

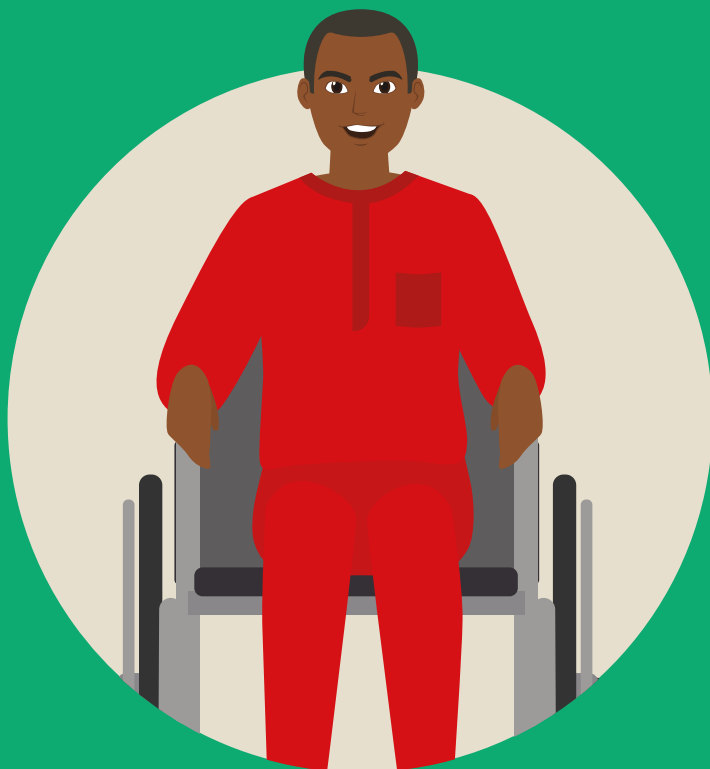
Facilitator guide



Community activities for
young men with disabilities

Introduction

This is a guide to help you run in-person sessions with **young boys with disabilities** within your community. The aim of the guide is to spark a conversation about family planning, child spacing and modern contraceptives, and to encourage people to access health facilities to get more information.



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Materials

To run the activities, you will need:

- This guide
- A flip chart or board
- Markers or chalk
- Picture codes



Running accessible and inclusive sessions

Use this **checklist** to ensure everyone can participate in the sessions.

| x | Ten days before the session |
|---|---|
| | Check that the venue doesn't have physical barriers (e.g. steps, steep ramps, narrow doorways, poor signage) outside and inside. |
| | Check that the venue has toilets that are accessible for people with disabilities (e.g. barrier-free entry, wide door, larger cubicle). |
| | Check the seating. Is it too high? Is it stable? |
| | Ensure the venue allows sufficient privacy to encourage participants to engage more actively. |
| | Check the venue is well illuminated. |
| | Check there are no loud and/or distracting sounds that can be heard from the venue. |
| | When inviting participants, ask them about their accessibility requirements. These could be sign language interpretation, material in braille or large print, or personal assistance. You can ask Sightsavers staff to provide these. |
| | When inviting participants, tell them what to expect. How long the session will be? What's the format of the meeting? Tell them what will be provided (food, water, etc.). |

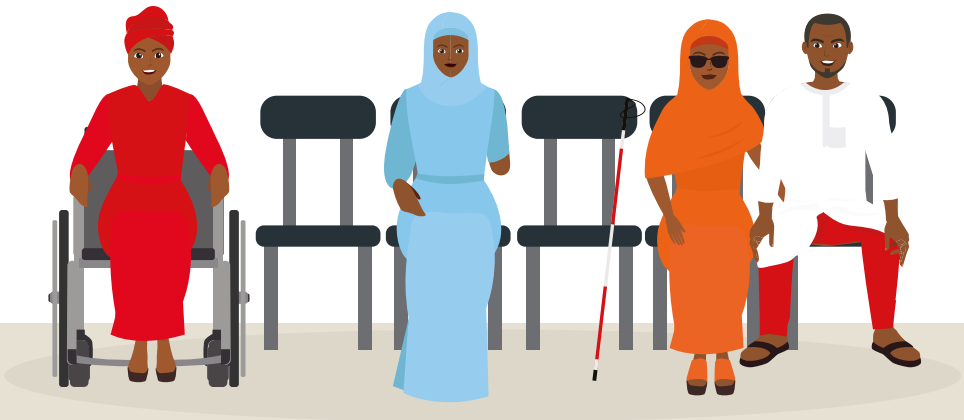
X Right before the session

Arrive early to prepare the facility for the session and address any potential last-minute issues.

Ensure physical obstacles inside the venue (e.g. extra chairs, tables, cables) are removed, especially from busy areas.

Ensure there's enough space between seating for a wheelchair to pass through.

Ensure seating is arranged so that everyone can see the facilitator easily. A semicircle arrangement is a good option. No seating should be behind the facilitator.



x

During the session

Start by introducing yourself and ask everyone to introduce themselves.

Speak clearly and at a normal pace, especially if there are interpreters present.

Make sure there is a clear view of your face and mouth to assist lipreading.

Use hand and physical gestures and the provided picture codes to support what you are saying.

Talk to the participants directly, even if they are accompanied by an assistant.

Observe and ask if someone needs assistance before giving help. Helping in the wrong way can hurt or humiliate someone.

Don't pretend to understand someone when you don't understand them.

Ensure scheduled breaks are taken.

If you write or draw, ensure your writing is large and bold for maximum clarity. Always describe what you are writing or drawing, or what you are pointing to, to assist participants who may not be able to see.

x

After the meeting

Ask for feedback from participants, telling them their honest comments will contribute in making next sessions better for them and everyone else.

Session 01

Agenda

1. Introductions and icebreakers (15 minutes)
2. Goal setting: group discussion (30 minutes)
3. Radio drama episode listening (15 minutes)
4. Know your body: group discussion (30 minutes)
5. Conclusion



1. Introduction and icebreakers (15 minutes)

At the beginning of the session, introduce yourself and welcome participants. Invite participants to introduce themselves one by one and share something that makes them unique.

2. Goal setting: group discussion (30 minutes)

Show **picture code 1** to the group and ask them to describe what's happening in the illustration.



Picture
code 1



Ask participants to share their personal experiences of goal setting. You can use the questions below to start the conversation:

- Why is it important to set goals for yourself?
- What are your short-term and long-term goals?
- How long do you think these will take to achieve?
- What steps have you taken or should you take to get closer to your goals?



Use the discussion notes below to guide the conversation:

Goals: the things a person wants to achieve in life. The goals we set depend on our values and what we consider to be important. Think about how to direct efforts towards achieving the goals.

Short-term goals: these are meant to be achieved within 0 – 6 months. Example: studying to pass final exams in school

Medium-term goals: these are meant to be achieved within 7 – 12 months. Example: planning to set up a small-scale agriculture business to support the family.

Long-term goals: these are meant to be achieved from a 1-year period to over a lifetime. Example: a married couple who plan to build a house for their family.

Steps in achieving goals:

- Clarify your inspiration/motivation
- Identify options (consider possible alternatives)
- Make a choice
- Set a reasonable time to achieve your goal
- Consistently work hard towards achieving your goal
- Check progress regularly
- Achieve your goal

3. Break: radio drama listening (15 minutes)

Invite participants to take a comfort break and mention you will play an episode from the radio drama Madubi during it. Play the episode using the provided audio device.

4. Know your body: group discussion (30 minutes)

Show **picture code 2** to the group and discuss with them how the body changes through the course of the life of a man.



Picture
code 2



**Ask participants to share their personal experiences.
Use the questions below to guide the conversation:**

- How do you feel in your body? What do you like about it?
- How has your body changed during the years?
How is it different from 5 years ago?
- What changes have you noticed during puberty
and adolescence?



Use the discussion notes below to guide the conversation:

Some of the possible body changes during puberty and adolescence include:

- Height and muscular growth
- Acne
- Voice changes
- Hair growth
- Genital growth
- Wet dreams
- Erections
- Breast changes

5. Conclusion



Thank participants for their contribution and let them know when you are meeting next and what you will discuss.

Session 02

Invite a health service provider to **attend** this session.

Agenda

1. Introductions and icebreakers (15 minutes)
2. Decision-making: group discussion (30 minutes)
3. Radio drama episode listening (15 minutes)
4. Intimacy, abstinence and modern contraceptives: group discussion (30 minutes)
5. Conclusion

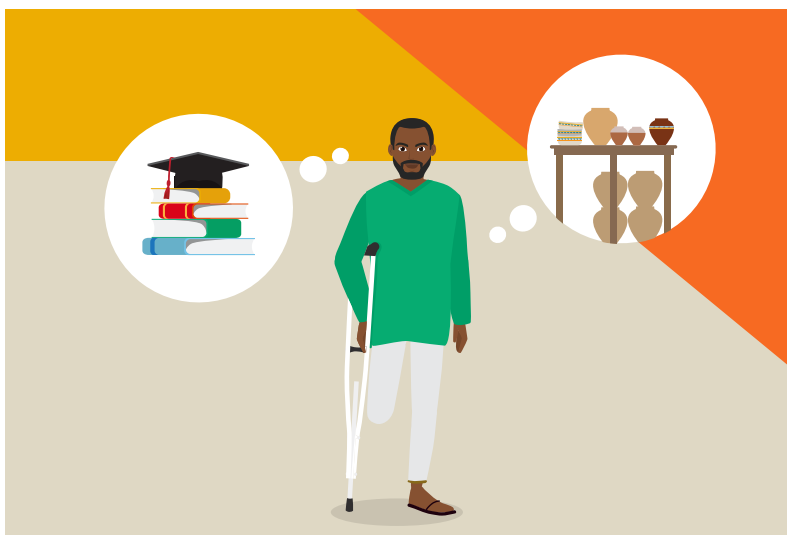


1. Introduction and ice breakers (15 minutes)

At the beginning of the session, introduce yourself and welcome participants. Invite participants to introduce themselves one by one and ask them to provide two statements about themselves: one truth and one lie. The group will then guess which statement is the lie.

2. Decision-making: group discussion (30 minutes)

Show **picture code 3** to the group and ask them to describe what's happening in the illustration.



Picture
code 3

?

Ask participants to share their personal experiences on making decisions and ask them to talk about a time when they had to take an important decision. You can use the questions below to start the conversation:

- What were the reasons to make the decision?
- What helped you make the decision?
- What influenced your decision?



Use the discussion notes below to guide the conversation:

Decision-making is making a choice about a situation or thing that will affect our lives.

Examples of decisions include:

- Decision on what studies to undertake
- Decision on future profession or career
- Decision on if and when to have a family

Steps for decision-making:

- Identify the situation or problem
- Obtain information on the situation or problem
- Identify possible solutions
- Consider the various choices and discuss the advantages and disadvantages of each one
- Make your choice based on your goals and values
- Plan and take action

Factors that influence decision-making:

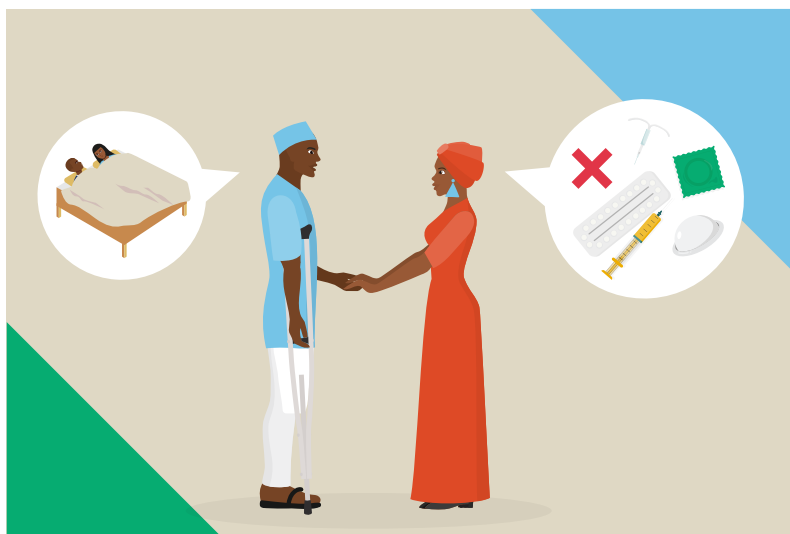
- Religion
- Culture
- Family values
- Society/community
- Personal values and preference
- Friends
- Information
- Education

3. Break and board game set up (15 minutes)

Invite participants to take a comfort break while you set up The Ideal Family board game.

4. Intimacy, abstinence and modern contraceptives: group discussion (30 minutes)

Show **picture code 4** to the group and ask them to describe the image.



Picture
code 4

Ask participants to share their personal experiences on making decisions around using contraceptive methods. You can use the questions below to guide the discussion:

- What does abstinence involve?
- What are contraceptive methods? Do you know any?
- Are contraceptive methods for people with disabilities?
- What are the positives of practicing abstinence or using modern contraceptives?



Use the discussion notes below and picture code 6 to guide the conversation:

Family planning or child spacing is the ability of individuals and couples to plan their desired number of children and the spacing and timing of their births. It is achieved through use of contraceptive methods.

People with disabilities, like all others, should have the right to decide the number, spacing and timing of their children freely and responsibly. They should also be able to exercise their right to the safe, effective, affordable and acceptable methods of contraception of their choice.

Benefits of practicing abstinence or using contraceptive methods:

- You don't have to worry about unintended pregnancies and can focus on your goals
- It prevents you from becoming a parent too soon
- With abstinence or use of condoms, you don't risk getting sexually transmitted infections

5. Conclusion



Tell participants they can get more information on family planning and child spacing at their local healthcare centre displaying the green dot logo. If health service providers are attending the session, tell participants they can ask them any questions at the end of the session.



Get support from the health service provider to respond to questions around family planning that might come up during the session.



Distribute the informative booklet to participants and give them an overview of family planning and where to get more information.



Thank participants for their contribution and let them know when you are meeting next and what you will discuss.

Session 03

Invite a health
service provider
to **attend**
this session.

Agenda

1. Introductions and icebreakers (15 minutes)
2. Negotiation skills: group discussion (30 minutes)
3. Radio drama episode listening (15 minutes)
4. Intimacy and negotiation: group discussion (30 minutes)
5. Conclusion

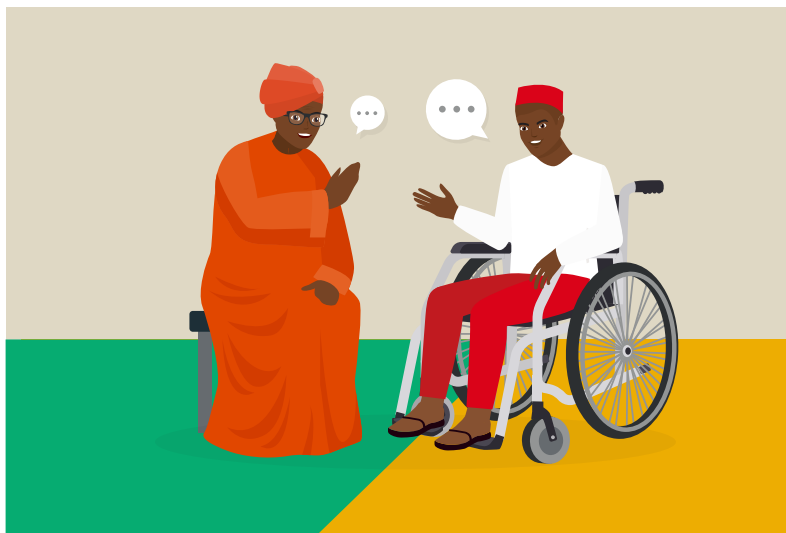


1. Introduction and icebreakers (15 minutes)

At the beginning of the session, introduce yourself and welcome participants. Invite participants to introduce themselves one by one and ask them to share their favourite childhood memory.

2. Negotiation skills: group discussion (30 minutes)

Show **picture code 5** to the group and ask them to describe what's happening in the illustration.



Picture
code 5

?

Ask participants to share their personal experiences around negotiating a decision with someone else (e.g. their parents or friends). You can use the questions below to start the conversation:

- What is negotiation?
- Why is it important to negotiate for a shared decision?
- What is needed for a successful negotiation?



Use the discussion notes below to guide the conversation:

Negotiation is a discussion aimed at reaching an agreement.

- It allows people to solve a problem or resolve a conflict peacefully.
- It allows two parties to meet their needs without anyone feeling guilty, angry, cheated or intimidated.

Skills used in effective negotiation:

- **Effective communication:** speak in clear and simple words and sentences so that it is easy to understand your intention.
- **Listening:** carefully listen to what the other person is saying so that you can understand them. Ask questions if you do not understand or need clarification.
- **Observation:** Carefully observe the other person's non-verbal signals (body language, distractions etc.) during your discussion to know if they are listening and understanding what you are saying.
- **Critical thinking:** Having listened to and observed the other person's intentions, carefully weigh the consequences of their suggestions.
- **Peer resistance:** Use positive body language to further help you to communicate your intention.
- **Problem-solving:** Think out the solution to the problem together.

3. Break: radio drama listening (15 minutes)

Invite participants to take a comfort break and mention you will play an episode from the radio drama Madubi during it. Play the episode using the provided audio device.

4. Intimacy and negotiation (30 minutes)

Show **picture code 6** to the group and ask them to describe the illustration.



Picture
code 6

?

Ask participants to share their personal experiences of making decisions around using contraceptive methods. You can use the questions below to guide the discussion:

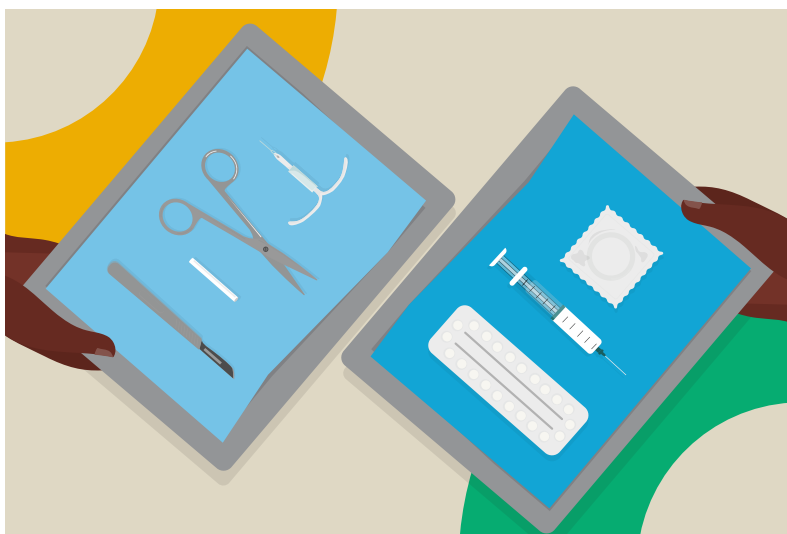
- Who decides whether to use contraceptive methods within a couple?
- Have you ever discussed contraceptives with your partner, your friends or relatives?
- What are the ways to avoid unintended pregnancies?
- What contraceptive methods do you know?
- What's the best way to understand the best method for you?



Use the discussion notes below and picture code 7 to guide the conversation:

Using contraceptive methods needs to be discussed as a couple. It's never just a one-person decision.

Healthcare centres displaying a green dot logo are the trusty source of information on family planning. Health staff will be able to advise on the best family planning method for you.



Picture
code 7

Long-term family planning methods and their benefits

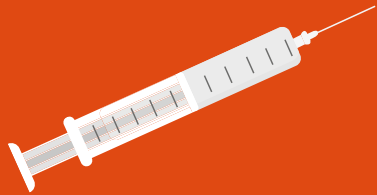
Male and female condom

- Highly effective when used correctly
- Provides protection from sexually transmitted infections (STIs) including HIV/AIDS



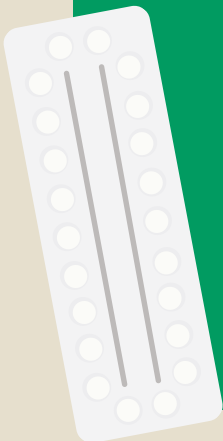
Injection

- Highly effective and safe
- Can be used throughout breastfeeding, starting 6 weeks after birth
- Does not decrease breast milk production
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



Oral contraceptive pill

- Highly effective in preventing pregnancy
- Have to be taken every day at about the same time
- Reduces menstrual cramps
- Mini pills can be used by breastfeeding women
- Fertility is restored once the use of the pill is stopped
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



Long-term family planning methods and their benefits

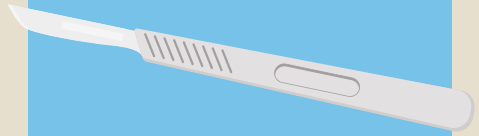
Intrauterine device (IUD)

- Highly effective
- Can be used by most women
- Immediately effective and can last for 10 years
- Fertility returns immediately after stopping using it
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



Vasectomy

- Highly effective method
- The surgery is safe
- The surgery has no effect on sexual function and ejaculation
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



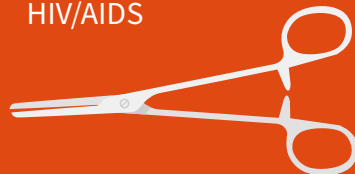
Implant

- Highly effective
- Lasts about 3-5 years
- Does not interfere with sex
- No one else can tell whether a woman is using a contraception method
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



Tubal ligation

- Highly effective method
- The surgery is safe
- It does not affect female hormones
- Does not protect against sexually transmitted infections (STIs) including HIV/AIDS



5. Conclusion



Tell participants they can get more information on family planning and child spacing at their local healthcare centre displaying the green dot logo. If health service providers are attending the session, tell participants they can ask them any questions at the end of the session.



Get support from the health service provider to respond to questions around family planning that might come up during the session.



Distribute the informative booklet to participants and give them an overview of family planning and where to get more information.



Thank participants for their contribution and let them know when you are meeting next and what you will discuss.

Session 04

Agenda

- 1. Introductions and icebreakers (15 minutes)**
- 2. Self-esteem: group discussion (30 minutes)**
- 3. Radio drama episode listening (15 minutes)**
- 4. Rights of persons with disability: group discussion (30 minutes)**
- 5. Conclusion**

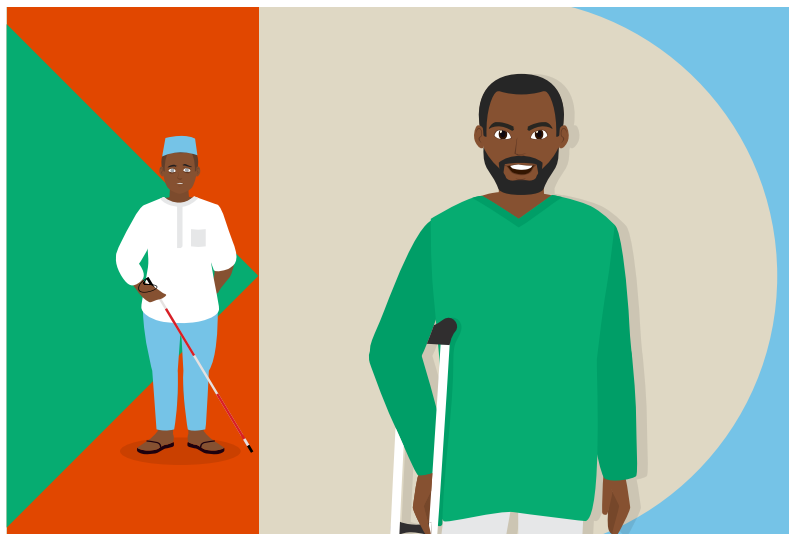


1. Introduction and ice breakers (15 minutes)

At the beginning of the session, introduce yourself and welcome participants. Invite participants to introduce themselves one by one and ask them to share their favourite quality about themselves.

2. Self-esteem: group discussion (30 minutes)

Show **picture code 8** to the group and ask them to describe what's on the illustration.



Picture
code 8

?

Ask participants to share their experiences around discrimination and how this has affected their self-esteem. You can use the questions below to start the conversation:

- What's self-esteem?
- What has caused you, or what can cause, low self-esteem?
- What can we do to improve our own self-esteem? What about supporting the self-esteem of others?



Use the discussion notes below to guide the conversation:

Self-esteem is the way we feel about ourselves:

- How we feel about ourselves influences how others feel about us
- Our performance is higher when we feel good about ourselves and vice versa
- Our relationship with others is affected by the way we feel about ourselves

Low self-esteem can be caused by:

- Poor support from the environment (e.g. constant criticism, discrimination)
- Unstable family background and upbringing
- Refusal to accept failure

High self-esteem can be achieved through:

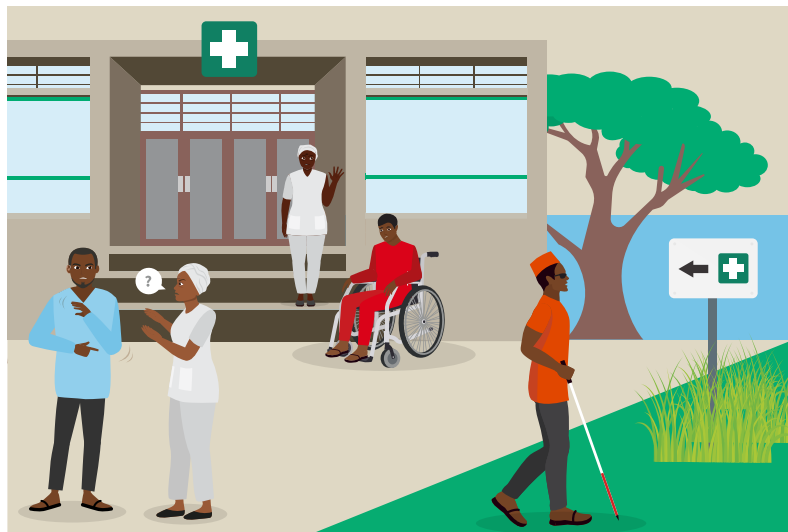
- Regular encouragement on achievement
- Environment full of love, support and understanding

3. Break: radio drama listening (15 minutes)

Invite participants to take a comfort break and mention you will play an episode from the radio drama Madubi during it. Play the episode using the provided audio device.

4. Rights of people with disabilities: group discussion (30 minutes)

Show **picture code 9** to the group and ask them to describe the illustration.



Picture
code 9

?

Ask participants whether any of these images resonate with them and whether they know what the rights of people with disabilities are. You can use the questions below to guide the discussion:

- Have you seen or experienced situations like these in your community?
- What can be done to prevent the negative examples to happen?
- How can the positive examples be encouraged?
- What are the rights of people with disabilities?



Use the discussion notes below to guide the conversation:

Right to access: people with disabilities have the right to access, on an equal basis with others, to medical facilities and information, both in urban and rural areas.

Right to be free from exploitation, violence and abuse: people with disabilities, both within and outside the home, have a right to be protected from all forms of exploitation, violence and abuse, including gender-based violence and abuse.

Right to a home and family: people with disabilities have a right not to be discriminated against in all matters relating to marriage, family, parenthood and relationships. People with disabilities have the right to decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning/child spacing education.

5. Conclusion



Tell participants they can get more information on family planning and child spacing at their local healthcare centre displaying the green dot logo. If health service providers are attending the session, tell participants they can ask them any questions at the end of the session.



Thank participants for their contribution and let them know when you are meeting next and what you will discuss.

Session 05

Invite a health
service provider
to **attend**
this session.

Agenda

1. Introductions and icebreakers (15 minutes)
2. Gender-based violence: group discussion (30 minutes)
3. Radio drama episode listening (15 minutes)
4. Sexual health: group discussion (30 minutes)
5. Conclusion



1. Introduction and icebreakers (15 minutes)

At the beginning of the session, introduce yourself and welcome participants. Invite participants to introduce themselves one by one and share the gift they have received in their life that made them the happiest.

2. Gender-based violence: group discussion (30 minutes)

Show picture code 10 to the group and ask them to describe the illustration.



Picture
code 10



Ask participants whether any of these images resonate with them and whether they know the rights of people with disabilities. You can use the questions below to guide the discussion:

- Are the things illustrated happening in your community?
- What do you think can be considered gender-based violence?
- Which of these happen in your community? Are women with disabilities affected?
- Do you know what to do if something like this happens?



Use the discussion notes below to guide the conversation:

Gender-based violence is physical, mental or social abuse directed against a person based on gender or sex. Every individual can be a target of violence, regardless of their gender.

Tell participants where they can reach for help if they experience any abuse.

Salama SARC Kaduna: 09029991140, 09031999783

Salama SARC Zaria: 08093314811, 08093314844,
08093314855

Salama SARC Kafanchan: 08148026802, 09061503384,
09067528082, 09032488802

Salama SARC Tudun Wada: 09011578622, 08063968541

Salama (mini) SARC Rigasa Miyetti: 07067925135

Forms of violence one can experience:

- **Physical violence:** a person who exerts control over another person using physical force.
- **Sexual violence:** making a woman take part in any form of sexual activity when she does not want to or is unable to give consent.
- **Psychological violence:** this can be:
 - **Economic violence:** preventing a woman from making decisions about family finances, such as shopping independently, working outside the home and being denied participation in economic decision-making.
 - **Controlling behaviours:** keeping a woman from seeing her friends; restricting her use of social media or contacts with family or relatives; insisting on knowing where she is; forbidding a woman to leave the house, or to leave without being accompanied by a relative;

forbidding the use of contraception or restricting her decisions on family planning; preventing her from getting an education; deciding what clothes she can wear; or asking for permission to see a doctor.

- **Abusive behaviours:** insults, name-calling or rejection; humiliation, belittling or humiliating her in front of other people or in private; using her children to blackmail her; abusing her children.
- **Sexual harassment:** unwelcome touching, hugging or kissing; sexually suggestive comments or jokes; intrusive questions; comments about appearance; staring or leering; inappropriate advances on social-networking websites
- **Stalking:** offensive or threatening mails, text messages, letters or cards; threatening or silent phone calls; loitering or waiting for a woman outside of her home, workplace or school without her consent; deliberately following a woman
- **Harmful traditional practices:** child and forced marriages; female genital mutilation; tooth removal and crimes committed in the name of so-called 'honor'; forced prostitution

Effects of gender-based violence

- **Health consequences:** physical injury, shock, infection, sleeping disorders, substance abuse and reproductive consequences (miscarriage, STIs)
- **Psychological/emotional consequences:** post-traumatic stress, depression, anxiety, fear, anger, shame, insecurity, mental illness, suicidal thoughts

3. Break: radio drama listening (15 minutes)

Invite participants to take a comfort break and mention you will play an episode from the radio drama Madubi during it. Play the episode using the provided audio device.

4. Sexual health: group discussion (30 minutes)

Show **picture code 11** to the group and ask them to describe the illustration.



Picture
code 11

Ask participants whether they know about sexually transmitted infections and whether they know what to do to prevent and treat them. You can use the questions below to guide the discussion:

- Do you know any infections that are passed through sexual contact?
- Do you know how these can be prevented?
- Do you know how these can be treated?
- Have you heard of sexual reproductive health cancers?

Use the discussion notes below to guide the conversation:

Sexually Transmitted Infections (STIs) are infections passed from an infected person to an uninfected person(s) through sexual contact, either through genital (vaginal), oral or anal (through the anus). An untreated STI can lead to infertility.

Examples of STIs include: gonorrhoea, syphilis, herpes and human immunodeficiency virus (HIV)

STIs can be prevented through abstinence or using a male or female condom during intercourse.

Treatment of STIs should be delegated to trained healthcare providers. It's important to report any symptoms to the health care provider promptly and follow the prescribed treatment. Don't have unprotected sex during treatment to prevent infection of partners.

Sexual reproductive health cancers in men are the cancers that affect the testicles, penis and prostate. Some symptoms include:

- Pain, discomfort in the testicles
- Lump or swelling in the testicles
- Redness, discomfort, soreness or lump on the penis
- Weak flow of urine, blood in urine or frequent need to pee

If you witness any of the signs and symptoms above, please immediately visit the healthcare facility nearest to you for medical attention.

5. Conclusion



Thank participants for their contribution and remind them once again where they can reach for help, information and get support around family planning and sexual health:

They can get information and access to family planning methods at your local **healthcare centre displaying the green dot logo**.

They can call or text the **MSION contact centre** for information and supportive services on sexual and reproductive health and rights (SRHR) topics, including contraception/family planning and STIs. The services are provided in five languages: Igbo, Hausa, Yoruba, English and pidgin. The toll-free numbers are: **22252** (phone) and **09080 022252** (WhatsApp).

Thank participants for their contribution and let them know when you are meeting next and what you will discuss.

FAQ

Myths and facts about **family planning**



Myth

The internet and your friends are the best source of information on family planning.

Fact

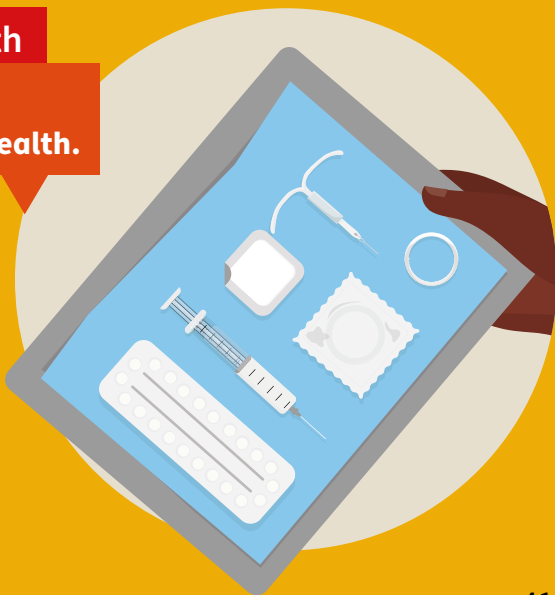
Healthcare centres with a green dot logo are the trustworthy source of information on family planning.

Myth

Family planning is dangerous for your health.

Fact

Modern contraceptives are **safe** – there is a method for everyone.





Myth

People with disabilities
couldn't have children.

Fact

People with disabilities have
the **same rights as everyone** to
decide whether to have children.

Myth

Family planning is just
for married people.

Fact

Family planning is for married
and unmarried people.



Myth

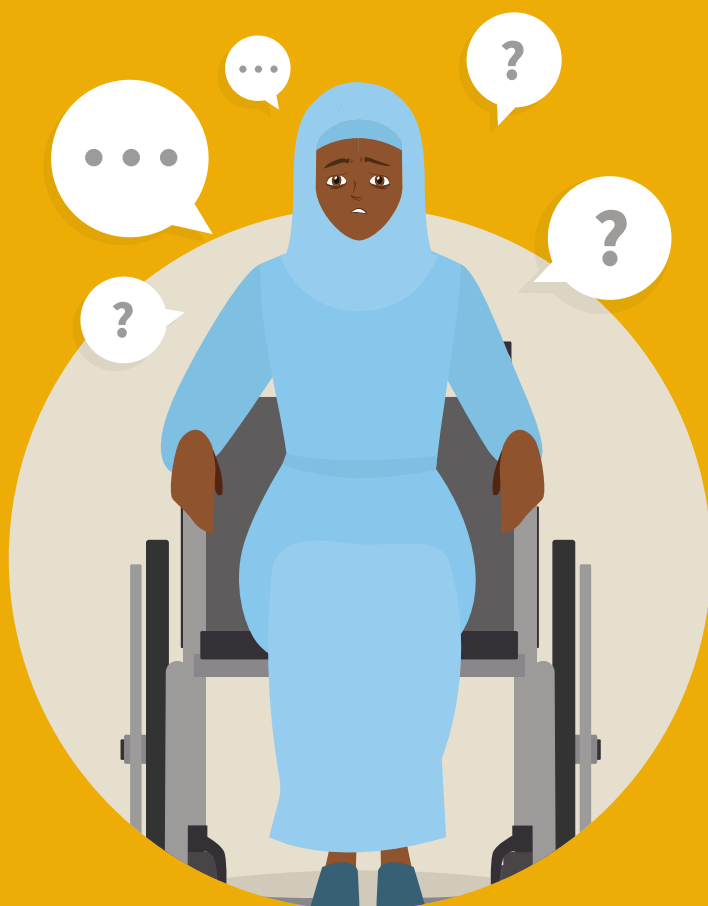
Family planning
is not for people
with disabilities.

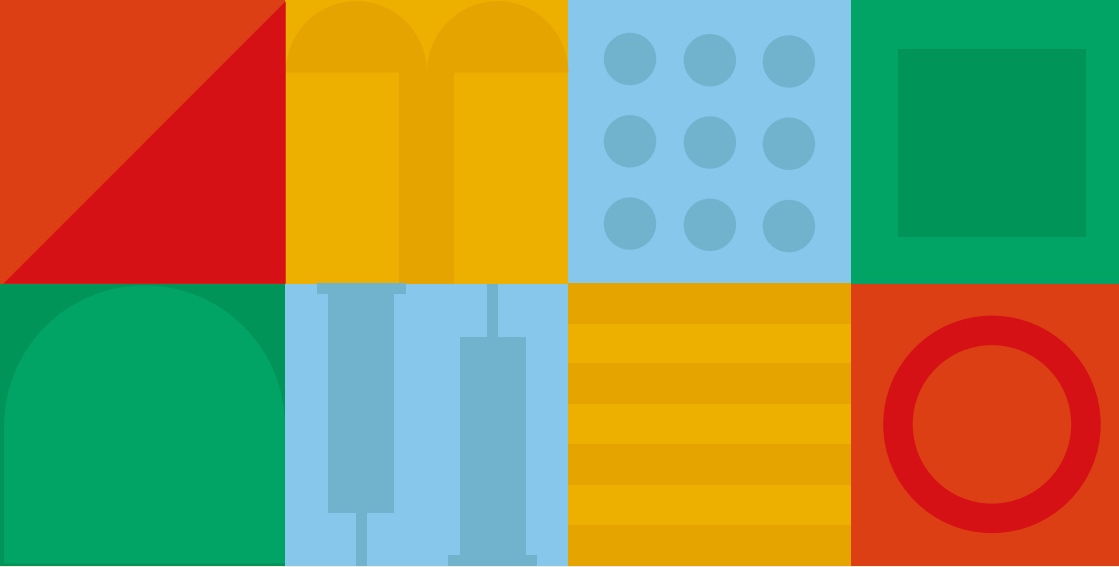
Fact

Family planning is for
everyone, including
people with disabilities.

**What to do when
people ask for detailed
information and I don't
know how to respond?**

You can either call the MSI
hotline at 22252 or refer them to
a healthcare centre displaying
the green dot logo.





For information and access to family planning methods go to your local healthcare centre displaying the green dot logo.

You can also call or text the MSION contact centre at the toll-free numbers 22252 (phone) and 09080 022252 (WhatsApp).

The services are provided in five languages: Igbo, Hausa, Yoruba, English and pidgin.

The decision
is mine.



**Inclusive
Futures**

