

Keeping Girls Safe Project

The report on training of unwed teen mothers
on promoting Gender equality, Adolescent
Reproductive Health and ending GBV



5 January, 2017

1. Background	3
2. Training objectives.....	4
2.1 General objective.....	4
2.2 Specific objectives	4
3. Trainers.....	4
4. Description of participants	4
5. Training Venue and timeline	5
6. Expectations from participants	5
7. Methodology and sessions covered.....	5
7.1 Session 1: Gender and related key concepts.....	6
7.2 Session 2: Gender Based Violence (GBV)	6
7.3 Session 3: Breaking the silence about violence and Promoting Respectful Relationships	6
7.4 Session 4: Sexual Reproductive Health and Rights (SRHR)	6
7.5 Session 5: Preventing STIs and HIV/AIDS	7
7.6 Session 6: Family planning and early pregnancies.....	7
7.7 Session 7: My Future	7
8. Summary of training Evaluation	8
8.1 Rapid assessment after post-test	9
9. Training challenges and recommendations	9
9.1 Challenges.....	9
9.2 Participant's recommendations	9
10. Closing of the training	10
ANNEXES	11

1. Background

Young people's sexuality may cause some problems if it is not properly addressed. In Rwanda, most teenagers have unprotected sex, rarely use contraceptives (CLADHO, 2016)¹. This may result in unwanted pregnancies, sexual transmissible Infections, child marriages, dropping out of school and premature parenthood. In most sub-Saharan countries, at least 10% of single teenagers of 18 years get pregnant unwillingly due to lack of information about reproductive health (WHO, 2013).

The unwed teen mothers encounter many difficulties, they receive less support from their families and communities, and sometimes have fewer resources to rise up and educate their children (CLADHO, 2016). In Rwanda, families have traditionally developed and still develop strong prejudice against those children. Many girls surrender themselves to precocious sexuality because of poverty. Some give up their studies for prostitution in order to satisfy their basic needs. Some girls are encouraged by their parents, their guardians, others accept to have sexual relations with their teachers in order to get school materials. To get rid of unwanted pregnancies, many young girls very often resort to abortion. Most of the time, they throw their newborn babies into toilets (Report of MINEDUC, 2013).

Sexual education is still at early stage in Rwanda; parents feel uncomfortable talking with children about sex, others become reluctant to expose their own lack of knowledge about sexual health. Likewise, it has been observed that many adults do not receive sexuality education themselves and that some have fear to expose their own negative sexual experiences. For this reason, adult family members tend to shy away from actively educating youth about issues relating to sexual and reproductive health and rights.

In this context, KEEPCARE RWANDA, pointed out that not providing information or evading young people's questions can send negative messages about sexuality. By observation, sexual education through schools and other sources of information such as mass media, churches, peers, fill this gap through the role played by each in youth sexual education. KEEPCARE RWANDA designed the project "KEEPING GIRLS SAFE" (KGS) for increasing the knowledge and raising the awareness of the unwed teenage mothers on topics of gender equality, sex and reproductive health and rights, and the use of family planning methods available in Rwanda. Secondly, the project is supporting socio-economically these unwed teenage mothers who are poor and some their kids suffer from malnutrition. Indirectly, Keeping Girls Safe project will engage parents (adults) in sexual education and encourage them to educate their children and their peers.

This narrative report explains more and provides the highlights of the 3 days' workshop training of 30 unwed teenage mothers conducted in order to increase the knowledge on gender equality, prevention of gender based violence, family planning methods, address the above mentioned problems and break the cultural barriers on adolescent sexual reproductive health and rights.

¹ Early/unwanted pregnancy for under 18 years in 10 districts of Rwanda: rapid assessment done by CLADHO under financial support of KNH "Kindernothilfe". Kigali, August, 2016

2. Training objectives

2.1 General objective

The general objective of the training workshop was to build skills and capacity of unwed teen mothers on promotion of Gender equality, eradication of Gender Based Violence, promotion of Sexual and Reproductive Health and Rights, and family planning.

2.2 Specific objectives

- To explain types/forms of gender based violence;
- To inform unwed teen mothers the provisions of the law preventing and punishing gender based violence in Rwanda;
- To explain them why preventing early marriage and unwanted pregnancies ;
- To inform them the available services on family planning ; and
- To inspire unwed teen mothers for starting plans for their future, through saving, entrepreneurship and other small business, and
- To assess the needs and main challenges for these unwed teen mothers.

3. Trainers

The training was facilitated by Keepcare Volunteers, and health professionals from nearest health facilities. The following tables show the names of training facilitators.

No	Names	Profession	Place of work	Contacts
1	HABINSHUTI Martin	Psychologist,	KEEPCARE RWANDA	+250788576002
2	UWAMWEZI Ernestine	Social worker	KEEPCARE RWANDA	+250788441096
3	MIGEZO Guido	Medical Doctor	KABUTARE District Hospital	+250783857559
4	MUKAMANA Souda	Nurse	MUKURA Health Center	+250783006421
5	MUKANGWIJE Venantie	Nurse	University Teaching Hospital of Butare (CHUB)	+250788786401

4. Description of participants

The training attendees were 30 teenagers got pregnant under 18 years of old. They are all currently under 20 years old. These teen mothers are from all cells of Mukura sector, in Huye district southern province of Rwanda.

The criteria of selection were: to be unwed/not married, vulnerable and poor, rejected by the family, not supported by relatives, and having a child less than two years.

5. Training Venue and timeline

The training was conducted during three days; started from 28th to 30th December, 2016 at “Salle Polyvalente Mukura” in Mukura sector, Huye District in Southern Province of Rwanda.

6. Expectations from participants

The training started by asking participants what they expect to learn from the training. Their expectations before training started were turning around the following points:

- To learn on Gender equality and equity, Sexual Gender Based Violence;
- To understand the important role of youth in promoting Sexual and Reproductive Health and Rights;
- To know cycle of menstruation and calculation of ovulation period;
- To get updated on available of family planning methods;
- Increasing skills in prevention Sexual Transmittable Infections and HIV/AIDS;
- To know where youth can get sexual and reproductive health information, any

7. Methodology and sessions covered

The methodology applied was lecturing, group discussion and group works. The training approach was responding to the participants needs; some of them can read and write Kinyarwanda, others cannot. The training was more practical and speaking than class teaching.

The training workshop covered 7 main sessions, detailed in the following table.

Date	Session
28/12/2016	Session 1: Gender and related key concepts
28/12/2016	Session 2: Gender Based Violence
29/12/2016	Session 3: Breaking the silence about violence and Promoting Respectful Relationships
29/12/2016	Session 4: Sexual Reproductive Health and Rights (SRHR)
29/12/2016	Session 5: Preventing STIs and HIV/AIDS
30/12/2016	Session 6: Family planning and early pregnancies
30/12/2016	Session 7: My Future

7.1 Session 1: Gender and related key concepts

This session explained in details the roots of gender imbalance/inequality imbibed in Rwandan culture. This was transmitted from generation to generations through socialization process in the family through division of house cores, duties, and responsibilities, behaviors (masculinities and femininities), basing on sex. we explained the key terms for example gender, sex, gender equality, equity, patriarchy, use of power. The participants got the updates on the legal frameworks (sensitive laws and policies) related to gender equality and GBV prevention in Rwanda.

7.2 Session 2: Gender Based Violence (GBV)

This session increased the knowledge of participants on definition and the types/forms of gender based violence including physical, emotional, economical and sexual gender based violence as provided in the law No 59/2008 of 10/09/2008 on prevention and punishment of gender based violence in Rwanda. The participants learned the referral path way for any case of gender based violence. The participants worked in group to identify the example of GBV in the community.

Participants did focus group discussions and group works in order to give them time for reflection and giving ideas freely in the groups. Each group was composed by 6 people.

7.3 Session 3: Breaking the silence about violence and Promoting Respectful Relationships

The strategy for preventing GBV is to report and speak about it. The cultural silence is barrier to prevention and response programs; participants learned to report any case of GBV, through calling KEEP CARE Rwanda, Police, Local authorities or toll free provide by the government.

7.4 Session 4: Sexual Reproductive Health and Rights (SRHR)

This session was very interesting for participants, because it seemed to be new for them. They have



learned the human reproductive health, and the cultural myths related to it. It was very exciting to hear some participants who did not know the ovulation period, when and how to get pregnant etc. It was applied to the manual provided by the Ministry of health specifically for youth. The participants asked more questions about adolescent period and got the answers. It was revealed that, some

participant got pregnant for the first ovulation period.

7.5 Session 5: Preventing STIs and HIV/AIDS



Participants learned the frequent infectious sexually transmitted and HIV/AIDS. The unwed teen mothers were oriented to Mukura health center for voluntary testing of HIV infection. They knew the alarming symptoms and signs of STI and the importance of going to the health facility. The unwed teen mothers learned the mode of transmission of HIV infection and the ways of preventing it.

7.6 Session 6: Family planning and early pregnancies

The participants learned different family planning methods and their advantages and limitations. This session broke the negative perceptions participants have had about family planning for youth (side effects) and in general to all users. Mukura health center assisted us with a mobile family planning service; where 5 girls asked family planning services immediately.



It was distributed the leaflets on family planning methods, all those who can read got the copy of that leaflet.



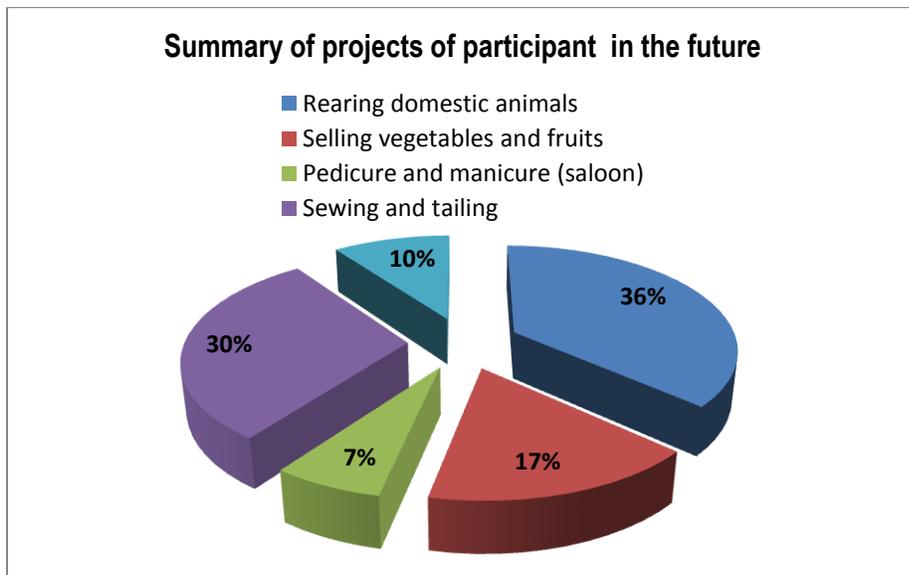
Photo: Sauda (Nures at Mukura Health Center) was explaining family planning methods and the consequences of early pregnancy

7.7 Session 7: My Future

This was the last session, which helped the participants to start thinking about the life of their kids and themselves in the future. It was done through the exercise of asking everybody participated in the training

to draft her plan for the future. This session reminded the unwed teen mothers that being pregnant at early age does not mean the end of life; become vulnerable, poor, sex worker, street children, etc.

It was analyzed the plan for everyone and come up the following summary.



Most the unwed teen mothers beneficiaries of KEEPCARE are poor, vulnerable and abandoned by their family and they have no source of income; food for the kids, clothes, health insurance and shelter.

It was the good opportunity to inform the group about the project of rearing pigs is starting to be implemented through the financial support from WWVK. They were informed about the whole implementation process of that project.

At the end of the session; participants asked KEEPCARE to do advocacy for getting support in achieving their project goals. All of participants solicited to get a special training on Income Generating activities design and management.

8. Summary of training Evaluation

We administered The Pre-test before training and Post-test at the end of training in order to evaluate the participants' knowledge before the training and the knowledge they gained from the training.. The following table summarizes the results score from both pre and post-test.

Assessment	Highest score	Lowest score	Average
Pre- test	13/20	2/20	8/20
Post-test	16/20	9/20	13.5/20

Averagely, the training has achieved its objectives; participants scored higher on the Post-test. The test included questions about gender equality, gender based violence, sexual and reproductive health and family planning.

8.1 Rapid assessment after post-test

Concerning the factors contributing to an early pregnancy, it was found that the poverty of parents, unsatisfaction and carelessness of parents and sexual violence are the major factors that led participants to be involved in early sex intercourses. The most consequences and problems faced by teenagers after getting pregnancy are school dropout, poverty (lack of health insurance, basic needs such as food and clothes, etc), and social discrimination. After being pregnant, most of them didn't receive any legal support/assistance, any support from perpetrators and young babies are not officially registered. The girls did not know that they have rights like other children in the family and in the society in general.

9. Training challenges and recommendations

9.1 Challenges

- Pre and post test were challenging because of the participants who cannot write and read, it required to assist them, which took too long time and possibly biased the answers;

9.2 Participant's recommendations

At the end of training, participants were asked to provide ideas and recommendation for further improvement of the next training. The following are the summary of their recommendations:

- Increase the days of training between 4 and 5 days;
- Training other youth for helping them to prevent early pregnancies: The participants recommended KEEPCARE to train the adolescents on the same sessions especially sexual and reproductive health, family planning and prevention of early pregnancy;
- Training/meeting with their parents: The participants said that, the reason for being rejected and abandoned by their parent is that lack of knowledge and misunderstandings rooted in the Rwandan culture towards gender equality, pregnancy out of marriage etc.
- Training manuals: These who can read and write asked for summarized resource documents having all content of the training;
- Outreach sensitization in the community: This was recommended by training facilitators; because early pregnancies among adolescent is very high in the community. Campaign activities can reach out so many people.

10. Closing of the training



Photo: Official Closing remarks of the training by Executive secretary of Mukura

“We are grateful KEEPCARE and Sponsors who helped us in the identification of young women, for grouping them into association or groups for facilitating exchange between them. Early pregnancy is the burden for our community.

Huye is hosting young girls from neighboring

Districts; Nyaruguru, Nyamagabe and Gisagara, coming for seeking jobs, house workers etc. We really appreciate your work and encouraging you to extend your intervention. On behalf of authority, I officially close this 3 day training workshop hosted here in Mukura Sector”. ES Mukura Said. This is the small part of Mukura Executive Secretary’s speech at the closing of the training. He recommended KEEPCARE to plan a training of parents of those teen mothers in order to increase their knowledge and raising awareness on the same topics provided in this training, plus the role of parents in early pregnancy prevention and response once happened.

ANNEXES

Time	Hours	Sessions	Facilitator
DAY ONE (28/12/2016)	8h30-9h00	Arrival of participants and registration	Ernestine UWAMWEZI/KEEPCARE
	9h00-9h10	opening remarks	In charge of social affairs in Mukura Sector
	9h10-9h45	Pre Test	Ernestine UWAMWEZI /KEEPCARE
	9h45-10h00	Introduction, Expectations & Setting Ground Rules	Ernestine UWAMWEZI /KEEPCARE
	10h00-10h30	Break	Restaurant
	10h30-13h00	Session 1: Gender and related key concepts	Martin HABINSHUTI/ keepcare
	13h00-14h00	Lunch	Restaurant
	14h00-16h00	Session 2: Gender Based Violence, types/forms, referral path way and the law	Ernestine UWAMWEZI /KEEPCARE
	16h00-16h15	Closing	Ernestine UWAMWEZI/KEEPCARE
DAY TWO (29/12/2016)	8h30-8h50	Recap	Martin HABINSHUTI/KEEPCARE
	8h50-10h50	Session 3: Breaking the silence about violence	Martin HABINSHUTI/KEEPCARE
	10h50-11h00	Break	Restaurant
	11h00-13h00	Session 4: Sexual Reproductive Health and Rights (SRHR)	MUKANGWIJE Venantie, Nurse at CHUB
	13h00-14h00	Lunch	Restaurant
	14h00-16h00	Session 5: Preventing STI's, HIV/AIDS	Dr.Migezo Guido/KABUTARE Hospital
	16h00-16h15	closing	Martin HABINSHUTI/KEEPCARE
DAY THREE (30/12/2016)	8h30-8h50	Recap	Ernestine UWAMWEZI/KEEPCARE
	8h50-10h50	Session 6: Family planning and early pregnancies	MUKAMANA souda, a nurse at Mukura Health center
	10h50-11h00	Break	Restaurant
	11h00-13h00	Session 7: My Future	Martin HABINSHUTI/KEEPCARE
	13h00-14h00	Lunch	Restaurant
	14h00-15h00	Post Test	Martin HABINSHUTI/KEEPCARE
	15h00-15h30	Closing general remarks and recommendations	Executive Secretary of Mukura Sector