FEMNET

The African Women's Development and Communication Network

A TRAINING IMPLEMENTATION MANUAL
ON SEXUAL & REPRODUCTIVE HEALTH RIGHTS,
REPRODUCTIVE RIGHTS,
ENDING VIOLENCE AGAINST WOMEN & GIRLS
POLICY & BUDGET ADVOCACY
IN WEST & CENTRAL AFRICA REGION
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UN WOMEN

The African Women's Development and Communication Network

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ABBREVIATION & ACRONYMS

AU	African Union
BPfA	Beijing Declaration and Platform for Action
CAR	Central Africa Republic
CESCR	Committee on Economic, Social and Cultural Rights
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CRPD	Convention on the Rights of Persons with Disabilities
DRC	Democratic Republic of Congo
ECOWAS	Economic Community of West African States
EVAWG	Ending Violence Against Women and Girls
FGM/C	Female genital mutilation/cutting.
FP	Family Planning
GEF	Generation Equality Forum
ICPD	International Conference on Population and Development
RR	Reproductive Rights
SRHR	Sexual and reproductive health and rights
SDGs	Sustainable Development Goals
ToT	Training of Trainers
UN	United Nations
UNFPA	United Nations Population Fund
WACA	West and Central Africa Region

ACKNOWLEDGEMENT

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1.0 INTRODUCTION

1.0 INTRODUCTION

1.1 Background Summary

The West and Central Africa region faces numerous challenges regarding sexual and reproductive health and rights (SRHR) as well as violence against women and girls (VAWG). According to a report by the United Nations Population Fund (UNFPA), the region has some of the lowest contraceptive prevalence rates in the world, with only 18 percent of married or in-union women using modern contraception in 2020. Furthermore, the region has the highest levels of unmet need for family planning, which is estimated at 24 percent for all women and 35 percent for adolescents aged 15-19. These challenges are further compounded by the region's high levels of maternal mortality, which continue to be among the highest in the world, at an estimated 533 maternal deaths per 100,000 live births.

Violence Against Women and Girls (VAWG) also remains extremely high in West and Central Africa. Intimate Partner Violence, sexual violence, especially conflict-related remain extremely high in the region. Also, the region is one of the world's hotspots of harmful practices. Whereas FGM/E is generally more prevalent in West Africa (45% over 29% of women and girls), and child marriage in Central Africa (41% over 35%), this is not homogeneous, with significant differences per country. In Niger, 76% of women and girls were married before turning 18 years old, followed by Cameroon (61%), CAR and Chad (60,6%). In 6 out of 24 countries of the region, more than 50% of the women were married before turning 18. Similarly, FGM/E is most widely practiced in Guinea (Conakry), were 94,5% of women and girls have undergone cutting/excision, followed by Mali (88,6% and Sierra Leone (86%). In 7 out of 24 countries more than half of the women's population have undergone FGM/E.

Restrictive laws, policies, and regulations that impede access to SRHR services contribute to these health disparities. For instance, laws that require spousal or parental consent for contraceptive use, as well as policies that limit the provision of contraceptive methods to medical doctors and nurses, act as barriers to accessing family planning services. In some countries, cultural and religious beliefs also play a significant role in limiting access to SRHR services.

To address these challenges, sustainable improvements to SRHR require the removal of restrictions and addressing systemic political, economic, cultural, and social barriers that prevent women, men, and young people from accessing services. This includes legal and policy reforms anchored on human rights, comprehensive sexuality education, community engagement, and the provision of affordable, accessible and quality SRHR and RR services.

In terms of legal and policy frameworks, the international treaty bodies and mechanisms create demand for accountability at the international level on SRHR, RR and VAWG. The adoption of regional human rights treaties r such as African Union's Maputo Protocol and Banjul Charter are key regional instrument that seeks to promote and protect women's SRHR, RR and end violence against women and girls (EVAWG) in Africa. The protocol provides for the right to access and control over reproductive health information and services, and the right to access safe abortion services in cases of sexual assault, rape, incest, and when the life and health of the woman is in danger. Additionally, the Maputo Plan of Action 2016-2039 reinforces the call for Universal Access to Comprehensive Sexual and Reproductive Health Services in Africa.

Overall, addressing the numerous challenges facing SRHR in West and Central Africa requires a multi-sectoral and or multiagency approach involving governments, civil society organizations (national level and grassroots) international non-governmental organizations, multilaterals partners to address both the supply and demand-side factors that affect access to quality services. This includes improving health systems, strengthening policies and legal frameworks, and addressing socio-cultural barriers that impede access to quality SRHR, RR and EVAWG services.

1.2 About the Manual

This manual is designed to provide participants drawn from Civil society organizations including Women rights organizations- (National level and grassroots) and International non-governmental organization with a comprehensive understanding of the SRHR, RR, and EVAWG policy and budget advocacy landscape in West and Central Africa and equip them with the necessary knowledge and skills to effectively advocate for change and or action in their respective contexts. The first level of training will produce trainers (Training of trainers) who will then replicate the training at different levels targeting participants from WROs and or CSOs working on SRHR, RR, SSR and RHR.   This two-day virtual training curriculum provides a comprehensive and interactive approach to learning about SRHR, RR and EVAWG Policy and Budget Advocacy. It incorporates several modules and a variety of sessions to suit different learning styles and includes group work and experience/best practice sharing, and presentations to ensure that participants can apply what they have learned in their own contexts. The training is divided into six modules that will cover different aspects of SRHR, RR, and EVAWG advocacy, as well as the legal and policy frameworks, country-level action plans, and the role of men and boys as allies. The modules are as follows:

Module 1: The Current Environment of SRHR, RR, and EVAWG in West and Central Africa (WCAR) This module will explore the current environment of SRHR, RR, and EVAWG in West and Central Africa, highlighting the progress made, challenges faced, and barriers and threats encountered in advocacy effort

Module 2: Legal and Policy Frameworks on SRHR, RR and EVAWG - This module will provide an overview of the existing legal and policy frameworks on SRHR and EVAWG in West and Central Africa, including regional and international instruments, commitments and action plans.

Module 3: Country-Level Action Plans on SRHR, RR and EVAWG - This module will focus on the country-level action plans on SRHR and EVAWG in West and Central Africa, including the progress made, challenges faced, and opportunities for advocacy.

Module 4: Working Together: Men and Boys, Traditional Leaders and Health Workers as Allies on SRHR, RR and EVAWG - This module will focus on the role of men and boys as allies in EVAWG and SRHR & RR advocacy and provide useful examples to illustrate the learning points.

Module 5: EVAWG and SRH & RR Budget Advocacy - This module will cover the effective strategies, barriers, and challenges related to policy and budget advocacy for SRHR, RR and EVAWG, including tracking allocations and social accountability.

Module 6: Strategies for effective advocacy in SRHR, RR &EVAWG - This module focuses on advocacy strategies for addressing sexual reproductive, reproductive health and EVAWG. This module will discuss how to sharpen existing strategies and adopt new innovations for SRHR and EVAWG advocacy, including potential innovative approaches, tools, and technologies that can be used to enhance advocacy efforts.

By the end of the training, participants will have a deep understanding of the SRHR, RR, and EVAWG policy and budget advocacy landscape in West and Central Africa, as well as the tools and strategies to effectively advocate for change in their respective contexts to continue to make a difference in the lives of women and girls in the region.

1.3 Setting the Pace
Title: Setting the Pace: SRHR, RR, and EVAWG Policy and Budget Advocacy in West and Central Africa.

The introductory session is critical because it sets the climate for participants to interact openly and freely with the training content and with one another.

Facilitator's Note

During this session, the Facilitator carry's out introduction and discusses the training objectives with the participants, participants get to know each other and build trust. The purpose of this training session is to provide participants with the knowledge and skills necessary to engage in policy and budget advocacy for SRHR, RR, and EVAWG issues in West and Central Africa. The training will cover topics such as understanding policy and legal frameworks, developing policy and legal analysis, engaging in legislative and policy processes, and mobilizing resources and support.

Learning Objectives:

1. Understanding the regional context, common challenges and opportunities on SHRH, RR and EVAWG in the región (WCAR)
2. Understand the policy and legal frameworks related to SHHR, RR, and EVAWG in West and Central Africa.
3. Develop policy and legal analysis skills to effectively engage in advocacy efforts.
4. Learn strategies for engaging in legislative and policy processes to influence policy and laws.
5. Understand how to mobilize resources and support for advocacy efforts.
6. Learn from successful advocacy examples in the region.

Pre-Training Assessment

Please take a few minutes to answer the following questions before the training begins. This assessment is designed to help us understand your current knowledge and experience on Sexual and Reproductive Health and Rights (SRHR), Reproductive Rights (RR), and Ending Violence Against Women and Girls (EVAWG) Policy and Budget Advocacy in West and Central Africa Region.

1. **What is your understanding of SHRH, RR, VAWG?**
   a) Sexual and Reproductive Health and Rights, Rural Renewal, Violence Against Women and Girls
   b) Sexual and Reproductive Health and Rights, Reproductive Rights, Violence Against Women and Girls
   c) Sexual and Reproductive Health and Rights, Reproductive Rights, Voluntary Active Euthanasia, Women's Gender Equality

2. **What are the most prevalent issues in the region?**
   a) Lack of access to quality healthcare services
   b) High maternal and infant mortality rates
   c) Gender-based violence and discrimination
   d) All of the above

3. **How would you rate your understanding of the legal and policy frameworks on SRHR in your country? (Scale of 1-5)?**
   a) 1 - Very Poor
   b) 2 - Poor
   c) 3 - Moderate
   d) 4 - Good
   e) 5 - Very Good

4. **Can you name any regional and international instruments, commitments, and action plans related to SRHR and EVAW in your country and or region (WCAR)?**
   a) The African Charter on Human and Peoples' Rights
   b) The Maputo Protocol
   c) The Sustainable Development Goals
   d) All of the above

5. **Have you been involved in any advocacy efforts related to SRHR, RR, or EVAWG in your country or region?**
   a) Yes
   b) No

6. **What are some of the progresses made, challenges faced, and barriers and threats encountered in SRHR, RR, and EVAWG advocacy efforts in West and Central Africa?**
   a) Lack of funding and resources
   b) Social and cultural norms
   c) Resistance from religious and traditional leaders
   d) All of the above

7. **How do you see the role of men and boys, Traditional Leaders, Health Workers as allies in EVAWG and SRHR & RR advocacy?**
   a) They are important allies in promoting gender equality and ending gender-based violence
   b) They are not necessary allies in promoting gender equality and ending gender-based violence
   c) They are only useful in promoting sexual and reproductive health and rights

8. **Do you have experience in working with men and boys as allies? If so, what are the main results & challenges you have faced?**
    a) Yes
    b) No

9. **Have you been involved in any policy and budget advocacy efforts related to SRHR and EVAWG in your country or region? If so, can you describe your experience?**
    a) Yes
    b) No

10. **In your experience, what strategies have proven successful towards advancing in policy and budget advocacy (at regional, national or community level) for SHRH, ¿RR and EVAWG in West and Central Africa? Which ones are not effective?**
    a) Mobilizing civil society organizations and advocacy networks
    b) Engaging with policymakers and decision-makers
    c) Using evidence-based research to support advocacy efforts
    d) All of the above
    e) None of the above

11. **Have you used any innovative approaches, tools, or technologies to enhance your advocacy efforts for SRHR and EVAWG? If so, can you describe your experience?**
    a) Yes
    b) No

12. **What are your expectations for this training? What do you hope to learn or achieve by the end of the training?**
    a) Learn about effective advocacy strategies for promoting SRHR and EVAWG
    b) Understand the legal and policy frameworks related to SRHR and EVAWG
    c) Network with other advocates and share experiences
    d) All of the above

Thank you for taking the time to complete this assessment. Your responses will help us tailor the training to better meet your needs and expectations.

2.0 TRAINING MODULES

2.0 TRAINING MODULES
2.1 Training Module 1: Exploring the Current Environment of SRHR, RR, and VAWG

Title: Exploring the Current Environment of SRHR, RR, and VAWG in West and Central Africa States. This learning module will provide an overview of the current environment of SRHR, RR, and VAWG in West and Central Africa states, including progress, challenges, barriers, and threats, and will provide participants with the opportunity to develop strategies and solutions to address the challenges and barriers identified in their respective countries. By the end of the learning module, participants will have a clear understanding of the current environment of SRHR, RR, and VAWG in their respective countries and will have developed concrete strategies and solutions for addressing the challenges and barriers in their work or advocacy.

Objective: The objective of this learning module is to provide an overview of the current environment of SRHR, RR, and VAWG in West and Central Africa states, including progress, challenges, barriers, gaps and threats.

Methodology: The learning module will use a combination of presentations, group discussions, and mapping exercises to facilitate learning and knowledge sharing. The learning module will be conducted online using virtual communication tools.

Learning Materials:
- PowerPoint presentation on the current environment of SRHR, RR, and VAWG in West and Central Africa states
- Handout on the mapping exercise and strategy template

Assessment: The learning module will be assessed based on the level of participation and engagement of the participants, the quality of the country-level mapping exercise and strategy development, and the feedback provided by the facilitators.

Duration: 2 hours

Agenda:

Session 1: Overview of SRHR, RR, and VAWG in West and Central Africa States
         (30 minutes)
Overview of the current environment of SRHR, RR, and VAWG in West and Central Africa states, including progress, challenges, barriers, and threats.

📋 Facilitator's Notes
Security Crisis in WCAR
- West and Central Africa faces some of the world's most complex challenges in a context where acute and prolonged crises are deepening and needs deteriorating. The confluence of conflict and violence, and other factors are driving millions to the fringes of survival. Insecurity and violence are threatening lives and livelihoods, disrupting access to health, water, sanitation, and hygiene services, depriving violence-affected communities' access to vital services, increasing human rights violations, and jeopardizing social cohesion.
- Since 2015, the number of brutal attacks increased eight-fold in the Central Sahel and tripled in the Lake Chad basin, leading to additional displacement and needs. In the Democratic Republic of the Congo (DRC) and the Central African Republic (CAR), long-running conflict and protracted crises

continue to affect millions of people. In western Cameroon, violent conflict in the South-West and North-West regions has displaced many. Trends in the Sahel point towards further deterioration. A series of coups d'état in Mali, Chad, and Guinea, renewed hostilities across conflict areas in the region, and 2022 upcoming elections risk further strain the situation in the region.

SRHR & VAWG challenges in WCAR

- The West and Central Africa region continues to face significant challenges in promoting and protecting sexual and reproductive health and rights (SRHR), reducing very high maternal mortality, reducing rates of unintended pregnancy, ensuring access to safe and legal abortion, and combating gender-based violence (GBV) and discrimination. Despite efforts to improve access to SRH services and information, progress has been slow, and significant barriers persist for instance many women and girls living in rural areas still struggle to access services and commodities, most of regions   in Central Africa present with insufficient infrastructure and resources available to support and sustain the services.

- Women and girls continue to face challenges while accessing quality Family planning services and commodities (contraceptives) including all sexual reproductive health services ranging from antenatal care, delivery, and postnatal care. Where contraceptives are available the prices are too high for women and girls to afford. This then contributes to high rates of unintended pregnancy, high maternal mortality rates and a high unmet need for family planning. In West and Central Africa, only 17% of women use modern methods of contraception, compared to the global average of 56%. A lack of access to quality family planning services, particularly in rural areas, and cultural and religious barriers, contribute to this low uptake. Generally, social norms and cultural barriers limit uptake of Sexual reproductive health services especially in patriarchal and male dominated communities as manifested in WCAR region where women continue to struggle with limited power to make decisions regarding the number of children, use of resources at household level and whether to seek care/assistance in the event of reproductive health emergencies.

- Gender-based violence (GBV) including harmful practices (child marriage and FGM/C), sexual violence linked to situation of conflict, sexual violence in humanitarian settings, and emerging new forms of violence such as online violence and or technology aided violence also pose a significant problem in the region. In Nigeria, for example, over 30% of women aged 15-49 have experienced physical or sexual violence, while in Cameroon, over 40% of women have experienced GBV mostly linked to conflict. In West and Central Africa, over 40% of women aged 20-24 were married before the age of 18, while in some countries, such as Niger and Chad, this figure is over 70%. This is a major barrier to girls' education and access to SRH services and information, and increases the risk of maternal mortality and morbidity, including obstetric fistula. In addition, FGM is still widely practiced in many parts of the region, despite being outlawed in many countries. The stigma and shame associated with GBV often prevents women and girls from reporting incidents and seeking help, and laws and policies protecting women and girls from GBV are often inadequate or poorly enforced.

Session 2: Case studies and examples of progress, challenges, barriers, and threats in West and Central Africa states

📝 Facilitator's Notes – Chad Case study

- **In 2002,** the Government of Chad passed a reproductive health (RH) law that enshrined the right to SRH services. However, the impact of this new law was limited by the failure to pass a decree of application to establish the framework for its implementation. The absence of the decree created a significant gap between the law and its implementation, contributed to misunderstanding and a lack of knowledge, limited reproductive rights and meant that many healthcare providers felt at risk and unprotected when providing critically needed SRH services.

- **Sixteen years later,** in 2018, the decree was passed by the Council of Ministers – marking a key step

in the legislative process and a window of opportunity for further advocacy.

- **Two years later in 2020** the implementing decree was signed by the President of the Republic and the Minister of Health and National Solidarity on 14th of October 2020. The law and implementing decree protect the rights of women to make essential decisions about their sexual and reproductive health without requiring the consent of a spouse or a parent or other family member, requirements which can compromise choice, waste valuable time and endanger lives. In family planning, the decree protects the right of women to receive family planning methods without the consent of their husband or family members – putting choice squarely back in women's hands, where it belongs. In obstetric care, it allows healthcare providers to carry out emergency caesarean sections without having to wait for consent from the spouse or family. In abortion care, the decree establishes the legal parameters for the provision of abortion in cases where the life of the foetus or the pregnant woman is in danger. By upholding women's rights and also protecting service providers and ensuring they will not be arrested or prosecuted when they provide care based on medical needs, this legislation has the potential to save thousands of lives.

Facilitator's Notes – Burkina Faso

- The government of Burkina Faso has demonstrated strong political will and pursued enabling policies for sexual and reproductive health.

- In 2010, the government committed to removing financial barriers by offering free emergency obstetric care. In 2011, Burkina hosted the launch of the Ouagadougou Partnership, which aimed to reach at least 2.2 million additional Family Planning users in the nine West African countries by 2020.

- Eight years later, in 2018, it extended this commitment to FP services. The 2016-2020 National Economic and Social Development Plan (PNDES) includes the acceleration of the demographic transition among its priorities. The 2017-2020 National Plan for Accelerating Family Planning (known as the PNAPF) is one of the specific tools for operationalizing the PNDES in order to accelerate this demographic transition.

Session 3: Mapping of Progress/Backlash, Challenges, Barriers, and Threats (60 minutes)

- Participants will be divided into small groups based on their respective countries.
- Each group will map the progress/backlash, challenges, barriers, and threats related to SRHR, RR, and VAWG in their country in legislation, Prevalence of GBV/violence, social stigma and investments (budget allocations)
- Facilitators will provide guidance and feedback to each group including material for further reference this includes statistical data bases (UNFPA, WHO, UN Women) Resources on country specific legislation, Data on prevalence of GBV at country level.

Relevant examples from WACA:

- **Niger:** Niger has one of the highest maternal mortality rates in the world, with limited access to family planning and a high unmet need for contraception. Child marriage and female genital mutilation (FGM) are also prevalent, affecting young girls' health and well-being. However, there has been some progress in recent years, including the development of a national action plan to reduce maternal mortality, the expansion of family planning services, and efforts to combat child marriage and FGM.

- **Liberia:** Liberia has made significant progress in recent years in improving maternal and child health, including expanding access to family planning services, improving maternal and child health care, and addressing gender-based violence. However, significant challenges remain, including limited access to quality health services, high rates of teenage pregnancy, and ongoing gender-based violence, including rape and sexual exploitation.

- **Cameroon:** Cameroon faces significant challenges in addressing sexual and reproductive health issues, including high rates of maternal and infant mortality, limited access to family planning services, and a high unmet need for contraception. Additionally, child marriage and FGM are still prevalent, particularly in rural areas. However, the government has made some progress in recent years, including the development of a national strategy to reduce maternal mortality and the expansion of family planning services.

- **Mali:** Mali faces significant challenges in addressing sexual and reproductive health issues, including high rates of maternal and infant mortality, limited access to family planning services, and a high unmet need for contraception. Additionally, child marriage and FGM are still prevalent, particularly in rural areas. However, the government has made some progress in recent years, including the development of a national strategy to reduce maternal mortality and the expansion of family planning services.

- **DRC:** The Democratic Republic of Congo (DRC) faces significant challenges in addressing sexual and reproductive health issues, including high rates of maternal and infant mortality, limited access to family planning services, and a high unmet need for contraception. Gender-based violence, including rape and sexual exploitation, is also prevalent, particularly in conflict-affected areas. However, the government has made some progress in recent years, including the expansion of family planning services and efforts to address gender-based violence.

- **Nigeria:** Nigeria has the largest population in West and Central Africa and faces significant challenges in addressing sexual and reproductive health issues, including high rates of maternal and infant mortality, limited access to family planning services, and a high unmet need for contraception. Additionally, child marriage and FGM are still prevalent, particularly in northern states. However, the government has made some progress in recent years, including the expansion of family planning services and efforts to address gender-based violence.

- **Côte d'Ivoire:** Côte d'Ivoire, there have been efforts to improve SRHR, RR, and EVAWG. The government has developed a National Health Development Plan for 2016-2020 that aims to strengthen the health system and improve access to healthcare services, including SRH services. The country has also adopted laws and policies aimed at promoting gender equality and protecting women's rights, including a law criminalizing female genital mutilation (FGM). However, implementation and enforcement of these laws and policies remain a challenge, and gender-based violence continues to be a major issue in the country. The prevalence of FGM, early and forced marriage, and other harmful practices also remains high.

- **Burkina Faso:** Burkina Faso has made some progress in advancing SRHR, RR, and EVAWG. The government has adopted a National Gender Policy that recognizes women's rights and promotes gender equality. The country has also made efforts to improve access to family planning services and reduce maternal mortality. However, there are still challenges in implementing these policies and programs, particularly in rural areas where access to healthcare services is limited. Gender-based violence is also a significant issue in the country, with high rates of sexual violence and FGM.

- **Chad:** Chad faces significant challenges in advancing SRHR, RR, and EVAWG. The country has one of the highest maternal mortality rates in the world, and access to healthcare services, including SRH services, is limited, particularly in rural areas. Child marriage and FGM are also widespread in the country. There have been efforts to address these issues, including the adoption of a National Plan for the Health of Women, Children, and Adolescents, but implementation and funding of these initiatives remains a challenge.

- **Ghana:** Ghana has made some progress in advancing SRHR, RR, and EVAWG. The country has adopted policies and programs aimed at improving access to family planning services, reducing maternal mortality, and promoting gender equality. The government has also passed laws aimed at addressing gender-based violence, including a Domestic Violence Act and a Sexual Offences Act. However, implementation and enforcement of these laws and policies remain a challenge, and there are still significant gaps in access to healthcare services, particularly in rural areas.

Session 4: Sharing and Analysing Country-Level Findings (30 minutes)
- Each group will share their findings with the larger group.
- Facilitators will guide the group in analysing the commonalities and differences in the progress, challenges, barriers, and threats across the different countries.

> **Facilitator's Notes**
>
> **Commonalities:**
> - All countries in the region face significant differentiated challenges in addressing SRHR, RR, and EVAWG, particularly due to socio-cultural and economic factors such as gender social norms and limited investments by governments towards maternal and reproductive health that in turn limit access to services, education, and resources.
>
> - High maternal mortality rates, low contraceptive prevalence rates, and high levels of unmet need for family planning are common challenges across the countries.
>
> - The region also experiences high levels of child marriage, female genital mutilation/cutting, and sexual and gender-based violence.
>
> - All countries have ratified international and regional agreements aimed at promoting and protecting the rights of women and girls, including the Maputo Protocol, CEDAW, and the SDGs.
>
> **Differences:**
> - The political and social context varies across the countries, with some countries experiencing conflict or political instability, which further exacerbates the challenges in addressing SRHR, RR, and EVAWG. Conflicts limit access to services and increase vulnerability to different form of violence including sexual violence such as rape and defilement. Political instability prevents the passing of legislations and allocation of resources /budgets towards on VAW, SRH among others. Most countries in WCAR that continue to have significant groups of refugees and internally displaces persons that live in very poor conditions and struggle with access to water and basic hygiene conditions that remain very key for women and adolescent girls.
>
> - Some countries have made significant progress in addressing these issues, such as Ghana, which has implemented policies and programs that have contributed to a reduction in maternal mortality rates and an increase in contraceptive prevalence rates.
>
> - Other countries, such as Liberia, continue to face significant challenges in addressing these issues, particularly due to limited resources and weak health systems.
>
> - While all countries have laws and policies in place aimed at promoting SRHR and ending EVAWG, the implementation and enforcement of these laws vary across the countries, with some countries facing significant challenges in this regard.

Session 5: Exercise sharing experiences and emerging issues as well as best practices in dealing with challenges, barriers, backlash, and threats. (30 min)
- Participants will brainstorm and identify.
- Similar or different challenges, barriers and threats across the region?
- Socio-cultural and economic factors preventing access to services?

2.2 Training Module 2 Existing Legal SRHR and VAWG Frameworks

> **Title: Existing Legal SRHR and VAWG Frameworks in West and Central Africa: Key Regional and International Instruments.**
> This training module will provide an overview of the existing legal frameworks on SRHR and VAWG in West

and Central Africa, including key regional and international instruments, policies, commitments, and action plans. By the end of the training, participants will have a better understanding of what these legal tools are, how they can use these legal frameworks to advance SRHR, RR and EVAWG policy and budget advocacy, and reflections on whether the available legal frameworks give response to the challenges.

Objective: The objective of this training module is to provide an overview of the existing legal frameworks on Sexual and Reproductive Health and Rights (SRHR) and Violence Against Women and Girls (VAWG) in West and Central Africa, including key regional and international instruments, policies, commitments, and action plans.

Methodology: The training module will use a combination of presentations, and group discussions, to facilitate learning and knowledge sharing. The training module will be conducted online using virtual communication tools.

Learning Materials:
- PowerPoint presentation on the existing legal frameworks on SRHR and VAWG in West and Central Africa
- Handout on the key regional and international instruments, policies, commitments, and action plans on SRHR and VAWG
- Action planning worksheet

Assessment: The training module will be evaluated through participant feedback and engagement during the training and through the evaluation form provided at the end of the training module.

Duration: 2 hours

Session 1: Overview of Legal SRHR, RR and VAWG Frameworks in West and Central Africa (30 minutes)

Definition of SRHR and EVAWG

📋 Facilitator's Notes
- SRHR stands for Sexual and Reproductive Health and Rights. According to the International Planned Parenthood Federation (IPPF)[1], SRHR encompasses a wide range of issues related to people's sexual and reproductive health and their right to access information, services, and care related to these issues. Specifically, SRHR includes the right to make informed choices about one's own sexual and reproductive health, including the right to access contraception, safe and legal abortion, and information and services related to preventing and treating sexually transmitted infections (STIs) and HIV/AIDS. It also includes the right to access comprehensive sexuality education, to have safe and consensual sexual relationships, and to receive respectful and non-discriminatory care related to one's sexual and reproductive health. According to the United Nations Population Fund (UNFPA)[2], reproductive rights refers to "the basic human right of all couples and individuals to decide freely and responsibly the number, spacing, and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health." Furthermore, reproductive rights are considered a subset of human rights, and are recognized as an essential element of achieving gender

1 International Planned Parenthood Federation - What is Sexual and Reproductive Health and Rights? Retrieved from https://www.ippf.org/what-we-do/what-are-sexual-and-reproductive-health-and-rights. Accessed: April 14, 2023.
2 United Nations Population Fund (UNFPA) (2017). Reproductive Rights and the Sustainable Development Goals: A Human Rights-based Approach Retrieved from https://www.unfpa.org/sites/default/files/resource-pdf/UNFPA_Reproductive_Rights_and_the_Sustainable_Development_Goals.pdf

equality and women's empowerment. Reproductive rights are therefore an integral part of the broader framework of human rights and social justice.

- EVAWG stands for Ending Violence Against Women and Girls. the official UN definition of EVAWG is derived from the Declaration on the Elimination of VAWG : ", the term "violence against women" means any act of gender based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life "[3]This also refers to the efforts to prevent and respond to violence against women and girls, which can include physical, sexual, and emotional abuse. Advocacy for EVAWG policies and budgets may involve promoting laws and policies that protect women and girls from violence, as well as increasing funding for prevention and response programs.

- Family Planning according to the World Health Organization (WHO) family planning is "the ability of individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. It is achieved through use of contraceptive methods and the treatment of involuntary infertility." Family planning is considered a fundamental human right and is recognized as a key element of achieving the United Nations Sustainable Development Goals, particularly those related to maternal and child health, gender equality, and poverty reduction.[4]

Session 2: Overview of existing legal frameworks in West and Central Africa

📋**Facilitator Notes**

- **SRHR:** In general, West, and Central African states have legal frameworks that recognize sexual and reproductive health and rights. Many countries have ratified international conventions and agreements related to SRHR, such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Maputo Protocol. However, there can be gaps between legal frameworks and the actual implementation of SRHR policies and programs, and many states face challenges related to limited resources, infrastructure, and social and cultural norms. An exhaustive list of countries that have ratified can be found at: https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsgno=IV8&chapter=4&cla   ng=_en

- **RR:** The legal frameworks related to reproductive rights vary across West and Central African states. They include international, regional, and national frameworks that support access to contraception and safe abortion, while others have restrictive laws that limit these rights. A list of countries that have legal provisions against which type of GBV can found at https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsg_no=IV-8&chapter=4&clang=_en

- **EVAWG:** Many West and Central African states have legal frameworks that prohibit violence against women and girls, including sexual assault, domestic violence, and female genital mutilation/cutting (FGM/C). Some countries have enacted laws and policies that specifically address gender-based violence, such as national action plans and strategies, and others have established specialized services, such as shelters and hotlines, for survivors of violence. However, implementation can be challenging, and cultural and social norms that condone violence against women and girls can be deeply entrenched in some communities.

- In terms of budget frameworks, SRHR, RR and FP funds are often allocated and delivered under the relevant National Health ministry while issues of EVAWG are allocated funds under National Gender or Women's rights departments or ministry. In West and Central African states challenges relate to limited resources for health care, and Gender equality/women's rights /social services, which can affect the

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3 United Nations General Assembly. (1993). Declaration on the Elimination of Violence against Women. Retrieved from https://www.un.org/documents/ga/res/48/a48r104.htm

4 World Health Organization. (2021). Family planning/Contraception. Retrieved fromhttps://www.who.int/news-room/q-a-detail/family-planning-contraception.

implementation of policies related to SRHR, RR, and EVAWG. Some states may also face challenges related to corruption and inefficient use of resources. Many advocates and organizations are working to increase funding for these issues and ensure that resources are allocated effectively to address the unique challenges faced by each state.

Session 3: Key international instruments treaties on SRHR and VAWG

📋 Facilitator's Notes

- **The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)** is a human rights treaty that seeks to address SRHR, RR, and EVAWG in West and Central African States by calling for the elimination of discrimination against women and ensuring their equal rights in areas such as education, health, and employment. CEDAW recognizes reproductive rights as human rights and calls for the elimination of harmful practices such as FGM/C and child marriage.

- **The International Conference on Population and Development (ICPD)** is a global conference that sought to address population issues and promote human rights, including SRHR. The ICPD recognized the importance of ensuring universal access to reproductive health services, reducing maternal mortality, and promoting gender equality.

- **The Beijing Declaration and Platform for Action** is a global blueprint for advancing women's rights and gender equality. It includes commitments to ensuring women's access to SRHR services, promoting gender equality, and eliminating violence against women and girls.

- **The Committee on Economic, Social and Cultural Rights (CESCR)** general comment 14 provides guidance on the right to health under the International Covenant on Economic, Social and Cultural Rights. It recognizes reproductive health as a fundamental component of the right to health and calls for the elimination of discrimination and violence against women in accessing health care services.

- **The Convention on the Rights of Persons with Disabilities (CRPD)** aims to promote and protect the rights of persons with disabilities, including their right to health and access to SRHR services. The CRPD recognizes that persons with disabilities may face barriers in accessing SRHR services and calls for the elimination of discrimination and barriers in accessing these services.

- **The Generation Equality Forum** is a global gathering focused on advancing gender equality and promoting women's rights. The forum includes a focus on promoting SRHR, RR, and EVAWG, including commitments to ensuring universal access to sexual and reproductive health services, preventing, and responding to gender-based violence, and promoting gender equality. The forum includes a focus on addressing the needs of marginalized groups, such as women and girls with disabilities and refugees.

- **World Health Organization's Global Strategy for Women's, Children's, and Adolescents' Health (2016–2030)**[5]

- **The United Nations Sustainable Development Goals (SDGs)** are a set of 17 global goals aimed at ending poverty, protecting the planet, and promoting prosperity for all. The SDGs include targets related to SRHR, RR, and EVAWG as well as Indicators (See Annex).

- **SDG 1** aims to end poverty in all its forms and dimensions, and it includes targets such as eradicating extreme poverty, reducing the proportion of people living below the poverty line, implementing social protection systems, and ensuring equal rights to economic resources and access to basic services.

- **SDG 3:** Ensure healthy lives and promote well-being for all at all ages, including targets to reduce maternal mortality and ensure universal access to sexual and reproductive health services.

- **SDG 4:** Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all, including targets to promote comprehensive sexuality education and eliminate gender dispar-

5 Retrieved from https://apps.who.int/iris/handle/10665/276423

ities in education.

- **SDG 5:** Achieve gender equality and empower all women and girls, including targets to eliminate all forms of violence against women and girls, end child marriage, and ensure universal access to sexual and reproductive health and rights.

- **SDG 10:** Reduce inequality within and among countries, including targets to ensure equal opportunities for all, regardless of gender, and eliminate discriminatory laws and practices.

- **SDG 16:** Promote peaceful and inclusive societies for sustainable development, provide access to justice for all, and build effective, accountable, and inclusive institutions at all levels, including targets to eliminate all forms of violence against women and girls and strengthen institutions to prevent and respond to gender-based violence.

- https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsg_no=IV-8&chapter=4&clang=_en

Session 4: Key Regional Instruments on SRHR, RR and EVAWG (30 minutes)

📋 Facilitator's Notes

- The African Union's Agenda 2063: This framework, adopted in 2013, includes several goals related to SRHR, RR, and EVAWG, such as improving maternal and child health, reducing maternal mortality, and eliminating harmful practices such as FGM/C and child marriage.

- Regarding SRHR, the agenda prioritizes access to comprehensive sexuality education, increased access to family planning services, and the reduction of maternal mortality rates through improved reproductive health care. It also recognizes the importance of addressing harmful traditional practices such as female genital mutilation and child marriage.

- In terms of RR, the agenda highlights the need to ensure universal access to sexual and reproductive health services, including safe and legal abortion, while also acknowledging the importance of empowering women and girls to make informed decisions about their reproductive health.

- Regarding EVAWG, the agenda includes commitments to combat all forms of violence against women and girls, including sexual violence, trafficking, and harmful traditional practices. It recognizes the importance of gender equality and the empowerment of women and girls in achieving these goals.

- The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) seeks to address SRHR, RR, and EVAWG in West and Central African States by recognizing reproductive rights as human rights and calling for the elimination of harmful practices such as female genital mutilation/cutting (FGM/C) and child marriage. It also calls for the protection of women's rights during armed conflict and the prevention and punishment of all forms of violence against women.

- The Banjul Charter, also known as the African Charter on Human and Peoples' Rights, is a legally binding human rights instrument adopted by the African Union in 1981. The Charter recognizes that women's rights are an integral part of human rights and explicitly prohibits all forms of discrimination against women.

- In relation to SRHR, the Charter recognizes the right of individuals to make decisions concerning their own reproductive health and to have access to the necessary information and services to exercise this right. The Charter also recognizes the right of women to be protected from harmful traditional practices, such as female genital mutilation and forced marriage.

- Regarding EVAWG, the Charter recognizes the right of women to be free from all forms of violence, including physical, sexual, and psychological violence. It also requires State Parties to take measures to prevent, punish, and eradicate all forms of violence against women. Overall, the Banjul Charter plays an important role in promoting and protecting women's rights in Africa, particularly in the areas of SRHR, RR, and EVAWG

Examples of campaigns at the Regional Level

- The African Union Campaign to End Child Marriage in Africa is a Pan-African campaign that aims to end child marriage in Africa by 2030. The campaign seeks to raise awareness about the harmful impacts of child marriage on girls and their communities, and to promote policies and programs that prevent child marriage and support girls who are at risk of or already married. The campaign includes a focus on empowering girls to make their own decisions about their lives, including their reproductive health.

The African Women's Decade (2010-2020) on Gender Equality and Women's Empowerment was a 10-year campaign launched by the African Union to accelerate progress towards gender equality and women's empowerment in Africa. The campaign aimed to address key issues affecting women in Africa, including SRHR, RR, and EVAWG. The campaign focused on empowering women to participate fully in all aspects of society, promoting women's access to education and economic opportunities, and eliminating all forms of violence against women and girls. The campaign helped to raise awareness about these issues and promote policy and programmatic actions to address them.

WACA Sub-Regional Mechanisms:

- The ECOWAS Supplementary Act on Equality of Rights between Women and Men for Sustainable Development in the ECOWAS Region aims to promote gender equality and women's empowerment in West Africa. It includes provisions on SRHR, RR, and EVAWG, such as promoting access to reproductive health services, preventing and responding to gender-based violence, and eliminating harmful practices such as FGM/C and child marriage.
- The Central African States Declaration on the Fight Against Sexual Violence Against Women and Children recognizes sexual violence as a serious human rights violation and calls for the prevention and punishment of these crimes. It also includes provisions on providing support and services to survivors of sexual violence.
- The Ouagadougou Partnership is a regional initiative focused on increasing access to family planning services in West and Central African states. It includes commitments from governments, civil society organizations, and donors to increase funding and improve service delivery for family planning. By improving access to family planning services, the partnership seeks to address SRHR issues such as reducing maternal mortality, preventing unintended pregnancies, and improving women's and girls' overall health.
- The Abuja Declaration is meant to strengthen Africa's health systems and ensure their preparedness for disease outbreaks. African governments made an historic pledge to allocate at least 15% of their annual budgets to the health sector.

Session 5: Group Discussion (30 minutes)

- Participants will be divided into small groups to discuss the relevance and implementation of the legal frameworks on SRHR and VAWG in their respective countries and contexts.
  - What are the commitments AU Member States (WACA) have made on SRHR, RR and EVAWG?
  - Are these instruments present in your country's national legislation?
  - Which of these instruments is more relevant for your organization/ work context?
  - Do people in your community know about the existence and relevance of these instruments?
  - Do these instruments respond to the SHRH/EVAWG challenges of your country/community/region?
  - What are the challenges and opportunities for implementation?
- Facilitators will provide guidance and feedback to each group.

2.3 Training Module 3: Analysing SRHR, RR and EVAWG Country-Level Action Plans

Title: SRHR, RR and EVAWG Country-Level Action Plans for implementing Frameworks.
This learning module will provide an overview of the West and Central Africa country level action plans for implementing SRHR, RR and VAWG frameworks. It will provide participants with the opportunity to oriented to analyse existing action plans and how to advocate for their implementation. By the end of the learning module, participants will have a clear understanding of the how the frameworks apply in their respective countries and will have developed concrete advocacy plans for implementing them.
Objective: The objective of this learning module is to provide an overview of the SRHR, RR and EVAWG country level action plans for implementing these frameworks.

Methodology: The learning module will use a combination of presentations, group discussions, and action planning to facilitate learning and knowledge sharing. The learning module will be conducted online using virtual communication tools.

Learning Materials:
- PowerPoint presentation on the legal and policy frameworks related to SRHR and VAWG in West and Central Africa
- Handout on the mapping exercise and action plan template

Assessment: The learning module will be assessed based on the level of participation and engagement of the participants, the quality of the country-level advocacy plans developed, and the feedback provided by the facilitators.

Duration: 3 hours

Agenda:

Session 1: SRHR, RR and EVAWG Country-Level Action Plans for implementing Frameworks (30 minutes)

> 📋**Facilitator's Notes**
>
> Some of the key SRHR, RR, and EVAWG country-level action and strategic plans for each of the countries as of 2021, based on available sources:
> - **Niger:** Niger has a National Reproductive Health Policy and Strategic Plan (2018-2022) that focuses on increasing access to and use of modern contraceptives, reducing maternal and neonatal mortality, and improving the quality of reproductive health services. The country also has a National Gender Policy and a National Plan of Action for the Promotion and Protection of Human Rights (2018-2022), which includes actions to prevent and respond to gender-based violence.
> - **Liberia:** Liberia has a National Gender Policy and a National Plan of Action on Sexual and Gender-Based Violence (2019-2023), which aims to prevent and respond to all forms of violence against women and girls, including sexual violence. The country also has a National Adolescent Health Policy and Strategy (2018-2022) that prioritizes improving the sexual and reproductive health of adolescents and young people through comprehensive sexuality education, access to youth-friendly health services, and promoting healthy behaviours.
> - **Cameroon:** Cameroon has a National Reproductive Health Policy (2014-2020) that focuses on increasing access to and use of family planning, reducing maternal and neonatal mortality, and addressing sexually transmitted infections and HIV/AIDS. The country also has a National Gender Policy (2011-2020) and a National Action Plan to Combat Gender-Based Violence (2017-2021), which includes

actions to prevent and respond to violence against women and girls.

- **Mali:** Mali has a National Reproductive Health Policy and Strategic Plan (2014-2023) that prioritizes increasing access to and use of family planning services, reducing maternal and neonatal mortality, and improving the quality of reproductive health services. The country also has a National Gender Policy and a National Plan of Action for the Promotion of Gender Equality (2017-2026), which includes actions to prevent and respond to gender-based violence.
- **DRC:** DRC has a National Reproductive Health Policy (2014-2020) that focuses on improving access to and use of family planning services, reducing maternal and neonatal mortality, and addressing sexually transmitted infections and HIV/AIDS. The country also has a National Gender Policy (2016-2025) and a National Strategy for Combating Gender-Based Violence (2016-2020), which includes actions to prevent and respond to violence against women and girls.
- **Ivory Coast:** Ivory Coast has a National Reproductive Health Policy and Strategic Plan (2014-2020) that focuses on improving access to and use of family planning services, reducing maternal and neonatal mortality, and addressing sexually transmitted infections and HIV/AIDS. The country also has a National Gender Policy and a National Plan of Action for the Promotion of Gender Equality (2017-2020), which includes actions to prevent and respond to gender-based violence.
- **Burkina Faso:** The current National Action Plan for the period of 2018-2022 on SRHR in Burkina Faso prioritizes four key areas: family planning, maternal and child health, HIV/AIDS and STI prevention and management, and the prevention of gender-based violence. The plan also includes specific strategies for improving the availability, accessibility, and quality of SRH services, including training for health care providers and community health workers, expanding the availability of contraception, and increasing access to safe abortion services. Additionally, the plan aims to address social and cultural barriers to SRH and promote gender equality through community engagement and awareness-raising campaigns.
- **Chad:** The National Strategy for Reproductive Health and Population for the period of 2017-2021 in Chad focuses on four main areas: family planning, maternal and child health, prevention of sexually transmitted infections, and gender-based violence. The strategy aims to increase access to quality SRH services through the integration of services at the primary health care level, as well as the training of health care providers. Additionally, the strategy aims to increase awareness and address social and cultural barriers through community mobilization and the promotion of gender equality.

Session 2: Identification of Priority Areas for Action (30 minutes)

- Each group to explore the:
  - Status of their Country Action Plans,
  - Implementation of the Action Plans.
- Each group will explore respective Country Action Plans under a comparative perspective with the following areas in mind:
  - Which areas are usually considered?
  - Which areas are usually not considered?
  - What kind of measures do they include?
  - Who is involved (which Ministries, other institutions,)?
  - Which areas are usually considered?
- Facilitators will provide guidance and feedback to each group.

Session 3: Developing Country-Level Advocacy Plans (90 minutes)

- Each group will develop an advocacy plan for the legal and policy frameworks related to SRHR and VAWG in their country.
- The advocacy plan should address the priority areas for action identified in the previous session.
- Facilitators will provide guidance and feedback to each group.

Sample action plan for implementing the international and regional legal and policy frameworks related to SRHR, RR and EVAWG for a women's rights organization in Nigeria:

Goal: To improve women's access to comprehensive sexual and reproductive health services and protect them from gender-based violence in Nigeria.

Objective 1: Advocacy and Awareness Raising
- Conduct awareness campaigns on the importance of SRHR, RR and EVAWG in Nigeria, targeting community leaders, policymakers, healthcare providers and the general public.
- Lobby the Nigerian government to prioritize the implementation of existing regional and international legal frameworks on SRHR, RR and EVAWG, such as the Maputo Protocol and the CEDAW.
- Advocate for increased funding for SRHR, RR and EVAWG programs at both national and state levels.

Objective 2: Service Delivery
- Increase access to comprehensive sexual and reproductive health services, including family planning, safe abortion, and maternal health care, by setting up mobile clinics in underserved areas and training healthcare providers on gender-sensitive and rights-based approaches.
- Provide psychosocial support and legal aid services to survivors of gender-based violence, including rape, domestic violence and forced marriage.
- Conduct capacity building workshops for community health workers, youth groups and women's groups on SRHR, RR and EVAWG.

Objective 3: Research and Documentation
- Conduct research on the prevalence and causes of gender-based violence in Nigeria, as well as the factors that contribute to low contraceptive use and high maternal mortality rates.
- Document and disseminate best practices in SRHR, RR and EVAWG interventions in Nigeria.
- Use research and documentation to inform policy and programmatic interventions and to hold the government accountable for their commitments to SRHR, RR and EVAWG.

Objective 4: Networking and Partnership
- Strengthen existing partnerships and build new partnerships with civil society organizations, government agencies, and international organizations working on SRHR, RR and EVAWG in Nigeria.
- Engage with women's rights organizations in other West and Central African countries to share best practices and lessons learned in the implementation of international and regional legal frameworks on SRHR, RR and EVAWG.

Monitoring and Evaluation:
- Develop a monitoring and evaluation framework to track progress towards the achievement of the objectives outlined in this action plan.
- Regularly collect data on the number of people reached through awareness campaigns, the number of women accessing SRHR services, and the number of survivors of gender-based violence receiving psychosocial, medical support and legal aid services.
- Use the monitoring and evaluation data to inform programmatic decision-making and to improve the effectiveness of interventions.

Budget:
- Develop a detailed budget that outlines the costs associated with implementing the different activities under each objective.
- Explore opportunities for funding from international donors, government agencies, and private foundations.
- sample action plan for implementing international and regional legal and policy frameworks related to SRHR, RR, and EVAWG for a local development organization in Nigeria:

Goal: To promote and protect the sexual and reproductive health and rights of women and girls in Nigeria

through the implementation of international and regional legal and policy frameworks related to SRHR, RR, and EVAWG.

Objectives:
- Increase awareness and understanding of international and regional legal and policy frameworks related to SRHR, RR, and EVAWG among staff, partners, and community members.
- Advocate for the implementation of international and regional legal and policy frameworks related to SRHR, RR, and EVAWG at the national and sub-national levels.
- Increase access to quality sexual and reproductive health services for women and girls, especially those in underserved communities.
- Promote gender equality and prevent gender-based violence in all spheres of life.

Strategies:
- Conduct a baseline survey to assess the knowledge, attitudes, and practices of staff, partners, and community members related to SRHR, RR, and EVAWG.
- Develop and implement a training program on international and regional legal and policy frameworks related to SRHR, RR, and EVAWG for staff, partners, and community members.
- Collaborate and support coordination with other civil society organizations and advocacy groups to lobby policymakers at the national and sub-national levels for the implementation of international and regional legal and policy frameworks related to SRHR, RR, and EVAWG.
- Strengthen referral systems to ensure that women and girls have access to quality sexual and reproductive health services, including family planning, maternal health, and HIV/AIDS prevention and treatment.
- Develop and implement community-based programs to prevent gender-based violence and promote gender equality, including engaging men and boys as allies.
- Monitor and evaluate the implementation of the action plan to ensure that objectives are met and that activities are carried out effectively.

Action Steps:
- Conduct a baseline survey to assess the knowledge, attitudes, and practices of staff, partners, and community members related to SRHR, RR, and EVAWG. Use the results to develop a training program and advocacy strategy.
- Develop and implement a training program on international and regional legal and policy frameworks related to SRHR, RR, and EVAWG for staff, partners, and community members.
- Collaborate with other civil society organizations and advocacy groups to develop a policy brief on the implementation of international and regional legal and policy frameworks related to SRHR, RR, and EVAWG at the national and sub-national levels. Use the policy brief to lobby policymakers.
- Strengthen referral systems by training health workers, developing community-based networks of service providers, and promoting the use of mobile health technologies.
- Develop and implement community-based programs to prevent gender-based violence and promote gender equality, including engaging men and boys as allies. Activities may include awareness-raising campaigns, training on gender-responsive budgeting, and support for women's economic empowerment.
- Monitor and evaluate the implementation of the action plan to ensure that objectives are met and that activities are carried out effectively. Use feedback from stakeholders to make improvements and adjust strategies as necessary.

Resources Needed:
- Training materials on international and regional legal and policy frameworks related to SRHR, RR, and EVAWG.
- Funding for advocacy and lobbying activities.
- Human resources, including staff and volunteers.

- Referral systems and networks of service providers.
- Community mobilization materials, including posters, flyers, and radio spots.
- Monitoring and evaluation tools and resources.

Timeline:
Year 1:
- Conduct baseline survey (Month 1-2)
- Develop and implement training program (Month 3-6)
- Develop policy brief and advocacy strategy.

Session 4: Group Presentations and Feedback (30 minutes) Kindly note this depends on the number of participants.
- Each group will present their country-level advocacy plan to the larger group.
- Facilitators will provide feedback and suggestions for improvement.

2.4 Training Module 4: Identifying and working with Allies - Men and Boys, Traditional   leaders, religious leaders, and health workers.

Title: Working Together: Men and Boys, Traditional leaders, and Health workers as Allies on EVAWG and SRH&RR in West and Central Africa States.

This learning module will provide an overview of the importance of identifying and working with men and boys as allies in ending violence against women and girls and promoting sexual and reproductive health and rights in West and Central Africa states as a key advocacy strategy. By the end of the learning module, participants will have a clear understanding way of identifying and working with boys and men as strategic allies as well as the role and benefits of engaging men and boys as strategic allies. Effective strategies of engaging or partnering with them in advocacy work.

Objective: The objective of this learning module is to provide an overview of the importance of working with men and boys, traditional leaders, and health workers as allies in ending violence against women and girls (EVAWG) and promoting sexual and reproductive health and rights (SRH&RR) in West and Central Africa states, and effective strategies of doing so.

Methodology: The learning module will use a combination of presentations, experience sharing, group discussions, and case studies to facilitate learning and knowledge sharing. The learning module will be conducted online using virtual communication tools.

Learning Materials:
- PowerPoint presentation on identifying and working with men and boys, Traditional leaders, and Health workers as allies in EVAWG and SRH&RR
- Handout on effective strategies for engaging men and boys and the Kinshasa declaration on Positive Masculinity (2021)

Assessment: The learning module will be assessed based on the level of participation and engagement of the participants, the quality of the strategies developed by the groups, and the feedback provided by the facilitators.

Duration: 2 hours

Session 1: Why Engaging Men and Boys is Important (30 minutes)

Discussion of the role of men and boys in perpetuating or preventing EVAWG and promoting SRH&RR & Overview of the benefits of engaging them as allies in these efforts

> ### 📋 Facilitator's notes
>
> As in many parts of the world, men, and boys in West and Central Africa have historically been socialized to view women as inferior and to use violence as a means of control. This has contributed to high rates of EVAWG and limited access to SRH&RR services in the region. However, there is growing recognition of the critical role that men and boys can play in preventing violence against women and promoting sexual and reproductive health.

- Gender roles refer to the social and cultural expectations and norms placed on individuals based on their gender, which can shape their behaviours', attitudes, and values (Eagly & Wood, 2013). These roles can impact the division of labour, access to education and resources, and participation in decision-making processes.[6]
- Gender inequality refers to the unequal distribution of power, resources, and opportunities based on gender, resulting in disadvantage for individuals of a particular gender, usually women and girls (World Health Organization, 2014). This inequality is linked to violence, including sexual and gender-based violence, which is often used to maintain unequal gender relations (Heise et al., 2019).[7]
- Patriarchy refers to the social system in which men hold primary power and authority over women, and the system is maintained through social, political, and economic structures (Connell, 2014). Patriarchal norms and beliefs shape gender roles, perpetuate gender inequality, and maintain power imbalances between men and women.
- Positive/transforming masculinity refers to a concept that recognizes and promotes the positive aspects of masculinity, such as empathy, compassion, and respect for women's rights, and challenges the negative aspects, such as aggression and dominance, that contribute to gender inequality and violence against women. This concept is contrasted with toxic or negative masculinity, which is characterized by aggressive and harmful behaviour towards women and other marginalized groups. The Kinshasa Declaration on Positive Masculinity (2021) defines positive masculinity as "the transformation of negative and toxic expressions of manhood, into positive and non-violent expressions, where men become part of the solution for gender equality."[8]

In Guinea, for example, the NGO Tustin has been working with men and boys to promote gender equality and end harmful practices such as female genital cutting. Through its Community Empowerment Program, Tustin uses a participatory approach that engages men and boys as allies in the fight for gender equality. As a result, there has been a significant reduction in the prevalence of female genital cutting in the communities where Tustin works.

Similarly, in Mali, the NGO CARE has been working with men and boys to promote gender equality and end violence against women. Through its Engaging Men and Boys for Gender Equality program, CARE has been working with male leaders and role models in communities to promote positive attitudes towards gender equality and to challenge harmful gender norms. As a result of this work, there has been a significant increase in the number of men who support gender equality and are willing to take action to prevent violence against women.

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6 Eagly, A. H., & Wood, W. (2013). The nature–nurture debates: 25 years of challenges in understanding the psychology of gender. Perspectives on psychological science, 8(3), 340-357.

7 Heise, L. L., Kotsadam, A., & Germain, A. (2019). Gender-based violence. In International Encyclopedia of Public Health (Second Edition) (pp. 137-145). Elsevier

8 Kinshasa Declaration on Positive Masculinity (2021)

In Niger, the NGO Plan International has been working with men and boys to promote sexual and reproductive health and rights. Through its Promoting Rights in Schools program, Plan International has been working with male students to promote healthy relationships and prevent gender-based violence. The program also provides information on sexual and reproductive health, including contraception and HIV prevention. As a result of this work, male students in the program have reported increased knowledge and awareness of sexual and reproductive health issues.

Engaging men and boys in efforts to prevent violence against women and promote sexual and reproductive health can have a range of benefits, including improved health outcomes for women and girls, reduced rates of gender-based violence, and more equal and respectful relationships between men and women.

Session 2: Understanding the Needs and Perspectives of Men and Boys (30 minutes)

📑 Facilitator's Notes

The needs and perspectives of men and boys related to EVAWG and SRH&RR in selected West and Central African states vary based on cultural, religious, and socio-economic contexts. However, some common needs and perspectives include:

1. Access to accurate information: Men and boys need accurate and reliable information about SRH&RR and EVAWG to make informed decisions and take actions to promote gender equality and prevent violence against women and girls. Many men and boys lack knowledge about these issues due to limited education and cultural norms that discourage discussing sexuality and gender-based violence.

2. Empowerment to challenge harmful gender norms: Men and boys need support to challenge harmful gender norms and attitudes that perpetuate EVAWG and restrict women and girls' access to SRH&RR services. This can be achieved through education and awareness-raising programs that encourage men and boys to reflect on their own attitudes and behaviours towards women and girls.

3. Access to male-friendly SRH&RR services: Men and boys require access to male-friendly SRH&RR services that are designed to meet their specific needs and preferences. This includes services that are confidential, non-judgmental, and free from discrimination.

4. Support to become positive role models: Men and boys need support to become positive role models for their peers, families, and communities. This can be achieved by promoting positive masculinities that value gender equality, respect for women and girls, and non-violent communication.

Session 3: Overview of common barriers to men and boys' engagement and how to address them.

📑 Facilitator's Notes

Common barriers to men and boys' engagement in promoting EVAWG and SRH&RR include:

1. **Stigma and shame:** Men and boys may feel ashamed or stigmatized for discussing SRH&RR or EVAWG due to cultural norms and taboos that prohibit such conversations. Men and boys may fear being perceived as weak or less masculine by their fellow men. This leads to low levels of awareness and understanding of RR, SRH, EVAWG issues amongst men and boys. This limits their engagement and participation in efforts to prevent EVAWG and promote SRH and RR.

2. **Lack of male-friendly services:** Men and boys may be deterred from accessing SRH&RR services due to the lack of male-friendly services that meet their specific needs and preferences and harmful belief and attitudes towards co-parenting responsibilities and family planning. In most WCAR communities the responsibility of child rearing and family planning is socially and religiously bestowed upon women

> To address these barriers, it is essential to engage men and boys in activities that promote gender equality, prevent EVAWG, and promote SRH&RR. Examples of effective strategies include:
> 1. Working with traditional and religious leaders: Traditional and religious hold and wild a lot of power at different levels within communities. Most of this power can be tapped to influence social norms and attitude change, s Budget allocation, Policy, and implementation.
> 2. 2Mapping, tapping, and engaging with Male-only community dialogues spaces at different levels. These spaces tend to provide opportunities for combating harmful social norms and beliefs and toxic masculinity through awareness raising.
> 3. Mapping/ identifying, lobbying, and engaging, positive male role models and champions in different influential and strategic positions. This strategy has specifically been useful in influencing policy change and investments in SRH, EVAWG, RR and SRHR.   This would include men promoting positive masculinity, gender equality and in decision making.

Male health workers have a critical role to play in promoting SRHR, RR, and EVAWG, and their engagement is essential in efforts to achieve gender equality and reduce gender-based violence. Some of their roles include:

- **Providing accurate and comprehensive information:** Male health workers can provide accurate and comprehensive information on SRHR, RR, and EVAWG to men and boys in the community, promoting gender equality and healthy relationships.
- **Encouraging positive behaviour change:** Health workers can encourage men and boys to adopt positive behaviours', such as condom use and family planning, that promote SRHR and RR. They can also encourage men to become allies in the fight against EVAWG by promoting gender equality and challenging harmful gender norms including toxic masculinity, gender biases and harmful cultural practices.
- **Supporting survivors of violence:** Male health workers can provide support and care to survivors of violence, including providing medical treatment, counselling, and referrals to other support services.
- **Advocacy:** Male health workers can advocate for policies, budgets and programs/initiatives and actions that promote SRHR, RR, and EVAWG. They can work with other stakeholders, such as government officials, community leaders, and civil society organizations, to create an enabling environment for these issues.
- **Role modelling:** Male health workers can serve as positive role models for men and boys in the community by promoting respectful and non-violent behaviour towards women and girls and access and uptake of SRH information and commodities as well as participating in modelling the redistribution of care giving tasks/roles.

📑 **Facilitator's notes**

Examples of Male Engagement Initiatives

- **"Project Masa Masculine" in Niger:** This project aims to engage men and boys in promoting gender equality, preventing gender-based violence, and improving sexual and reproductive health. The project includes community mobilization, peer education, and behaviour change communication strategies to address harmful gender norms and promote positive masculinity. A key component of the project is the training of male leaders and role models in the community to become advocates for gender equality and positive change.

- **"Men for Gender Equality Now" in Mali:** This project focuses on engaging men and boys in promoting gender equality, preventing gender-based violence, and improving sexual and reproductive health. The project includes community dialogues, awareness-raising campaigns, and capacity building activities for male leaders and role models in the community. The project also provides counselling and support services for men and boys who have experienced or perpetrated gender-based violence.

- **"Men and Boys for Gender Equality" in Cameroon:** This project aims to engage men and boys in promoting gender equality and preventing gender-based violence. The project includes community

dialogues, awareness-raising campaigns, and capacity building activities for male leaders and role models in the community. The project also provides counselling and support services for men and boys who have experienced or perpetrated gender-based violence.

• **"The Men Engage Alliance" in Burkina Faso:** The Men Engage Alliance is a global network of organizations that work to engage men and boys in promoting gender equality and preventing violence against women. In Burkina Faso, the Men Engage Alliance works with community leaders, men's groups, and youth to promote gender-equitable attitudes and behaviours. The program has been successful in promoting women's rights and reducing the prevalence of violence against women.

Session 4: Exercise - Effective Strategies for Engaging Men and Boys, Traditional Leaders and Health Workers (60 minutes)

Mapping and Identifying Key Allies
• Participants will be divided into small groups.
• Each group**.**
    • Identify potential allies among men and boys, traditional leaders, and health workers.
    • Strategies for building relationships and partnerships with these key allies
    • Addressing barriers to engagement, including cultural and societal norms that may limit their involvement.
    • Communication strategies for engaging and collaborating with men and boys, traditional leaders, and health workers.
    • Capacity building and training opportunities to equip allies with the knowledge and skills needed to support SRHR and VAWG advocacy efforts.
    • Developing advocacy plans that include engagement strategies for men and boys, traditional leaders, and health workers.
    • Monitoring and evaluation strategies to measure the impact of the involvement of these key allies.
• Facilitators will provide guidance and feedback to each group.

Sample advocacy plan on the role of men and boys in perpetuating or preventing EVAWG and promoting SRH&RR:

Objective: To engage men and boys in preventing EVAWG and promoting SRH&RR in the community.

Target audience: Men and boys in the community.

Activities:
1. Mapping and identifying potential allies.
2. Conduct a needs assessment to identify the existing knowledge, attitudes, and practices of men and boys related to EVAWG and SRH, SRHR &RR.
3. Develop a training curriculum on the role of men and boys in preventing EVAWG and promoting SRH&RR.
4. Conduct training sessions for men and boys in the community, covering the following topics:
    • The prevalence and consequences of EVAWG
    • The importance of respecting women's rights
    • The link between gender-based violence and poor sexual and reproductive health outcomes
    • Positive masculinity and healthy relationships
    • Strategies for preventing EVAWG and promoting SRH&RR
5. Use participatory approaches such as role-playing, group discussions, and case studies to facilitate learning and encourage active engagement of men and boys.

6. Develop and disseminate information, education, and communication materials (posters, flyers, brochures, etc.) to reinforce the key messages on EVAWG and SRH&RR.
7. Create peer support groups for men and boys to share experiences, discuss challenges, and reinforce positive behaviour change.
8. Monitor and evaluate the training program's impact through follow-up assessments and feedback from participants and stakeholders.

Expected outcomes:
- Increased awareness among men and boys about the negative impacts of EVAWG on women's health and well-being.
- Improved attitudes and behaviours' towards women's rights and gender equality.
- Increased use of SRH&RR services by men and boys and their partners.
- Development of positive relationships and healthy coping strategies among men and boys.

Resources needed:
- Trained facilitators and program staff
- Training materials and resources
- Venue for training sessions
- Communication materials (posters, flyers, brochures, etc.)
- Evaluation tools and monitoring system.

Timeline: 6-12 months

Budget: The budget will depend on the scope and scale of the training program. It may include costs for staff salaries, training materials, venue rental, communication materials, and evaluation tools. A detailed budget will be developed during the planning phase.

Session 5: Group Presentations and Feedback (30 minutes)
- Each group will present their strategies to the larger group.
- Facilitators will provide feedback and suggestions for improvement.

Examples of effective engagement of men and boys in West and Central Africa states.

- **Guinea:** In Guinea, men are often the main decision-makers in households and communities, which can contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are efforts underway to engage men in promoting gender equality and ending violence against women. For example, the organization Tustin has implemented community-led programs that engage men in discussions about gender norms and promote positive behaviours around sexual and reproductive health.

- **Liberia:** In Liberia, traditional gender roles and patriarchal attitudes have contributed to high rates of gender-based violence and limited access to sexual and reproductive health services for women and girls. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization Profundo has implemented programs that work with boys and young men to challenge traditional gender norms and promote healthy relationships.

- **Mali:** In Mali, patriarchal attitudes and harmful gender norms contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization CARE Mali has implemented programs that work with men and boys to

promote positive attitudes around gender equality and support women's access to sexual and reproductive health services.

- **Niger:** In Niger, traditional gender roles and patriarchal attitudes contribute to high rates of gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization Engender Health has implemented programs that work with men and boys to promote positive attitudes around gender equality and support women's access to sexual and reproductive health services.

- **Cameroun:** In Cameroun, patriarchal attitudes and harmful gender norms contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization Profundo has implemented programs that work with men and boys to challenge traditional gender norms and promote healthy relationships.

- **Chad:** In Chad, traditional gender roles and patriarchal attitudes contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization UNFPA has implemented programs that work with men and boys to promote positive attitudes around gender equality and support women's access to sexual and reproductive health services.

- **Burkina Faso:** In Burkina Faso, patriarchal attitudes and harmful gender norms contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization Engender Health has implemented programs that work with men and boys to promote positive attitudes around gender equality and support women's access to sexual and reproductive health services.

- **Ivory Coast:** In Ivory Coast, patriarchal attitudes and harmful gender norms contribute to gender-based violence and limit women's access to sexual and reproductive health services. However, there are also efforts underway to engage men and boys in promoting gender equality and ending violence against women. For example, the organization UNFPA has implemented programs that work with men and boys to promote positive attitudes around gender equality and support women's access to sexual and reproductive health services.

- Another notable good practice is also the work being done under the Spotlight Initiative (EU/UN and partners in Mali, Niger, Nigeria) https://mptf.undp.org/project/00112285 also present.

2.5 Training Module 5: SRHR, RR & EVAWG in West and Central Africa: Strategies for General Advocacy

Title: Advocating for SRHR, RR & EVAWG in West and Central Africa: Strategies for Effective Advocacy.: This module will provide an overview of the key strategies and tactics for effective advocacy on Sexual reproductive health (SRH) sexual and reproductive health and rights (SRHR), reproductive rights (RR), and ending violence against women and girls (EVAWG) in West and Central Africa states. It will provide guidance on identifying advocacy spaces, building coalitions and partnerships, engaging stakeholders, and influencing policies and laws. It will also cover ways to overcome common challenges and barriers to advocacy.

Objectives:

1. Understand what advocacy is and its importance in advancing SRHR, RR & EVAWG in West and Central Africa states.
2. Learn key general advocacy strategies and tactics for engaging decision-makers and influencing poli-

cies, laws, budgets, commitments, and action plans.
3. Identify key stakeholders and partners for building coalitions to advance SRHR, RR & EVAWG.
4. Learn how to identify allies and opposition, and how to effectively engage with them.

Methodology: The learning module will use a combination of presentations, group discussions, and case studies to facilitate learning and knowledge sharing. The learning module will be conducted online using virtual communication tools.

Learning Materials:
- PowerPoint presentation on the importance of engaging men and boys as allies in EVAWG and SRH&RR
- Handout on effective strategies for engaging men and boys

Assessment: The learning module will be assessed based on the level of participation and engagement of the participants, the quality of the advocacy strategies developed by the groups, and the feedback provided by the facilitators

Session1: Introduction to Advocacy for SRHR, RR & EVAWG

📋 Facilitator's Notes

Advocacy: What it is?

UN Women defines advocacy as a deliberate process of influencing those who make decisions on policies, laws, and resource allocation. Advocacy involves collecting evidence and building support for an issue or cause to influence policy change. It can be used to promote women's rights and gender equality by influencing decision-makers at all levels of government and society.

Why advocacy is useful for advancing social causes.
- Advocacy efforts can raise awareness about the issues, mobilize communities to take action, and influence policies, and practices at the local, national, and international levels.

- By engaging with decision-makers and stakeholders, advocates can work to promote policies and programs that promote gender equality, reproductive health and rights, and ending violence against women and girls.

- Advocacy efforts can lead to increased funding for programs and services that support SRHR, reproductive rights, and EVAWG, which can have a significant impact on the lives of individuals and communities.

Therefore, it is important to analyse your context and determine what advocacy strategy to deploy and when to do so. It is worth noting that advocacy strategies are not cast in stone and are subject to review to align to change changes in context such as shifts in political ideologies and priorities etc.

Session 2: Identifying Advocacy Spaces and Mapping the advocacy environment.

📋 Facilitator's Notes

- To effectively advocate for change, it is important to map the advocacy environment and identify key stakeholders and decision makers. This includes understanding the political and social contexts in which advocacy efforts will take place. This can be done through research, needs assessments, and community consultations.

- In order to address the challenges facing SRHR, RR, and EVAWG, advocacy efforts must focus on increasing awareness, changing policies and legal frameworks, and increasing funding and resources. Advocacy efforts should also prioritize engaging men and boys as allies in promoting gender equality and addressing gender-based violence.

- Overall, advocacy is a critical component in advancing SRHR, RR, and EVAWG in West and Central African states. By engaging key stakeholders, raising awareness, and advocating for change, advocates can drive progress towards greater gender equality and improved access to sexual and reproductive health services.

Examples of advocacy spaces in West and Central Africa
Advocacy spaces for SRHR, RR, and EVAWG in West and Central Africa can take various forms, such as civil society organizations, networks, coalitions, and movements. It is important to undertake an ally and opposition analysis in each context and at every level. Identifying allies and opposition can vary depending on the country and context. Allies are individuals and or groups/ organizations and or institutions that similar values, missions, vision, and goals and believe in the same cause, agenda and outcomes, while the opposition are the people, groups, institutions organizations that do not believe in your agenda or cause and will loudly or quietly oppose and or sabotage. Allies can include governmental bodies, international organizations, and other civil society organizations that share similar values and goals. Opposition can come from conservative religious groups, traditional patriarchal values, or other organizations that may not prioritize women's rights or gender equality. Building alliances with other organizations and advocating for policy change can help address opposition and advance SRHR, RR, and EVAWG. It is worth noting that advocacy efforts can be led by organized groups such as Civil Society Organizations, National thematic organizations IO) and "ad hoc" groups such as social movements and or citizens movements such as Dafa Doy in Senegal). Here are some examples of such spaces in selected countries:

1. **Cameroon:**
   - Association for the Promotion of Women and the Development of the Family (APRODEF)
   - Centre for Human Rights and Democracy in Africa (CHRDA)
   - Alliance for Women and Girls' Rights (AFED)
   - Allies: National Commission on Human Rights and Freedoms, UN Women
   - Opposition: Conservative religious groups, traditional patriarchal values

2. **Mali:**
   - Association for Women's Promotion and Endogenous Development (APEFE)
   - Association for the Promotion of Girls' Education in Mali (APEM)
   - Network of Associations and NGOs for the Promotion of Women's Rights in Mali (RAFEP)
   - Allies: Ministry of Women, Children, and the Family, UNFPA Mali
   - Opposition: Conservative religious groups, traditional patriarchal values

3. **Côte d'Ivoire:**
   - Federation of Women's Associations of Côte d'Ivoire (FAFCI)
   - Coalition of Ivorian Women's Associations for the Fight against AIDS (COSCI)
   - Association for the Development and Promotion of Women's Initiatives (ADEPI)
   - Allies: Ministry of Women, Family and Children, UN Women
   - Opposition: Conservative religious groups, traditional patriarchal values

Session 3: Building Coalitions and Partnerships

📝Facilitator's notes
- Building coalitions and partnerships is a crucial aspect of advancing Sexual and Reproductive Health and Rights (SRHR), Rights to Reproductive Health (RR) and Ending Violence Against Women and Girls (EVAWG) agendas.
- Partnerships and coalitions are built on shared goals and values. To build a successful partnership, it's important to identify areas where your goals align with other organizations and stakeholders.

- Partnerships and coalitions demonstrate the importance of collaboration and coordination in advancing SRHR, RR, and EVAWG agendas in West and Central Africa. By working together, organizations can leverage their resources and expertise to effect positive change in the region.

- Building coalitions and partnerships to advance Sexual and Reproductive Health and Rights (SRHR), Rights to Reproductive Health (RR) and Ending Violence Against Women and Girls (EVAWG) agendas in West and Central Africa requires a tailored approach that considers the unique challenges and cultural contexts of the region.

Examples of successful coalitions and partnerships in West and Central Africa States

📋 **Facilitator's Notes**

- **The West Africa Women's Association (WAWA):** This coalition was established in 2015 and comprises women's organizations from across West Africa. Its mission is to promote women's rights and gender equality, including access to SRHR services. WAWA has been successful in advocating for the adoption of laws and policies that protect women's rights, such as the adoption of the ECOWAS Gender Policy in 2015.

- **The Ouagadougou Partnership:** This partnership was established in 2011 and includes 9 francophone West African countries. Its goal is to increase access to modern contraceptives and family planning services for women and girls. The partnership has been successful in mobilizing resources and coordinating efforts to improve access to family planning services, resulting in a significant increase in contraceptive prevalence rates in the region.

- **The Men Engage Alliance:** This coalition includes organizations from across the globe, including several from West and Central Africa. Its mission is to engage men and boys in promoting gender equality and ending gender-based violence. In West and Central Africa, the Men Engage Alliance has been successful in promoting positive masculinities and engaging men and boys in efforts to end violence against women and girls.

- **The African Women's Development and Communication Network (FEMNET):** This coalition was established in 1988 and includes women's organizations from across the continent, including several from West and Central Africa. FEMNET's mission is to promote women's rights and gender equality in Africa, including access to SRHR services. FEMNET has been successful in advocating for the adoption of laws and policies that protect women's rights, such as the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa.

- Other examples in the WACA region include RESPEECO and COPAC.

Human rights-based advocacy

- Anchored upon a non-discriminatory process that reflects human rights values and, therefore, it becomes an objective in and of itself. Furthermore, a human rights-based advocacy aims at ensuring that national laws and policies comply with international human rights instruments.

- State Membership of International and regional organizations places obligations on national governments to enforce laws on violence against women and girls. There are two general categories of mechanisms: bodies created pursuant to an international treaty or convention, and bodies that exist independently of such treaties and conventions. National compliance with international human rights treaties is monitored by United Nations committees. Nations that are parties to these treaties are required to submit periodic reports to these committees.

- At the regional level, the strategies closely resemble the work undertaken at the international level requiring compliance by members of the African Union. The Banjul Charter requires States Parties to submit reports to the African Commission every two years to document compliance with human rights

norms. Also, the African Commission may receive and review communications from other sources, including victims of violations or anyone acting on behalf of such victims. the African Protocol on Women's Rights, obligates state parties to the protocol to ensure the implementation of the protocol at the national level and requiring submission of periodic reports to the African Commission on their compliance with the protocol

Session 4: Developing Advocacy Strategies

📋 **Facilitator's Notes**

- Setting advocacy goals and objectives: Advocacy goals and objectives should be specific, measurable, achievable, relevant, and time-bound (SMART) and well linked to the strategy which could either be political (Lobbying parliamentarians) or citizen or social (raising awareness for citizen to advocate for a cause so government feels pressured to take any measure). By setting clear goals and objectives, developing effective messaging and communication strategies, and mobilizing resources and support, advocates can effect positive change in the region.

- To set effective advocacy goals and objectives, it's important to conduct a thorough analysis of the problem and the context, identify key stakeholders, and determine the most effective strategies for achieving the desired outcomes.

- Messaging and communication strategies should be tailored to the target audience and the specific context. Effective messaging should be clear, concise, and compelling, and should resonate with the values and beliefs of the target audience. Communication strategies may include storytelling and use of social media such as launching social media campaigns, community engagement, media outreach, and advocacy events.

- Mobilizing resources and support requires building strong partnerships and coalitions, identifying potential allies, and engaging stakeholders at all levels. Effective mobilization strategies may include donor outreach, fundraising events, advocacy training and capacity building, and building networks of like-minded organizations and individuals.

- SRHR and VAWG are critical issues that require advocacy efforts to effect change and create a better world for all. To achieve these goals, advocates may employ different strategies, including political and social strategies, to influence government policies and public opinion.

- Political strategy involves engaging with policymakers and legislators to create policies and laws that promote SRHR and prevent VAWG. This approach includes lobbying in parliaments and engaging with political leaders and government officials. For example, advocates may lobby for the allocation of more funds to programs that promote SRHR and VAWG prevention, the inclusion of SRHR and VAWG prevention in national development plans, and the passing of laws that protect women and girls from violence. This strategy requires advocates to have a good understanding of the political landscape and to be able to engage with policymakers effectively.

- On the other hand, social or citizen-based strategy involves raising awareness among the public to mobilize support for SRHR and VAWG prevention efforts. This approach involves engaging with citizens to advocate for these issues and exert pressure on governments to act. This strategy may include community mobilization, social media campaigns, and public demonstrations, among others. For example, advocates may organize public awareness campaigns to highlight the impact of VAWG and the importance of SRHR. By raising public awareness, advocates can create a groundswell of support that can influence government policy.

In terms of specific advocacy goals and objectives, advocates may set out the following:

SRHR Advocacy Goals:
- To promote access to comprehensive SRHR services for all individuals, including access to contraception, maternal health services, and safe abortion services.
- To eliminate gender-based discrimination and harmful gender stereotypes that affect access to SRHR services and education.
- To promote comprehensive sexuality education in schools and other settings.
- To address the social and cultural barriers that prevent women and girls from accessing SRHR services.

SRHR Advocacy Objectives:
- To lobby for the allocation of more funds to SRHR programs at the national and international levels.
- To advocate for policies that promote SRHR, such as the provision of free or low-cost contraceptives and maternal health services.
- To promote gender-sensitive healthcare that addresses the unique needs of women and girls.
- To promote comprehensive sexuality education in schools and other settings.

VAWG Advocacy Goals:
- To eliminate all forms of violence against women and girls.
- To promote laws and policies that protect women and girls from violence.
- To promote awareness of the impact of VAWG on individuals, families, and communities.
- To promote gender equality and empowerment as a means of preventing VAWG.

VAWG Advocacy Objectives:
- To lobby for the adoption and implementation of laws and policies that protect women and girls from violence.
- To promote gender-sensitive justice systems that address VAWG effectively.
- To promote awareness of the causes and consequences of VAWG among policymakers, the media, and the general public.
- To promote the active involvement of men and boys in preventing VAWG

Examples of effective advocacy strategies in selected West and Central Africa states

📑 Facilitator's notes
- In Senegal, advocacy efforts led to the adoption of a law in 2019 that criminalizes child marriage and increases the legal age of marriage to 18 years old. The advocacy strategy included engaging religious leaders and community elders, partnering with civil society organizations, and leveraging media outreach to raise public awareness of the harmful effects of child marriage.

- In Burkina Faso, the Burkina Yirwa coalition advocates for the rights of women and girls, including access to SRHR services. The coalition has been successful in mobilizing support from religious leaders and engaging men and boys in efforts to promote gender equality and end gender-based violence.

Session 5: Engaging Stakeholders

📑 Facilitator's Notes
- It is key to define who a stakeholder is and the types of stakeholders that exist at different levels, women and girls remain key stakeholders.

- According to the International Organization for Standardization (ISO) stakeholders are "individuals or organizations that can affect, be affected by, or perceive themselves to be affected by a decision

or activity. Thus, engaging stakeholders, decision-makers, and influencers: Engaging stakeholders, decision-makers, and influencers involves building relationships, establishing trust, and identifying common ground. Effective general engagement strategies may include conducting research and analysis, organizing advocacy events, leveraging media outreach, and building coalitions and partnerships. Key stakeholders and influencers may include government officials, religious leaders, traditional leaders, healthcare providers, and civil society organizations.

- Mobilizing communities and grassroots organizations: Mobilizing communities and grassroots organizations is important in building support for SRHR, RR, and EVAWG agendas. Mobilization strategies may include community organizing, engaging local leaders and influencers, leveraging social media and other communication tools, and organizing awareness-raising events. Mobilization efforts should be tailored to the specific context and culture of the communities being targeted.

- In addition to engaging stakeholders and mobilizing communities, media and public engagement is also critical in advancing these agendas. Effective media and public engagement strategies may include developing compelling messaging, leveraging social media and other communication tools, and organizing awareness-raising events.

- Many a times or sometimes advocacy efforts are prone to encountering resistance at different levels or spaces. It is therefore important to devise strategies of overcoming resistance and ensuring effective engagement. Some of the strategies of overcoming resistance include engaging in community dialogue to clarify and identify points of resistance, leaders of resistance and solutions to resistance. Cultural mediation is another strategy for overcoming resistance. Many at times it is key to keep monitoring the opposition and maintaining the advocacy momentum such that it doesn't lose impetus and or the efforts persist. It is worth noting that social change takes time. We can only accelerate the pace by remaining consistent and strategic.

Examples of successful stakeholder engagement in West and Central Africa states

📋**Facilitator's Notes**

- In Burkina Faso, traditional leaders and community members have partnered with civil society organizations to promote gender equality and end harmful practices such as female genital mutilation and child marriage. The Burkina Yirwa coalition has been successful in engaging traditional leaders in advocacy efforts and building community support for gender equality.

- In Mali, the government, civil society organizations, and religious leaders have partnered to promote maternal health and family planning. The government has worked with religious leaders to promote messages of reproductive health and family planning, while civil society organizations have organized community events and campaigns to raise awareness of the importance of maternal health.

- In Cote d'Ivoire, the government, civil society organizations, and international partners have worked together to combat gender-based violence. The government has established legal frameworks to protect women and girls from violence, while civil society organizations have organized awareness-raising campaigns and provided support to survivors. International partners have provided technical and financial support to these efforts.

Session 6: Influencing Policies and Laws

📋**Facilitator's notes**

- Influencing policies and laws is critical to advancing Sexual and Reproductive Health and Rights (SRHR), Rights to Reproductive Health (RR), and Ending Violence Against Women and Girls (EVAWG) agendas in West and Central Africa. Here are some keyways to engage in policy and legislative processes in the

region:

- Understanding policy and legal frameworks: It is essential to have a clear understanding of the policy and legal frameworks that impact SRHR, RR, and EVAWG in each country. This includes understanding national laws, international treaties and conventions, and regional agreements that relate to these issues. This understanding will help advocates to identify gaps in policies and laws and develop targeted advocacy strategies.
- Developing policy and legal analysis: Policy and legal analysis involves examining laws, regulations, and policies to identify gaps, strengths, and weaknesses. It helps advocates to develop evidence-based arguments to support their advocacy efforts. Policy and legal analysis can also help advocates to identify potential allies and opponents and develop targeted advocacy strategies.
- Engaging in legislative and policy processes: Advocates can engage in legislative and policy processes by submitting written comments, participating in public hearings, and meeting with policymakers and legislators. These engagements can help advocates to build relationships with decision-makers and influencers and to influence the development of policies and laws.

Examples of effective advocacy strategies in select West and Central African states include:

- In Cameroon, advocates have worked to improve access to family planning services by engaging with policymakers and healthcare providers. The advocacy efforts involved developing evidence-based arguments and building partnerships with healthcare providers and civil society organizations.
- In Liberia, advocates have successfully engaged in the policy process to ensure the passage of the Domestic Violence Bill, which criminalizes domestic violence and provides legal protection for survivors. The advocacy efforts involved engaging policymakers and building public support for the bill.
- In Sierra Leone, advocates have successfully engaged in the policy process to ensure the passage of the Domestic Violence Act, which criminalizes domestic violence and provides legal protection for survivors.

Session 7: Overcoming Barriers and Challenges

📋**Facilitator's notes**

Common barriers and challenges to advocacy

- Socio-cultural norms and beliefs: Sociocultural norms and beliefs often perpetuate harmful practices such as child marriage and female genital mutilation, making it difficult to advocate for SRHR, RR, and EVAWG issues.

- Limited access to information and resources: Limited access to information and resources can limit the ability of advocates to build their knowledge and skills and to effectively engage in advocacy efforts.

- Limited funding for advocacy: Limited funding for advocacy can limit the resources available to advocates, making it difficult to sustain advocacy efforts over time.

Strategies for overcoming barriers and challenges:

- Build coalitions and partnerships: Building coalitions and partnerships with like-minded organizations can help advocates to leverage resources and share knowledge and skills.

- Use evidence-based advocacy: Using evidence-based advocacy can help advocates to develop strong arguments and to persuade decision-makers to support SRHR, RR, and EVAWG issues.

- Engage with religious and community leaders: Engaging with religious and community leaders can help advocates to shift sociocultural norms and beliefs and to build support for SRHR, RR, and EVAWG issues.

Examples of successful advocacy in the face of barriers and challenges:

- In Mali, advocates have worked to address the issue of early marriage by engaging with religious leaders and communities. The advocacy efforts involved building partnerships with local organizations and developing messaging that emphasized the negative impact of early marriage on girls' health and education.

- In Burkina Faso, advocates have worked to increase access to family planning services by engaging with health care providers and policymakers. The advocacy efforts involved developing evidence-based arguments and building partnerships with health care providers and civil society organizations.

- In Guinea, advocates have worked to address the issue of female genital mutilation by engaging with community leaders and building awareness about the harmful effects of the practice. The advocacy efforts involved developing messaging that emphasized the importance of women's health and education and building partnerships with local organizations.

2.6 Training Module 6: SRHR, RR and EVAWG Budget Advocacy Strategies

Title: SRHR, RR and EVAWG Budget Advocacy. Budget advocacy is a crucial tool for advancing Sexual and Reproductive Health and Rights (SRHR), Sexual Reproductive Health (SRH), Rights and Reproductive (RR), and ending violence against women and girls (EVAWG). Advocacy for increased funding for these areas helps to ensure that adequate resources are allocated to support programming and policies that will improve the lives of women and girls. Key, to this is understanding Gender Responsive Budgeting or Gender Budgets. This module will provide an overview of budget advocacy and Gender Responsive Budgeting/gender Budgeting importance in promoting SRHR, RR, and EVAWG. The training session provides an overview of GRB and its core goals, objectives, and categories of gender budgets. The session also explains the rationale for GRB, GRB requirements, enabling environment, and GRB frameworks and tools.

Objectives:

1. Understand the importance of budget advocacy for promoting SRHR, RR, and EVAWG.
2. Learn about the budget advocacy process and key stakeholders.
3. Identify strategies for effective budget advocacy.
4. Understand the challenges and opportunities in budget advocacy for SRHR, RR, and EVAWG.

Session 1: Overview of Budget Advocacy

📋**Facilitator's notes**

- Budget advocacy is the process of influencing resource allocation decisions made by governments or other stakeholders to ensure adequate funding for programs and policies that support a particular cause or issue.

- Budget advocacy is an important tool for advancing SRHR, RR, and EVAWG in West and Central African states. By advocating for increased funding and effective use of resources, advocates can help ensure that these issues are prioritized and adequately addressed within the larger framework of national development.

- In the context of SRHR, RR, and EVAWG, budget advocacy refers to efforts aimed at securing and increasing funding for programs and policies that promote sexual and reproductive health and rights, reduce sexual and gender-based violence, and advance gender equality.

- Budget advocacy is crucial for SRHR, RR, and EVAWG in West and Central African states for several reasons. Firstly, budget advocacy can help ensure that these issues are adequately addressed within the larger framework of national development plans and strategies. Secondly, it can help ensure that

sufficient funding is allocated for programs and policies that aim to improve the lives of women and girls, reduce gender-based violence, and promote sexual and reproductive health and rights. Finally, budget advocacy can help hold governments accountable for their commitments to address these issues and ensure that resources are being used effectively to achieve tangible results.

- The Abuja declaration on Health capped at 15% of African government's budget to be allocated to health for purchase of services and commodities. There is an emerging push for the practice of 3-5% budgets to be for gender.

Examples:

- Examples of the benefits of budget advocacy for SRHR, RR, and EVAWG in selected West and Central African states include:
- In Mali, budget advocacy efforts by civil society organizations led to increased funding for maternal and child health programs. This led to a reduction in maternal mortality rates and improved access to healthcare services for women and children.
- In Burkina Faso, budget advocacy efforts by women's rights organizations led to the inclusion of funding for gender-based violence prevention programs in the national budget. This led to the establishment of a national hotline for survivors of gender-based violence and the creation of community-based networks to prevent violence against women.

Session 2: The Budget Advocacy Process

📝 Facilitator's notes

SRHR, RR and EVAWG budget advocacy is a critical process for ensuring that governments allocate adequate resources to programs and policies that promote these issues in West and Central African states. The following is a summary of the budget advocacy process, key stakeholders, and tools that can be used to facilitate the process:

1. **Steps in the Budget Advocacy Process:**
   - **Identify the advocacy issue:** This involves identifying the specific issue or policy that needs to be addressed, such as increasing funding for family planning programs.

   - **Conduct research:** This involves gathering data and evidence to support the advocacy issue and build a strong case for why it is important.

   - **Develop an advocacy strategy:** This involves developing a clear plan for how to advocate for the issue, including identifying target audiences, messages, and tactics.

   - **Build alliances:** This involves identifying and engaging key stakeholders, such as civil society organizations, policymakers, and media outlets, to build support for the issue.

   - **Monitor the budget process:** This involves tracking the budget process to ensure that the issue is being considered and that adequate resources are being allocated.

   - **Evaluate the advocacy efforts:** This involves assessing the impact of the advocacy efforts and identifying areas for improvement.

2. **Key Stakeholders in the Budget Advocacy Process:**
   - **Policymakers:** Policymakers have the power to allocate resources and make decisions that impact SRHR, RR, and EVAWG programs and policies
   - **Civil society organizations:** These organizations play a critical role in advocating for SRHR, RR, and EVAWG issues and mobilizing communities to support the cause.
   - **Media outlets:** The media can help raise awareness of SRHR, RR, and EVAWG issues and build public

support for these causes.

- **Donors:** Donors can provide funding and support to civil society organizations and other stakeholders to advance SRHR, RR, and EVAWG issues.

3. **Tools for Budget Advocacy:**

- **Budget analysis:** This involves analysing the government budget to identify areas where funding can be increased or redirected to support SRHR, RR, and EVAWG programs and policies. It is key that during budget analysis one looks at budget commitments, allocation, actual disbursement, and expenditure as well as budget audit reports. In budget analysis the aim is to look at the trends in allocations, disbursement and expenditure for Health and Gender commitments and priorities. It's therefore important that CSOs and WROs engage with budget development processes at country level with the aim of influencing and advocating for adherence to commitments and increased allocations to health and gender budgets.

- **Policy briefs:** These are short, targeted documents that summarize key information and arguments in support of the advocacy issue.

- **Policy and or budget blogs:** These are short, targeted communication documents that summarize key information and arguments in support of the advocacy issue. They are normally published on websites and on social media.

- **Advocacy campaigns:** These are coordinated efforts to raise awareness and build support for the advocacy issue, such as social media campaigns or community mobilization events.

- **Lobbying:** This involves directly engaging policymakers to advocate for the issue and build support for the cause.

Session 3: Gender Responsive Budgeting/Gender Budgets

📋 Facilitator's notes

- Gender-Responsive Budgeting (GRB), which is a process of conceiving, planning, approving, executing, monitoring, analysing, and auditing budgets in a gender-sensitive way. GRB is an essential tool for promoting gender equality and advancing women's human rights. GRB is a tool that ensures that gender perspectives are integrated into all stages of the budget process and promotes transparency and accountability of the gender impacts of government budgets.

- GRB is not a separate budget for women and men, nor does it divide the budget equally between women and men. Instead, it involves analysing the actual expenditure and revenue on women and girls/men and boys.

- **Rationale for GRB:** The core rationale for GRB is to promote gender equality and advance women's human rights. It helps to alleviate poverty more effectively, accelerate the pace towards ending all forms of violence against women, men, girls, and boys as well as children, promote good health at household level and enhance economic efficiency. GRB helps to monitor the achievement of policy goals, promote good governance, and enhance accountability and transparency. By analysing the actual expenditure and revenue on women and girls/men and boys, GRB helps to identify the gaps between policy and budget allocations.

- **Core Goals of GRB:** The core goals of GRB are to raise awareness of gender issues in budgets and programs, promote transparency and accountability of the gender impacts of government budgets, change/adjust programs, and budgets to promote gender equality.

- **Objectives of GRB:** The objectives of GRB are to raise awareness of the gendered impact of policies and corresponding budget allocations, highlight the gap between policy and budget allocations, make

government and communities accountable to gender equality, and bring about changes to policies and budgets that promote gender equality.

- **Categories of Gender Budgets:** There are three categories of gender budgets:
- **Women-specific targeted expenditures:** Resources allocated for programs that specifically target women. More often under affirmative action programs and or projects
- **Equal employment opportunity expenditures:** Resources allocated to affirmative action to promote employment of women and men in equal numbers, equal representation within management posts, and equal pay.
- **Mainstream expenditures:** The bulk of the remaining expenditures not covered by the first two categories and considered in terms of their impact on gender equality.
- GRB Requirements include gender knowledge, budget knowledge, issue/sector-specific knowledge.
- GRB Enabling Environment includes access to the budget, availability of gender-disaggregated data, awareness of the need for/benefits of GRB, political will, citizen support and clear objectives, and adequate resources.
- **GRB Frameworks and Tools:** There are several frameworks and tools for GRB, including:
- **Rhonda Sharp's framework for Gender Analysis of Expenditures:** Gender-specific allocations: These are allocations specifically targeting women and girls or men and boys.
- **Mainstream allocations:** Mainstream allocations need to be examined for their gendered impacts.
- **Equal opportunity employment allocations:** Such allocations are intended to promote gender equality in the public service.
- **Challenges:** Effective implementation, conflict between civil-customary laws, instability, and backlash against gender equality are all big challenges in the region for effective legal frameworks.

Session 4: Group Exercise

- How would you classify your country's budget?
- In your opinion, what is the impact of your country's budget on the existing pattern of gender differences and inequalities?

3.0 CONCLUSION & NEXT STEPS

3.0 CONCLUSION AND NEXT STEPS (20 MINUTES)

> 📋 **Facilitator's Notes**
>
> - This training manual has highlighted the importance of advocacy as a tool for change, and the strategies that can be used to promote SRHR, RR, and EVAWG, including engaging with decision-makers, building alliances, and using evidence-based advocacy.
>
> - One of the key takeaways from this training manual is that advocacy efforts are grounded in feminist and Gender Equality and Women Empowerment principles as well as human rights-based approaches. The main focus being empowering marginalized groups, including women and girls, adolescents, and people living with disabilities, among others. It is also important to engage men and boys in advocacy efforts to address harmful gender norms and promote gender equality.
>
> - Another important takeaway is the role of budget advocacy in promoting SRHR, RR, and EVAWG. Advocating for increased funding for health services and programs that promote SRHR, RR, and EVAWG is crucial for ensuring that these issues remain a priority on the policy agenda.
>
> - Furthermore, this training manual has emphasized the importance of building strong partnerships and alliances to strengthen advocacy efforts. Identifying allies and understanding opposition are key steps in building effective coalitions.
>
> - Finally, it is important to recognize the challenges and barriers that exist in West and Central Africa in addressing SRHR, RR, and EVAWG issues. These include legal and policy barriers, cultural norms and practices, limited access to information and services, and social and economic inequality. However, by using evidence-based advocacy strategies, building strong partnerships, and engaging with decision-makers, progress can be made to address these issues and promote the health and well-being of all individuals and communities in the region.

POST-TRAINING ASSESSMENT

Please take a few minutes to answer the following questions after the training. This assessment is designed to help us understand the impact of the training on your knowledge and skills related to Sexual and Reproductive Health and Rights (SRHR), Reproductive Rights (RR), and Ending Violence Against Women and Girls (EVAWG) Policy and Budget Advocacy in West and Central Africa Region States.

1. **How would you rate your overall satisfaction with the training?**
   a) Very satisfied
   b) Somewhat satisfied
   c) Neutral
   d) Somewhat dissatisfied
   e) Very dissatisfied

2. **Did the training meet your expectations? If not, what was missing or what could have been improved?**
   a) Yes, it exceeded my expectations
   b) Yes, it met my expectations
   c) No, more hands-on activities were needed
   d) No, more case studies/examples were needed
   e) No, more interaction with trainers was needed

3. **What were some of the most valuable aspects of the training for you?**
   a) Learning about policy and budget advocacy strategies
   b) Gaining new knowledge on SRHR, RR, and EVAWG
   c) Learning about the role of men and boys, traditional leaders, and health workers in advocacy efforts
   d) Networking with other advocates and professionals

4. **What new knowledge or skills did you gain from the training?**
   a) Understanding of policy and budget advocacy strategies
   b) Understanding of legal and policy frameworks related to SRHR and EVAWG
   c) Knowledge of regional and international instruments, commitments, and action plans related to SRHR and EVAWG
   d) Knowledge of successful advocacy efforts in the region

5. **Were the training materials and resources helpful and relevant to your learning needs?**
   a) Very helpful and relevant
   b) Somewhat helpful and relevant
   c) Neutral
   d) Somewhat unhelpful and irrelevant
   e) Very unhelpful and irrelevant

6. **Were the trainers knowledgeable, effective, and engaging?**
   a) Very knowledgeable, effective, and engaging
   b) Somewhat knowledgeable, effective, and engaging
   c) Neutral
   d) Somewhat unknowledgeable, ineffective, and unengaging
   e) Very unknowledgeable, ineffective, and unengaging

7. **Did the training cover all the topics and modules as advertised?**
    a) Yes, all topics and modules were covered.
    b) Yes, but some topics and modules were not covered in depth.
    c) No, some topics and modules were not covered.
    d) No, the training covered more topics and modules than advertised.

8. **Were there any topics or modules that you found more challenging or less interesting than others?**
    a) Yes, more challenging
    b) Yes, less interesting
    c) No, all topics and modules were equally challenging and interesting.
    d) N/A, some topics and modules were not covered.

9. **How do you plan to apply the knowledge and skills you gained from the training in your work or advocacy efforts related to SRHR and EVAWG?**
    a) Develop new advocacy strategies.
    b) Improve existing advocacy strategies.
    c) Use new knowledge to influence policy and budget decisions.
    d) Share new knowledge with colleagues and partners

10. **Do you have any suggestions or feedback for improving future training on SRHR, RR, and EVAWG Policy and Budget Advocacy in West and Central Africa Region States?**
    a) Provide more hands-on activities and case studies/examples.
    b) Increase interaction with trainers
    c) Provide more practical tools and resources.
    d) Cover fewer topics and modules in more depth

Thank you for taking the time to complete this assessment. Your feedback is important to us and will help us improve the quality and effectiveness of future trainings.

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ANNEX 1: SDG INDICATORS

- SDG 1 aims to end poverty in all its forms and dimensions, and it includes targets such as eradicating extreme poverty, reducing the proportion of people living below the poverty line, implementing social protection systems, and ensuring equal rights to economic resources and access to basic services.
    1. Proportion of population below the international poverty line, by sex, age, employment status, and geographic location (urban/rural)
    2. Proportion of population living below the national poverty line, by sex, age, employment status, and geographic location (urban/rural)
    3. Measures of income inequality, such as the Gini coefficient
    4. Number of people covered by social protection systems, by type of program.
    5. Proportion of the population with access to basic services such as water, sanitation, electricity, and housing
    6. Proportion of people who are food insecure or malnourished, by age and sex.
    7. Proportion of youth not in education, employment, or training (NEET)
    8. Economic growth rate, particularly in the poorest countries
    9. Financial inclusion indicators, such as the proportion of adults with bank accounts and access to credit
- SDG 3: Ensure healthy lives and promote well-being for all at all ages, including targets to reduce maternal mortality and ensure universal access to sexual and reproductive health services.
- SDG 3: Ensure healthy lives and promote well-being for all at all ages.
- Maternal mortality ratio
- Proportion of births attended by skilled health personnel.
- Contraceptive prevalence rate
- Adolescent birth rate
- HIV prevalence among key populations
- SDG 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.
- Proportion of schools with access to safe drinking water and sanitation facilities
- Proportion of children under 5 years' old who are developmentally on track.
- Proportion of adolescents and youth who have relevant information and skills for employment, decent work, and entrepreneurship.
- Percentage of population by sex, age, and persons with disabilities who have basic literacy and numeracy skills.
- SDG 5: Achieve gender equality and empower all women and girls.
- Proportion of women and girls subjected to physical and/or sexual violence by a current or former intimate partner in the previous 12 months.
- Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months.
- Proportion of ever-partnered women and girls aged 15 years and older subjected to psychological violence by a current or former intimate partner in the previous 12 months.

- Proportion of women aged 20-24 years who were married or in a union before age 18 and before age 15.

- SDG 10: Reduce inequality within and among countries.

- Gini coefficient (measure of income inequality)

- Proportion of the population living below the national poverty line, by sex and age

- Proportion of people who believe decision-making power over their lives has improved.

- Percentage of women and girls aged 15 years and older subjected to sexual harassment or violence in the previous 12 months.

- SDG 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all, and build effective, accountable, and inclusive institutions at all levels.

- Proportion of population who feel safe walking alone in the area they live in, during the day and at night.

- Number of victims of intentional homicide per 100,000 populations, by sex and age

- Proportion of persons who had at least one contact with a public official and who paid a bribe to a public official or were asked for a bribe by those public officials, during the previous 12 months.

- Proportion of women who experienced physical and/or sexual violence by an intimate partner in the previous 12 months, by form of violence and by age.

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