



JOURNEYS OF COURAGE

Pains and triumphs of diverse women and girls in accessing and enjoying SRHR

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Foreword

Planting Seeds, Nurturing Change

Some journeys begin quietly. With a whisper, a question, or a dream. We Lead began with the belief that young women who have been silenced, excluded, or overlooked hold the wisdom, courage, and vision to shape a better world. Over five years, that belief has grown into a vibrant movement spanning nine countries, rooted in solidarity, resilience, and hope. And the journey has become a celebration.

We Lead is an inspiring, innovative and bold program aimed at upholding and advancing the sexual and reproductive health and rights (SRHR) of young women. It focuses on four specific groups of young women: those living with HIV, those with disabilities, gender and sexual minorities, and those affected by displacement. Through mutual capacity strengthening, the program puts these young women rightsholders in the lead while supporting them in making sustainable changes to improve their SRHR. The program started in January 2021 and runs until December 2025. Its vision is to build a movement of resilient young women taking the lead in creating and strengthening inclusive organizations that champion the enjoyment of their SRHR.

In the nine We Lead countries, young women belonging to the program's four focal groups are often denied their SRHR by those in power. However, young, rightsholder-led CSOs and movements, in collaboration with more established CSOs, have been working to challenge the laws and social norms that perpetuate this exclusion. Our consortium of six lead partners has worked with determination to support these young women in setting their own priorities, raising their voices and claiming their rights.

We lead not only follows in the footsteps of Hivos' most ambitious initiatives in the field of sexual rights and diversity and SRHR; it has upscaled. The program engaged in continuous co-creation with rightsholders and finetuning of its approaches and strategies for change. It linked rightsholders in spaces for learning and exchanges, and made them part of a global community of young women and other actors working to promote change. It empowered them and their organizations to challenge the growing opposition to human rights in general, while strengthening safety and security in its programming and integrating care for the wellness and wellbeing of activists and rightsholders.



← Over five years, We Lead has contributed to tangible and lasting change in the SRHR landscape. Across nine countries, rightsholders and partners have driven policy changes that advance inclusion and equity, from influencing national SRHR strategies to securing recognition of the rights of young women in their diversities. Our investment in capacity strengthening has empowered rightsholders to lead their own advocacy, research, and movement-building. Many have transitioned from being recipients of services to becoming recognized leaders, trainers, and policy influencers in their communities and beyond. Alongside this, We Lead has contributed to shifting narratives, replacing stigma and silence with stories of resilience, leadership, and possibility.

We Lead's journey has also sparked key innovations in SRHR advocacy. From creative arts-based awareness campaigns, feminist leadership models, and digital learning tools, to inclusive resources like sign language SRHR dictionaries. These approaches not only strengthened advocacy but also set new standards for how SRHR can be made truly inclusive.

The Journeys of Courage booklet is a celebration of the courage, creativity, and determination that have defined We Lead. Within these pages are stories of young women who challenged stigma, reimagined possibilities, and turned advocacy into lasting action for SRHR. Each story is a seed, a future transformation that has been planted in policies, movements, and communities across nine countries. Together, these seeds tell a larger story of collective power, resilience, and progress. And these seeds are still growing, extending deep roots into movements and minds, blooming into a future where equality is not an aspiration, but a lived reality.

This booklet is both a tribute to the rightsholders and partners who made this journey possible, and an invitation to keep nurturing the change they have begun. May these stories remind us that change often begins small; but with care, courage, and collective action, it grows beyond imagination. ■

Nyambura Gathumbi,
We Lead Global Program Manager

Acknowledgements

The Journeys of Courage booklet is a result of the collective vision, passion, and dedication of many individuals and organizations who have walked this journey with us. To the young women rightsholders: your courage lit the path, your voices stirred the winds of change. To our Host Organizations, and Community of Action (CoAs): you nurtured the soil where these seeds could grow. To every hand that wrote, photographed, designed, and dreamed: you gave this story its colors. This booklet is a celebration of us all.

Our immense gratitude to the Dutch Ministry of Foreign Affairs, who funded the We Lead program under the SRHR Partnership Fund, which is part of the Strengthening Civil Society subsidy framework. Without your support, these stories of change would not have been possible.

Many thanks to our consortium partners: Positive Vibes, Restless Development, Marsa, FEMNET, and the Central American Women's Fund. Your support and thoughts contributed to changing the lives of hundreds of women in the countries we intervened in. To the team at Hivos, the Lead consortium partner: thank you for your tireless efforts that ensured the program was implemented seamlessly. To M&C Saatchi World Services, thank you being our much-valued technical partner.

Because when We Lead, Change Blossoms.

JORDAN

Fighting to protect women with disabilities from forced sterilization

For years, a disturbing practice had taken root in Jordan. Families were subjecting women with disabilities to hysterectomies without their consent, driven by fears that they would be left to raise any children these women might have. In effect, they were stripping away a fundamental human right—the right to have a child and raise a family.

Hysterectomy removes a woman's reproductive organs to make her incapable of conceiving. While it is a legitimate medical treatment for uterine cancer and other diseases, in Jordan it had been weaponized against women with disabilities to prevent them from having children.

This practice went unchecked for many years until human rights reports, investigative journalism, and social media accounts revealed how women with disabilities had suffered in silence. According to news website Akhbar Albalad, an estimated 65 hysterectomies are performed annually in Jordan, with the majority targeting women with disabilities.


However, no laws existed to provide safeguards against such treatment or to criminalize forced sterilization. The consent of women with disabilities was neither sought nor their rights respected.

Families sometimes justified these procedures as preventive measures against pregnancy in cases of sexual violence or as a means of maintaining hygiene for disabled women. Those most vulnerable were women with intellectual and physical disabilities, including those with Down Syndrome.

This practice continued for many years, even in Jordanian public hospitals, without being challenged. The situation only began to shift when the government issued a fatwa in 2014, stopping public health facilities from sterilizing women with disabilities. However, families simply moved to private hospitals, which were even harder to monitor. The lack of a robust legal framework to penalize such practices made the situation worse.

A study that changed everything

This was the situation when the Information and Research Center – King Hussein Foundation (IRC-KHF), with funding from Hivos' We Lead program, intervened to disrupt the practice.

The organization's first step was a comprehensive study titled: Rights of Recipients of Sexual and Reproductive Health Services and the Most 



← Vulnerable to Marginalization in Jordan: Gaps in Practice. The study had two key objectives. One was to assess whether Jordanians were respecting international and national standards related to sexual and reproductive health as human rights, including the right to life, health, privacy, and non-discrimination.

The other was to outline measures Jordan needed to take to ensure optimal access to sexual and reproductive health services for at-risk individuals, such as women with disabilities.

When the study findings were announced, they painted a worrying picture of sexual and reproductive health rights violations: forced hysterectomies of girls with disabilities, high prevalence of child and forced marriages, and widespread sexual and physical violence.

Government response and reform

The study prompted the government to act. In 2024, a National Advisory Committee was formed to reflect on the findings and offer recommendations. It comprised 23 representatives from key government bodies, civil society organizations, experts, and health institutions.

The committee identified hysterectomy as a priority area, and developed policy papers to challenge the practice of forced hysterectomies, and advocate for legislative change. Based on the general provisions of the Jordanian Personal Status Law, the committee proposed key legal and procedural reforms.

One crucial recommendation was requiring a mandatory permit issued by a competent court, such as the Sharia or ecclesiastical judiciary, to ensure informed consent for girls with →

← disabilities. This legal safeguard was designed to prevent hysterectomies except in cases of medical necessity and when supported by a court permit.

The committee made additional recommendations, including the need for awareness campaigns to highlight the reproductive rights of women with disabilities, and training for medical professionals on ensuring these rights are respected.

The committee called on the Ministry of Health to play a leading role in protecting women with disabilities by developing a procedural guide on hysterectomy, and issuing clear directives prohibiting unauthorized hysterectomies in both government and private hospitals. This included revising the Medical Liability Law to define precisely what constitutes “medical necessity” and how to improve accessibility to reproductive health services.

The Ministry heeded. A procedural guide was created by the Chief Islamic Justice Department, the Ministry of Health, and the Higher Council for the Rights of Persons with Disabilities to regulate court approvals for such procedures in emergency cases.

Tangible progress

These efforts have already begun to show concrete results. The procedural guide outlines the steps needed to obtain authorization from the competent Sharia court in cases of necessity or emergency involving women with disabilities.

It also requires healthcare providers to inform the Sharia Public Prosecution if a legal guardian

“The committee made additional recommendations, including the need for awareness campaigns to highlight the reproductive rights of women with disabilities, and training for medical professionals on ensuring these rights are respected.”

or the individual insists on going ahead with the procedure without prior approval, enabling appropriate investigations to protect women with disabilities.

These legal efforts, combined with increased awareness, are encouraging families to reconsider their decisions to subject women with disabilities to hysterectomy procedures.

The changing environment is expected to inspire policymakers and health care providers to gain a deeper understanding of the rights and needs of women with disabilities, and their role in protecting them.

Only when these comprehensive measures are fully implemented will the dignity, rights, and agency of women with disabilities be truly protected and assured ■

Turning the pain of women with disabilities in accessing SRHR services into joy

When Ebni set out to tackle the many obstacles persons with disabilities in Jordan faced in accessing sexual and reproductive health and rights (SRHR) services, they knew this would not be a battle easily won. But with determination and passion, Ebni—a movement led by persons with disabilities and their families—was confident that success was possible.

The movement had identified three key factors obstructing the enjoyment of SRHR by people with disabilities, who were estimated to total 1.2 million of Jordan's general population. These were: failure to integrate SRHR into routine programs of government and other actors, ignorance among rightsholders and their families about their SRHR rights, and lack of training among healthcare workers to respond to the SRHR needs of people with disabilities.

These were major challenges that required human and financial resources as well as political will.

Getting the much-needed support

Recognizing this reality, Ebni reached out to We Lead, a Hivos-led program, to support its efforts. We Lead agreed to partner with Ebni and provided

the much-needed support. With this backing, Ebni started its work by mobilizing government and other actors to speak about how to integrate SRHR services into other health services accessed by persons with disabilities in both state and non-state facilities.

In 2022, Ebni leading by example, successfully integrating SRHR into its own programs. The movement then used this to mobilize persons with disabilities and their families to advocate for and demand similar inclusive health care services in government health facilities.

To address the ignorance of rightsholders and their families about SRHR, and what was expected of duty bearers in fulfilling these rights, the organization held forums where women with disabilities and their families discussed these issues.

This was the first time such conversations were taking place in Jordan, revealing how young women with disabilities were being deprived of their SRHR and subjected to violations. They began engaging in aggressive advocacy for free government-provided rehabilitation services following the Law on the Rights of Persons with Disabilities.





← They demanded enjoyment of their rights within a health care system that ran on principles of justice, equality, and equal opportunities. These were rights already enshrined in Article 24 of the People with Disability Act of 2017, which guarantees free access to medical, treatment, and rehabilitation services, including surgeries, medicines, vaccinations, assistive tools, and rehabilitation sessions.

Evidence-based advocacy

In 2023, Ebni conducted a comprehensive assessment to see what kind of services were provided to women with disabilities in Comprehensive Health Centers. It identified some serious violations of sexual and reproductive rights of women and girls with disabilities. For instance, women and girls with disabilities were not benefiting from health care services due to inappropriate equipment and inadequate health facilities.

This, compounded by the negative attitudes of

health care providers and other employees in health facilities, made such access even more difficult. The study further noted that there was an urgent need to train health care providers in catering for the diverse needs of persons with disabilities. The findings were published in a policy paper that outlined the gaps and provided recommendations for addressing them.

The recommendations included: improving capacity of Ministry of Health staff in handling SRHR and other health needs of women and girls with disabilities; integrating SRHR into other health systems; and engaging families, policymakers, and service providers in greater recognition and inclusion of the rights of women and girls with disabilities in their programs.

Driving systemic change

These recommendations and the broader policy paper would later influence major changes in Jordanian society regarding how to respond to the SRHR, and other needs of women and →

← girls with disabilities. Government and other actors acted on the findings.

In response to the training needs, Ebni, in collaboration with the Higher Council for Persons with Disabilities, developed a pioneering training manual for health care providers, which has been accredited by the Council.

The Ministry of Health agreed to adopt the manual to inform its training programs for staff. The manual focuses, amongst other things, on enhancing the skills of medical staff dealing with sensitive issues such as sexual violence that affects women with disabilities.

The second success resulting from this assessment was the creation of a partnership between Ebni, the Ministry of Health, and the Higher Council for Persons with Disabilities to implement a health care protocol that emphasized accessibility, accommodation, and rights-based medical consultations for people with disabilities.

A major outcome of this partnership was the introduction into the health care system of sign language and video call support for individuals with hearing impairments, which greatly increased accessibility.

National impact and recognition

Ebni used this partnership to advocate for an inclusive SRHR model in both state and non-state facilities, including addressing various violations taking place in some of these facilities. This advocacy turned these issues into a national conversation, contributing to the government taking action in government health facilities.

“

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It was such efforts that saw Ebni recognized by the Information and Research Centre-King Hussein Foundation (IRC-KHF) as a credible source on SRHR for people with disabilities.

At the health facility level, the advocacy had its own positive effects: service providers adopted a rights-based approach in delivering their services to women with disabilities. Families of women with disabilities were also going through a transformation because of the awareness and education they received from Ebni.

One mother of a young girl with a disability summed it up: “We are no longer invisible. Our stories and struggles are now part of the conversation”■

UGANDA

From shame to dignity: How Ugandan girls are reclaiming menstrual health

In the districts of Arua and Terego in Uganda's West Nile region, menstruation once meant monthly episodes of sadness, shame, and desperation for countless women and girls. For them, access to menstrual pads, something many take for granted, as an impossible luxury.

The depths of this crisis became starkly clear in 2020, when research conducted by Birungi Charities uncovered a devastating reality: adolescent girls and young women in these two districts were offering sexual services to raise money for menstrual pads.

The study, dubbed the "sex for pads" research, revealed that young girls were using anything they could find—old pieces of clothing, leaves, pieces of mattresses—or simply sitting in sand to manage their periods.

There was no dignity for them during this critical time in their reproductive cycle.

A culture of silence and stigma

The research was conducted in villages where menstruation was highly stigmatized. Many girls found it shameful to speak about their periods, particularly in public. Poor access to clean water and sanitation compounded an already dire

situation.

The consequences rippled through every aspect of these girls' lives. They missed school lessons. Some dropped out entirely from an educational system that had completely failed them. The study identified critical gaps in access and shared these findings with duty bearers, urging them to act.

As the girls grappled with this dehumanizing experience, they began thinking about long-term solutions to their problem. Unknown to them, someone else was also working on a plan to help.

The turning point

In 2022, Birungi Charities launched an initiative under the We Lead Program that would transform lives. The organization trained 30 girls in how to make reusable sanitary towels, taking them through a comprehensive series of alternative pad-making sessions.

Crucially, the program went beyond just production skills. The girls received Menstrual Hygiene Management (MHM) information to ensure a holistic approach to tackling their challenges.

After two years of trials and refinement, a breakthrough came in June 2024. Twelve



← right holders, girls and women from 18 to 30 who had followed the Birungi Charities training, began producing and selling reusable sanitary pads at approximately \$0.55 each.

These young entrepreneurs now produce 50 reusable pads every month, keeping some for themselves while using the profits from sales to enhance their livelihoods.

From beneficiaries to advocates

The transformation went far beyond economics. Experiencing first-hand the positive impact of the initiative on their lives, the girls evolved into strong advocates for Sexual and Reproductive Health and Rights (SRHR). They recognized that their advocacy could broaden attention to other critical SRHR needs in their communities.

Their awareness campaigns on SRHR and menstrual hygiene management, conducted through Access Radio and West Nile TV, reached more than 560,000 viewers and listeners across Arua and Terego districts.

This audience consists of adolescent girls and young women who are either internally displaced persons or refugees from neighboring countries embroiled in conflicts, including South Sudan and Congo. The two districts have a combined population of over 3.3 million people.

As awareness about reusable pads spread throughout the two districts, demand surged. More and more young women expressed interest in the venture, putting pressure on Birungi Charities to expand their training programs.





← The organization responded by scaling up operations. To date, more than 10 cell groups of adolescent girls and young women have been trained in the production of reusable sanitary pads. Each cell group consists of 10 members, bringing the total number of those trained to 100.

These groups are led by girls who received leadership training from Birungi Charities under the We Lead Program. This training has emboldened them to seek leadership opportunities in social and political spaces.

Restoring dignity, demanding rights

By 2025, the reusable sanitary towel initiative had accomplished what once seemed impossible: returning dignity to adolescent girls and young women in Arua and Terego.

The work of Birungi Charities has drawn crucial attention to the plight of these young women regarding their SRH and rights. Local communities

and authorities have become increasingly conscious of the challenges young women face in accessing menstrual pads.

Together, Birungi Charities and the young women rightsholders have used the project to advocate for a more inclusive and responsible government approach to addressing the SRHR needs of young people. They have engaged duty bearers in Arua and Terego districts, pushing to ensure that issues of menstrual pad access and broader SRHR for young women are integrated into official plans and budgets.

What began as a response to a humanitarian crisis has evolved into a movement; one where young women are not just managing their periods with dignity, but are standing up, speaking out, and demanding their rights. In the West Nile region of Uganda, menstruation is no longer just a monthly challenge to endure; it has become a catalyst for change ■

Rewriting the narrative:

How women with disabilities are shaping the future of Uganda

Once seen as burdens by their own families, a group of young women with disabilities in Kamuli district, Uganda, now enjoy the admiration of their community. Their thriving horticultural farm has not just changed their economic status, but more importantly, what others think people with disabilities can achieve.

The Young Women with Disability (GYWD) group has built a successful vegetable farming enterprise that is now the talk of the town. Since launching their project in 2024, these women have achieved what many thought impossible: economic empowerment, financial self-reliance, and a powerful voice in their community.

The women said they are now valued within their families, as they are contributing meaningfully to the household economy and overall wellbeing. This sense of purpose and self-reliance has significantly boosted their confidence.

From exclusion to empowerment

Before this transformation, life held little promise for them. Like women with disabilities elsewhere,

they faced daily discrimination and exclusion from social, economic, and political activities. Their socio-economic situation was dire, with high levels of poverty combined with limited access to resources necessary for fulfilling their sexual and reproductive health and rights (SRHR).

The turning point came when Integrated Disabled Women Activities (IDIWA), with support from the We Lead program, organized a series of capacity-building activities. The most important was a peer-to-peer learning visit to the Environmental Defense Network (EDN), a movement that addresses climate justice through climate-smart agriculture.

EDN gave a revolutionary demonstration of how climate-smart agriculture can be linked with disability inclusion, sustainable livelihoods, and advocacy. The presentation so inspired the young women that they immediately requested training in the approach.

The training was practical, focusing growing vegetables on small plots of land. Beyond farming techniques, the women received comprehensive training from IDIWA covering →



← leadership, meaningful youth participation, and advanced advocacy skills.

From knowledge to action

Returning to Kamuli, the women were determined to apply their learning. Their first step was finding land to farm. They approached the officer in-charge of Lulyambuzi Health Centre III, requesting permission to use a small plot as a demonstration garden. This is a centre these women were working closely with to increase access to SRH services for women with disability. It is this friendship they were relying on for support to get a piece of land.

The health center's response exceeded their

expectations; they received a larger space than requested, a gesture showing the health facility's allyship with We Lead's commitment to disability inclusion. The facility had already followed We Lead training on disability inclusion and was working with the Mukisa GYWD group on other disability-related matters.

What began as a modest demonstration garden quickly evolved into full-fledged farming operations. The success inspired other young women with disabilities to express interest in agriculture. The group, now with 40 members, began lobbying the health center for additional land to meet growing demand. →

← Building on success

While waiting for more communal farming land, the women took action at home and set up kitchen gardens to improve family nutrition.

"From my kitchen garden at home, I am able to save about \$1.50 that I use to support my family," says Namugaya Sarah, one of the group members.

The GYWD group in Jinja offered to help them access markets, including selling produce at one of the city's major food markets. This farming business proved a breakthrough for women who had struggled to find employment in factories. The flexibility of farming allowed them to balance agricultural work with their SRHR advocacy activities.

Income from farming now modestly finances their advocacy work. It covers transport costs for visiting health facilities for meetings with health care providers, peer-to-peer capacity-building visits, and participation in district budget conferences, where they present alternative budget proposals.

Financial systems for sustainability

As their agricultural business grew, the young women established a savings scheme to invest their proceeds wisely and finance their SRHR advocacy work. The scheme has also eased access to loans, enabling members to invest in personal initiatives that further improve their lives.

Many of the women interviewed report that these loans have boosted their small businesses, providing livelihoods for their children and families.

"We envision a future where girls and young women with disabilities are fully empowered to operate their group as a registered Community-Based Organization, actively advocating for climate justice, sexual and reproductive health and rights, economic empowerment, and sustainable livelihoods," the GYWD group wrote in one of their reports.

Their success has captured attention at multiple levels. Local leadership regularly invites them to take part in agricultural sub-county meetings to showcase their work. Development actors such as Heifer International, which focuses on agriculture, have expressed interest in prospective partnerships, following strong recommendations from local leaders and duty bearers.

"We managed to access government livelihood programs due to our ability to clearly articulate our needs and demonstrate tangible progress in our initiatives. This is a result of our structured engagement with the Community Development Office," one of the young women explains.

Financial independence has made them active contributors to community development, and has likewise challenged stereotypes about disability and promoted the inclusion of persons with disabilities in economic activities. Their success in business has even challenged beliefs about their ability to have children and raise families.

"We are now in a position to host community dialogues where we openly discuss our concerns; not as dependents or individuals seeking charity, but as empowered community members →



← who understand what is good for them and their community,” several of them affirm.

Despite their remarkable progress, challenges remain. Access to formal banking services, located 40 to 50 kilometers away from their village, has proven difficult. While a bank account would improve safety and resource management, the distance forces them to rely on the Village Savings and Loans Association (VISLA) model, with funds kept by the group’s chairperson.

Balancing city life, employment commitments, and advocacy work presents another challenge. Some joint horticultural farming activities experience prolonged delays, and marketing of farm produce suffers from limited follow-up

Future of possibility

Despite these obstacles, the group’s popularity

continues to grow within their communities, creating increased demand for larger plots of land to support the growing number of young women with disabilities eager to join the farming business.

These young women have gone from being perceived burdens into real breadwinners, advocates, and community leaders. Their farming activities represent more than economic empowerment: it symbolizes a fundamental shift in how disability is perceived and valued in their communities.

As they beam with pride about their successes and express hope for a secure future, the Mukisa Girls and Young Women with Disability group stands as living proof that with the right support, training, and determination, barriers can become bridges to empowerment ■

MOZAMBIQUE

Love without limits - A wedding that inspired disability inclusion

They told her she would never amount to anything. Her prospects for success, happiness, or even a normal social life were dismissed as impossible dreams. Community members whispered that people with disabilities simply didn't "make it" in life, while others went further, branding her as "possessed by spirits" and visibly shunned any contact with her.

This was the reality facing Helena Matule in Maputo city, Mozambique. A reality shared by countless women with disabilities across the country. For Helena, discrimination wasn't just an abstract concept; it was woven into the fabric of daily life, creating formidable barriers to the most basic services, including sexual and reproductive health rights.

A case in point was the appalling treatment she suffered when she went to give birth, when some health care providers asked how she had even conceived in the first place.

For Helena, the treatment at the hospital was an echo of what she had faced in her community. Fellow villagers and some family members had discouraged her from getting married, let alone raising a family. This, together with social

stereotypes and bias, meant Helena never imagined enjoying a married life and raising children of her own.

Verde's strategic approaches

Life began to change for the better when she received support from Folha Verde and the Mozambican Association of Women with Disabilities (AMMD) to join the We Lead program as an activist promoting the rights of women and girls with disabilities.

The first thing the program did for women like Helena was to encourage them—using inspiring stories of other women like them who had overcome similar challenges—to dream about whatever they wanted to be in life. Addressing the self-esteem and agency of women with disabilities became a key area of focus.

This was followed by training on the rights of women and girls with disabilities, and how to advocate for them. The training focused on how to advocate for their rights to access sexual and reproductive health and creating an enabling environment for them to realize their full potential.





← The inspiration, knowledge, and skills Helena gained from the We Lead training began shaping many things for her. It was like a seed of change had been planted.

Under the program, Helena began visiting health facilities in her community to advocate for health services that were disability friendly. She called for the removal of barriers like poor pathways, limited access to information, and the negative attitudes of health care workers towards the enjoyment of sexual and reproductive health rights by people with disabilities, especially women and girls.

She undertook the same task in the community, advocating for young women to enjoy marriage and exercise their rights to sexuality, getting married, and having children.

Helena's new-found agency

At a personal level, Helena was also going through a major transformation. We Lead had made her vocal about her views and rights, especially about

the sexual and reproductive health rights of women with disabilities.

"I was a woman without a voice who did not know her rights, especially those related to sexual and reproductive health. I was even afraid of having a relationship with someone, fearing the person might get tired of me or just want to use me because few people like me are married or living with a partner. But when I joined the project as an activist, I gained more information about my rights, and my self-confidence improved," says a contented Helena.

The empowerment sessions had sparked Helena's determination to set and achieve goals. She says that, for the first time, she dared to dream of things that society had written off her list. Raising a family of her own was one of them. Quietly, she was thinking of doing something major that would forever challenge and change attitudes about women with disabilities. →

← A wedding to remember

In February 2025, Helena's family and community had the shock of their lives. Helena and six other women with disabilities—three with physical disabilities, three visually impaired, and one with psychosocial disability—decided jointly to wed the loves of their lives. The church organized a mass wedding for them, reducing the cost of the event significantly.

For Helena, this was not just a wedding but a major message: women with disabilities have the right to marry and raise a family. Indeed, things for Helena and other women with disabilities began to change afterwards. Some of the social barriers they had faced started to disappear, and their communities began including them in the ordinary events of community life.

For Helena, who formalized her marriage through the ceremony, the wedding reinforced the recognition of women with disabilities as people with the same capabilities, wishes, and aspirations as any other person in society. It also proved that a successful and fulfilling relationship is not based on a person's physical condition but on the feelings two people have for each other.

Folha Verde also celebrated this significant development in the lives of women with disabilities. The organization observed: "Despite the many stereotypes, taboos, and myths about women with disabilities, such as 'How can a woman with a disability care for children or express her sexuality?', the wedding proved many people wrong."

Still, naysayers were trying to scuttle what had happened even as Helena celebrated her wedding.

They said that her partner would eventually leave her and that he was just playing with her emotions. They argued that a person with a disability cannot have a functional relationship.

"What can she even do at home? She will not manage to care for the household or the family," was the type of comment Helena recalls they made.

What they did not know was that the skills and confidence Helena gained from the We Lead program had strengthened her to where she could easily weather their negativity.

Transformation and lasting impact

Helena says her marriage has blossomed and her relationship with her family and other people is improving greatly. She now enjoys considerable respect from both the community and her family.

"Their reactions have been positive, and even those who once doubted I could marry now look at me differently," says Helena.

She notes that her life has become more meaningful and rewarding after participating in the We Lead program.

Today, Helena has become an inspirational figure, influencing other women to fight for their rights and to think positively about their capabilities. She is now a leading advocate encouraging young women with disabilities to overcome their fears.

"My greatest moment was the transformation I went through and having the ability to transform the lives of other women and girls with disabilities" ■

Power of hope:

The story of Suzana Djedje

Growing up with a physical disability in a world that saw only limitations for her, Suzana Célia Djedje's childhood was marked by profound isolation. Where other young girls discovered their potential and embraced their rights, Suzana learned to see herself through the lens of society's low expectations. The message was clear and unrelenting: she simply wasn't worthy of the same opportunities.

Family members and community alike had written her off, viewing her abilities as negligible and her future as predetermined. These attitudes slowly eroded her sense of self-worth, leaving her shy, fearful, and withdrawn.

Like many women with disabilities, Suzana was unaware of her rights, particularly those related to sexual and reproductive health. She had no understanding of how to confront the discrimination that stymied her every attempt to find work or access essential services. The doors she knocked on remained firmly shut, with potential employers seeing her more as a financial burden than a valuable contributor.

Simply put, Suzana felt excluded from social life and deeply insecure about her future.

Actions that changed Suzana's world

Until the day she started attending the We Lead program's sessions on capacity building and self-recognition conducted by Associação Moçambicana para o Desenvolvimento da Família (AMODEFA) - Girls Not Brides.

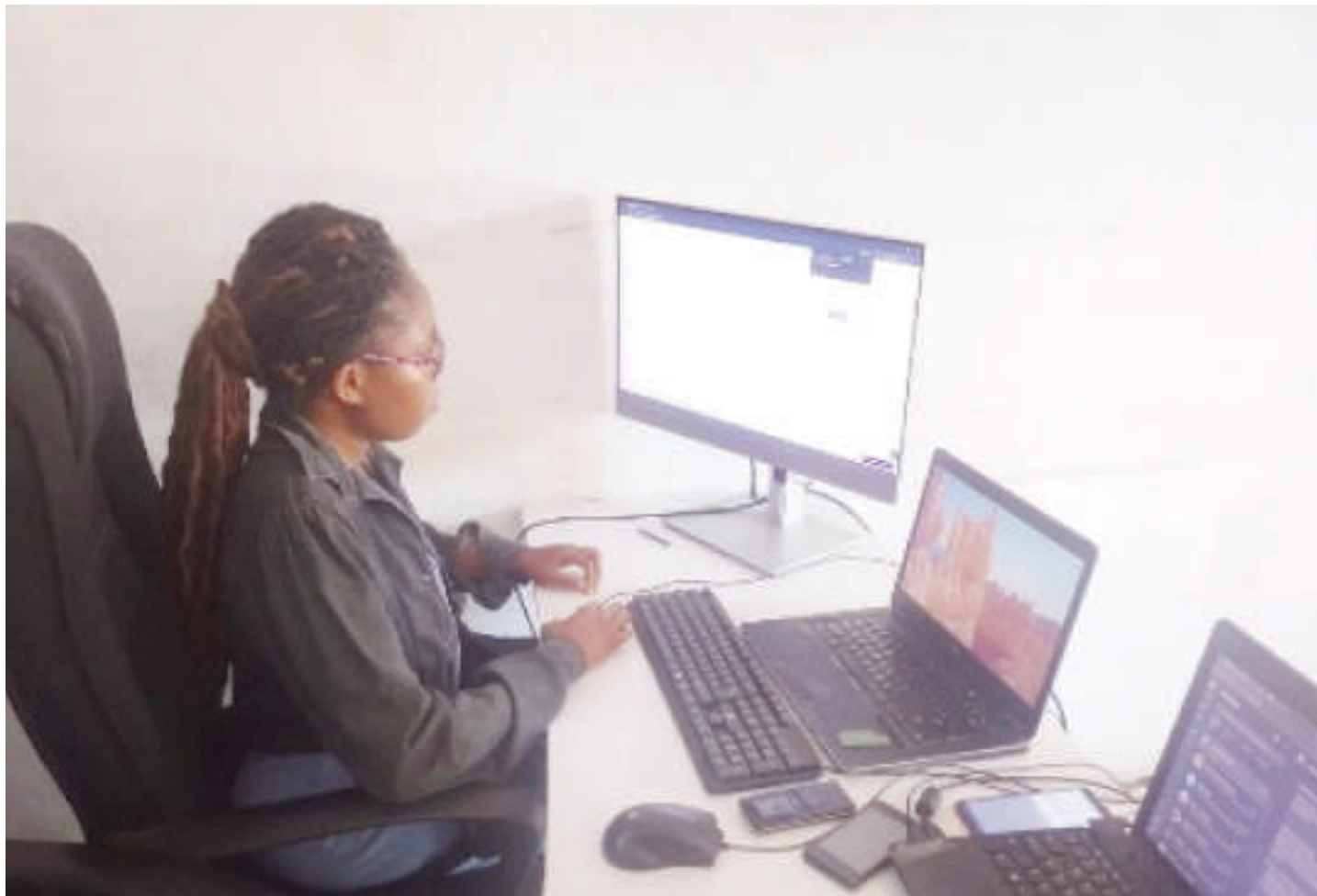
These sessions were designed to transform women with disabilities into agents of change using AMODEGFA's expertise in promoting the rights of women with disabilities and advocating for their inclusion in social, economic, and political development.

The training taught Suzana about her rights and how to advocate for other women with disabilities. She felt newly emboldened, with increased self-esteem, and able to recognize and seize opportunities. The first one was securing pre-professional internships. For the first time, life began to have meaning.

Prospects that had seemed impossibly distant such as finding work, getting married, and raising a family, suddenly became tangible possibilities.

"After going through these sessions, I overcame my fears, gained confidence, and realized that it is possible to challenge stereotypes about me, knock on doors for support, and explore new





← opportunities,” says Suzana.

She explains that the program helped her become emotionally and intellectually stronger, enabling her to know and defend her rights while expressing her views on issues that significantly affected her and other women with disabilities.

Winning against all odds

As Suzana became more vocal about her identity and rights, her increasing visibility and determination to transform her life began to impress people and organizations alike.

One such organization was Motivation Design Gráfico, a communications company that specializes in marketing and graphic design and promotes the inclusion of people with disabilities in the job market.

The company awarded her a scholarship to pursue her interest in design at its headquarters in Maputo.

Her responsibilities include digital marketing, content production, social media management, and supporting promotional campaigns.

She has also been enlisted by the company as one of its experts to help evaluate and improve its inclusivity principles, policies, and procedures, particularly for women with disabilities. This has given Suzana the perfect platform to flourish beyond her dreams.

Suzana’s plans are ambitious, but doable. She aims to set up training programs for young women with disabilities.

“We Lead contributed significantly to dismantling myths and proving that we are all equal in our differences. We are capable and can realize our dreams. We hope that Hivos, AMODEFA, and other partners will continue supporting us to realize our dreams and promote greater social justice,” she says ■

KENYA

A transgender woman's life changing journey through the legal system

The knock on the door came without warning. At just 20 years old, Sarah* had been living authentically as herself for the first time, until the morning police officers arrived to turn her world upside down. What she didn't expect was that the person who had reported her to the authorities was someone from her own family, someone who couldn't accept that the person they once knew as a son had found peace living as a daughter.

"I felt like the world should just open up and swallow me alive," she recalls, her voice still heavy with the memory of that devastating betrayal in 2019.

The charges were serious: obtaining by false pretenses, under Section 320 of Kenya's Penal Code. It all started when Sarah wanted to change her identity documents to her a female name. Under the Kenyan law, a person must submit a copy of the ID card of at least one of their parents to get such documents. Because she declared herself as a transgender person, her family had ostracized her, making it very difficult to get these documents.

Finding herself in this difficult situation, she collected lost ID cards of strangers and presented them as her mother, father, and guardian. They

passed the test, and she got a birth certificate, ID, and passport using her name. She then managed to bypass the legal system and changed her documents to recognize her as female. From male, she was officially female in the new documents.

She was arrested in Eldoret while seeking health care, and detained at Eldoret Central Police Station before being taken to court to face the charges of obtaining registration by false pretenses.

This arrest exposed her to many threats. The police who had gone to her house to look for evidence, made fun of her panties and bras; displaying them to the neighbors. Before this, many people did not know that she was transgender. She was in danger. Amka Africa, one of the partners of We Lead, a HIVOS program, intervened immediately, and helped her travel from Kapsabet to a safe house in Eldoret, about 46 kilometers away.

But for Sarah, this exposure and the legal battle that ensued represented something far more fundamental: her right to exist as herself. Sarah had been navigating life in a society where transgender identity is still largely misunderstood and, in many cases, criminalized.





← According to the United States National Institute of Health, Gender dysphoria is defined as a marked incongruence between their experienced or expressed gender and the one they were assigned at birth. People who experience this turmoil cannot correlate to their gender expression when identifying themselves within the traditional, rigid societal binary male or female roles, which may cause cultural stigmatization.

Her worst nightmare was being forced into male police cells, where she became vulnerable to violence of cell mates. "This was my first time being arrested. I actually felt like committing suicide," she recalls. The fear wasn't just about legal consequences; it was about surviving a system that

didn't recognize or protect people like her.

An unlikely lifeline

While out on bail and struggling to come to terms with what had happened, Amka Africa came to her aid. The organization managed to transform what seemed like Sarah's darkest moment into a beacon of hope for Kenya's wider transgender community. Through the We Lead program, they didn't just provide legal representation, they embarked on an educational mission that would change minds in Kenya's courtrooms.

The organization's approach was revolutionary: rather than simply defending Sarah, they chose to educate. Their lawyers spent consid- →

← erable time helping court officials understand transgender identity, the challenges faced by this community, and the human story behind the legal case.

When the ruling came in June 2024, nearly five years after her first arrest, it marked a watershed moment. Yes, Sarah was found guilty, but the magistrate handed down a suspended sentence, allowing her to serve her time outside prison. It was an unprecedented decision that reflected the court's newfound understanding.

"I believe this ruling opened the minds of the magistrate, the prosecutor, and the justice system generally," Sarah reflects. During proceedings, the magistrate openly admitted wanting to learn more about transgender persons, a remarkable shift in judicial attitudes.

The court went even further, requesting that Sarah participate in training workshops to educate court officials and the community about transgender experiences. What began as a prosecution had evolved into a platform for change.

Today, Sarah moves through Eldoret with a confidence she never thought possible. "These days, I walk around with my head held high. I don't pretend to be someone I'm not," she says, carrying a printed copy of Kenya's Constitution to educate other transgender people about their rights.

Her message to others in her community is powerful in its simplicity: "Don't be afraid to be who you are. You are a human being just like every other person."

“Every day I pray for Amka Africa to be blessed abundantly,” Sarah says. “I don’t know what could have happened to me without them.”

***Sarah**

A ripple effect

Sarah's case and experiences are huge personal victories, which offer a template for other people going through similar legal situations. Amka Africa now uses her experience to guide other transgender individuals through legal name-change processes, steering them away from potentially dangerous illegal alternatives.

Her story represents a crucial shift in how Kenya's legal system approaches transgender rights, proving that education and empathy can transform even the most challenging situations into opportunities for progress.

"Every day I pray for Amka Africa to be blessed abundantly," Sarah says. "I don't know what could have happened to me without them."■

*Name changed to protect privacy

Power in Solidarity: Women with Disabilities Win Historic Budget Allocations in Kilifi County

The story of women with disabilities in Kilifi County, Kenya, has long been marked by struggle. From violations of their basic rights to the failure by county and national governments to formulate policies and financial proposals addressing their plight, this group has faced significant challenges.


Discrimination has kept them from accessing essential healthcare, education, and economic opportunities, while their voices have been absent in leadership and decision-making spaces. Nowhere has this neglect been felt more acutely than in sexual and reproductive health services, where inaccessible facilities, harmful cultural attitudes, and inadequate funding have left many without the care and dignity they deserve.

Rights advocates for women with disabilities have been campaigning tirelessly to draw the county government's attention to two key demands: first, acknowledge in policies that women with disabilities constitute a strategic group requiring county focus; and second, allocate a budget to address this group's specific needs.

This rising wave of advocacy found its champion in the Dream Achievers Youth Organization (DAYO), a grassroots group committed to advancing the rights of women with disabilities in Kilifi County. With support from We Lead, DAYO set out on a bold mission: to lobby and advocate to the county government and key stakeholders to recognize and prioritize the unique needs of women with disabilities in both programming and financing.

Building momentum through dialogue

In 2022, DAYO began hosting a series of awareness forums and listening sessions with duty-bearers and healthcare workers. These gatherings became safe spaces where women with disabilities could speak their truths; sharing raw, firsthand accounts of exclusion and offering concrete recommendations for change.

Among their most urgent demands were the deployment of sign language interpreters in every healthcare facility, ensuring that no woman would ever again be turned away for lack of 



← communication. They called for disability-friendly infrastructure, the immediate operationalization of the Kilifi County Disability Act, and, most critically, the creation of dedicated budget lines to finance rehabilitation services, including the procurement of assessment machines and assistive technologies vital for their wellbeing and autonomy. These recommendations were submitted to the county government for action.

Empowering women to lead their own fight

But DAYO recognized that more needed to be done to drive home the message of inclusion. In a strategic shift, the organization empowered women with disabilities to lead campaigns for their own voices to be heard on critical needs.

This approach was launched in 2023 with the training of 12 women with disabilities on budget advocacy and leadership skills. The women also

learned how to hold duty-bearers accountable for promoting and safeguarding their rights.

Following the training, the women developed a memorandum highlighting poor communication, high healthcare costs, inaccessible facilities, and livelihood programs as areas requiring urgent county government action.

The memorandum was shared with several strategic officers within Kilifi County government, including the departments of Gender, Devolution, and Health; the chief of staff in the governor's office; the Department of Devolution; and members of the County Assembly.

Representatives from these offices pledged to address the issues raised. Crucially, they committed to pushing for the inclusion of disability issues in their respective departmental budgets and the overall county budget, ensuring financial →

← allocations were disability friendly.

Breakthrough: Historic budget wins

The results of these sustained advocacy efforts proved significant for the over 15,000 women with disability, given the absence of such substantial allocations in the past. On 4th July 2024, Kilifi County approved a program-based budget for the 2024/2025 fiscal year, presented by the Department of Gender and the Directorate of Social Services.

This budget allocated millions of shillings to programs aimed at improving the wellbeing of people with disabilities, particularly the more than 15,000 women with disability living in the county.

The allocations included approximately \$38,500 (Ksh5 million) for Persons with Disability (PWD) empowerment, \$23,100 (Ksh3 million) for procurement of assistive devices, and \$66,500 (Ksh8.6 million) for completing a PWD center in Malindi's Shella Ward.

The sustained advocacy by DAYO and women with disabilities achieved further wins. Kilifi County Referral Hospital and Mtwapa Sub-County Hospital now have sign language interpreters, though the challenge remains to extend this service to Level 2 and Level 3 health facilities throughout Kilifi County.

The advocacy also led to operationalization of the Kilifi County Disability Act. The Kilifi County Board for Persons with Disabilities—a corporate body responsible for overseeing disability-related matters in the county—is now in place.

Expected impact and future accountability

Women with disabilities believe the budget allocations will have far-reaching positive effects on their lives. "The assistive devices will increase our mobility and independence, reducing over-dependence on caregivers," said one elated woman with disability.

The PWD centre, once established, will support greater empowerment and autonomy for PWDs, particularly young women with disabilities. These interventions should help reduce the financial dependency of women with disabilities on their families and combat discrimination in service provision.

However, DAYO recognizes that these funds will only be meaningful if used effectively. This requires high levels of commitment and accountability on disability issues. Consequently, DAYO has strengthened the capacity of rights holders, particularly women with disabilities, on budget advocacy and social accountability to enable them to monitor the implementation of relevant county policies and Acts.

Through its active membership in the Kilifi County Disability Network (KCDN), DAYO continues to work alongside the Departments of Health and Gender and the National Council for Persons with Disabilities (NCPWD). This collaboration ensures the gains achieved are not only protected but built upon, driving forward a future where women with disabilities are central to the planning, budgeting, and implementation of county programs that affect their lives ■

LEBANON

Standing ground: A Syrian NGO's fight for refugee rights in Lebanon

The unfinished concrete buildings of Bekaa governorate were never meant to house families fleeing war. Yet as Israel's aggression escalated into full-blown conflict against Lebanon in September 2024, these skeletal structures became lifelines—rented for \$500 a month by an organization desperate to find shelter for the displaced.

"We saw our people stranded in the streets, sleeping in parks and under bridges. It was extremely heart-breaking," recalls Ola al-Jounde, a Syrian feminist activist and founder of Gharsah, a local women's rights NGO.

A country already at breaking point

Lebanon was already buckling under pressure when the new wave of displacement began. The country had been struggling with a massive influx of Syrian refugees for years and now found itself facing an additional crisis as more populations, including Syrian refugees who had found a new home in Lebanon, were forced to flee once again.

This convergence of crises was most acute in Bekaa governorate in Eastern Lebanon, some 50 kilometers from the capital city. The region, already home to one of the highest densities of

Syrian refugees in the country, suddenly faced an impossible situation: more displaced people seeking refuge in shelters that were already overflowing.

The Lebanese government, overwhelmed by the existing Syrian refugee population, was hesitant to accommodate more people seeking shelter in facilities that had reached their limits. This was the seemingly hopeless situation that Gharsah suddenly found itself in.

A decade of building trust

Founded in 2014 with a mission to provide educational support for Syrian refugee children living in camps, Gharsah had spent a decade expanding its reach and impact. The organization had grown beyond its original mandate, working not only to provide shelter for refugees but also to improve their access to education, particularly for refugee children.

More significantly, the organization had focused on empowering Syrian refugee women and girls with economic and other skills while ensuring their safety—experience that would prove invaluable in the crisis ahead.





← When the September 2024 displacement crisis hit, Gharsah was ready to act. With support from the We Lead program, the organization navigated the shelter crisis by finding alternative spaces, sometimes far from perfect, to serve as temporary homes for the refugees, especially women and girls.

Success, however, came with its own challenges. Lebanese security forces were not pleased with Gharsah's activities and began pressuring the organization to evict Syrian refugees from the schools. This pressure formed part of a broader anti-Syrian refugee campaign that had taken root in Lebanon, with Lebanese citizens increasingly demanding that Syrian refugees return to Syria.

The organization held its ground and managed to resist this pressure until their partner, Frontlines for Change, secured alternative shelters for the women and girls fleeing war.

What proved crucial during these tense moments was something Gharsah had been building for years: trust with local communities. Some of the activities implemented under the We Lead program had helped strengthen this relationship.

The power of community relationships

Ola al-Jounde reflects on how the trust Gharsah had cultivated between itself and local Lebanese communities became their salvation during these grim times. The communities in Bekaa →

← allowed Gharsah to run shelters even before securing official approval from the Lebanese government.

"While we struggled with government officials, local community members were supportive," she recalls. "This allowed us to bypass the ban on sheltering Syrian refugees without prior approval."

For Khaled Khansa, Gharsah's program manager, this community support exemplified something deeper. "Solidarity for me is about empathy and understanding. It is about being inclusive, feeling everyone's pain, and organizing for practical solutions."

The funding crisis

Even as Gharsah successfully navigated the political and logistical challenges of providing shelter, another crisis loomed: money. The pressure of supporting refugees quickly exhausted their resources, creating a situation that tested the organization's resilience.

"People fled their homes again, leaving everything behind. We had to provide for them while we struggled with lack of funding and support," Khaled explains. "All relief expenses were covered by our core funds. We only received small additional grants from our regular feminist donors."

The organization was forced, with the little fundings it had, to meet not only foods, but the sexual and reproductive health needs of hundreds of women and girls trapped by this war

The funding shortage during the war presented serious challenges not just for Gharsah, but for

many other community organizations caring for Syrian refugees. "We noticed that all groups working with Syrian refugees faced difficulty in securing funds," Khaled observes.

This pattern led many women's rights organizations to suspect that a political decision had been taken not to fund them for assisting Syrian refugees.

When funding did materialize, new problems emerged. Khaled describes how the paperwork was complicated and time-consuming, creating additional barriers during a crisis that demanded immediate action.

The fluid war situation made it nearly impossible to comply with standard donor conditions, such as obtaining multiple quotations before procuring services and goods.

Beacons of hope

Against this backdrop of bureaucratic obstacles and funding challenges, certain programs stood out. The We Lead program became what Khaled describes as "a beacon of hope in these difficult circumstances."

He reserves praise for feminist donors such as Hivos, commending their flexibility and participatory approach to social work. "They are supportive, understanding, and truly participatory. They make bureaucratic procedures easy and simple. We do not feel [power] hierarchy with them. Theirs is truly a partnership."■

Giving hope to women and girls trapped in war

The classroom that once echoed with children's laughter now sheltered families huddled together on cold floors, their possessions reduced to whatever they could carry while fleeing for their lives.

In September 2024, as the Israel-Hezbollah war intensified in Lebanon, bombs and bullets transformed Lebanon's poorest neighborhoods into battlegrounds, sending waves of terrified families scrambling for sanctuary. Schools, those bastions of learning and hope, became overcrowded shelters of last resort, their corridors now filled not with the chatter of pupils, but with the whispered fears of the displaced.

Yet these learning institutions, now their final refuge, were woefully unprepared for the tsunami of humanity that crashed through the doors.

Nowhere was this crisis more acute than in Akkar, a remote and impoverished region in northern Lebanon where economic indicators had long painted a bleak picture. Here, in this forgotten corner of the country, public facilities, including schools, stood as crumbling monuments to government neglect.

When hundreds of desperate families sought refuge in these dilapidated buildings, teachers found themselves facing an impossible situation.

They were totally unprepared to care for the wave of displaced persons who now called their classrooms home.

It was into this chaos that I'MPOSSIBLE stepped forward.

Founded in 2017 with a mission to build sustainable, prosperous, and inclusive communities in the Akkar region, I'MPOSSIBLE had already seen the area's struggles first-hand. But nothing had prepared them for this.

"The needs kept growing as displaced people were flooding into Akkar, and organizations were not prepared to handle it," recalls Jana Makhoul, co-founder of I'MPOSSIBLE. "We immediately jumped to work, opening shelters and coordinating with municipalities to provide aid."

With the support of We Lead program, the organization managed to provide over 600 women and girls with food, shelter, healthcare necessities including menstrual pads, medical attention for pregnant women and lactating mothers, and access to midwives.

To get the teachers to help in providing these services, I'MPOSSIBLE offered rapid training to teachers, transforming overwhelmed educators into capable crisis responders.



← private, confidential spaces where women and girls could seek support with dignity. For the most serious cases of sexual violence, they developed referral pathways to partner organizations with specialist expertise.

"We provided psychosocial support and case management in many instances," Jana notes, "but we could not follow up properly because women returned home after the ceasefire. We lost contact with them."

This challenge of broken continuity highlighted a critical gap in emergency response, one that continues to haunt Jana's reflections on their work.

The experience exposed systemic weaknesses that extend far beyond any single organization's ability to address. Budget restrictions hampered response efforts across the board, with rigid donor requirements creating bureaucratic barriers at precisely the moment when flexibility was most needed.

"We could not act freely to meet our staffing and resource needs," Jana explains with clear frustration. She now advocates for emergency funds with streamlined protocols, allowing organizations to access resources "without complicated paperwork and long waiting periods before approvals and disbursements are made."

Perhaps most significantly, the crisis revealed the cost of poor coordination amongst feminist organizations. Without unified planning, aid distribution became haphazard and inefficient.

"We should have given more priority to strengthening the network," Jana reflects. "Lack of

"We need to meet, have plans and design an organized way of working as a team," ... "We must draw lessons from this war and better support each other in the future."

coordination resulted in unorganized distribution of aid across shelters."

A vision for the future

Despite the challenges, Jana's vision extends beyond crisis response to fundamental system change. She believes the response to women and girls' needs could have been far more strategic and targeted with better coordination of feminist organizations during emergencies.

"We need to meet, have plans and design an organized way of working as a team," she says. "We must draw lessons from this war and better support each other in the future."

Her roadmap is clear: resource sharing, coalition building, and developing a common vision that, in her words, "unifies us and honors our diversity." ■

GUATEMALA

Comic book pushes boundaries of SRHR enjoyment for Guatemalan women with disabilities

Many people in Guatemala never expected them to produce a book that would tell their own stories about sexual and reproductive health and rights. They weren't expected to undertake a project that was intellectually demanding either. They proved everyone wrong.

These are the women with disabilities of Guatemala who produced the first-ever comic book of its kind in their country, telling their personal stories and experiences while addressing their sexual and reproductive health and rights (SRHR).

Known as Las Super Lemuras, the book promotes inclusive sexual and SRHR education for women with disabilities in all their diversity and uniqueness. It is also valuable for young people who are not disabled. Topics covered include SRHR, LGBTIQ+ rights, gender-based violence, and the undignified way health care providers often treat women with disabilities.

The book presents problems around these topics and then provides solutions to increase learning and challenge stereotypes and attitudes about women with disabilities.

More than just a document, it's a powerful expression of freedom by women with disabilities, speaking about their emotions, desires, their bodies, hopes, and expectations. It contains conversations these women have been shut out from for far too long.

A collective genesis

The idea for the book was born in 2023, following several presentations made at The Interactive House, a playful space designed to teach and raise awareness among the general public and the families of women with disabilities about the human rights and SRHR of these women.

Further presentations took place at Casa Joven, CECADA, and CRI on how to present the voices and stories of women with disabilities in an engaging manner. These sessions were followed by another meeting in Palencia, where young women with disabilities from various regions of Guatemala took part.

They agreed to continue the conversation at the spaces of the Benevolent Committee for the →



← Blind and Deaf of Guatemala, where the decision to create the comic book was made. In May 2024, two We Lead partners worked with women with disabilities to produce the comic book, the Integral Rehabilitation Centre (CRI) of the Benevolent Committee for the Blind and Deaf of Guatemala and Casa Joven.

Time to exhale

The heroines who developed the book were inspired by fellow women who are part of the We Lead program. As content creators, the women said the process of writing the book was empowering for many of them. They have now become leading advocates for SRHR in their communities.

“At first, I was scared,” one of the women with disabilities admitted. “But expressing myself through drawing helped me to set new boundaries as a deaf woman.”

“People think we don’t have questions, desires, or rights, and now we are the ones giving the answers,” one of the women said.

“This book has enabled us to raise awareness about the importance of respecting the right to sexual and reproductive health of young women with disabilities,” added a member of Collective Las Lemuras.

Changing the narrative

When the comic book was launched, it communicated a powerful message: when women with disabilities control their narratives, everyone listens and learns. The book has been widely distributed in 19 public and private spaces to reach as many people as possible.

Las Lemuras Collective, which facilitated this work, says the publication of the comic book is a ground-breaking step in inclusive SRHR education, ensuring that young people with disabilities have a voice in shaping narratives about their own rights.

The book is now being used as a tool to raise awareness about the challenges and violations many women with disabilities face, including stigma and exclusion ■

It is carnival when the LGBTIQ+ Pride and Visibility Parade reclaims its place

In 2024, the streets of Quetzaltenango, Guatemala, pulsed with carnival energy even though it was June. Long lines of people in colorful outfits marched through the city, dancing to music amongst street entertainers, while curious crowds lined the sidewalks to watch the LGBTIQ+ community create awareness about their rights and needs.

For the over 1,500 participants, this wasn't just a celebration; it was a declaration. This community, known to suffer numerous rights violations in silence and denied chances to express themselves, voice their concerns, or tell their own stories, had refused to be muzzled any longer. Their determination filled the streets of Quetzaltenango as they demanded their human rights and respect in the community.

For many years, this march had been absent from Guatemala's streets. The drums and music fell silent following Covid-19 restrictions imposed throughout the country, as in many other nations.

Even after health restrictions were lifted, limitations imposed by the political establishment followed. The right-wing government that took power closed the spaces and platforms where LGBTIQ+ people had made themselves visible, delaying the return of the march by more than three years.

A defining moment returns

In June 2024, the determination to fight for rights resurfaced with the reinstatement of the LGBTIQ+ Pride and Visibility Parade. This day will be remembered by many as a defining moment in the lives of the LGBTIQ+ community.

The massive importance of this parade wasn't lost on participants. This wasn't just a parade; it was a platform to make themselves and their issues visible, celebrate their identity, advocate for LGBTIQ+ community rights, and push for inclusion in public discourse on social, economic, and political matters affecting them.

The march also served as a crucial platform for communicating the needs and rights of young lesbians and bisexual women related to sexual and reproductive health. It tackled discrimination, promoted acceptance, and facilitated discussions about sexual and reproductive health rights (SRHR).

Stronger than ever

In 2024, the LGBTIQ+ community reclaimed the streets with a stronger presence than before thanks to the tenacity of local organizations that built alliances and developed innovative strategies: Grupo de Apoyo Xela (GAX), BeRadFem, Asociación IDEI, the Kabawil clinic, and Asociación Iniciativa por la Diversidad Sexual de →

← Occidente (IDSO).

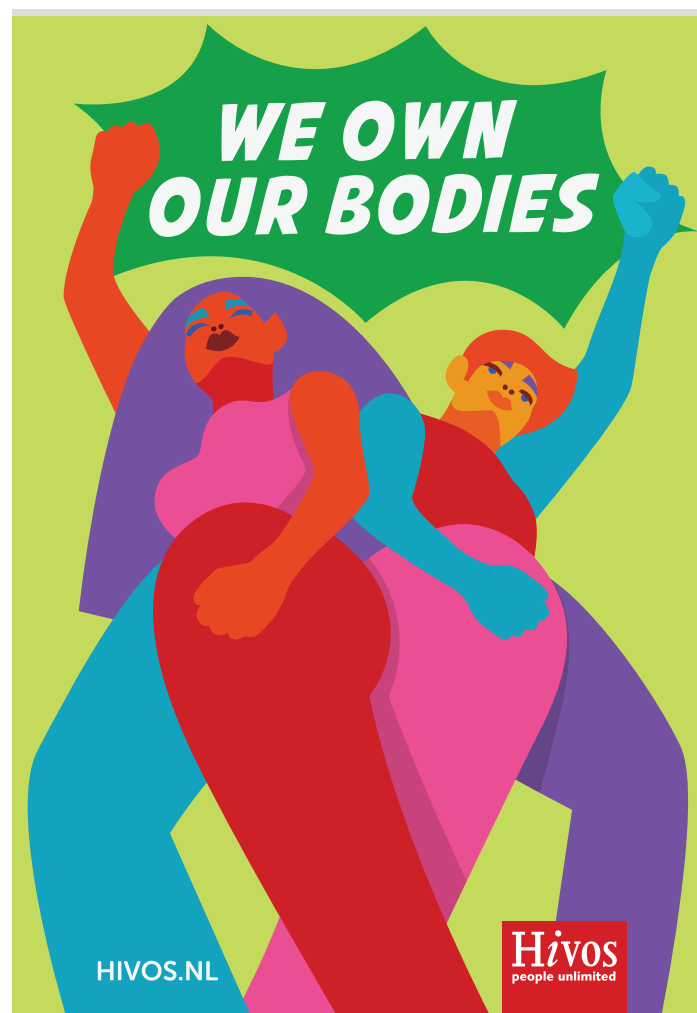
Vidas Paralelas, with support from We Lead, played a key role in reactivating the Pride Parade march and creating significant awareness about LGBTIQ+ community issues and needs with their activities. These initiatives included empowering LGBTIQ+ people to appreciate their rights, learn how to express them, and demand justice. The organizations used International Women's Day on March 8 to create awareness about community rights, and set up safe spaces where LGBTIQ+ people could discuss issues affecting them and propose solutions to the challenges they faced.

Vidas Paralelas has been a frontrunner in using innovative strategies to keep the community visible. On April 26, 2024, they used Lesbian Visibility Day to transform Central Park into a space for open dialogue with artistic performances about rights.

This parade helped strengthen and enhance solidarity among organizations and rightsholders, particularly young lesbian and bisexual women, ensuring that issues affecting these marginalized groups became part of public discourse and policy agendas.

Growing momentum

The march's revival strengthened solidarity and collaboration among local organizations advancing LGBTIQ+ community rights. In 2025, participation grew again, with new groups including university students and youth organizations joining the march.



According to Vidas Paralelas, the return of the Pride and Visibility Parade forms part of broader strategies including content creation and recreational activities that happen on key international dates such as Lesbian Visibility Day and International Women's Day. These occasions are used to promote visibility, awareness, and pride within the LGBTIQ+ community ■

HONDURAS

Women with disability overjoyed with their SRHR sign language dictionary

The deaf women of Honduras struggle with compound challenges that dominate their lives: the inability to hear, to exercise their sexual and reproductive health rights (SRHR), and to communicate their feelings and desires.

Each day is a struggle for them to enjoy their SRHR – something that for many people is a routine affair. Complicating the situation is the fact that their community and families often can't figure out what these women need and want.

The problem: nobody was speaking to them about SRHR issues in a language they could understand. The result was continued ignorance about sexual violations, forced use of contraceptives, and a worrying trend of sexually transmitted diseases among deaf women.

The end of the tunnel in sight

So it was heartening when FENAPEDISH reached out to these women in January 2023 and started to co-create solutions to their problems with funding from We Lead Program.

Their consultations led to one of the most groundbreaking solutions to the communication and awareness difficulties the women were facing when it came to SRHR issues: the first ever sexual and reproductive health Sign Language Dictionary.

With it, the SRHR knowledge gap they had experienced for many years closed. They could now make their own informed decisions on matters of reproductive health.

Translating complex concepts into understandable gestures

The journey to developing this dictionary was led by two organizations, FENAPEDISH and Fundación Llaves, together with deaf women rightsholders. They started off holding meetings with representatives of the Honduran Association of the Deaf to identify relevant SRHR words that needed to be coded into Honduran sign language.

This was followed by a meeting between the We Lead team and Fundación Llaves to consider two things: the contents of the dictionary and the financial and technical support to develop it.

"Translation was not just about choosing any word to go into the dictionary. We had to reflect on complex concepts like consent, menstruation, pleasure, violence, and find the associated visuals that made them understandable and meaningful to the deaf population," explained Luis Alberto, interpreter, and member of the Honduran Association of the Deaf.

The transformative outcome of these efforts became a reality in May 2023, when the dictionary,



← as part of a toolkit, was published and launched. Some of the topics covered in the dictionary are human diversity, sexual and reproductive rights, and sexual violence.

The toolkit also includes informational materials such as a Guide to SRHR, a comic strip with conversations about the reality of women with disabilities, and SRHR brochures.

A turning point

For many young women with hearing disabilities, this toolkit marked a turning point in their lives. It not only improves access to information, but also opens doors for them to participate in SRHR discussions, rights advocacy initiatives, and enjoy personal autonomy.

"Now I can finally name what I feel. And when I can name it, I can defend it," one of the deaf women said full of excitement at her newfound freedom and knowledge to express her SRH needs and rights.

Another young woman agreed: "Before the publication of this dictionary, I was in the wilderness about SRHR issues. Even when I attended a meeting discussing these issues, without a translator to help me, I was at a loss. Now, with the dictionary, I can follow such conversations, ask questions, and even explain to others what I have learned."

Some of the women who have followed the We Lead-supported training are now using the dictionary and the toolkit to help train other deaf women in SRHR matters.

Besides strengthening their abilities to advocate for SRHR and coordinate strategic actions with decision



makers in state institutions, the dictionary and the toolkit form a major life-changing resource.

An invaluable resource

In training, the toolkit has become an invaluable resource to help young deaf women appreciate their SRHR. It is now being integrated into comprehensive sexuality education programs, health care services, and political advocacy efforts by state and non-state actors in Honduras.

Organizations such as Secretariat of Social Development (SEDESOL), Secretariat of Human Rights (SEDH), The City Women Program in Honduras, Llaves Foundation, Mariposas 88 Collective, and Youth Action use the toolkit in their courses for women with disabilities.

FENAPEDISH is now exploring how to replicate the toolkit in other regions where health professionals and educators are in dire need of training materials for advancing the rights women with disabilities ■

From silent observers to policy makers: women with disabilities in Honduras claim their decision-making power

As communities and governments make decisions on political, economic, and social issues affecting their populations, one group has consistently remained a silent observer in these conversations: women.

The story becomes even more troubling for women with disabilities, whose views and voices are rarely recognized in decision-making spaces.

This is what the National Federation of Parents of People with Special Needs of Honduras (FENAPAPEDISH) and Mariposas 88, together with other groups in Honduras, set out to change.

Creating space for voices

In November 2022, FENAPAPEDISH and Mariposas 88, with funding support from the We Lead program, joined other organizations to create the first Women and Disability Roundtable—a formal decision-making space led by and for women with disabilities in Honduras.

This space creates opportunities and empowers women with disabilities to share their views on matters affecting them and articulate what they want the government and other actors to do for them.

The five women with disabilities and their caregivers who sit on this roundtable are chosen based on their knowledge of women's sexual and reproductive health needs and rights. They work closely with Wendy Aguilar, a government officer who communicates their decisions and recommendations to key government organs.

Aguilar, who works at the Ministry of Social Development within the Ministry of Health, serves as the link between women with disabilities and the Ministry on political matters and actions that address these women's needs.

The Ministry of Social Development is tasked with ensuring greater efficiency and effectiveness of the social protection system, guaranteeing the enjoyment of social, economic, cultural, and environmental rights for vulnerable groups.

Targeting legal reform

One of the key reforms women with disabilities are seeking is the amendment of the Integral Disability Law, known as Ley Integral de Discapacidad.

Other areas the women have singled out for government attention include a comprehensive reform of the Law on Equity and Comprehensive Development for Persons with Disabilities →



← (Legislative Decree 160-2005), creating the first Public Care Policy for caregivers of persons with disabilities, establishing a partnership state institution to create a training and capacity-building program on the proper treatment of persons with disabilities, and establishing a space in the Technical Care Roundtable (MECUIDA) to promote the Public Care Policy.

In 2024, reforms on the law began, with the Libertad Refundación (LIBRE) Party Caucus of the National Congress of the Republic of Honduras receiving memorandums from interested parties.

Organizations working with people with disabilities sent proposals that, among other things, addressed recognizing the SRHR of women with disabilities and the need for caregivers for people with disabilities.

From conversation to action

The creation of decision-making spaces involving women with disabilities is considered one of the most significant initiatives in developing comprehensive national norms and policies that address the wellbeing of women with disabilities in Honduras.

Aguilar notes that establishing the Roundtable has improved the real representation of the voices and views of women with disabilities on matters that affect them. For the first time, she adds, women with disabilities have a direct voice in shaping public policies that affect their lives, such as the urgent reform of the Comprehensive Disability Law.

“Before, we did not have a place to express ourselves, let alone being considered. Now, we are part of the process to design the solutions,” said Anita Josselin Antúnez, who is deaf.

A model for change

The Women and Disability Roundtable has been recognized as a model that guides how to take part in and influence public policies on matters related to rights, inclusion, and social justice.

From silent observers to active policy makers, Honduras’s women with disabilities have not just found their voice; they’ve created a platform that ensures it will be heard by those who make the decisions that shape their lives ■

NIGER

Advocacy in action: How young women are reclaiming their SRHR in a refugee camp

The health center at Garin Kaka refugee camp in Maradi, Niger, was supposed to be a lifeline for women and girls seeking sexual and reproductive health services. Instead, it became a place they avoided at all costs.

Despite being established, among other things, to improve sexual and reproductive health outcomes, the facility served as a stark reminder of how cultural insensitivity can undermine even the best-intentioned health care initiatives. Of the 1,794 women in the camp, only 10 percent had the courage to visit the center for services.

The reason was simple yet profound: a male nurse had been appointed to attend to women clients' most intimate health needs.

For the women and girls of Garin Kaka, consulting a male health care provider about sexual and reproductive health matters felt culturally inappropriate. Many feared the angry reactions of their husbands and community members if they sought such services from a man. Rather than compromise their cultural values, they chose to suffer in silence.

The consequences were devastating. Pregnant women declined to attend clinics or seek medical support, exposing themselves to serious health

risks. Many ended up giving birth in tents or under trees without medical assistance. Stories began circulating about five women who died from preventable maternal and infant deaths; deaths that could have been avoided with simple consultations, better hygiene, and basic medical support.

For those fortunate enough to survive childbirth, access to family planning advice and commodities remained problematic, leading to closely spaced births and poor health outcomes. This single barrier threatened to increase maternal mortality, while denying an entire generation of women and girls their sexual and reproductive health rights.

A community-led solution

Recognizing the gravity of the situation, Cellule Nigérienne des Jeunes Filles Leaders (CNJFL), with support from the We Lead program, stepped in with a comprehensive strategy. Rather than imposing external solutions, they chose to empower the community with knowledge, information, and skills to understand the importance of sexual and reproductive health services, and to demand how they wanted their health center to be run.

CNJFL launched a series of well-coordinated advocacy initiatives designed to build community support for employing a female nurse at →



← the camp's health center. Through town hall meetings, training sessions, and coaching programs, they worked to sensitize the community about the importance of women and girls accessing sexual and reproductive health services in a culturally appropriate environment.

The approach was methodical and inclusive. Ten religious leaders, six camp leaders, and ten local health staff were trained and involved in creating awareness about the need for gender-sensitive health care that respected cultural realities.

Building evidence for change

To strengthen their advocacy efforts, CNJFL conducted research to provide evidence-based arguments about the sexual and reproductive health problems in the camp. A survey of 300 women

revealed poor access to maternal and family planning services, the need for income-generating skills training, and psychosocial assistance for survivors of sexual and gender-based violence.

The organization also launched awareness radio campaigns, reaching more than 2,000 listeners. These programs explained to the entire community, including local leaders and heads of households, why women needed a safe, respectful health care space adapted to their realities.

Meanwhile, CNJFL trained about 30 young girls to advocate for youth-friendly sexual and reproductive health services. These young champions went throughout the villages, informing their peers and other women about their rights and the importance of seeking proper healthcare. →

← Overcoming initial skepticism

The community's initial reaction was cautious, as one community elder later recalled: "To be honest, we had our doubts at first. We thought these people were coming to impose things that were foreign to our culture or disrupt our way of life. But very quickly, we saw that, on the contrary, they were seeking to understand our realities and adapt to them. Above all, they wanted to correct what was harmful to our health and dignity. They put the well-being of our community at the center of their actions."

"They listened to the women, respected our customs, and provided concrete solutions. It was this respectful and humane approach that convinced us to fully support their efforts."

The turning point and lasting impact

The cumulative effect of these efforts was an empowered community that began actively demanding the appointment of a female nurse at the refugee camp health center. A Community of Action (CoA) was established to advance these rights, conducting intense lobbying and arguing that installing a female nurse would enhance gender sensitivity in the camp's health care system.

Under pressure from multiple directions, camp management finally took decisive action. In September 2022, officials appointed a female nurse to serve at the health center.

The change was dramatic and immediate. Women and girls began viewing the health center positively and streamed in to receive sexual and reproduc-

tive health services. Within two years, the number of women and girls seeking services at the health center had increased to 80 percent—meaning 1,435 of the camp's 1,794 women were now actively using the facility.

The quality treatment they received from the female nurse created a ripple effect. Women became agents of change, encouraging others to consult the health center and stop giving birth at home or in dangerous conditions.

The employment of a female nurse had effectively removed a critical barrier affecting health-seeking behavior. More importantly, it showed the power of community-led advocacy in shaping inclusive and responsive health systems, as well as refugees' ability to influence decisions that directly affect their well-being.

Sustaining progress

To ensure the momentum continued, CNJFL helped set up women's committees with a mandate to monitor the provision of sexual and reproductive health services, hold camp health services accountable, and create awareness about the importance of women and girls seeking proper health care. These committees also focus on women's leadership and addressing gender-based violence.

The transformation at Garin Kaka refugee camp serves as a powerful reminder that effective health care isn't just about medical expertise—it's about understanding and respecting the communities being served. When cultural sensitivity meets community empowerment, the results are lifesaving ■

When elders lead change, the forbidden becomes the practice

Their voices were low; their faces etched with concern. In February 2024, 20 of the most influential community leaders in a remote village in Niamey, Niger – the moral compass of their community – gathered for an urgent consultation.

WANEP Niger, a regional peacebuilding organization and partner of the We Lead program, had gathered them to address pressing health challenges in their community. At the top of the list was improving access to sexual and reproductive health rights (SRHR) services, especially for women and girls.

The elders needed to solve the access crisis while respecting deeply held cultural values.

A coalition takes shape

They decided to create a coalition to tackle the problem together. This influential team included the Village Chief, an Imam, and wise men experienced in mediation processes, among others. Their challenge was finding a delicate balance between traditional norms and sexual and reproductive health rights, particularly those of young girls.

WANEP Niger also asked them to address the safety and protection of women and girls from sexual

and gender-based violence. The coalition asked others to join in: local authorities, defense forces, human rights defenders, opinion leaders, women, and young people from marginalized communities.

Confronting complex challenges

Limited knowledge of SRHR – including consent, contraception, and menstrual health – was widespread, as was sexual and gender-based violence (SGBV). The situation was further complicated by sociocultural constraints, misinterpretation of religious teachings on SRHR, and the stigmatization of SGBV survivors.

WANEP Niger used three key strategies: intense community consultations, comprehensive SRHR training for coalition members, and getting formal commitments from the elders to support the health rights of women and youth.

The training covered access to reproductive health services, cultural practices that hinder this access, and Niger's legal framework regulating sexual and reproductive health matters. They learned best practices and strategies for promoting and securing the rights of those needing these essential services.





← Results stream in

Some months after the coalition's formation and capacity-building sessions, the results began to show. Women and girls started experiencing tangible benefits from this community-led initiative.

Community members became actively engaged

in conversations around the sexual and reproductive health rights of women and girls; topics that had previously been considered taboo.

More than 7,000 people were reached through community educational talks, interactive radio programs, intergenerational forums, →

← and social networks including Facebook and WhatsApp, with conversations centered on women's and girls' access to SRHR services.

The elders took the lead in spreading these crucial messages. An Imam spoke on community radio in Birni N'Gaouré, citing verses from the Quran and Hadiths that empowered him to educate young girls about health and body protection.

He emphasized the importance of parent-child dialogue on issues related to puberty, marriage, and early pregnancies. He showed it was possible to reconcile religious values with the right to sexual and reproductive health information.

Similarly, a village chief in Tessa village engaged his community members on SRHR matters through several community dialogues, addressing early marriages, sexually transmitted infections, and gender-based violence.

The impact resonated with community members. "Initially, I did not see the importance of sex education. But when I saw the village chief support the program, I listened. I learned that it's our responsibility to protect our children through words, not just prohibition," says a father of young people in Tessa village.

Opening hearts and minds

Now there is greater openness to dialogue on sexual and reproductive health matters, particularly through educational talks and community discussions.

Dialogue sessions between young people, community leaders, and health service providers have become a normal feature of community life.

Young girls are daring to ask questions and request sexual and reproductive health information or services, while parents are beginning to see these requests as preventive measures rather than actions that encourage deviant behavior.

"Before, I would never have dared to ask a question about puberty or infections. Now, I can talk to my aunt and even our religious leader. I feel safer," said 17-year-old Aïchatou.

A mother of four in Commune 2, Niamey, observes: "Before, I thought talking about these topics with my daughter would encourage her to make mistakes. But after attending the discussion with the imam and educators, I understood that silence is more dangerous. Now, we talk about it together."

Sustainable impact

The coalition has also seen increased support for survivors of sexual and gender-based violence and improved distribution of food and hygiene kits at the obstetric fistula referral center in Niamey.

Community elders and other stakeholders now collaborate, network, share knowledge, mobilize resources, and collectively address barriers to the enjoyment of sexual and reproductive health rights ■

NIGERIA

From opponent to supporter of SRHR of women and girls: The story of Chief Ala

Chief Yina Ala was known to be a no-nonsense man who did not hold conversations about expanding the sexual and reproductive health and rights of women and girls beyond what was allowed and accepted by his Ortar community's customs.

A powerful traditional leader, Chief Ala's resistance to SRHR discussions was making it difficult for not only women and girls, but also for organizations pushing for greater SRHR to work freely in his community.

Troubled with what was happening, one organization, Disability Rights Advocacy Center (DRAC), decided to contact Chief Yina to tell him why his support for SRHR services in his community was so important. For DRAC, Chief Yina held the solution to reducing the resistance women and girls were experiencing.

The challenge for DRAC was how to approach the Chief and get his support for expanding access to SRHR services by women and girls. Initial attempts to meet with him failed as he viewed such talks as an affront to traditional norms.

Strategic actions that transformed the Chief

DRAC, supported by the We Lead program, had to devise tactical ways to arrange a meeting. Their

strategic engagement with other community leaders got them the support of respected community influencers to act as emissaries to the Chief. Finally, he agreed to a formal meeting at his palace with DRAC.

When the day arrived, DRAC's team presented a compelling case for why SRHR issues in the community needed urgent action. More importantly, they spoke about the need to address misconceptions about disability and SRHR. They framed SRHR as a human rights matter; not a taboo, emphasizing the vulnerabilities and needs of women and girls with disabilities (WGWD). The organization then presented to the Chief "A Leader's Guide to Disability Inclusion," a publication specifically designed to help figures of authority better understand these matters.

This constructive dialogue impressed the Chief, but he was non-committal. Follow-up meetings were held with the Chief to win his trust and support. They worked. Once a reluctant traditional leader, Chief Ala agreed to be on the frontline in championing access to SRHR for women and girls with disabilities (WGWDs) in his community. To date, he remains a vocal advocate.

His transformation had massive ripple effects in the Ortar community. Members of his ruling



← council, too, joined in to push for greater access to SRHR and enjoyment of these rights by women and girls. They committed to challenge harmful cultural beliefs about women with disabilities and to promote disability inclusion. Slowly, their shift in mindset started to positively influence the attitudes of families and community members on the rights of WGWD.

Women and girls enjoy expanded rights

Women and girls in the Ortara community say Chief Ala's conversion from an opponent to a supporter on access to SRHR has been a blessing. He has created awareness about the subject and dismantled myths such as "family planning is taboo" or "disability is punishment from the gods so persons with disabilities should be avoided."

In the community, he uses his influential council members to challenge misconceptions and beliefs that negatively affect enjoyment of SRHR. This has seen more women and girls' stream to health facilities to get their needs attended to.

To his credit, the Chief now promotes full inclusion of persons with disabilities in health care, especially in SRHR provision, and in other aspects of social life. Every month, he visits primary health care centers under his authority to advocate for inclusive SRHR. His actions and those of other community leaders have increased local ownership, endorsement, and acceptance of SRHR-related discussions in the community.

DRAC is now using this favorable environment and culturally-sensitive approaches to further break down barriers to SRHR services for WGWD.

For these rightsholders, a chief's personal transformation represented hope, unfettered access to SRHR, and inclusion in spaces where they were once invisible. The success of this We Lead supported initiative proves that shifting societal attitudes, building local leadership, and promoting systemic change within communities is key to increasing the enjoyment of SRHR for women and girls with disability ■

A traditional chief becomes the greatest champion of SRHR inclusion and dignity

Tired of community leaders preventing young people from enjoying their sexual and reproductive rights, an organization in the Lagos state managed to do what many people thought was impossible. They got the community leaders to become frontline advocates championing these rights.

Known in many African societies as gatekeepers of cultural norms, community leaders think talking about or using SRHR services is only for adults. For young people, it's a taboo. From the leaders' perspective, a person's sexuality is controlled by the family and society, not oneself.

At the same time, young women across communities in Nigeria were constrained by cultural prescription from enjoying their SRHR needs, a health care system that was judgmental when offering these services to young people, and disrespectful language used to discuss SRHR.

With support from the We Lead program, Vision Spring Initiatives (VSI) decided to jump into this context and try to change the practices, narratives, perceptions, and attitudes about young people's access to SRHR services and enjoyment of their rights.

Crucially, VSI gained support from another import-

ant corner: an influential Baale, the traditional chief of Ibeshe village, in Lagos State. Initially, he was hesitant to engage in such initiatives and conversations, fearful of being branded as a traitor to the community's social norms.

But through training, Chief Jimo Badejo emerged as a vocal and committed SRHR champion. He is now a powerful voice and advocate of SRHR rights for young women and girls. On many occasions, he has helped amplify their voices at SRHR workshops and public dialogues and influence debate in broader community and policy spaces. His support and public statements about SRHR values have lent credibility to the cause and opened doors for SRHR actors in the community to engage in policy advocacy.

"I am happy to be part of this project. I have not only grown in knowledge, my heart has grown bigger, my mind has become more open, and I am able to speak up for young women and girls," said Chief Badejo.

Chiefs join the SRHR liberation movements

His story is not an isolated one. In another six southwestern states of Nigeria - Lagos, Ogun, Oyo, Osun, Ekiti, and Ondo- a total of 90 communi-



← ty leaders, including religious leaders, are also doing the same in their communities, thanks to VSI initiatives there as well. The elders' conversations center around ending stigma and harmful stereotypes, and allowing comprehensive sexuality education.

How did this happen? It was in 2022 when VSI started a series of structured engagements with community leaders in the six states about young women's and girls' SRHR. The organization convinced them of the importance of supporting the cause. Many of them were persuaded.

This breakthrough, however, did not come as easy as it sounds. Some leaders remained resistant to the proposal VSI was making, saying it went against traditional views and religious teachings on sexuality, bodily autonomy, and gender equality. In addition, such discussions have always created discomforting situation between adults and young women and girls.

Winning strategies

However, VSI's strategy of building trust, listening to concerns, and tackling SRHR conversations with cultural sensitivity, helped to break down →

← their resistance. Rather than dismissing them, VSI learned to use storytelling, human-centred approaches, and lived experiences of young women and girls to gently confront harmful attitudes.

“Building on this foundation, we deployed the Value Clarification and Attitude Transformation (VCAT) training model—a proven tool that invites personal reflection, empathy-building, and non-confrontational dialogue around SRHR issues,” says VSI.

Using the model, community leaders were encouraged to examine deeply held beliefs, question inherited norms and connect emotionally with the lived experiences of rightsholders; particularly young women and girls who were experiencing stigma, discrimination, and limited access to health and rights services.

Elders advocate for SRHR rights

The elders listened and became key champions of the SRHR rights of women and young girls. Their support was a major cultural shift that in turn helped to shift attitudes, create new alliances, and influence community members to appreciate the rights young women and girls to access SRHR services and products.

Indeed, people in the communities within the six states noted that the leadership of community leaders paved way for greater inclusion, protection, and dignity for rights holders in hard-to-reach communities.

These positive changes at the society level can also be attributed to VSI’s dedicated and commit-

“**...We deployed the Value Clarification and Attitude Transformation (VCAT) training model—a proven tool that invites personal reflection, empathy-building, and non-confrontational dialogue around SRHR issues**”

ted team and young women and girls being on the frontline of change. In addition, having a traditional leader acting for their wellbeing sent a powerful message: that their rights are valid, their voices matter, and that they deserve protection and support within their own communities and families.

This endorsement helped reduce stigma, leading to community acceptance, and created safer environments for the young people to express themselves on SRHR matters.

The successful engagement of community elders in such sensitive matters demonstrates how inclusive dialogues can shift deeply entrenched social norms and create a favorable environment for women and girls to enjoy their rights. It further proves that even in the most rigid cultural spaces, norms and attitudes can be changed when influential people in the community become the change agents ■

