Part V

Assisting Clients in Making Their Own Voluntary and Informed Decisions

At times, assisting clients in making voluntary and informed decisions may be a matter of confirming a decision that the client made before he or she even entered the clinic. In other instances, this may involve helping the client consider certain issues and weigh several options to reach his or her decision. While a provider’s objective may be to help individuals make their decision, often the decision-making process is heavily influenced by gender expectations in the client’s social setting or by power imbalances in personal relationships that may limit the client’s decision-making capacity. Counseling can and should address all of these factors.
Session 24
Gender Roles

Objectives
• To define gender and gender roles
• To describe how gender roles can affect communication between SRH clients and providers and between clients and their partners
• To describe how gender roles can have a negative impact on SRH

Materials
• Flipchart paper, markers, and tape

Advance Preparation
2. Prepare two flipcharts, one with the heading “Act Like a Man” and the other titled “Act Like a Woman.” Draw a large box on each paper, with enough room to write messages both inside and around the margins of the boxes.

Time

<table>
<thead>
<tr>
<th>Training Activities</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Discussion</td>
<td>5 min.</td>
</tr>
<tr>
<td>B. Brainstorm</td>
<td>10 min.</td>
</tr>
<tr>
<td>C. Discussion</td>
<td>10 min.</td>
</tr>
<tr>
<td>D. Brainstorm</td>
<td>10 min.</td>
</tr>
<tr>
<td>E. Discussion</td>
<td>10 min.</td>
</tr>
<tr>
<td>F. Summary</td>
<td>5 min.</td>
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</tbody>
</table>

Note: This session is adapted from: EngenderHealth, 2000.
Session 24 Detailed Steps

Activity A: Discussion (5 minutes)
1. Ask the participants if they have ever been told to “act like a man” or “act like a woman.” Ask them to share some experiences in which someone has said this or something similar to them. Why did the individual say this? How did it make the participant feel?

Training Tip
In some cultures, “act like a woman” does not have the same social meaning for women as “act like a man” does for men. If this is the case in your setting, try using “act like a lady” for the heading.

2. Tell the participants that this session will look more closely at these two phrases. Doing so will allow them to begin to see what messages we receive about being either male or female.

Activity B: Brainstorm (10 minutes)
1. Post the flipchart entitled “Act Like a Man.” Ask the participants to share their ideas about what this means. These are society’s expectations of how men should act and what men should feel and say. Write their comments inside the box.

Training Tip
Another way of conducting this activity is to ask small groups to prepare their own flipcharts and then share the results with the others. If there are enough men to make their own group, it can be very interesting to have them do their own versions of the male and female gender-role boxes, to compare these with comparable gender-role boxes prepared by groups of female participants.

2. If necessary, ask the following questions, to include expectations about sexual behaviors in the box.
   * What messages are given to men about engaging in sexual activity?
   * What messages are given to men about taking risks?
   * What messages are given to men about what to do when they are in pain or need help?
   * What messages are given to men about violence?

3. After completing the messages inside the box, ask the participants:
   * How are men treated when they try to act “outside of the box”?
   * What names are men called when they act “outside of the box”?

4. Write these names in the margin outside of the box.
Activity C: Discussion (10 minutes)
1. Explain that society uses these names to keep men inside this gender box.
2. Start a discussion by asking:
   ✴️ How can “acting like a man” affect a man’s relationship with his partner and children?
   ✴️ How can social norms and expectations to “act like a man” have a negative impact on a man’s SRH?
   ✴️ How do gender roles affect the interaction between a male client and a female provider?

Activity D: Brainstorm (10 minutes)
1. Post the flipchart entitled “Act Like a Woman.” Ask the participants to share their ideas about what this means. These are society’s expectations of how women should act and what women should feel and say. Write their comments inside the box.
2. If necessary, ask the following questions, to include expectations about sexual behaviors in the box.
   ✴️ What messages are given to women about engaging in sexual activity?
   ✴️ What messages are given to women about being assertive?
   ✴️ What messages are given to women about the importance of beauty?
3. After completing the messages inside the box, ask the participants:
   ✴️ How are women treated when they try to act “outside of the box”?
   ✴️ What names are women called when they act “outside of the box”?
4. Write these names in the margin outside of the box.

Activity E: Discussion (10 minutes)
1. Explain that society uses these names to keep women inside this gender box.
2. Start a discussion by asking:
   ✴️ How can “acting like a woman” affect a woman’s relationship with her partner and children?
   ✴️ How can social norms and expectations to “act like a woman” have a negative impact on a woman’s SRH?
   ✴️ How do gender roles affect the interaction between a female client and a male provider?

Activity F: Summary (5 minutes)
Ask the participants:
✴️ What can SRH providers do to overcome the negative impact of gender roles on men’s and women’s SRH?
Session 25
The Effect of Power Imbalances on SRH Decision Making

Objectives
• To identify four categories of behavior that people use to control their partners in different types of sexual relationships
• To describe how such behaviors can affect the ability of partners to make and carry out decisions regarding SRH
• To explain the concept of social vulnerability to HIV and STIs or unintended pregnancy

Materials
• Flipchart paper, markers, and tape

Advance Preparation
1. Review Session 25 in the Participant’s Handbook (page 107). Consider if or how you want to use the Participant’s Worksheet (case studies) with this session.
2. Prepare a flipchart showing the four types of behavior that people use to control their partners (Activity A).
3. Prepare four flipcharts, each with one of the four behaviors as a heading (Activity B).
4. Determine what resources exist in the participants’ communities to which clients could be referred for gender-based violence, including physical, emotional, and sexual abuse, and obtain contact information for these resources. Prepare a flipchart with the contact information (Activity C).

Time

<table>
<thead>
<tr>
<th>Training Activities</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A. Introduction</td>
<td>5 min.</td>
</tr>
<tr>
<td>B. Small-group work</td>
<td>10 min.</td>
</tr>
<tr>
<td>C. Discussion</td>
<td>15 min.</td>
</tr>
<tr>
<td>D. Presentation/summary</td>
<td>15 min.</td>
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</tbody>
</table>

Note: This session is adapted from: EngenderHealth, 2002.
Session 25 Detailed Steps

Activity A: Introduction (5 minutes)

1. Introduce the session by noting that for various reasons “power imbalances” may exist between clients and providers. This will be discussed in more detail in Session 26.

2. This session focuses on power imbalances between partners. Explain to the participants that making SRH decisions that require a partner’s cooperation is sometimes not easy. It is even more challenging, however, in a relationship where there is a power imbalance between partners or where one partner abuses the other. This session first considers the impact of gender and power on SRH decision making, then broadens the discussion to consider other social factors that affect SRH decision making.

3. Normally, when we think of “power” or “power imbalances” in relationships, we think of physical force. However, physical force is not the only type of controlling behavior that people experience in their relationships. Ask the participants:

   * What other kinds of behavior could be used to control a sexual partner?

   >> Training Tip

   Participants or trainers may have experienced these controlling behaviors themselves. Thus, it is important to acknowledge this at the beginning of the session, by saying that this activity might bring up strong emotions for some participants and that they can speak privately with a trainer to discuss what would make them more comfortable.

4. After a few responses, post the prepared flipchart (see below) showing all four behavior categories. Briefly describe each category, and give one example of each (see Participant’s Handbook, page 108).

   Behaviors people use to control their partners

   - Physical
   - Emotional/psychological
   - Financial
   - Sexual

5. Explain that this session will explore how these behaviors can affect SRH decision making and access to services.

6. In addition, note that, in most cultures, this kind of power is directed by men against women. We will at first focus on such examples, but please be aware that this is not always the case.
Activity B: Small-group work (10 minutes)

1. Divide the participants into four groups. Assign a category of behavior—physical, emotional or psychological, financial, and sexual—to each group, and distribute the flipcharts accordingly. (The participants should have their handbooks closed for this activity.)

**Training Tip**

Ten minutes is a very brief time for the group work. To save time, make the four groups by clustering people who are sitting next to each other. If there are more than 16 participants, you can assign people to work in pairs—again, with the person sitting next to him or her—and have two or more pairs working on the same category.

2. Ask each group to brainstorm behaviors under their category that people use to control their partners. Have one member of the group list these behaviors on the flipchart.

3. After 10 minutes (total), ask the groups to stop.

Activity C: Discussion (15 minutes)

1. Ask each group to post their flipchart and read the controlling behaviors from their list. (If more than one group worked on the same category, have them take turns reading from their lists while a trainer writes the behaviors on the prepared flipchart for that category.) Others can add to the lists after the group has reported, and the trainers can add from the lists in the Participant’s Handbook (page 108).

**Training Tip**

You will see that many types of controlling behaviors will overlap categories. For example, many examples of sexual abuse are also physical abuse. This overlap is understandable and reinforces the way in which controlling behavior can affect so many aspects of a person’s life.

2. After all of the groups have reported, ask:

   • How do you think these behaviors would affect an individual’s ability to make and carry out SRH decisions?

3. Note that many of these behaviors are included in the definition of “gender-based violence.” Although there is not enough time to cover this issue in this workshop, participants should be aware of resources in their area for referral if a client seems to be at risk for physical or emotional harm from his or her partner. Post the flipchart with the names and contact information for whatever resources you were able to find in your preparation for this session.
Session 25

Activity D: Presentation/summary *(15 minutes)*


   ➤ Training Tip

   If time permits, first ask the participants what they think about each topic (e.g., “Why are women more vulnerable to HIV/STI infection?” “Why are youth more vulnerable…?” or “What government policies contribute to people’s vulnerability?”).

2. If time allows, ask the participants how these same factors apply to other areas of SRH, such as pregnancy prevention and safe motherhood. (Except for the biological factors, the same social forces apply to pregnancy prevention and safe motherhood, with women and youth limited in their access to information, financial resources, and health care services and in their decision-making power.)

   ➤ Training Tip

   The Participant’s Handbook also includes a Participant Worksheet consisting of case studies on power imbalances in SRH decision making (pages 111 to 116). These will help the participants more fully understand and apply these concepts. They can be used as an additional session, either as case studies or as role plays, or as “homework” to be completed after the session. Note that the “answers” to the case-study questions are provided.
Session 26
Helping Clients Make Decisions—
Counseling Practice II

Objectives
• To identify the steps in the decision-making phase of integrated SRH counseling (REDI—
  Phase 3, Decision making; GATHER: Help)
• To list at least one open-ended question to ask clients for each of the four steps
• To describe the role of the provider in helping the client to make his or her own informed
decisions and in supporting the client’s sexual and reproductive rights
• To demonstrate helping a client to make his or her own decision

Materials
• “Props” to be used during the demonstration role play
• Flipchart paper, markers, and tape
• Prepared flipchart with guidelines for feedback (from Session 23)

Advance Preparation
2. Prepare a flipchart with the four steps of the Decision-making segment of REDI (page 141).
3. Prepare five flipcharts, each with one of the steps of decision making as a heading. The third step will be divided for two groups, as shown here:

   1. Identify what decisions the client needs to make in this session
   2. Identify the client’s options for each decision

   3(a). Weigh the benefits, disadvantages, and consequences of each option
   • Options meet clients’ individual needs
   • Provide more information as necessary

   3(b). Weigh the benefits, disadvantages, and consequences of each option
   • Who else would be affected?
   • Others’ reactions

   4. Assist the client to make his or her own realistic decisions
### Session 26

<table>
<thead>
<tr>
<th>Time</th>
<th>Training Activities</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 hour, 30 minutes</td>
<td><strong>A.</strong> Introduction</td>
<td>10 min.</td>
</tr>
<tr>
<td></td>
<td><strong>B.</strong> Small-group work</td>
<td>15 min.</td>
</tr>
<tr>
<td></td>
<td><strong>C.</strong> Plenary discussion</td>
<td>20 min.</td>
</tr>
<tr>
<td></td>
<td><strong>D.</strong> Demonstration role play/feedback</td>
<td>20 min.</td>
</tr>
<tr>
<td></td>
<td><strong>E.</strong> Practice role plays</td>
<td>15 min.</td>
</tr>
<tr>
<td></td>
<td><strong>F.</strong> Discussion</td>
<td>10 min.</td>
</tr>
</tbody>
</table>
Session 26 Detailed Steps

Activity A: Introduction (10 minutes)
1. Divide the participants into five groups. If they need to change seats, ask them to take their handbooks and their pens or pencils with them.


Training Tip

These are the five “client profile” groups for the next two counseling practice sessions. Depending on which option you chose in Session 21, these will be the same groups as the previous day or different.

In Activity E, you will assign them a client profile for their practice role plays. Again, this needs to be consistent with the option you chose in Session 21 (i.e., either the same as the day before or different).

2. Ensure that the participants keep their handbooks closed during the following activity. Explain that helping clients make their own decisions is one of the most difficult steps in counseling, despite years of GATHER training (which includes a “Help” step). Ask the participants why this might be true. Facilitate a brief discussion, making sure that the points in the Participant’s Handbook discussion summary (page 118) are covered.

3. Post the prepared flipchart (shown below) with the steps for the decision-making phase of REDI, and briefly review it.


Decision Making: Steps in Counseling
1. Identify what decisions the client needs to make in this session
2. Identify the client’s options for each decision
3. Weigh the benefits, disadvantages, and consequences of each option
4. Assist the client to make his or her own realistic decisions

Activity B: Small-group work (15 minutes)
1. Ask the participants to turn to Session 8 in their handbooks and find the detailed description of the decision-making phase of REDI.

2. Assign one step to each group (with the third step split between two groups). Distribute the prepared flipcharts and the markers. Ask the participants to brainstorm questions to ask clients for their step and to list them on the flipchart.
Session 26

3. Remind them to use open-ended questions as much as possible. Ask them to discuss in their group how to explain key points to the client and to make notes for reporting in the plenary discussion (but not on the flipchart).

Activity C: Plenary discussion (20 minutes)
Ask one member of each group to post their flipchart and read their questions. They should also share their notes about how to explain key points to the client. Trainers and the other participants can add to the questions or make comments. (4 minutes per group)

Activity D: Demonstration role play/feedback (15 minutes)
1. Have several members of the training team conduct a demonstration role play for the decision-making phase of counseling, using the “sixth client” profile from Session 23 (page 125). As much as possible, use the questions developed by the participants for each step. (10 minutes)
2. Ask the participants for feedback on how well the role play demonstrated the steps of decision making and on what improvements they would suggest. (5 minutes)
3. Remind the participants that power imbalances may exist due to differences in the status of clients and providers. It is difficult to demonstrate the impact of status in a role play. However, consider: (5 minutes)
   * What impact could a power imbalance have on this interaction?
   * What could the provider do to overcome the barriers caused by this imbalance?

Activity E: Practice role plays (15 minutes)
1. Have the groups move as far away from each other as possible, to cut down on distractions during the role plays (which will be conducted simultaneously).
2. Assign one of the client profiles to each group (see Training Tip, Activity A). Have the group decide who will be the “provider.” (It should be someone who has not already practiced counseling.)
3. Explain that each group will do a 10-minute role play of the decision-making phase of counseling with this client. Ask the groups to remember what happened with this “client” during the rapport-building and exploration role plays (Session 23, page 125) and to imagine that they are continuing the counseling from that point. Explain that because the role plays will be conducted simultaneously, discussion will take place in the large group following the role plays.
4. Ask the “providers” to begin. Have the training team monitor as many of the groups as possible, moving around as necessary. Stop the role plays after 10 minutes.

Activity F: Discussion (10 minutes)
1. Post the flipchart on feedback guidelines from Session 23 (page 128).
2. Facilitate a discussion on all three bullets.
**Trainers’ Tool**

**REDI—Phase 3: Decision making**

1. **Identify what decisions the client needs to make in this session**
   - Help the client to prioritize the decisions, to determine which are the most important to address today
   - Explain the importance of the client’s making his or her own decisions

2. **Identify the client’s options for each decision**
   - Many providers and clients feel that in most areas of SRH, clients’ decision-making options are limited. An important role of the provider is to lay out the various decisions that a client could make, to explore the consequences of each. This empowers the client to make his or her own choice, which is a key element of supporting the client’s sexual and reproductive rights.

3. **Weigh the benefits, disadvantages, and consequences of each option**
   - Make sure that the discussion centers on options that meet clients’ individual needs, taking into account their preferences and concerns
   - Provide more detailed information, as necessary, on the options that the client is considering
   - Consider who else would be affected by each decision
   - Explore with the clients how he or she thinks that partners or family members may react to the course of action (i.e., suggesting condom use or discussing sexuality with partners)

4. **Assist the client to make his or her own realistic decisions**
   - Ask the client what is his or her decision (i.e., what option he or she chooses)
   - Have the client explain in his or her own words why he or she is making this decision
   - Check to see that this decision is the choice of the client, free of pressure from spouse, partner, family members, friends, or service providers
   - Help the client assess whether his or her decision can actually be carried out, given his or her relationships, family life, and economic situation, among other issues