football, volleyball, wider (French skipping), jacks, other games
- **Drama, dancing, modelling**
- **praise and worship** - *How to go to church*
- **Photography** - *To put our photos on the wall, so when visitors come we can say "that is Karen"*
- **Outings** - *Adventure City, Victoria Falls, visit TV studios.*

At the end of the programme there was a Sports day with Sport in Action

- **Books** to read
- **Art** - *colouring with crayons*

Other Requests:

- **Safety** - *How can I improve my relation with police and security guards to avoid them sleeping with us?*
- **School** - *to go to school*
- *For this programme to continue on a daily basis in our own centre as street life has nothing good to offer*
- *To extend this programme to five days a week*

11.1.2 Recommendations from the Facilitators

In addition to the above facilitators recommend –

- Further teaching on **sexual and reproductive health** including HIV and STI s
- More use of **creative activities** in the groups.
- The group to become an **advocacy** or children's rights forum
- teaching **home management**, domestic skills and cooking African dishes

- For the group to continue with regular **reviews involving the girls**, to ensure the content and direction of the group are in line with the girls' needs and wishes

Recommendation: A sexual health group for boys

Addressing reproductive and sexual health with girls is only addressing half of the challenge. There is a need for a group on sexual health or sex and relationships for the boys to enable them to address some of the issues such as rape, HIV, STI's, puberty, etc.

11.2 Recommendations Regarding the Girls on the Streets

11.2.1 Recommendations from the Girls

Recommendation: Appropriate Places to Stay for All Girls

The girls clearly asked for places to stay, places to sleep, a centre, etc. It is imperative that a variety of options are available to the girls so that all of them can be safe and have their basic needs met.



Lunch time at Bakashana Twampane

Recommendation: A Place for Girls to Sleep

For the girls who choose, for whatever reason, not to access existing centres, there is a need for places to sleep. This could be an open access centre, i.e. where girls can come and go as they please, or a night shelter, open only at night offering a bed, a meal and a bath.

Recommendation: Comprehensive Reintegration and Follow Up Services

Girls asked for help in returning to their families. There are currently reintegration services which work hard to achieve their aims. However, with greater capacity, to intensively prepare, support and follow up placements these services could work more comprehensively with families and girls to ensure successful and long lasting reintegration.

Recommendation: A Daytime Support Centre for Girls

Girls asked for a place they could go to every day, not just once a week. There is a need for provision of a place easily accessible from town where programmes such as Bakashana Twampane, counselling, literacy, health checks etc. could be accessed by the girls. Such a centre could work with the girls to help them move

away from extensive use of inhalants, to provide opportunities to consider their future wishes and options, and to link them in to appropriate services.

11.2.2 Recommendations from the Facilitators

Recommendation: Outreach or Street Work targeting Girls

The girls from the group and any other girls on the streets could be targeted for outreach or street work at least twice a week, to find out who is facing difficulties, who needs items such as sanitary towels, soap, etc. to provide counselling, conflict resolution, to follow up those on daily medication, etc.

Recommendation: More Female Outreach Workers

ZACCW recommends that one key worker should work with a maximum of five children. Therefore a guide to the number of female outreach workers could be at least one female outreach worker for each five girls on the streets.

Recommendation: A fast track placement system for girls

To develop a fast track placement system for girls, so that a girl on the streets requesting a centre placement or a place to sleep could be placed within the same day to protect her from further danger that night, and to act in the moment whilst the girl is wanting help.

11.3 Recommendations Regarding Girls in the Centres and on the Streets

Recommendation: A Psychosocial Support Centre or 'Listening Centre' for Girls

It was apparent from working with the girls that they are facing a number of very difficult issues in their everyday lives, as well as many of them living with the consequences of past abuse and neglect. A 'Listening Centre' for the girls could be the coordination point for group and individual counselling services for the girls, as well as a range of psychosocial support activities, such as Bakashana Twampane and other group activities.

Recommendation: Peer Educators

Teenage girls are most likely to listen to messages from their peers. From the Bakashana Twampane Group there are 4 – 6 girls who could be trained as peer educators to convey reproductive health messages to their friends. This would also give them a sense of responsibility and purpose and improve their self esteem.

11.4 Recommendations regarding Coordination and Communication

Recommendation: Communication Structures

It is important to ensure good coordination and knowledge sharing between the various teams, e.g., Bakashana Twampane, the mobile health clinic, the

reintegration team and the outreach team. This could be achieved by a brief weekly or fortnightly meeting of the team leaders to share information and developments.

Recommendation: Coordination between teams through a key worker system

Working with girls with a high level of need and many challenges requires a comprehensive and structured team approach. To ensure good communication and coordination over each girl, who may have many workers working with her, the development of a key working system is recommended. This is a system in which each girl has an identified female key worker, someone who works on building a relationship with the girl and helping her to identify and achieve personal goals.

Each key worker is responsible for developing an **individual planning system** in which each girl develops a plan for their future with goals and methods by which these can be achieved. The key worker works systematically with the child to help them to achieve their goals, and organises regular reviews involving the girl, and all workers and family involved with her.

12. Conclusion

This report concludes that the Bakashana Twampane girls group on sexual and reproductive health provided a valuable service to the girls living on the streets. It is deemed essential that all girls have some basic knowledge about sexual and reproductive health, and the girls who attended the group regularly seem to have gained this knowledge. As well as providing knowledge on sexual and reproductive health, the group was seen to offer the girls some literacy and numeracy skills, to raise their self esteem, to offer an opportunity to become clean and practice self care, to provide a forum for the girls to support each other and to reflect on their lives and their wishes for the future. It is recommended that the group continue as a positive educational and support mechanism, both for girls on the streets and in the centres. This report can be used as a guide for those wishing to replicate the group within their organisations. It was noted that boys also would benefit from such a forum.

A number of difficulties faced by the girls were highlighted throughout the course of the group, such as a lack of appropriate sleeping places for the girls, lack of coordination between services, and the need for adequate psychosocial support for the girls. It is hoped that these issues will be attended to urgently.



Girls clean their teeth after taking a bath

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References

My Changing Body – fertility awareness for young people. Institute of Reproductive Health, Georgetown University, and Family Health International with Elisa Knebel. 2003

Street Life - The Story of Sufi and Site. A Life Skills Guide for Children ‘on’ and ‘of’ the Street. PCI Africa KidSAFE, Lusaka, Zambia. 2006.

Toolkit for Sexual and Reproductive Health Programmes. Project Concern International 2004

Tuko Pamoja – adolescent reproductive health and life skills curriculum. Program for Appropriate Technology in Health (PATH) 2006

Appendix 1

Unwanted Sexual Advances

Case Discussion 1

Musonda is a 35 year old security guard in Soweto.

Fanci is 15 years old and lives on the streets in Soweto.

Musonda tells Fanci that it is not safe around here and that he will make sure that she is ok. He offers her a safe place to sleep at night.

Fanci respects him and sees him as a father figure.

For the first two nights she sleeps well, then he buys her a pair of tropicals, she is very happy.

The next night some bigger boys come and bother Fanci. Musonda sends them away and tells her not to worry, he will protect her.

He says he will sleep next to her to make sure that she is safe, he tells her "I am your father, sleep well and don't worry, I will take care of you".

During the night Fanci feels Musonda's hand on her breasts. She tries to push it off but he tells her to relax, saying "you are safe with me". He continues touching Fanci and reassuring her that all will be well and not to worry so much, eventually he has sex with her (he rapes her).

This continues for a number of nights until Fanci hears some friends talking about how Musonda defiles girls. Then she realises that what he is doing to her is wrong and she wants to stop it from happening.

Discuss this story and answer these questions:

1. How might Fanci be feeling?
2. What could she do to try to get out of the situation?

Case Discussion 2

Mwape has been the boyfriend to Esther for 3 months.

He is kind to her, he buys her presents and protects her from the other boys and men on the street.

One evening Mwape tells Esther that she must go with his friend Derek for the night.

Esther says that she doesn't want to, but he tells her that she has to, and when she refuses he slaps her round the face. He threatens to beat her more if she continues to cause trouble, so she goes with Derek.

A few nights later, Mwape tells Esther that she has to go with Mwango. Again when she protests he slaps her and threatens her with worse if she refuses.

This becomes a regular thing until it happens every night, and Esther ends up sometimes sleeping with two or three boys or men in a night.

Esther notices the boys giving Mwape money in the mornings.

Esther is feeling very unhappy about the situation but she is not sure what she can do about it.

Discuss this story and answer these questions:

1. How might Esther be feeling?
2. What could Esther do to try to get out of the situation?

APPENDIX 2

ENDING QUIZ - QUESTIONS

To ask girls individually with translation whilst the others do the small group evaluation exercise.

We would like to ask you some questions to find out what you have learnt from this group and what you still need to learn more about. We will not tell anyone else your score. Is it ok to ask you these questions?

1. Can you tell us three changes which happen to a girl's body when she goes through puberty?
2. Can you tell us three changes which happen to a boy's body when he goes through puberty?

What is the missing word?

3. When a man ejaculates inside a woman, the leaves the man's penis and travels up inside the woman
4. Why is it important to keep clean and change sanitary protection regularly when we have our periods?
5. Can you tell us one way HIV is passed from one person to another person?
6. What are two ways we can prevent being infected with HIV?
7. To prevent pregnancy or HIV, is it safer to use 2 condoms?
8. Please show us how to use a male condom correctly whilst telling us what you are doing.
9. Please show us how to use a female condom correctly whilst telling us what you are doing.
10. Can you tell us three dangers of taking sticka?

APPENDIX 3

Girls Responses for Ending Evaluation

1. What motivates you to come to this group?

- to learn
- nice food
- bus rides
- condoms, especially female condoms
- Interaction with each other - working as a team and encouraging each other

2. What have you learnt here?

- Puberty, changes in puberty
- Feelings
- Bostik - though want to stop
- HIV/AIDS
 - mother to child transmission
 - Various ways of acquiring HIV/AIDS e.g. using sharp tools
- Condoms - male and female
- STI's
- Choosing a mate
- Street life
- Making a choice - not getting involved in dangerous activities
- Hygiene e.g. disposal of sanitary pads
- Pregnancy and abortion e.g. Dr Kaseba, the dangers of pregnancy when young
- Centre life, how I would like my centre to be
- Types of family planning
- Sex and love
- Bullying
- Assertiveness, aggressive and passive
- To write our names
- That its not only sexual intercourse to show a man you love him, you can do other things like take a walk hand in hand, hug, kiss

3. What other things have you liked or enjoyed about the group?

- Learning to read and write

- Bath
- Knowing people like Katebe (caterer), Sue, Mildred
- the ground rules - *at least we are being guided*
- Have enjoyed encouragement from facilitators to behave
- Less fighting among fellow girls - has brought us closer together

4. Which things that you learnt in the group have you used in your day to day life?

- **give examples**
- obedience
- condoms, male or female
- *have carried condoms, particularly female condoms, but hard to force boys to use them*
- *have negotiated using condoms with boyfriend, told him - what happens if I get pregnant?*
- avoiding casual sex
- going to the clinic
- to stop smoking dagga
- to avoid Bostik
- consequences of Bostik e.g. accidents
- to say no to sex
 - to say NO, leave me, I don't want (assertiveness)
 - men take advantage of us, its difficult to make a right decision
- respect - of elders
- we try to wash pads at city market or dispose of them properly

5. How has the group helped you change?

- **e.g. has your relationship with other people (police, security guards etc) changed at all as a result of the group?**
- the police, security guards , have the same approach towards us, they want to sleep with us
- the police don't attend to our complaints

6. If this group were to continue, what'd you like to learn about?

- How can I improve my relation with police and security guards to avoid them sleeping with us
- How to do something positive in life

- Continue
- To prepare traditional dishes
- learning literacy
 - to do more than just read and write, to be a nurse or teacher

7. What else would you like to do here?

- Include sports like netball, football, volleyball, wider (French skipping), jacks,
- Drama, dancing, modelling
- Different games
- Include praise and worship,
- To be seen on TV, to visit the TV studios
- To give up Bostik
- To speak english
- To put our photos on the wall, so when visitors come we can say "that is Karen"
- Outings - Adventure City, Victoria Falls

8. Anything else you'd like to say?

- Help us change our bad behaviour,
- Street life is bad, but I don't like my sisters, they shout at me
- I would like to continue with school
- Build a centre so it can help change our lives, e.g. we will go to school, bathe, eat, shelter, other girls on the streets can also come to the centre and be encouraged to change
- Wish what's happening on Tuesdays could be on a daily basis
 - Once a week is not enough, daily

9. Things not liked about the group?

- Our bad behaviour e.g., sleeping, fighting
- Telling lies that one is sick
- Bullying, sometimes during washing
- Not respecting elders & making noise when being taught
- Being disruptive and not observing ground rules