



# MALE ENGAGEMENT

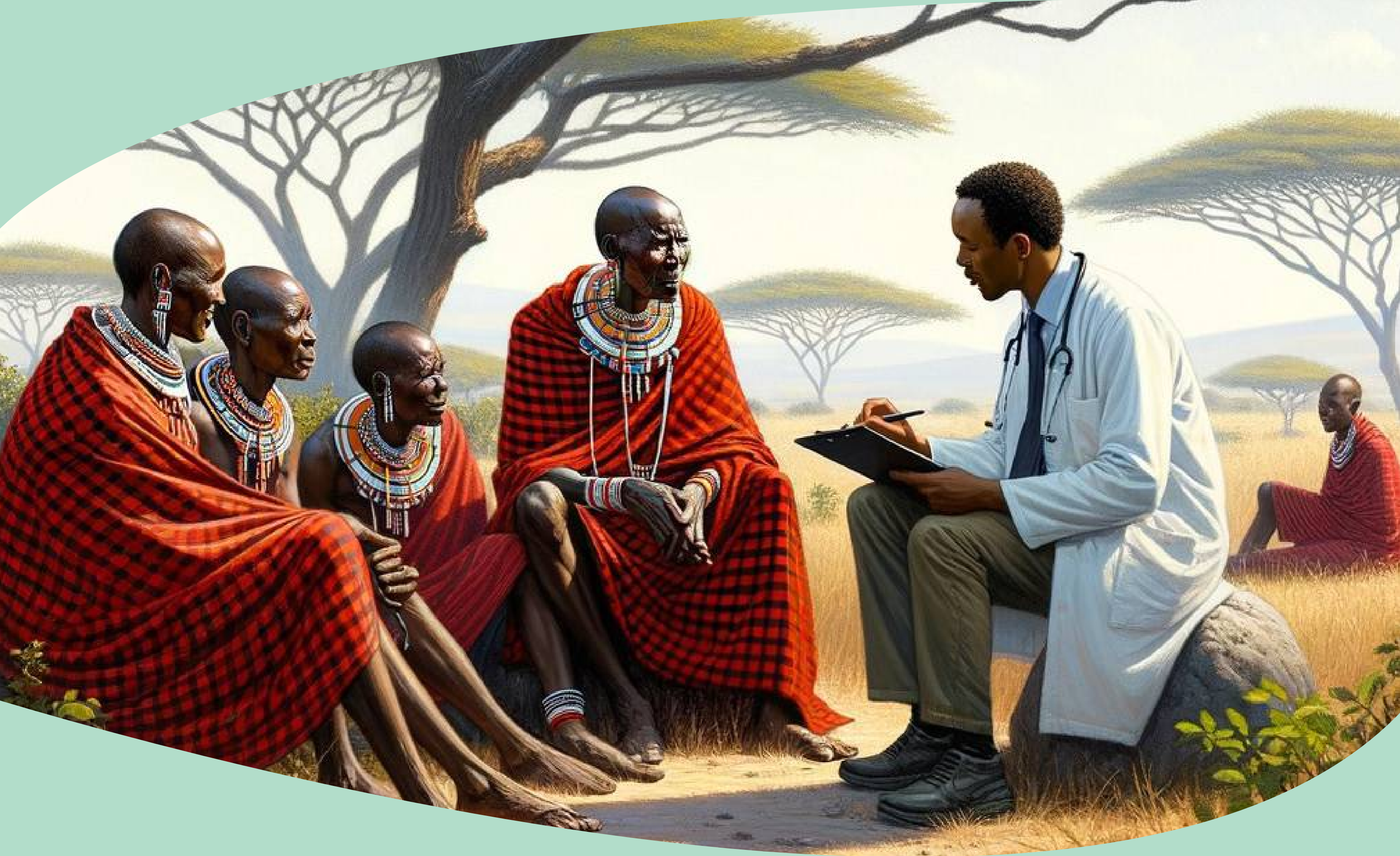
SESSION  
GUIDE



NEW PARTNERSHIPS INITIATIVE  
**EXPAND**

*New Partners for Better Health*





Increasing access to reproductive and maternal health services, while supporting communities to conserve their natural resources.

Produced by The New Partnerships Initiative (NPI) Expanding Health Partnerships - NPI EXPAND Project with support from the American people through the U.S. Agency for International Development (USAID)

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## **List of Acronyms and Abbreviations**

<b>ANC</b>	Antenatal Clinic
<b>CHVs</b>	Community Health Volunteers
<b>FGM</b>	Female Genital Mutilation
<b>FP</b>	Family Planning
<b>FANC</b>	Focused Antenatal Care
<b>GBV</b>	Gender Based Violence
<b>HTP</b>	Harmful traditional practices
<b>IEC</b>	Information Education Communication
<b>IPC</b>	Interpersonal Communication
<b>MHM</b>	Menstrual Hygiene Management
<b>NGO</b>	Non-Governmental Organization
<b>NPI</b>	New Partnerships Initiative
<b>NRM</b>	Natural Resource Management
<b>NUP</b>	New and Underutilized Partners
<b>PPR</b>	Pinch Place & Roll
<b>PHE</b>	Population Health Environment
<b>RH</b>	Reproductive Health
<b>SBCC</b>	Social Behaviour Change Communication
<b>SRH</b>	Sexual Reproductive Health
<b>STI</b>	Sexually transmitted Infection
<b>USAID</b>	U.S. Agency for International Development
<b>SGBV</b>	Sexual and Gender Based Violence
<b>WHO</b>	World Health Organisation



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# Using the Education through Listening approach

## The Education through Listening approach

The communication and discussion facilitation strategy of this SGC Picture Code tool is based on the Education through Listening approach. With the ETL approach, each session will be audience-centred and participatory.

### “People are more likely to listen when they feel listened to”

*Carl Rogers*

This statement captures why the Education through Listening approach is effective and how this behaviour change communication strategy is to be implemented.

### Participation is key.

By forming positive interpersonal relations and using open-ended questions, dialogue is encouraged as the participants will relax and share with others how they have experienced challenges and successfully overcome barriers. Adult learners are best in listening, absorbing and retaining information.

They begin the process of using their knowledge to change their behaviour when the atmosphere of the group session is empathetic, affirming, supportive and firmly based on reflective listening and respectful rapport. The sessions are forums for the facilitator to partner with the community, assisting them to clarify their barriers to practicing a desired behavior and in building confidence in their abilities to adapt solutions.

These are not forums for the facilitator to educate or pass on information unless this is requested by the group. Since these discussions can evolve in a broad manner (to be scripted) this guide therefore aims to equip the facilitator with some OARS – or tools required to steer the discussion.

- **Open ended questions** to initiate and guide the discussion
- **Affirmations** to encourage participation and self confidence
- **Reflective listening** to clarify what was said and what was meant
- **Summary** of the key discussion points and a key question to enable the participant to come up with plan of action

While each session will likely be different from the next, the underlying technique does not change and there are distinctive qualities that can be observed throughout a session facilitated using the ETL approach. Here are some of these distinctive qualities:

**Establish rapport** – Establish rapport – Begin each session by introducing yourself and asking the participants to do so too. Discuss and set ground rules (e.g. turn-off cellphones, be on time, etc) and establish how much time each session will need. The facilitator is to be a partner in the sessions and not the expert. Build rapport by acknowledging that each participant has valuable experience and knowledge to share from their observations or experiences in living and dealing with the situation/problem in their community.

**Ask for permission** – Adopting a behavior is a choice of the participants; and thus a need to establish their consent to participate is important. Ask how much time the participants will avail for the discussion and if they would like more information.

**Open-ended questions** – Use questions that start with “How” or “Why” to encourage the participants to share their personal stories and experiences. For example, ask the “How did you treat diarrhoea?” instead of “Did you treat diarrhoea?” Practice the skill of asking open-ended questions and it will become easier to use this discussion prompting approach.

**Affirmation** – We all have a need to be affirmed. It builds our confidence and will encourage more sharing. Encourage participants to clap, restate what they shared or nod in agreement.

**Drawing information** – The facilitator does more listening than talking. Resist the temptation to offer answers or solutions but rather asks others to share their thoughts, experiences and ideas from which, more often than not the information or a solution will emerge.

**Engage role models** – Encourage those already with the desired behavior to share their experiences. This is social support for others to see others in similar circumstances having overcome particular challenges. Point out genuine affirmation for the qualities they have expressed - their ingenuity in overcoming barriers, resourcefulness, knowledge, courage and hard work in caring for their families and themselves as good mothers, fathers or caregivers.

**Roll with resistance/deflect arguments** – For some people, given the choice of changing their behavior or not, they may choose to justify the behavior they currently are engaging in. To prevent a session turning into an argument, the maxim ‘we begin to believe what we hear ourselves say’ holds true therefore it is counterproductive to have lengthy sessions on reasons why it is difficult to practice a behavior.

### Here are some ways to roll with resistance:

1. Questioning, asking for clarification and elaboration, even using exaggeration, may help: For example, when discussing condoms: “So you feel that using a condom is like putting your private part into a straight jacket... and do you mean you feel like you’ll not be able to fully express yourself sexually? Is it the material used... or the color? ...or the size of the condom...?”

2. Humor if used well can lighten the mood and give a less serious perspective to challenges. For example, when discussing condoms:

**Participant:** “Using condoms is unrealistic; instead people who have HIV should be marked so one can avoid having sex with them...”

**Facilitator:** “Do you mean a tattoo, or branding like live-stock...? Let’s hope it wouldn’t become fashionable and everyone would want to have one... Interesting suggestion, but could we first discuss more of the solutions we are able to control?”

3. Offer new perspectives but don’t impose on them... For example: “Could you also consider what experts have said about this...?”
4. Focusing on solutions If most are keen on an argument and it is not focused on getting a solution, end the dialogue. For example, say, “Let’s talk about this for 5 more minutes and move on...”

**Reflective listening** –By reflecting back exactly on what was said or especially where a challenge is raised, reflecting both sides of what was said, and by restating what was said and what it implies is ‘reflective listening.’ Here’s an example:

**Participant** – “I don’t use condoms because they are difficult to put on.”

**Facilitator** — “I see you have a desire to use condoms as you have tried them before. Are you saying you don’t use them because you tried to put one on and was unable to?”

**Summary and Call to Action-** Summarise what was discussed and ask the key question from which the participants outline what they need to do and when in order to achieve the desired behavior. Plan a follow up session.

## How to use this Small Group Communication Tool

Before facilitating a group session, please read and review the relevant Quick Reference section for the sessions you’ll be facilitating so that you’re familiar and comfortable with the topics. Being prepared with facts and knowledge will enable you to guide discussions and clarify questions or queries that arise. The brief information provided in this SGC tool is to help facilitators in prompting discussions and activities among the group while using the Picture Codes to initiate them.

The sessions in this SGC tool are grouped by a Topic. An introduction to the topic is given along with a statement on who this topic is important to and why. The props needed for the sessions within that topic are also listed.

The Message Take-Out phrases appearing in the beginning and again at the end of each Session Script are to remind the facilitator of the directions you’ll be prompting the participants to take in the discussions, encouraging their understanding and self-confidence with the topic to grow. These are messages you’ll be guiding the participants to understand, say in their own words and own!

The Session Scripts begin with a title or session focus, followed by Facilitator’s notes. These include suggestions for Ice Breakers to introduce the focus of each session.

Once the group has expressed their specific concerns and interests in the session focus, look at the Picture Codes together and begin exploring the topic further by prompting a discussion. To assist, some questions are offered under the Start the discussion heading. Feel free to add to or change these prompting questions so they best fit the socio-cultural settings of the group and then proceed to facilitate or guide the discussions by listening effectively and reflectively to the members of the group.

Role Plays and Group Activities are also included. Read through these before facilitating a session to be sure you’re familiar with how the activity is to be conducted and make sure you bring to the session any required objects for the activity you’ve selected for that session. Again, if you know of other group activities, games or role plays, please use the ones you feel will work best for the participants.

Before facilitating a group session, try to visit the venue or arrive earlier than the group and decide how you will arrange the space and seating for the discussions and activities. Be sure to place this SGC tool so that the group can easily view the Picture Codes and you can easily glance at and read the notes and questions on the opposing pages once they’ve been flipped behind. This is an SGC tool that should be continuously referred to by the facilitator, but remember these sessions are discussions and not lectures!

Above all, be prepared. Read and review this SGC tool so that you’re familiar and comfortable with the contents, communication and discussion objectives, and the activities. Being prepared is the best way to ensure the participants and you enjoy these sessions!







# Session I

**Correctly and consistently using condoms at every high-risk sex**

## Objectives & Discussion Questions

### Objectives

1. Identify and perceive high-risk sex.
2. Correctly and consistently use condoms at every high-risk sex

### Discussion Questions

- 1) How many of us think sex is important?
- 2) Who should a man use condoms with?
- 3) What is high-risk sex?
- 4) What is the correct way to use a condom?

## Key Message

Always wearing a condom when having sex, with a partner, whose HIV status you do not know, is the smart way to stay healthy and still give and experience pleasure.







# Session 2

**Support wives/partners to consistently and correctly use modern contraceptives of their choice**

## Objectives & Discussion Questions

### Objectives

1. Understand the benefits of contraceptives.
2. Know the barriers to modern contraceptive use and how to mitigate them.
3. Discuss how to support wives/partners to take up and stay on modern contraceptives.

### Discussion Questions

- 1) How many children do we have?
- 2) Are there any challenges of having a large family?
- 3) Are there any benefits of having a large family?
- 4) Do we ever discuss the number of children we would like to have with our partners?
- 5) If we wanted to, would we know how to limit the number of children?
- 6) Are there any benefits of using modern contraceptives?
- 7) What are the barriers to the use of modern contraceptives?
- 8) What are the things we can do to support our wives/partners to access and stay on modern contraceptives?
- 9) What are the benefits and challenges of having a small family?

### Key Message

Men who support their partners to use modern contraceptives, have healthier children that they can comfortably provide for and that gives them peace of mind.







# Session 3

## Supporting wives /partners to attend Focused Antenatal Care (FANC Clinics)

### Objectives & Discussion Questions

#### Objectives

1. Understand the benefits of and barriers to FANC visits and skilled birth delivery.
2. Identify practical actions on how men can support their wives/partners to attend 4 FANC visits and deliver by a skilled attendant.

#### Discussion Questions

- 1) How many of us know where our children were delivered?
- 2) How many of us know if the delivery was safe?
- 3) What do we think would make delivery unsafe?
- 4) What do we think would make delivery safe?
- 5) What are some barriers to supporting partners during pregnancy and delivery?
- 6) What are the ways husbands/partners can support pregnant partners to carry the child to term and have a safe delivery?

### Key Message

Men who support their partners to attend FANC clinic contribute to happier and healthier partners, children, and families







# Session 4

## Promoting non-violent forms of conflict resolution in relationships and families

### Objectives & Discussion Questions

#### Objectives

1. To understand that all forms of violence are harmful to gender and cultural practices.
2. Appreciate the role of the man in changing the norms around harmful gender practices.
3. Change attitudes towards violence.
4. Identify ways to amicably resolve conflicts with wives/partners & partners.

#### Discussion Questions

1. Are there situations where couples need to address misunderstandings, real or perceived misconduct?
2. How are misunderstandings and misconduct currently addressed?
3. How can they be addressed in a better way?
4. What would need to happen for us to adopt some of the alternatives we have come up with?

### Key Message

Amicably solving conflicts with your partners, is the confident way to display your maturity.







# Session 5

## Ending harmful practices that violate the rights of women and girls and limit their full potential

### Objectives & Discussion Questions

#### Objectives

1. To understand and appreciate that Female Genital Mutilation (FGM), and early marriages are harmful gender and cultural practices.
2. Understand the effects of harmful gender and cultural practices.
3. Appreciate the role of the man in changing the norms around harmful gender and cultural practices.
4. Change attitudes towards harmful gender and cultural practices such as FGM & early marriage.

#### Discussion Questions

- 1) Are there cultural practices in our community that some would consider harmful?
- 2) Which are these?
- 3) What are the effects of these practices?
- 4) What effect does it have on those that don't go through these practices?
- 5) What can we do as leaders to make our communities safer from these practices?  
How can girls who choose not to undergo FGM and families that do not promote FGM be supported to uphold their decisions?

### Key Message

Accepting and promoting a girl's choice to not get circumcised ensures she remains included in the community, can pursue her dreams, and start a family when she is ready.

Accepting and promoting a girl's choice to not get circumcised minimizes the risk of medical complications while giving birth later in life.







# Session 6

## Increasing gender-conscious resource allocation in households

### Objectives & Discussion Questions

#### Objectives

- 1) Explore the role of men in addressing the needs of women and girls in the Maasai community.
- 2) Explore the role of men in supporting their wives/partners to manage the home as well as safeguard their health and that of the children.
- 3) Increase men's awareness of the need to allocate individual and household resources to manage menstrual hygiene.

#### Discussion Questions

- 1) What are some of the income-generating activities for men in Narok County?
- 2) Which ones are the highest return?
- 3) How do we use this money? What are the key expenditures?
- 4) How do we set aside any money to manage our homes, and for the welfare of our wives /partners and children?
- 5) Are wives/partners involved in identifying resource allocations? Why or why not?
- 6) Do we know how our wives/partners and daughters manage their menstrual health?
- 7) Do we know of any challenges they face, regarding the management of their menstrual health?
- 8) How can we be involved in supporting our wives/partners and daughters to address these challenges?

### Key Message

- Involving my wife in resource allocation ensures that she has resources to manage the home and that her health and the well-being of the children are taken care of.
- Providing and allocating money for my wives /partners and daughters' menstrual health management increases their health and dignity.







# Session 7

## Health and Environmental Conservation.

### Objectives & Discussion Questions

#### Objectives

- 1) To understand and appreciate the relationship between health and environmental conservation.
- 2) To understand and appreciate that some agricultural, cultural and livelihood practices are harmful to the environment.
- 3) To identify ways of maximizing environmental conservation

#### Discussion Questions

- 1) Are there any agricultural, cultural or income-generating practices in Narok County, which are harmful to the environment?
- 2) Which are these?
- 3) What are the effects of these practices on the environment?
- 4) Has that affected our health in any way?
  - a. At the household level
  - b. At the community level
- 5) Do we see any connection between the increased drought and flooding and our agricultural, cultural and livelihood practices?
- 6) Has the health of community members suffered because of drought and floods?
- 7) What can we do as leaders to get our community to adopt more eco-friendly cultural, agricultural or income-generating practices?

### Key Message

Embracing eco-friendly cultural, agricultural and income-generating practices, is the sustainable way to make money while safeguarding the environment that provides us and keeps us healthy.

Embracing sustainable environmentally friendly income-generating practices safeguards the health of all people in our community.



*High-risk sex: sex with a partner whose HIV status you do not know.*

*Having multiple sex partners.*

- 1) One can use condoms for protection from sexually transmitted infections including HIV and to prevent unplanned pregnancies.
- 2) Use ONE condom at a time.
- 3) Store condoms in a cool dry place and ensure they do not have tears and defects.
- 4) Use latex or polyurethane condoms and water-based or silicone-based lubricant to prevent breakage.
- 5) One way to quickly remember how to use a condom correctly is PPR – Pinch, Place, and Roll.
- 6) One must correctly and consistently use condoms at EVERY high-risk sex to get the benefits

There are different types of contraceptive methods.

- 1) Women-controlled methods
- 2) Men-controlled methods
- 3) Cooperative methods

***Always consult your health provider for counselling before taking a method. Contraceptives give a couple peace of mind and offer an opportunity for the female partner to engage in livelihood activities.***

- 1) Contraceptives help to delay or space childbirth as per the couple's needs/desires.
- 2) Birth spacing is good for the health of both the mother and children.
- 3) It helps families to comfortably take care of the children they choose to have especially in terms of health and education.
- 4) Reduce pressure on land and inheritance.
- 5) Couples spacing births with modern contraceptives can help to start livelihood activities for additional family income and reduce household running costs.

***Barriers to modern contraceptives include:***

- 1) Myths & misconceptions exist about contraceptives.
- 2) Some wife/partners experience side effects which can be managed with the help of a health provider.
- 3) In some areas the facilities are farther away and require money for transport which may not always be available considering competing priorities- men can facilitate transport or take advantage of outreaches.

Husbands can help their wives/partners to take up and stay on modern contraceptives by

- 1) Supporting their wives/partners decisions to get on modern contraceptives.
- 2) Supporting access to contraceptives by giving money for transport and service costs where it is not free.
- 3) Helping wives/partners manage side effects.



# S W E E T O N

Every 2 minutes, a woman dies from pregnancy-related causes World Health Organization (WHO)

***Most maternal and neonatal/child morbidity and mortality are preventable if the mother gets timely management by a skilled health professional in a supportive environment (hospital)***

***Once a woman learns that she is pregnant it is important to go to the clinic for ANC as soon as possible to monitor how the fetus is growing and the mother's health.***

The ANC visits help with the following.

1. Monitor growth and detect any anomalies in the growing baby.
2. Learn from skilled health providers about warning signs during pregnancy and childbirth.
3. Prevent maternal maternal and neonatal/child morbidity and mortality by referring for specialized care in case of a warning sign.
4. Prepare mother and father for birth, lactation, and care post-birth.
5. Provide supplements to pregnant wives/partners.
6. Provide 'The mother and child health booklet' (The purple booklet) to women and men, which helps with birth registration and recording the mother, fetus, and child growth progress.
7. Can help reduce costs of delivery through access to Linda Mama\* and access to free maternity care which covers both vaginal delivery and Caesarean section delivery.

***Benefits of hospital delivery include:***

1. Prevention of maternal and neonatal/child morbidity and mortality for both mother and child as the environment is supportive.
2. Early detection of complications for either mother or child
3. Early referral and care for both mother and child in case of danger
4. Provision of health education and counselling to mothers and fathers on post-partum care for mothers and children.

***Barriers to male engagement***

1. Long queues
2. Culture
3. Unawareness of the need

***Benefits of male engagement***

1. Actively involving men in prenatal care strengthens familial support and maternal health outcomes.
2. Engaging men in open discussions on reproductive health aims to to dispel misconceptions, reducing stigma within the community.
3. Fostering improved communication and joint decision-making between couples on fertility preferences and contraception usage through active male engagement.



# S E T T I N G

Among the Maasai community, in Narok, domestic violence is viewed as an acceptable practice in the community by many men and women. The practice of caning women is seen as normal.

Women are beaten by husbands when they lose goats, sheep, or cattle when grazing; when they resist instructions of any kind from the husband; when fighting occurs within polygamous households; and sometimes when a daughter gets pregnant early which is viewed as a sign of the wife's poor parenting.

Because Gender Based Violence (GBV) is usually concealed, only survivors who have suffered from the most severe physical abuse will seek treatment.

- 1) It's essential to realize that there is no justification for any form of violence and that everyone deserves to live a life free from fear and abuse.
- 2) Both husband and wife should practice effective communication, respect, and understanding within the relationship.
- 3) Those in violent situations should seek immediate help from the church, support groups, or respected community or family members.
- 4) Community leaders can facilitate open discussions within the community to address the root causes of GBV and challenge harmful norms. They can engage both men and women in these dialogues to promote mutual understanding and shared responsibility.

# S E T O N

Harmful Traditional Practices (HTP) are cultural or social practices that happen widely and have become to be perceived as normal. They include Female Genital Mutation, Early and Forced Marriages and Social and Gender-Based Violence. They violate the girls' and women's human rights and are punishable by law. These practices also cause sharp divisions in families and societies.

- 1) The HTP are a violation of human rights and collaborators and perpetrators both can face legal and freedom consequences through jailing.
- 2) The HTP contribute to and compound health risks for women e.g., maternal and child deaths from obstructed labor, and fistula when young girls have to give birth.
- 3) FGM, Early and forced marriages, and SGBV significantly reduce the ability of a community to compete economically at national levels.
- 4) As leaders, men can catalyze and scale change by supporting alternative rites of passage for girls including de-stigmatizing women and girls who have not undergone FGM, supporting girls' education and adopting alternative forms of conflict resolution.
- 5) HTP contribute to and compound health risks for women, such as maternal and child deaths from obstructed labor and fistula when young girls are forced to give birth.
- 6) HTP practices can have profound psychological repercussions, exacerbating the impact on women's well-being.
- 7) Harmful practices like Female Genital Mutilation/Cutting harm women psychologically and physically, hindering their education, economic opportunities, and social integration. Efforts to address these challenges require community education, mental health support, and legal protections for affected individuals.



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Households benefit a lot from environmental and conservation activities like proceeds from leases, sale of livestock and trees and minerals. Men can support the allocation of resources for Menstrual Hygiene Management (MHM) at the individual, household, and community levels.

1. Community members should consider setting aside, some proceeds from community projects, to promote access to health services e.g., Maternal and Neonatal Health, improved infrastructure to health facilities and modern contraceptives.
2. Resources should be used to improve the quality of life for all members of a household.
3. The needs of men, women and children are all factored into budgetary allocations.
4. Households should allocate resources for MHM at the individual, household, and community levels.
5. By supporting MHM, individuals and families enable girls to attend school uninterruptedly and benefit from education.
6. Budgeting for MHM products reduces girls' exposure to sexual exploitation in exchange for MHM products. This reduces the chances of early and unplanned pregnancies.
7. Availing menstrual hygiene products for women and girls promotes their dignity. It helps to keep girls in school. This increases overall literacy levels in schools.
8. Men can encourage open communication within families and relationships and also ensure a comfortable environment for discussing menstrual health.
9. Men can create safe spaces for open discussions about reproductive health matters.

# S W E E T O N

Narok's main natural resources include the Maasai Mara National, Mau Narok Forest, Rivers & Mines. Households benefit a lot from environmental and conservation activities like proceeds from leases, sale of livestock and trees and minerals. These resources should be used to improve the quality of life for all members of a household.

- 1) When the resources are overused, we start to experience phenomena like drought, floods, and animal death due to lack of pasture.
- 2) Drought impacts on agriculture include crop losses, lower yields in both crop and livestock production, increased livestock deaths, increases in insect infestation and plant and animal diseases, damage to fish habitat, forest and range fires, land degradation and soil erosion.
- 3) Food insecurity and the lack of access to affordable nutritious food, can leave individuals, families, and communities with deficits in vital macro and micronutrients. They are also associated with increased risk for multiple chronic health conditions such as diabetes, obesity, heart disease, mental health disorders and other chronic diseases.
- 4) When the natural resources degenerate, we experience water scarcity, less rainfall, and perennial flash floods and in turn, this hurts our ability to stay healthy.
- 5) Excess floodwater can contaminate drinking water sources when rainfall makes contact with the ground and comes into contact with things like human and animal waste.

***Some of the ways we could protect our environment are by:***

- 1) Increasing our knowledge of natural resources and the need for management.
- 2) Establishing Community Natural Resource Management committees that incorporate women.
- 3) Adopting alternative use of land for example turning idle land into conservancies, crop rotation, tree planting and reforestation
- 4) Embracing environmentally friendly income-generating activities such as beekeeping and the use of alternative fuels to avoid charcoal burning





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