

APPENDIX F | Facilitated Group Discussions

Facilitated group discussions, as among shelter residents or those in reception centers, can be an effective way to both enable SGBV disclosure and raise awareness about this form of harm and possible sources of assistance. Three promising methods of group engagement are the “Open-ended story” approach, the “Facilitator Cards for Community Discussion” approach, and the “Drama for dissemination” approach.

Open-Ended Story¹

Open-ended stories provide a way to explore people’s beliefs and present potentially sensitive topics for discussion, even among people with less formal education. In an open-ended story, facilitators leave out the beginning, middle, or ending of the narrative. Participants discuss the missing part of the story. They can be prompted by specific questions. This activity is best facilitated by two people: a main “storyteller” and a “guide” who can jump in to ask questions and help participants fill in the gaps. Though often used as a research method, this technique can easily be adapted to prompt discussion about difficult subjects in a pressure-free and collaborative way. Stories and questions can also create opportunities for facilitators to fill in gaps with important information, raising audience awareness.

Possible adaptation for Regional Safe Spaces Network

Below is a possible story to be used by shelter providers working with refugees and migrants along the Guatemala-Mexico corridor. Given the cultural taboos around SGBV, it may make sense to conduct this exercise with a group of women instead of a mixed audience. (Separate scenarios could be devised depending on whether women, girls, men, boys, people with diverse SOGI or other potential survivor groups are being targeted.)

ROSA

Rosa is from a town outside of Tegucigalpa, Honduras. She lived with her husband Raúl and her two children, Marta and Darwin, 9 and 6 years old. Raúl worked in construction and Rosa worked as a housewife caring for her children. Although Rosa completed 2 years of high school, Raúl didn’t let her work because he was jealous and stated that it was his job to provide for the family. At times Raúl came home drunk and insulted and beat Rosa.

One night Raúl came home drunk and got very angry at Rosa for talking to their male neighbor. He beat her badly and left the house. Rosa immediately grabbed whatever she could fit into a backpack and took her children to the bus station where they headed north to the Guatemalan border. Rosa’s sister, Yesenia, lives in the USA and had always told Rosa to come join her. Rosa knew Yesenia would help her and planned to contact her once she got to Mexico City. From Guatemala, Rosa took another bus to the border. She and her children crossed a small stream about 500 yards from the immigration checkpoint and slipped into Mexico. Not knowing what to do, they started walking north to where Rosita had heard about organizations that help migrants and refugees.

After walking a couple of kilometers along the highway, a group of three men with machetes approached Rosita and her children. They said that they were vigilantes and that they work with Mexican Immigration. One man told her that he would turn them in unless she paid him something. When Rosa said she didn’t have any money, the man threatened to call immigration unless she had sex with him. Worried about being sent back to face Raúl, she saw no other choice. After having sex with the man, Rosa continued walking north for another day until she met another group of migrants and refugees headed towards a shelter. She arrived at the shelter in the afternoon.

¹ Adapted from Mary Ellsberg and Lori Heise, *Researching Violence Against Women: A Practical Guide for Researchers and Activists* (Washington, DC: World Health Organization, PATH, 2005), 144.


Questions about Rosa:

1. How do you think Rosa felt right after her experience with the men with machetes?
2. When Rosa arrived at the shelter, what kind of help do you think she wanted?
3. Do you think Rosa would tell the shelter staff about what happened to her the day before, with the men with machetes? Why or why not?
 - a. If you think she might not say anything, why do you think she would stay silent?
 - b. If you think she might say something, what would she say? What would help her speak freely?
4. What kind of information would Rosa want from the shelter staff? What kind of person would she want to talk to?
5. What are Rosa's rights in Mexico?
 - a. Can she get medical care?
 - b. Can she report the attack to the Mexican police?
 - c. Could any of her experiences of violence in Mexico (with the men with machetes) or Honduras (from Raúl) qualify her to apply for immigration status in Mexico now?
6. What else do you think people like Rosa want to know about how to get help while on the move?

Facilitator Cards for Community Discussion²

Community discussion and awareness raising activities can be made more dynamic and engaging with visual representations of key messages. When paired with a short list of two to three questions to stimulate reflection on an issue, facilitators can guide community discussion in a lively manner while communicating key messages about violence, community support, and available services.

Below is an example of a facilitator card from the Amani awareness raising campaign in Jordan.



Response to Violence

If you experience violence, now or at any time in the past, you have the right to receive help to stop the abuse. You also have the right to receive care and support from those around you. If someone you know is experiencing violence now, or has in the past, be supportive and help him or her to access relevant services.

Key Questions

1. What are the consequences of violence on women, girls, boys, and men? The family? The community?
2. Should women, girls, men, and boys (focus on each group) who experience violence in their family accept being subjected to violence? What about someone that is subjected to violence in the street or from a stranger?
3. How would you, or people around you, react to women, girls, boys, and men (focus on each group) experiencing violence?

Closing Remarks

Thanks a lot for your time! I hope you found our dialogue useful/interesting. Please come and join us in other activities (*provide some details and remember to share brochures or contact cards, and other relevant tools*).

Possible adaptation for Regional Safe Spaces Network

With a relevant graphic, a facilitator card may include discussion questions such as:

- What kinds of violence affect refugees and migrants in Central America – both in their home countries and while they are in transit? Are some forms of harm harder for people to talk about than others? Why?
- What would you tell someone traveling with you if they said they had suffered sexual violence? What kinds of help or information do you think they need? Where could they go for help?

² Adapted from the Child Protection and SGBV Sub-Working Group's Amani Campaign in Jordan, <https://reliefweb.int/sites/reliefweb.int/files/resources/AmaniImplementationguideEnglish%28online%29.pdf>.

Drama for Dissemination

Drama-based activities can be an effective way of engaging an audience in discussion and disseminating information about a targeted issue. They can be conducted as a group activity at a shelter or even as an open event in a public space. They simply require a space where people can gather around, where it is not too noisy. This method is particularly helpful when working with children or people who have limited education.

The basic approach is simple: Actors (often staff members or volunteers recruited and prepared earlier) play out a short story that illustrates an issue targeted for awareness raising. For example, they may enact a scenario related to domestic violence or early marriage — taking care to avoid graphic detail, abrupt outbursts, or potentially triggering language or situations. A facilitator may “freeze” the story at certain points to pose questions to the audience — eg, “What is the protagonist feeling?” or “What should he/she do next?” or “Who can help?” Alternately, the actors may present the whole story and then ask questions to the audience at the end. Finally, actors / facilitators wrap up discussion by delivering the intended message and informing the audience about where to find further information or assistance. They can even pass out informational materials afterwards, if appropriate.

Redemption Hospital, Monrovia, Liberia

Our research in Liberia several years ago highlighted a wonderful example of the use of “drama for dissemination” at Redemption Hospital in Monrovia. There was a gender-based violence clinic in the hospital but it did not have a sign, in order to avoid exposure and stigmatization of patients. So, to spread community awareness about SGBV and the availability of support services, the clinic team presented dramas right in the main waiting room of the hospital. Once a week, actors would gather in the middle of the waiting area and enact mini-stories alluding to issues like domestic violence. They took care to avoid graphic detail — particularly since children were present. People who were already sitting there, waiting for appointments or visiting relatives, gathered around. They watched the drama and called out their thoughts afterwards when prompted. Clinic staff closed by announcing relevant information, along the lines of, “If anyone you know has these challenges, they may need medical care or counseling. Let them know they can come to this hospital and tell the entrance worker they need to see the gender team. They don’t need an appointment and the meeting is private.”

Activity challenges included a.) the need to “edit” SGBV scenarios for a public audience while still getting the message across, b.) absence of reference to, or services for, male or LGBTI survivors, and c.) potential sustainability issues due to limited staff time. However, on the whole, the Redemption Hospital team felt this approach was a helpful way to spread awareness about SGBV and what the hospital could offer in terms of services.

Possible adaptation for Safe Spaces Network

- Conduct a dramatic presentation as a group activity at a shelter or reception center. The presentation could illustrate a scenario involving a Honduran woman preparing to travel north and the things she is worried about, or her encounter with a border official or fellow traveler who proposes sex in exchange for assistance.
 - Questions could probe: “What kind of information or support does she need?” “Where can she go for help?” “What do you think would happen if she went to the police? Is she allowed to report this even if she is a foreigner?”
 - Shelter or reception staff can close by responding to audience comments as well as presenting information about SGBV, available services down the road, and legal rights. They can also distribute printed materials for participants to take with them. Staff should make sure to consider the accessibility of advertised services for women, girls, boys, men, LGBTI individuals, indigenous people, and people with disabilities.
- In some cases, similar drama-based outreach might be possible in public spaces where refugees and migrants gather, such parks or train and bus stations. However, care should be taken to avoid exposing refugees and migrants to unwanted attention from surrounding community