

Facilitating discussion groups



This chapter has information to help improve your facilitation skills and should be read before beginning any sessions with your groups.

What are some important guidelines for working with groups?

1. Active listening: Being able to listen and understand what another person is saying is a very valuable communication skill. Active listening is more than just hearing with your ears, it means:

- Making the other person feel comfortable so that he/she feels free to talk and express himself/herself; and
- Being sure that you understand what is being said.

Effective listening skills show participants that you are interested, attentive and respectful. To be really good at active listening, follow these rules:

- **Listen.** Do not do other things. Focus on what the person is saying, do not prepare your response or think about something else.
 - **Do not interrupt.** Interrupting the other person is a strong signal that you are not interested in what he/she has to say. If you need to ask a question or summarise, do it when the person has reached a natural pause.
 - **Do not judge a person.** No one is going to share what is really on his/her mind if he/she is liable to be judged or criticised. Even if you disagree, withhold judgment and negative comments. Remember the goal is to understand the other person, not to comment on or evaluate him/her.
 - **Do not be passive or indifferent.** Lack of interest causes people to be defensive or be quiet. People may not communicate openly or fully when they think you are not really interested in what they have to say.
 - **Encourage the speaker.** Use body language like eye contact and leaning forward to show your interest. Respond from time to time with acknowledging sounds or asking questions.
 - **Make sure you understand what is said.** Ask a question if something is unclear. Summarise what the speaker has said to check for accuracy (i.e., is this you what meant?). Ask the speaker to repeat or rephrase when something isn't clear.
 - **SOFTEN demonstrates effective listening.** S-smile. O-open posture. F-forward lean. T-touch. E-eye contact. N-nod.
- 2. Effective feedback:** The purpose of giving feedback to another person is to provide a mirror so they can see and evaluate their own behaviour or beliefs in order to make changes. Sometimes people become defensive when given feedback of any sort. Remember the following when giving feedback to another person:
- **Intent:** Think about why you are providing the feedback. Feedback is effective when it is done constructively with the aim of helping the other person. If the purpose of feedback is to attack, criticise, or to ridicule the other person, then it is unlikely that the words will have a positive impact because the other person will become defensive.
 - **Timing:** Feedback should be given when the person is ready to "hear" what you have to say, ideally soon after the behaviour occurs, but only when the other person is receptive and able to listen. Feedback should also be done in private.
 - **Tone:** Feedback should not be judgemental, it should be as neutral and factual as possible. Report what you saw and the consequences for either another or yourself. Do not give feedback when you are emotionally upset.
 - **Specificity:** Be as specific as possible with respect to the other's performance or behaviour. Give examples. Generalities are hard to understand and hard to change. Generalities are likely to be dismissed and resisted. It is easier to change when you know exactly you have done.
 - **Change:** The decision to change the behaviour is up to the other person. You cannot force someone to change. All you can do is reflect back to them the results of what they are doing and leave them to make the decision about it. Do not try to suggest solutions at the time of providing feedback.

You may need to schedule a time later, if the other party agrees, to talk about solutions to the problem.

- **Tools** – Use language that is personal and not hostile. Some examples might be:
 - “I feel.....when you.....”
 - “When you.....it affects me by.....”
 - Try to have the person first evaluate his/her own performance, i.e. “how do you think the meeting went? What succeeded and what needs improving?”
 - Then use more directive questions to help the person see/discover specific things, i.e., “what happened to the discussion after you interrupted Mary?”
 - Provide your observation when necessary to reinforce or contradict the other’s observations, i.e., “yes, I agree, everyone became very quiet and restless then.”
 - Use “what if” statements to help the other discover ways to improve. “What if you tried it this other way, would that be better?”
- 3. **Body language:** We communicate using words, sounds, silence, voice, body, eyes and face. Half of communication is said to be non-verbal. How a person uses or displays their body can show how they might be feeling. Facilitators should be aware of body language and use it as a signal to change their tactic or try to make the individual feel more comfortable. In addition to being aware of your own non-verbal communication, it is important to pay attention to the others. Some signs to look for include:
 - Crossing of the arms tightly across the chest may indicate the person is feeling defensive and not open to what is being said.
 - Frowning, grunting, or low verbal noises.
 - Slouching could be an indication of boredom or disinterest.Nonverbal behaviours such as these can block good communication.

Tips for facilitating discussion groups

The facilitator’s job is to make people feel comfortable, create an environment that allows open, honest discussion, ensure group participation and help the group achieve its goal. Your skills are key to the success of the session.

A facilitator should:

- **Speak slowly and clearly.** Make sure everyone understands what you are saying.
- **Don’t impose your point of view.** The goal is to facilitate discussion, not present what you think is wrong or right. What’s most important is to understand the participants’ points of view and get them to think about things in a different way or consider options they had not thought of before.
- **Don’t try to be an expert.** A facilitator is not a teacher, but simply guides the discussion. Although it is important to correct myths or incorrect information from time to time, be sure not to do this all the time, as it could be distracting to the conversation.
- **Keep the discussion focused.** Don’t allow the discussion to wander but keep the group talking about the topic or working its objectives.
- **Ensure what people say is clear and understood.** If something is said that is not clear ask the speaker questions to help him say what he means in a different way or re-phrase what was said in your own words, then ask “is this what you meant?”
- **Encourage participation.** Ask questions and call on people who are quiet.
- **Provide information** when it is needed by the group.

- **Suggest techniques and tools** for the group to use to achieve their objective.
- **Use questions effectively.** If an answer is incomplete or wrong, ask questions to help the person complete or correct the error. If she or he cannot, ask the group to help. When asked questions by the group, throw them back to the group. If still no one can answer, then answer it yourself. Never make up an answer. Admit you do not know and explain that you will find out the answer and get back to them later.
- **Maintain a team-like environment.** Make sure the group is aware they are working together. If problems between people are interfering with the work of the group, call their attention to it and try to solve the conflict or speak with them after the discussion.
- **Use flip charts effectively.** If you will be using flip charts or other visuals, prepare them in advance. Print clearly, write large enough to be seen. Use only key word or phrases. Don't use complete sentences or lots of writing. When possible use pictures, designs, charts, and drawings to illustrate points. Always face the participants when talking, try not to look at the visual aid.

Encouraging reflection

The following strategies and questions can be used to guide the audience through the stages of reflecting, generalizing and applying experiences to their own lives:

- **Reflection:** Ask open-ended questions ("What happened?"; "What do you think about it?"; "How did you feel about the activity?") to encourage individuals to describe the experience and how they felt about it. This can show how different people perceive the same activity or event differently. In addition, it can help individuals begin to recognize patterns in the way they think, react, and respond. The facilitator's role is to encourage everyone's participation; to record responses; and to listen for recurring themes, differences and similarities as individuals report on and think about their common experience.
- **Generalization:** Help individuals make connections between their everyday lives and what they experienced in a role play or group exercise. Ask questions, such as "Does this happen to people in your community?"; "Have you experienced this in your life?"; or "Do you know someone who was in a similar situation?"
- **Application:** Ask individuals to think about what they experienced or saw, and how they can apply what they have learned to real life situations. Ask questions such as: "What is the most important thing you learned from this activity?"; "How will you use what you have learned?"; "What is a problem situation in your own life that you think you would deal with differently, based on what you know now?"; or "What changes do you want to make in the way you act?"

These questions can be used during an activity or group discussion, but at the very least, they should be asked at the end of each session.

Ways to make people feel comfortable

Many of the topics discussed in this manual are sensitive and can impact people personally. One common strategy for creating a respectful environment where participants feel comfortable sharing their personal beliefs and feelings is to review basic "ground rules" that will govern the group's discussion. Participants can suggest their own guidelines for how members of the group should treat each other, but commonly used ground rules include:

- **Confidentiality:** Any information shared within the group will not be shared with others outside the group.

- **Openness:** It is important for all participants to be open and honest about their feelings and experiences, but everyone should make sure that in discussing his or her own experiences, the personal lives and private information of other people (who are not present) are not disclosed.
- **Non-judgmental:** It is normal for people to have different points of view, and it is okay to disagree with others in the group. However, no one should be judged, ridiculed or looked down upon for his or her point of view.
- **"I" statements:** When expressing one's own values and feelings, one should try to use sentences beginning with "I feel..."; "I believe..."; or "I think..." Rather than saying "It is ..."; or "You should..."
- **Right to pass:** Although the best discussions are those in which everyone is involved and contributing, each person has the right to sit out during a particular activity or question if it makes them feel too uncomfortable.
- **There are no "stupid" or "silly" questions.** Each and every question is important and valid. If one person has a question, others probably have the same question. If participants seem too shy or embarrassed to ask questions, let them write down their questions anonymously, and put them in a question envelope or box.
- **Make no assumptions:** It is important for everyone to avoid making assumptions about other group members' feelings, values, life experience and behaviour.¹

Helping people help themselves²

As facilitators, there are many ways you can help members of your community. You can:

- **Share your knowledge.** To help themselves, people need knowledge. Many health problems can be prevented if people know how. But remember that you do not have to have all of the answers to help people. Many times there are no easy answers. It is fine to admit when you do not know something. The participants in your group will be happy with your honesty.
- **Treat people with respect.** Each person should be treated as someone who is capable of understanding his or her own health problems and of making good decisions about their treatment. Never blame the person for their problem or for past decisions they have made.
- **Keep health problems private.** Health problems should not be discussed where others can hear. Never tell anyone else about a problem someone has unless the person with the problem has given you permission.
- **Remember that listening is more important than giving advice.** A person often needs someone who will listen to their problem without judgment. By listening, you let that person know you care and that he or she is important. And as that person gets a chance to talk, he or she may find out that he or she has some of the answers to the problem.
- **Solve problems with others, not for them.** Even when a person's problems are very large and cannot be solved completely, that person usually has some choices that can be made. As a Field Agent, you can help that person realize he or she has choices, and help her or him find the information they need to make their own decisions.
- **Learn from the people you help.** Learning how others solve their own problems can help you to better help others (and sometimes yourself, too).

¹Adapted from: Advocates for Youth. Life Planning Education: A Youth Development Program. Washington, D.C.: 1995.

²Adapted from: Burns A, Lovish R, Maxwell J, Shapiro K. Where Women Have No Doctor: A Health Guide for Women. Berkeley, CA: The Hesperian Foundation; 1997.

What are experiential learning techniques?

Learning by actively doing an activity is called 'experiential' education because the participants are experiencing part of what they are learning. Experiential activities in this manual are designed to help the participants gain new information, examine attitudes, and practice skills. There are exercises where the participants do something and then talk about the experience together, making some general statements about what they learned and trying to relate the new information to how they will use it in the future. **This type of learning focuses on the participants.** While your role as a facilitator is important, creating a learning environment is the job of the entire group.

In order for discussion groups to be effective, learning activities must be participatory, build on participants' experiences, be meaningful and useful to their lives, take place in a respectful and supportive setting, and allow participants to control their own learning.

What are some participatory learning techniques?

Listed below are a number of different types of participatory learning techniques. In order for these techniques to be used effectively, a facilitator should practice the techniques with guidance and support.

Brainstorming

This is a creative way of generating a range of ideas in a short time. It allows for maximum group participation. It can be used in groups as an ice-breaker or as a way to generate common definitions and terminology. For brainstorming to be useful, follow three basic rules:

- a. Accept every idea without judgment.
- b. Aim for quantity, not quality.
- c. Do not interrupt the brainstorming process to talk about the ideas mentioned.

Group exercise

This is usually in the form of a game or activity that allows participants to move around the room, talk frankly with a smaller group of participants, and have some fun while learning and discussing.

Quiz

Asking participants questions can help the facilitator understand what participants have learned, identify areas that need further discussion, reinforce information, or clarify misinformation.

Role play

Role play is a powerful technique for exploring personal experiences, feelings, and beliefs in a safe and non-threatening environment. In role play, participants use their imagination to create characters, conversations, and stories. This allows them to express personal situations and experiences without saying that they are true.

Role play is not a special skill that only a few people have. We are all born with the ability. Children are natural role players, and frequently take on roles while playing together. As we grow up, we lose the skill or come to believe we have lost it. Some adults may claim that they 'do not know' how to role play.

However, with a little warming up, everyone can participate in this activity.

Role play should not be scripted or rehearsed. The idea is to have spontaneous expression of players' experiences, feelings, and beliefs. The facilitator should allow just enough time (between 2 and 5 minutes) for a brief discussion between the players, followed by an impromptu performance.

Role play should never be competitive, or else it can make participants feel self-conscious. This will limit their self expression and reduce the usefulness of the tool. Facilitators should never comment negatively on the quality of an individual's role play. Instead, always applaud and congratulate those who do a good role play, while offering suggestions on how the performance could be made better in the future.

Role play can help participants explore the feelings or attitudes within some experience or behaviour. For example, if someone in the group has shared a moving personal experience, then the facilitator may decide to conduct a role play to explore those feelings and beliefs. To conduct a role play follow these steps:

- a. Repeat the details of the personal experience that a participant has just shared.
- b. Tell participants that such experiences may be common and that we would like to explore the feelings and beliefs that make people behave in such ways.
- c. Ask for volunteers to play the roles of the characters in the story.
- d. Ask them to re-enact the situation. (Repeat steps c and d two or three times with different participants.)
- e. Explore their feelings using the freeze technique.
- f. Explore the causes and consequences of the experience, using the Timeline technique.

Timeline

Timeline is a tool for exploring the causes and consequences of risky behaviour. It helps participants to imagine the long-term effects of different decisions, and examine how a decision to behave in a certain way affects the lives of individuals and their loved ones.

Timeline is best conducted with a participant who, in the scenario, has been exposed to risk or who plans to practice risky behaviour. Examples of these might be:

- I will not tell my partner that I am HIV positive, and I will not use a condom during sex.
- I am going to have sex with my daughter.
- Now that I am HIV positive and pregnant, my best choice is to commit suicide, so that I and my loved ones can avoid the pain of coping with AIDS.
- In a newspaper interview, a sugar daddy says, "My girlfriend is a college girl. She gets money and gifts from me, I get status and sex from her. Why stop a relationship in which both benefit? My wife knows she is not attractive to me any more."

The main participant in a Timeline session is called a key player. The key player is a person who has been in a high-risk situation or plans to be in a high-risk situation. For example, it could be a man who plans to have sex without condoms, or a woman who will not go for voluntary counselling and testing (VCT) because she is scared she may be positive.

The incident (such as rape, sex without condoms, suicide, incest, not going for VCT) that contains the risk is called the crisis. There may be one person or two people in a crisis. For example, in a decision not to go for VCT, there is only one person. However, in an incident of unprotected sex between strangers, there will be two people.

A crisis may be something that has already happened, or something that is about to happen. For example, a rape that has taken place is a crisis. Equally, an HIV positive person's plan to commit suicide is a crisis. It is possible to use Timeline to examine both situations.

A crisis such as rape can be a shattering experience. A crisis such as unprotected sex with a stranger can lead to a shattering experience, such as HIV infection. A crisis evokes strong emotional reactions, and can bring about strong attitudes and beliefs. For example, a woman who has been raped may fear all men for the rest of her life, and may believe that no man can be trusted. A man who repeatedly enjoys casual unprotected sex may develop an attitude that he is very attractive to women, and may believe that condoms are not needed between attractive, healthy-looking people.

A crisis leads people to make behaviour choices that can change their lives permanently for the better or the worse. Timeline helps us to explore these options.

There are 9 steps in a Timeline session (*about 45 minutes*)

1. **Prepare the setting.** You will need a chair for the key player. Rearrange participants to clear space for a corridor equal to the length of the meeting space or room. This is called the Time Corridor. One end of the Time Corridor represents the key player's past (childhood and adolescence). The other end represents the key player's future, including his or her death. Somewhere between these two is the present moment, in which the crisis has occurred.

2. **Set up the present moment.** Ask questions to help participants imagine and describe the key player's current situation. Sample questions:

- What is the person's name? Location?
- What is his/her age?
- What is his/her occupation?

Place the chair in the time corridor, in a spot roughly matching the key player's age. Explain to participants that this position represents the present moment, the key player's age today. Ask the key player to sit in the chair.

3. **Define the crisis.** Help participants describe the crisis that has created a risky situation in the key player's life. Example: An employer raped his employee.

- What has this person done?
- How does the person feel about what happened?
- How does the person feel about what he or she is going to do?
- Is this the first time such an incident has occurred?
- What sort of life lies ahead for this person?

4. **Explore the choices the key player has now.** After a crisis, a person has several choices of behaviour. Explore the key player's options.

- What can this person do now?
- What is the best choice for this person to make?
- Why is it the best choice?
- What choice will the person actually make?

5. **Explore the key player's childhood timeline.** Move the chair back a few feet towards the past and explain that this is the key player as a child, at around age 10. Explore the key player's quality of life and experiences at that time. Sample questions:

- What was the quality of the relationship between the key player's parents? Did they love each other? Was there violence between them? Was there trust and faithfulness between them?
- As a child, did the key player see a similar crisis?
- Was the key player loved as a child?
- What sort of child was the key player? (quiet, social, difficult, shy)
- How many brothers and sisters were there in the family? What was the relationship between them?
- Which was the most disturbing event the key player observed as a child?
- What were the key player's difficulties during childhood?
- What did the key player observe of other people's sexual behaviour (such as relatives, friends, or eachers) as a child?
- What attitude did the key player observe towards women in his/her family and community? Towards men?
- Did the key player have friends in school or near home? What were the good experiences of friendship? What were the bad experiences?
- What good behaviour did the key player learn from childhood? What bad behaviour did the key player learn?
- What attitudes did the key player form towards women? Towards men? Towards sex? Towards himself/herself?

6. **Explore the key player's adolescent timeline.** Move the chair slightly towards the future, and explain that this represents the key player at the end of his/her teenage years, at around age 18. Explore the quality of the key player's adolescence. Sample questions:

- At age 18, has the key player had sexual intercourse?
- When and how did it happen? What was the experience like for the key player?
- From whom did the key player learn about sex and sexual relationships?
- Did the key player know about risk behaviour?
- Does the key player have a regular sexual partner?
- Has the key player been a victim of sexual violence?
- Has the key player committed sexual violence?

7. **Discuss the causes of the current behaviour.** Ask participants how the key player's past experiences and attitudes seem to have led to the current crisis. Sample questions:

- What attitudes did the key player form about sex, risk, relationships, and the opposite sex, as a result of childhood and adolescent experiences?
- How have the key player's attitudes led to his or her current behaviour?

8. **Explore the Future Timeline.** Move the chair well beyond the present moment, and explain that this is the key player later in life, about 10 to 15 years in the future. Explore what life is like now for the key player. Sample questions:

- What is the key player's life like now?
- What is his/her health like?
- What kind of risk behaviour does he/she practice?
- What kind of relationship does the key player have with his/her family?

- How has the key player's behaviour choices affected his/her happiness and health?
- How is the key player's current life the result of past behaviour decisions?
- What is the best possible life situation for the key player today?
- What behaviour option should he/she have chosen in the past to enjoy the best possible life today?

9. **Discuss consequences.** Discuss how past behaviour choices, experiences, and attitudes could have led the key player to a crisis in a relationship with another person. Discuss how the crisis itself could lead the key player to new behaviour. Analyze the key player's behaviour options after the crisis. Which behaviour choice could lead to the happiest possible future for the key player and his or her loved ones?

Group discussion

The facilitator's ability to clarify, question, explain, draw out, and sum up are important skills for group discussion to be effective. The discussion works best if the facilitator presents clear objectives and presents them in a logical sequence. The facilitator must be aware of individuals who may dominate the discussion. The facilitator should make a special effort to draw out participants who seem shy or quiet and ensure that they have a chance to speak.

Picture Code

The Picture Code is a powerful tool to help participants draw upon their personal experiences and understand, recreate, or examine dilemmas concerning health and relationships. A Picture Code session includes role play and experience sharing, and is used to examine the personal feelings and attitudes underlying health-related interpersonal situations. It gives participants a safe way to talk about sensitive or even taboo subjects by using their imagination to create a story around a picture. The four stages in the Picture Code process are:

1. Use imagination to build a story around a picture or object
2. Use role play to explore emotions
3. Use Timeline to explore causes and consequences
4. Use experience sharing to examine real feelings

It takes a long time to go through each Picture Code step. Either use Picture Code when you have extra time or divide it over several group meetings.

Step 1: Using imagination to build a story around a picture or object (30-45 minutes)

- a. Hold up the picture or object. Any picture or an object (e.g., pen or bottle) may be used to facilitate a discussion on any subject. Using imagination, the picture or object can take on the meaning and significance of the situation. For example, a facilitator may use a picture of young people at a bar to talk about rape, by saying, "Someone in this picture was raped."
- b. Announce the subject of the discussion by saying, "Someone in this picture is connected with (topic)."
- c. Next, the key players are identified. These may be individuals in the picture, or be related to individuals in the picture. The people usually do not have equal power in their relationship. For example, a story of unprotected sex with a commercial sex worker indicates the need for two players – the sex worker and the male client. The male client usually has more power than the sex worker and can force his will upon her. The sex worker is more vulnerable because her need to earn a living makes it difficult for her to insist on safe sex.

To identify the key players, ask the following questions: Who is connected to the topic? Are they individuals in the picture or outside it? How are they connected to the topic? For example, if the topic is unprotected sex with a stranger, the question could be, how are the key players connected to unprotected sex? Allow several options to emerge and then choose the most appropriate one.

- d. Invite participants to create details about the key players, and thus build a story. Details might cover: What are their names? What are their ages? Which part of Kenya do they come from? What kind of house do they live in? Who are the members of their families? What are their names? What is the character's occupation? What is the occupation of the parents/children?
- e. Allow two or three options to emerge for each question. Choose the story that is most appropriate for your community.
- f. The next step is to outline a dramatic experience around the picture/object and key players. This dramatic experience is an experience involving at least two individuals, which will be acted out by participants using role play. The two individuals may be visible in the picture, or may be related to people visible in the picture. Some examples of dramatic experiences might be rape, unprotected sex with a stranger, first sexual encounter, learning of HIV positive status, incest, or suffering domestic violence.

What is the dramatic experience? Explore the incident or experience that was a personal crisis for the key players. Sample questions: When did the experience happen? Who did what to whom? Where did it take place? What happened in the hours before and after the experience? What were the other characters doing at the time? Why did the people involved do it? What were the key players' reactions?

Step 2: Use role play to explore emotions (30-45 minutes)

- a. Review the dramatic experience in detail.
- b. Invite participants to act out the experience using role play.
- c. Allow three or four enactments. After each enactment, encourage actors to be more realistic, use more detail, and show more feeling and emotion. When you are satisfied with the quality of the role play, choose the most appropriate enactment.
- d. Ask participants to perform the chosen role play again, but this time make them freeze (stop the performance) just before the dramatic experience takes place.
- e. While remaining in the freeze, ask each participant to share what they are thinking about what is happening, including why and the consequences.
 - Example 1 (victim of rape): "Oh my God, I think he is going to rape me! But why? I always thought he was such a kind and gentle person. I trusted him. Should I shout for help? What will happen to my reputation? My life? No one will believe me..."
 - Example 2 (rapist): "I have waited for this moment for so long. My wife will never find out, and even if she does, I will say this girl drugged me and seduced me. As for this girl, I should be able to silence her by giving her some money..."
- f. Repeat the freeze using different participants, asking them to be more realistic, showing deeper emotions, and thinking about the consequences. When you are satisfied with the quality of the role play, choose the most appropriate freeze.

Step 3: Use Timeline to explore causes and consequences (30-45 minutes)

- a. Ask participants to review the chosen enactment from the previous session. Help them summarize the main reasons why the characters behaved the way they did.
- b. Explore the past of each of the two characters, going back to childhood if necessary. Ask participants to imagine what personal experiences the characters may have gone through that led to their current behaviour.

Tell them to think about:

- Significant incidents that may have happened in childhood.
 - Quality of relationships with parents and friends.
- c. Ask what actions the two people involved could take. Sample questions could be:
- What should the key player do now?
 - Who should he/she tell?
 - What are the options left to him/her now?
 - How could this incident affect the rest of his/her life?
 - What is the best course of action for him/her?
 - What might the victim/aggressor do?
- d. Explore what each person's life will be like in the future. How will he or she be at risk?
- e. What are decisions they could make today to reduce the risk in the years to come?

Step 4: Use experience sharing to examine real feelings (30-45 minutes)

Ask participants to recall and share personal experiences similar to the ones in the role play. The experiences could be their own or of someone they know.

Relationship Grid

Facilitators might want to devote a session to some subject which they feel could be of interest to the group. An overall goal of all discussions within APHIA II is to examine how the poor quality of relationships and communication within families can affect health, causing disease, suffering and death.

In order to develop new topics for discussions, role plays, picture codes and so on, the Relationship and Health Grid (R-H Grid), shown below, can be used or expanded.

Relationship		Problem/Situation	
A	Husband-Wife	1	Alcoholism
B	Boy-Girl	2	Violence
C	Teacher-Student	3	Rape
D	Older man-Younger girl	4	Infidelity
E	Boss-Employee	5	Incest
F	Father-Daughter	6	Unemployment
G	Mother-Son	7	Mistrust
H	Matatu tout – Passenger	8	Poor communication

The facilitator may expand this table by adding other relationships (Doctor-Patient, Priest-Unmarried Woman, etc) and also by adding other problems or situations that exist within relationships (boredom, greed, envy, selfishness, spouse is migrant worker, in-laws pressure, etc).

The R-H Grid can be used for generating discussion topics that can help explore relationships and health. To use the grid, the facilitator will pair any relationship from the 'Relationship' column, with any problem/situation, chosen from the 'Problem/Situation' column.

Forexample, make a pair out of relationship #F (Father–Daughter) with problem #8 (poor communication). The guiding question from this pairing will be: #F#8 What health problems could be caused by poor communication between a father and daughter?

The structure of the discussion could be as follows:

1. What are the problems that may exist between a father and his daughter? <i>Allow participants to express their opinions.</i>	Participants express their opinions on the various health and other problems that may arise within a father–daughter relationship with poor communication. For example, incest, unwanted pregnancy, poor communication, fear or delinquency.
2. What kind of health problems could be caused if a father and daughter do not communicate well? <i>Share stories and experiences.</i>	Participants share their experiences in which a health problem arose in a father–daughter relationship because of poor communication. (For example, because the father did not communicate well with his daughter about his views on unwanted pregnancies and how to deal with them, she sought a cheap and dangerous abortion when she found herself pregnant. This led to serious health problems for her, and made her the target of her father's fury.)
3. What could be the serious health problems of poor communication between a father and his daughter? <i>Choose an experience and conduct a role play based on it.</i>	Participants explore feelings through role play. The facilitator will choose a role play based on one of the experiences that have been shared. [See section on how to conduct a role play.] The role play should be used to explore the feelings of the characters in the role play, to understand how the father would have reacted if the girl and her mother had shared the information with him earlier. By exploring characters' behaviour, feelings and actions, role play can help participants understand causes and consequences. Why does the daughter fear sharing her health problems with her father? Is her fear justified? How is the father affected by his daughter's unwillingness to communicate with him on her health problems?
4. What are the behaviour options available to the daughter and the father? <i>Use discussion and role play to explore better outcomes to those situations.</i>	Participants list and discuss better outcomes to the same situation. They will role play the same experiences, but with new behaviour options, to examine how the characters' feelings will change when they behave in ways that enhance their relationships and health.
5. How else could the characters in the real-life experiences have behaved? <i>Use discussion and role play to list and explore better outcomes to those situations.</i>	Participants review the real-life experiences shared earlier, and discuss how there could have been better outcomes through different behaviour. If need be, the facilitator may stimulate discussion by using role play.

Figureheads

A "figurehead" is a person who is seen as a leader in the community, even though he or she may not have a lot of power. A figurehead is someone people in the community turn to for advice. The Figureheads game helps participants feel comfortable sharing personal experiences. Participants begin by role-playing a fictional situation and then finish by talking about their real-life experiences, when they are ready. In Figureheads, a panel of community figureheads is used to offer different solutions to a problem. As Figureheads try to offer advice based on their role, they try to think as that person would think, allowing different solutions to be explored. The objective of the Figureheads session is to create a safe environment to talk about a real-life problem or a taboo subject using a fictional setting. The goal is for participants to share real-life experiences, problems, and solutions. The game is not meant to be used to solve problems to community problems, but is used to encourage participants to talk about their own experiences. The quality of the acting is not important and participants should be discouraged from commenting on it. Instead the focus should be on the advice the Figureheads offered.

A figureheads session has the following steps:

1. Before the session, select someone with good role-playing skills to play the role of the Dilemma Holder. Share the following story and ask him or her to memorize it. When called upon, he or she should tell the story realistically before the group, using "I" and his or her own words, but not adding any details.
2. Ask participants what they understand by the word figurehead and then explain that in this session, the term figurehead refers to a person in the community or family who has authority or influence. For example, a doctor is a figurehead who is believed to be sensitive; caring; skilled in diagnosis, prescribing, and healing; and committed to delivering health care to all in need without discrimination.
3. Ask participants to give examples of figureheads in our community.
4. Ask for volunteers to play the role of each figurehead and then to sit in a line in front of the other participants.
5. Ask the Dilemma Holder (whom was briefed earlier) to come forward and tell the story to the group. Participants then repeat what they understand the problem to be.
6. The Dilemma Holder chooses one of the figureheads (who will be the Key Figurehead) to offer advice on what he or she should do. Then the other figureheads have a chance to give advice.
7. Once all the figureheads have presented their advice to the Dilemma Holder, summarize what each figurehead said, focusing more on what was said than which figurehead said it. Then ask the participants to comment on the advice given.



Gender and facilitation

Gender can play a significant role in group dynamics. It is important for facilitators to pay attention to the interaction between women and men, especially in mixed groups. Traditional roles may make women hesitant to participate. Certain topics may be difficult for women or men to address. Facilitators need to be aware of how gender affects group dynamics, to ensure that women and men are encouraged to participate equally and to recognize when certain topics make women or men uncomfortable. Some strategies to use include gently encouraging those who are not participating to share some thoughts, or asking them to take part in some of the role plays.

References

AMKENI. *Field Agents Handbook*. Nairobi: PATH; 2001.

Behague S, Christenson K, Martin S, and Wysong M. *Tuko Pamoja: Adolescent Reproductive Health and Life Skills Curriculum*. Nairobi: PATH; 2006.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the paper.