

**PEER SUPPORTERS TRAINING
NOTES**

SSABH PROJECT

DRAFT II

NOVEMBER 2005

(replace with film)


FOREWORD

One of the key education goals we aim to achieve within our education system is that of 'individual development and self-fulfilment'. This involves identifying the potential in the young people we meet as teachers and providing opportunities for the maximum development of their potential. A vital element of this individual development is that of positive character formation, which requires a planned approach focusing on the needs of our pupils and consideration of the methodologies we can use to help mould these young characters. Along with the teachers, parents have a central role to play in fostering sound morals and religious values in order to help children grow up into self-disciplined, self-reliant and socially integrated citizens.

We appreciate, therefore, the content of the Primary School Action for Better Health training programme, which has been offered to School Inspectors, TAC Tutors, Headteachers, Resource Teachers and Parent/Community Representatives. The material has now, been adopted for SSABH, guided by formative research findings carried out in 12 sites in secondary schools in Kenya, in the year 2005. The central objective of the programme of bringing about positive behaviour change in young people is clearly reflected in these training notes, which offer a range of information and activities that can support teachers and parents in creating a supportive school and home environment to support healthy behaviour patterns and characteristics. As the programme has been designed to address the current most serious threat to the well being of our young people, that of HIV infection, it is a valuable asset to any teaching force. The material incorporates guidance on technical issues such as the integration and infusion of HIV and AIDS information in existing school activities, as well as substantial material on adolescent health and development in the context of strong life skills and living values.

Ministry of Education Science and Technology (MoEST), and Ministry of Health (MoH) personnel already trained under the programme will find these materials essential in passing their knowledge on to colleagues as they build support for the full incorporation of HIV and AIDS education in their schools and communities. The materials are intended to be used as practical reference material by those who have already attended the PSABH and SSABH training programme and to support them when running in-service courses for both new and experienced teachers and parents.

We are grateful to DFID and USAID for funding the PSABH and SSABH programmes.



Mary Gichuru
CfBT Senior Projects Manager

ACKNOWLEDGEMENTS

DFID
USAID

For funding PSABH project managed by CfBT.
For funding SSABH project managed by CfBT.

Elena Mc Cretton
Mary Gichuru

Director Sub-Saharan Africa CfBT
Projects Manager / Technical Advisor CfBT

Lead Writing Team:

Councilor Joseph Ngure
Lily Kelelyo
Francis Ogello
Josephine Ondiek
Meggie Muyala

Nakuru, Rift Valley Province
QASO, MoEST, Kericho District
QASO, MoEST, Kisumu District
QASO, MoEST, Nakuru District
QASO, MoEST, Kakamega PDE's Office.

UNIVERSITY OF WINDSOR

Professor Eleanor Matika Tyndale

Technical guide on research under PSABH and
SSABH.

Steadman Research Company

For collection of data.

INTRODUCTION

These training notes have been adopted from PSABH that has successfully been implemented in primary schools in Kenya over the last five years. The adaptation has been guided by a formative research findings carried out in 12 sites in secondary schools in Kenya, in the year 2005.

The aims of these notes are to act as a reference source to any trained person during their implementation of the HIV and AIDS education. In addition, these notes will support Headteachers, teachers and Peer Supporters trained under the programme in the planning and delivery of training to other members of staff and students, who have a key role to play in reaching all secondary school populations, with this material.

Three sets of training material have been produced under PSABH, which will successfully support SSABH. These are: -

- Question and Answer Booklet.
- HIV and AIDS Education Templates.
- School Health Club Guide.

Given the complexity of the behaviour change process in relation to the risk of HIV infection, these training notes are intended to be dynamic in nature, allowing participants address the reality prevailing in their own schools and communities. They are designed to be implemented within the usual school setting and are intended to maximize the existing school opportunities for positive character formation and modification.

We hope that those who have been trained under SSABH will use these materials to share with others and increase the number of adults and students who have the confidence, ability and willingness to address this critical area.

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¹ USAID, November 2005

While USAID has funded the SSABH programme and the production of this information, the contents of these training notes do not necessarily reflect the views of USAID.

ABBREVIATIONS LIST

AIDS	Acquired Immune Deficiency Syndrome
BC	Behaviour Change
CfBT	Centre for British Teachers
FOD	Facilitator on Duty
HIV	Human Immunodeficiency Virus
HT	Headteacher
IGA	Income Generating Activity
IC	Information Corner
KCSE	Kenya Certificate of Secondary Education
KIE	Kenya Institute of Education
LTA	'Let's Talk About AIDS', KIE series of textbooks
NGO	Non Governmental Organization
PSABH	Primary School Action for Better Health
RT	Regional Trainer
QB	Question Box
SCAPP	School and Community AIDS Prevention Programme
SDP	School Development Plan
SHC	School Health Club
STI	Sexually Transmitted Infection
TASO	The Aids Support Organization
TC	Training Coordinator
FOD	Facilitator on Duty
ZOPA	Zonal Parents Association

SSABH: A BEHAVIOUR CHANGE PROGRAMME

OBJECTIVES OF THE PEER SUPPORTER TRAINING PROGRAMME

- Provide positive experiences for young people, contributing towards their personal development.
- Support and enable young people to make more informed choices about their sexual behaviors and relationships through skills and values development.
- Help adults to understand the ways in which young people think and feel.
- Increase discussion about sexual health in the context of HIV/AIDS.
- Help young people to talk about and care for people living with AIDS.
- Allow young people to talk about their aims and goals in life.
- Have fun!

	TOPICS	TIME	PAGE	REMARKS
1.	Contents and Objectives of SSABH		5	
2.	Appendix B: Workshop Timetables (Students)		6	
	Workshop Timetable (Teachers)		8	
3.	a) Registration	1 hr	10	
	b) Evening Session	1 hr	11	
4.	Climate Setting and Course Objectives			
	a) Students	1 hr	13	
	b) Teachers	1 hr	17	
5.	Project Overview	1 ½ hrs	21	
6.	Adolescent Health and Sexuality	2 ½ hrs	25	
7.	Adolescent Health Avoidance of Risk	2 hrs	47	
8.	Peer Support	2 hrs		
	a) Teachers		54	
	b) Students	2 hrs	56	
9.	DWEICM	2 hrs	58	
10.	Alcohol and Other Drug of Abuse	2 hrs	61	
11.	STI, HIV, AIDS Transmission, Prevention, MTCT, VCT, HBC & Question Box	4 ½ hrs		
12.	HIV Counseling	2 hrs		
13.	Life Skills Activities	2 hrs	71	
14.	Life Skills and Values	2hrs	75	
15.	Guidance	2 hrs	79	
16.	Question Box Management During Workshop	1 hr	95	
17.	Goal Setting	2 hrs	97	
18.	Career Guidance	2 hrs	103	
19.	Communication Approaches	2 hrs	110	
20.	Sexuality and Touch Continuum	2hrs	119	
21.	School Health Club	2 ½ hr	125	
22.	Thematic Games and Sports	4 hrs	130	
	Vision Avoidance of Risk			
	Fun Determination			
	Support Loyalty			
	Teamwork Faithfulness			
	Set Goals Co-operation			
23.	Thematic Song & Dance 'Ukimwi Tuvute Chini'	2 hrs	133	
24.	Appendix A: Report Form		134	
25.	Appendix C: Evaluation Sheet (Students)		135	
26.	Appendix D: Evaluation Sheet (Teachers)		136 - 137	
Videos: Silent Scream, Born In Africa, Choices, Love and Sex: Setting your Own Agenda, Bush Fire, Silent Epidemic, Sara Saves her Friend, Everyone's Child, Your Life your Choice.				

Appendix B: Workshop Timetable
SECONDARY SCHOOL ACTION FOR BETTER HEALTH
PEER SUPPORTERS TRAINING
STUDENTS - TIMETABLE

OBJECTIVES OF THE PEER SUPPORTERS TRAINING PROGRAMME

- Provide positive experiences for young people, contributing towards their personal development.
- Support and enable young people to make more informed choices about their sexual behaviours and relationships through skills and values development
- Help adults to understand the ways in which young people think and feel.
- Increase discussion about sexual health in the context of HIV/AIDS.
- Allow young people to talk about their aims and goals in life.
- To have fun!

DAY	TIME	SESSIONS	FACILITATOR
DAY 1 Sunday	4.00 p.m. - 6.30 p.m.	Arrival and registration	
	6.30 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 9.00 p.m.	Evening session	
	9.00 p.m.	Retire	
Day 2 Monday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.30 a.m.	Assembly and Opening Remarks	
	8.30 a.m. - 10.00 a.m.	Climate Setting	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 11.30 p.m.	Question Box	
	11.30 a.m. – 1.00 p.m.	Project Overview	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	Adolescent, Health & Sexuality	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	HIV/AIDS Counseling	
	6.30 p.m. - 6.35 p.m.	Reflection	
	7.00 p.m. - 8.00 p.m.	DINNER	
8.00 p.m.- 10.00 p.m.	“Bush Fire”		
10.00 p.m.	Retire		
Day 3 Tuesday	Morning		
	6.30 a.m. - 730 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Sexuality and Touch Continuum	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	STI / HIV / AIDS	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	STI/HIV/AIDS	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	Vulnerable Group	Doctors / Medics
	6.30 p.m. - 6.35 p.m.	Reflections	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m.- 10.00 p.m	“Silent Scream”	
10.00 p.m.	Retire		

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²**NOTE:** Remember to separate boys from girls in the following sessions.

- Silent Epidemic Video and Discussion
- Adolescent Health and Sexuality.

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Day 4 Wednesday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Alcohol and other Drugs of Abuse	Doctors / Medics
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	Adolescent Health and Avoidance of Risk	Doctors / Medics
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.00 p.m.	Life Skills and Living Values	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	DWEICM	
	6.30 p.m. - 6.35 p.m.	Reflections	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 10.00 p.m.	DWEICM Competitions	
10.00 p.m.	Retire		
Day 5 Thursday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Goal Setting	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	Thematic Games/Sports	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	Thematic Games/Sports	
	4.30 p.m. - 5.00 p.m.	TEA BREAK / Clean Up	
	5.00 p.m. - 7.00 p.m.	Thematic Song	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 10.00 p.m.	Video – Everyone's Child / Reflections	
	10.00 p.m.	Retire	
Day 6 Friday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.30 a.m.	Assembly	
	8.30 a.m. - 10.00 a.m.	Peer Support	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	Life Skills Activities	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	School Health Club & Choices Video	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	Way Forward / Action Plans per School (30 Groups)	
	6.30 p.m. - 6.45 p.m.	Reflections / Evaluation	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 9.00 p.m.	Closing Ceremony	
9.00 p.m.	Retire		
Day 7 Saturday	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.15 a.m.	Assembly	
	8.15 a.m.	DEPARTURE	

SECONDARY SCHOOL ACTION FOR BETTER HEALTH

PEER SUPPORTERS TRAINING TEACHERS - TIMETABLE

OBJECTIVES OF THE PEER SUPPORTERS TRAINING PROGRAMME

- Provide positive experiences for young people, contributing towards their personal development.
- Support and enable young people to make more informed choices about their sexual behaviours and relationships through skills and values development
- Help adults to understand the ways in which young people think and feel.
- Increase discussion about sexual health in the context of HIV/AIDS.
- Allow young people to talk about their aims and goals in life.
- To have fun!

DAY	TIME	SESSIONS	FACILITATOR
DAY 1 Sunday	4.00 p.m. - 6.30 p.m.	Arrival and registration	
	6.30 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 9.00 p.m.	Evening session	
	9.00 p.m.	Retire	
Day 2 Monday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.30 a.m.	Assembly and Opening Remarks	
	8.30 a.m. - 10.00 a.m.	Climate Setting	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 11.30 p.m.	Question Box During Workshop	
	11.30 a.m. – 1.00 p.m.	Project Overview	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	Adolescent, Health & Sexuality	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	HIV/AIDS Counseling	
	6.30 p.m. - 6.45 p.m.	Reflection	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m.- 10.00 p.m.	“Bush Fire”	
10.00 p.m.	Retire		
Day 3 Tuesday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Sexuality and Touch Continuum	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	STI / HIV / AIDS	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	STI/HIV/AIDS	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	Vulnerable Groups	Doctors / Medics
	6.30 p.m. - 6.45 p.m.	Reflections	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m.- 10.00 p.m	“Silent Scream”	
10.00 p.m.	Retire		

Day 4 Wednesday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Alcohol and Other Drugs of Abuse	Doctors / Medics
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	Adolescent Health and Avoidance of Risk	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.00 p.m.	Life Skills and Living Values	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	DWEICME	
	6.30 p.m. - 6.45 p.m.	Reflections	
	7.00 p.m. - 8.00 p.m.	DINNER	
8.00 p.m. - 10.00 p.m.	DWEICME Competitions		
10.00 p.m.	Retire		
Day 5 Thursday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.00 a.m.	Assembly	
	8.00 a.m. - 10.00 a.m.	Communication Approaches	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	Guidance	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	Thematic Games	
	4.30 p.m. - 5.00 p.m.	TEA BREAK / Clean Up	
	5.00 p.m. - 7.00 p.m.	Thematic Song	
	7.00 p.m. - 8.00 p.m.	DINNER	
	8.00 p.m. - 10.00 p.m.	Reflections /Video – Everyone’s Child	
10.00 p.m.	Retire		
Day 6 Friday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.30 a.m.	Assembly	
	8.30 a.m. - 10.00 a.m.	Peer Support	
	10.00 a.m. - 10.30 a.m.	TEA BREAK	
	10.30 a.m. - 1.00 p.m.	School Health Club (Choices – Video)	
	1.00 p.m. - 2.00 p.m.	LUNCH	
	2.00 p.m. - 4.30 p.m.	Career Guidance	
	4.30 p.m. - 5.00 p.m.	TEA BREAK	
	5.00 p.m. - 6.30 p.m.	Way Forward / Action Plans	
	6.30 p.m. - 6.45 p.m.	Reflections / Evaluation	
	7.00 p.m. - 8.00 p.m.	DINNER	
8.00 p.m. - 10.00 p.m.	Closing Ceremony		
10.00 p.m.	Retire		
Day 7 Saturday	Morning		
	6.30 a.m. - 7.30 a.m.	BREAKFAST	
	7.45 a.m. - 8.15 a.m.	Assembly	
	8.15 a.m.	DEPARTURE	

3 a) REGISTRATION/ARRIVAL

(Total time: 1 hour)

TRAINING MATERIAL

(Pre-Prep)

1. Numbered files
2. Name tags
3. Claim forms
4. Course registration sheets
5. Contact forms
6. Flip charts
7. Registration desk

SESSION OBJECTIVES

- Register all students and separately by gender.
- Register teachers together.
- Distribute course material and allocate sleeping area
- Have travel claim forms completed and submitted on arrival at the registration desk.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Preparation	<ul style="list-style-type: none">• Clearly mark the directions to assist orientation of participants.• Set three registration areas and display the Course Organizer's name and course date i.e. for girls, boys, and teachers.• Set course material ready for participants.• Confirm with liaison officer that the sleeping area and classrooms are ready.		
TWO	Arrival	<ul style="list-style-type: none">• Assigned facilitators welcome students and teachers. The teachers to hand over students to respective registration desks.		
THREE	Registration	<ul style="list-style-type: none">• The three groups are registered at their respective points. Numbered materials are distributed to the participants corresponding to their registration numbers.• All claim forms should be filled numbered and handed over to the registrar/facilitators at the registration desk. <p>NOTE: Participants are directed to their sleeping area and are informed about time they should take their supper and evening session</p>		

3 b) EVENING SESSION– Expectations and Ground rules

1 hour

1. Prayers.
2. Formal introductions.
3. Expectations/ Fears – Each participant writes on a small piece of paper and these must be summarized by the facilitators on a flipchart for the next morning.
4. Setting Ground Rules – contributions expected from the whole group and inclusion by consensus.
5. Checking that all people have numbers on nametags and explain the timetable.
6. Election of Team Leaders (*post up full lists of leaders in a central place in or outside training rooms*).

Proposed Group Leader Positions – elect positions for both teachers and pupils.

- Captain overall
- Welfare overall
- Class secretaries (per class)
- Dormitory captain (Male/Female)
- Time keeper (per class)
- Daily Rapporteurs (per class, per day)
- Spiritual Leaders (per class)
- Newscasters (per class)

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Prayer	FOD welcomes everybody to the workshop and requests one of the participants to pray – 8.00 p.m.	3 min	
TWO	Introduction	FOD introduces participants in groups/districts and takes note of attendance and representatives Facilitators are introduced.	7 min	
THREE	Expectations and Fears	FOD, assisted by other facilitators, gives out papers: (a) FOD asks participants to write down their expectations of the course. These expectations are collected. (b) FOD asks participants to write down their fears of the course. Papers with fears are collected. These are compiled for all classes for discussion during climate setting on the next day.	10 min	
FOUR	Course Norms / Ground Rules	FOD leads the participants to come up with minimal but effective / practical ground rules. These are also copied for all classes and summarized for typing.	15 min	

FIVE	Election of Leaders	<p>FOD leads participants to elect:</p> <ul style="list-style-type: none"> (a) Group Captain (b) Welfare Officer (c) Dorm Captains – students / teachers (d) Spiritual Leader – students / teachers <p>In case of double classes, the following leaders are elected the next day</p> <ul style="list-style-type: none"> (a) Class secretaries (b) Rapporteurs for all the days (c) Class spiritual leaders (d) Time-keepers <p>Elected leaders are briefed on specific roles that are to enhance the smooth running of the course.</p>	15 min	
SIX	Welcoming Remarks	<p>FOD handovers to Course Organizer</p> <ul style="list-style-type: none"> (a) Course Organizer introduces and welcomes Institutional Head or Representative to give welcoming remarks (b) Course Organizer gives his/her remarks about the workshop with an appeal to the participants to be time conscious and committed 	10 min	

4 a) CLIMATE SETTING
(For Students)

(1 hour)

TRAINING MATERIALS (Pre-prep)

Handouts:

- Characteristics of small animals

Materials:

- A5 size paper
- Pins
- A4 paper for each participants
- Drawing of small animals
- Charts on expectations
- Charts on workshop objectives

Other:

- Workshop Timetable

SESSION OBJECTIVES (2 min)

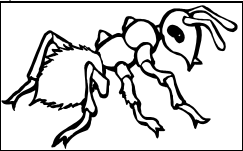


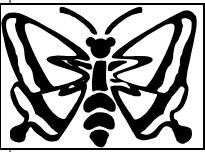
- To prepare the participants for the programmes activities
- To enable the participants know and familiarize themselves with each other
- To appreciate and integrate human behaviour with nature

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	PEER				
ONE	Objectives	<ul style="list-style-type: none"> • Facilitator reads through the session objectives displayed on flip chart 	2 min					
TWO	Ice Breaking	<ul style="list-style-type: none"> • Facilitator issue students with papers to write names/choice of small animals preferred from the following selection (<i>Bee, Safari Ant, Spider, Butterfly</i>) • Facilitator will display large drawings/pictures of the small animals in different parts of the room • Students pin the paper on their lapel and move to their small animal groups 	3 min					
THREE	List Characteristics	<ul style="list-style-type: none"> • In their groups students will discuss and list reasons for their choice e.g. Bee – Busy Safari Ant – Organized Spider – Protective Butterfly – Beautiful (<i>Use checklist attached</i>) • Facilitator gets feedback from groups using the format below <table border="1" style="margin-left: 40px;"> <tr> <td style="width: 50%;">Name of small animal</td> <td style="width: 50%;">Characteristics</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Name of small animal	Characteristics			40 min	
Name of small animal	Characteristics							
FOUR	Characteristics in relation to Positive Behaviour Change	<ul style="list-style-type: none"> • Facilitator enhances discussion on the characteristics of the small animals in relation to Positive Behaviour Change and 						

	and Peer Support	<p>Peer Support (Use questions below)</p> <p>(i) How do the small animals protect themselves?</p> <p>(ii) What shows that the small animals support each other?</p> <p>(iii) What could be the danger if they do not support each other?</p>		
FIVE	Fears and Expectations	<ul style="list-style-type: none"> Facilitator reads through the fears and expectations demystifying fears and clarifying the expectations to meet reality. Pupils are asked to own the norms recorded by the group. 	10 min	
SIX	Workshop objectives / Timetable	<ul style="list-style-type: none"> Using flip chart, facilitator reads through workshop objectives and timetable, clarifying which sessions are combined and those that are separate etc. 	5 min	

CLIMATE SETTING CHECKLIST FOR PUPILS

SMALL ANIMALS	CHARACTERISTICS	POSITIVE BEHAVIOUR THAT WE CAN EMULATE FROM INSECTS
<p>Safari Ant</p> 	<ul style="list-style-type: none"> • Organized company • Organized Movement • Live in colonies • Shared responsibility in groups 	<ul style="list-style-type: none"> • Take and accept roles and responsibilities at home and at school • Responding to commands at school and home • Always moving purposefully • Living and working in groups
<p>Spider</p> 	<ul style="list-style-type: none"> • Protective • Shows creativity in the design of the web • Alert / sensitive / reactive • Responsive to danger • None provocative 	<ul style="list-style-type: none"> • Avoid risk • Protect each other from risky irresponsible sexual behaviour • Adopt activities that reduce risk of engaging in early sex • Be vigilant in pressure to engage in sex • Be able to say NO to risky behaviour
<p>Bee</p> 	<ul style="list-style-type: none"> • Social • Hard working • Fierce if provoked • Assertive • Busy • Avoid contamination • Always returns to the hive 	<ul style="list-style-type: none"> • Enjoy social activities • We should always work hard on every assignment • We should be protective of our self and our image • Be assertive to say no to sex • Always keep busy because “Idle mind is the devils workshop” • Respect your self • Be disciplined and always avoid spending out
<p>Butterfly</p> 	<ul style="list-style-type: none"> • Beautiful • Harmless • Flies away when interfered with • Grows through complete metamorphosis 	<ul style="list-style-type: none"> • Appreciate beauty • Appreciating others and treating them with respect • Run away from danger • Remember, children should wait until they are adult before having sex

OBJECTIVES OF THE PEER SUPPORTERS TRAINING PROGRAMME

- Provide positive experiences for young people, contributing towards their personal development.
- Support and enable young people to make more informed choices about their sexual behaviours and relationships through skills and values development
- Help adults to understand the ways in which young people think and feel.
- Increase discussion about sexual health in the context of HIV/AIDS.
- Allow young people to talk about their aims and goals in life.
- To have fun!

4 b) CLIMATE SETTING **(For Teachers)**

(1hour)

TRAINING MATERIALS	(Pre-prep)
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Handouts:

- Characteristic of big animals

Materials:

- ¼ A4 sized cards for all participants and pins
- Drawings of the big animals – Giraffe, elephant, lion, buffalo, rhino.
- Charts on expectations and fears
- Workshop timetable
- Workshop objectives

SESSION OBJECTIVES	(2 min)
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- To prepare the participants for the programme's activities
- To enable the participants know and familiarize themselves with each other.
- To appreciate and integrate human behaviour with nature.

CONTENT AND PROCESS



STAGE	CONTENT	PROCESS	TIME	FACILITATOR	
ONE	Objectives	<ul style="list-style-type: none"> • Facilitator reads through the session objectives displayed on flip chart. 	2 min		
TWO	Ice Breaking	<ul style="list-style-type: none"> • Facilitator gives out to the participants ¼ A4 manila card and pins to write names of big animals preferred from the following select: <ul style="list-style-type: none"> • Giraffe • Elephant • Lion • Buffalo • Rhino • Facilitator will display large drawing/pictures of the animals in different parts of the room. • Participants pin the paper on their lapel and move to their animal groups. 	3 min		
THREE	List Characteristics	<ul style="list-style-type: none"> • In their animal groups, participants discuss and list reasons for their choice e.g. <ul style="list-style-type: none"> • Giraffe – elegant • Elephant – sharp Memory • Buffalo – protective • Facilitator gets feed back from groups using the format below. 	40 min		
		NAME OF ANIMAL			CHARACTERISTICS
FOUR	Characteristics in relation to positive behaviour change	<ul style="list-style-type: none"> • Facilitator enhances discussion on the characteristics of the animals in relation to positive behaviour 	30 min		

	and peer support	<p>change and peer support.</p> <p><u>Use Questions Below:</u></p> <ul style="list-style-type: none"> • How does the animal protect itself? • What shows that the animals support each other? • What could be the danger if they do not support each other? 		
FIVE	Fears and expectations	<ul style="list-style-type: none"> • Facilitator reads through the expectations and fears demystifying and clarifying them to meet reality. • Participants are asked to own the norms recorded by the group 	10 min	
SIX	Workshop Objectives and Time Table	<ul style="list-style-type: none"> • Using flip chart, facilitator reads through the workshop objectives and timetable 	5 min	

CLIMATE SETTING

	ANIMAL	CHARACTERISTICS	RELATIONSHIP TO BEHAVIOUR CHANGE
1.	 <p>GIRAFFE</p>	<ul style="list-style-type: none"> • Tall • Focused • Selective • Visionary • Beautiful • Graceful • Humble 	<ul style="list-style-type: none"> • Be visionary. • Focus on set goals. • Making informed decisions. • Need for a vision/a dream, a goal; know what you want to be and work towards it. • Be admirable in character and behaviour. • Retain/sustain your beauty. Do not misuse your gifts. • Humility allows learning to take place – stand out.
2.	 <p>ELEPHANT</p>	<ul style="list-style-type: none"> • Huge • Strong • Fearful/Fierce • Valuable • Live in territories/move in herds • Takes care of the young • Protective • Sensitive • Keen • Good memory/keep on track • Supportive/peer 	<ul style="list-style-type: none"> • Inters of knowledge/information • Strong in character. Determined to live a HIV free life. • When one knows their rights, they cannot be swayed. • Everyone has a potential that can be useful/valuable to the community • Teamwork/peer support is important in life. • Avoid danger. • Take care of the youth and protect them from danger. • Be sensitive to risky situations. • Be aware of dangers around you. • Remember the advice given or information gained to use in all situations. • Provide support to one another including people who are sick or vulnerable.
3.	 <p>LION</p>	<ul style="list-style-type: none"> • Fierce when provoked • Live in a family set up. • Female hunts for food while the male protects the young • Protective • Feeds on fresh flesh – not left overs • Strong and fast • Focused • “King of the Jungle” • Confident • Strong • Hardworking 	<ul style="list-style-type: none"> • Be assertive and stand for your rights. • Need to care for their families. • Responsibilities should be shared. • Protect yourself and your students. • Be selective in life and keep healthy. • Be strong willed and quick to achieve goals. • Be focused so as to achieve goals. • Be a star in whatever you do. • Be a hero. • Be confident in life. • One needs to be strong willed and assertive. • Hard work for achievement of goal

CLIMATE SETTING

	ANIMAL	CHARACTERISTICS	RELATIONSHIP TO BEHAVIOUR CHANGE
4.	 <p>BUFFALO</p>	<ul style="list-style-type: none"> • Strong • Hardworking • Fierce and protective when provoked • Has initiative (sprays urine on enemy when they cannot reach them) • Has high sense of smell 	<ul style="list-style-type: none"> • One needs to be strong willed and assertive. • Hard work for achievement of goals. • Be assertive and protect our families and our peers. • One has to have own initiative to be able to tackle situations. • Be alert and be sensitive to dangerous situations.
5.	 <p>RHINO</p>	<ul style="list-style-type: none"> • Fierce/aggressive when provoked • Sensitive • Lone ranger • Harmless unless provoked • Horn has monetary value 	<ul style="list-style-type: none"> • Be assertive. • Sensitive to danger • Be independent – avoid peer pressure. • Everyone has good potential, which can be exploited. • Do not look for problems. • Do not provoke others. • Be peaceful and humble. • Do not be in conflict with yourself.

5) PROJECT OVERVIEW

(Total time: (1½ hours))

TRAINING MATERIALS

(Pre- prep)

Flipcharts on:

- Research findings – reference information
- Programme features
- Features of a responsive school
- Behaviour change process

SESSION OBJECTIVES

(2 min)

At the end of the session the participants will be able to:

- Describe the main features of SSABH.
- Internalize the behavior change process.
- Identify key features of a responsive school.

CONTENT AND PROCESS

INTRODUCTION

(5 min)

Secondary Schools Action for Better Health is based on the formative research findings of September 2004.

The programme is funded by USAID and managed by Centre for British Teachers (CfBT).

The SSABH targets 8 students and 2 teachers in each school. The teachers are specifically Guidance and Counselling teachers and Games teachers.

The objective of the health programme is to bring about positive behaviour change to reduce the risk of HIV/AIDS transmission in secondary school students.

BEHAVIOUR CHANGE PROCESS

(35 min)

(Question: 'How do we change behaviour?')

Personal Activity (10 min)

We will start by looking at our own experiences of behaviour change.

*(Lead participants through the activity step by step, allowing them to write down their responses. At the end take the stages **one** by **one** and elicit responses to build picture of typical or common responses)*

Instructions to Participants

- Write down a pattern of behaviour or a bad habit that you personally have tried to change in the past and have either succeeded or failed to change in the long term. (e.g. to stop smoking, to drink less, to get fit, to save money etc.)
- Write down all the reasons why you thought this was a good change to make. (e.g. to make you healthier, to be able to pay all your children's school fees etc.)
- Write down how you tried to change this pattern of behaviour. (e.g. started walking to work, took less money out with you etc.)
- Write down the three main things that helped you to sustain (kudumisha) the change in behaviour or that made it more difficult (kuteleza).

Seek Responses Step by Step and Summarize

(Responses: 25 min)

Reasons for change - often health, concern for family, awareness of well-being.
It is not difficult to know WHY something is bad for you. i.e.. Knowledge is not the problem.

Strategies - get up earlier, sharing plans, saying 'no', making choices.
Had to change patterns, took actual effort.

What helped to sustain the change? (kudumisha)- recognition, strong image of the benefits
Support from others and rewards for success are central to change.

What hindered change? (kuteleza) - old habits, other peoples' expectations
Often the most difficult aspect of change is the threat to established friendships and challenge of making new ones.

Summarize responses on a table, using the responses of participants

Reason to change	Strategies	Sustain	Hindered
<ul style="list-style-type: none"> • Marital problems • Health reasons • Waste of resources • Lack of support form family • Unproductiveness at my place of work 	<ul style="list-style-type: none"> • Withdraw from the group • Sharing plans with spouse • Identify viable projects for investment • Changed to taking tea • Stopped going to discos • Allowing my spouse to accompany me on trips 	<ul style="list-style-type: none"> • Success on my projects • Joined Christian union • Respect for my body • Self-discipline • Support from my family members 	<ul style="list-style-type: none"> • Other people's expectations. • Old friends influence. • Weak will.

NOTE: Incase of students give relevant examples suitable to them.

Prepare flipcharts to reinforce the main 5 points of each stage

Reasons for change	Strategies for change	Things that help us to change	Things that hinder our efforts to change
<ul style="list-style-type: none"> • Concern of health • Well-being of family • Improved quality of life • Self-development. • Success at work 	<ul style="list-style-type: none"> • Give up old friends • Ask for help • Take less money out with you • Take up a new leisure activity. • Avoid old places 	<ul style="list-style-type: none"> • Support from family and friends • Celebrating success • Recognizing progress • New friends • Clear goal 	<ul style="list-style-type: none"> • Old friend's influence • Other people's expectations • Backsliding • Too high a goal • Loneliness

MESSAGES FOR BEHAVIOUR CHANGE TO REDUCE HIV TRANSMISSION (25 min)

(Talk with flipcharts - prompt participants to describe the current sexual behaviour that needs each message)

We have discussed a range of behaviours, but what is the main behaviour that represents the highest risk of HIV transmission? (Answer: by far the most cases of HIV infection come from unprotected sex with someone who is carrying the virus).

There are some common messages used in HIV/AIDS education. Let's look at the **behaviours** that relate to each message.

Current Behaviour Pattern		Desired New Behaviour
Virgin - sexual debut	A	Abstain - delay onset of sex
Married	B	Be faithful to one uninfected partner
Having sex with multiple partners	C	Use a condom properly and consistently
Having unprotected sex / Having an STI	D	Treat STIs with drugs (full dosage)
Having unprotected sex / Having an STI	E	Early and Effective Treatment of STIs

Give examples of where these messages can be plugged in and how they are value laden. To reduce the transmission of HIV we must recognize the existing behaviour pattern to know which message is appropriate - i.e. we need to know the entering behaviour. We cannot select the behaviour change messages to give based only on age because some very young pupils are already sexually active, and may even be infected.

We have seen that behaviour change is a complex process. We use a theoretical model (behaviour change ladder) to reflect the process of change.

- **Unawareness**

This is not very low now in relation to HIV, but often people have an inaccurate perception of their personal risk

- **Awareness of a problem**

People tend to have general awareness of HIV/AIDS but have not internalized it. Negative consequences still accompany HIV positive status.

- **New knowledge/skills**

Knowledge can be given and skills practiced in a school setting.

- **Motivation to act**

Motivation does not come from knowledge alone. It can come from role models, peer encouragement, inspiration from new skills or the belief in living values etc.

- **Trial and Re-trial**

We can provide the chance to try out new skills in co-curricular activities such as role-play or performance.

- **Success**

We need to reward or recognize small steps in progress towards success.

- **Sustained change**

This often needs peer support and broader adult/community endorsement.

PROGRAMME FEATURES

(5 min)

- Research findings
- Behaviour change messages

Whole School Approach

All that takes place in a school e.g.

- Extra-curricular - assembly, clubs, thematic parents' events
- Curricular – through subjects
- Co-curricular – drama, music, dance, games & sports.

Training Programme

- One week training for 8 students and 2 teachers of Guidance & Counseling and Games teacher.
- One games teacher

FEATURES OF A RESPONSIVE SCHOOL

(13 min)

If we are effective, we expect the following outcomes in the targeted schools:

- Health club
- True Love Waits Club
- Question box
- Co-curricular activities
- Extra-curricular activities
- Thematic games and sports
- Class teachers' time
- School rules and regulations
- Programmed guidance sessions
- Institutionalized counseling

SUMMARY

(5 min)

Students of today are the adults of tomorrow and the knowledge they gain now and the attitudes they form, will affect them for life. So, give them factual knowledge and build a foundation on which they can make sensible and safe decisions in the future.

6) ADOLESCENT HEALTH AND SEXUALITY

(2 ½ hours)

TRAINING MATERIALS (Pre-prep)

- Flip charts – Objectives
 - Checklists – self and sexual awareness, fertility awareness, what to do with fertility, friendship, intimacy, STIs, managing sexual energy and summary.
 - Small cards one per participant.
 - Yellow charts on fertility.
 - Female and male reproductive organs.

SESSION OBJECTIVES (5 min)

By the end of the session, participants will be able to discuss Adolescent Health in order to:

- Discuss sexuality and fertility management.
- Prevent common infections, Sexually Transmitted Diseases (STD) and pregnancy.
- To help the group to think about the degree of intimacy in friendship and to discuss the value of having friends they can talk to.
- To help them see some steps they might take to make friends or deepen their friendship without engaging in risky behaviour.

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objectives	Facilitator reads objectives from flipchart.	5 min	
TWO	Self & Sexual Awareness Activity	<ul style="list-style-type: none"> • Following PowerPoint presentation attached, present session in details step by step. • Highlight areas of emphasis and points of concern 	15 min	
THREE	Self & Sexual Awareness Discussion	Facilitator leads a guided discussion using the following points: <ul style="list-style-type: none"> • Why do I need to know myself? (Ref. Checklist attached) • Who am I? (Ref. Attached chart 8-19) • Can I then do what I want with my life? (Summarize with checklist) 	20 min	
FOUR	Sexuality & Fertility Activity of Female Sexual Hormones Activity of Male Sexual Hormones	Facilitator leads a discussion of what is sexuality using the following points: - <u>For girls</u> <ul style="list-style-type: none"> • Potential to become a parent • Conception • Puberty • Menstrual Cycle N/B: Use Yellow Charts <u>For boys</u> <ul style="list-style-type: none"> • Conception • Puberty – new experience: - sperm, erection, wet dreams, Masturbation, negative development (PowerPoint) Ref. Charts 27 – 28. N/B: Use Yellow Charts	35 min	

FIVE	Group work STIs	Students list down some of the STIs they know of and the facilitator harmonizes with checklist – Attch. Ref. Sexually Transmitted Diseases <ul style="list-style-type: none"> • Facilitator stresses on the need for adolescents to go for medical examination and check up regularly. 	15 min	
SIX	What to do with Fertility	Go through the suggestions to boys and girls as per checklist attached	10 min	
SEVEN	Friendship	Facilitator leads a discussion on friendship by asking the following questions: - <ul style="list-style-type: none"> • What is a friend? • What are friends for? • Summarize using checklist. Emphasize areas of concern and points of emphasis 	10 min	
EIGHT	Intimacy	Brainstorm on what is intimacy? <ul style="list-style-type: none"> • Types of intimacy – Harmonize with checklist 	20 min	
NINE	Managing Sexual Energy	Facilitator leads a discussion on how to manage sexual energy (use checklist)	10 min	
TEN	Summary	Facilitator summarizes by emphasizing the following points to support youth in maintaining self worth and dignity. <ul style="list-style-type: none"> • Prioritize • Keep safe distance of the opposite sex • Learn to control own sexual desires • Seek good counsel • Involve God in your friendship. 	10 min	

WHO AM I?

OBJECTIVES:

- To give the participants an opportunity to reflect on who they are and to deepen understanding of themselves.
- To give the participant the opportunity to express more of who they are to a few people.

Who am I (Self Awareness)

MATERIALS:

- A set of seven blank cards
- Pen and pencil
- Over head projector

PROCEDURE:

- Introduce the topic and illustrate different kind of answers to question 'Who am I?'
- Distribute 7 blank cards to each and ask them to write/draw 7 answers to the question.
- Ask them to reflect on which answers are most and least important on top and most important underneath.
- Ask them to go back over their cards one at a time reflecting on what they themselves would be like if that answer were not true for them.
- Ask them to form groups of three and take turns to share as much or as little as they wish of what they have been doing.
- Come back to a large group ask how the various parts of the sessions were for them

Self & Sexual Awareness

Suggest they close their eyes and let a symbol come which expresses something of who they are, have a quick round to share these.

SELF AWARENESS

- I am a sexual being male or female as total being
- It is a gift each one of us happens to be.
- It is not only unique to each one of us but is sacred (holy).
- When I 'do' something or 'know' something it is my whole self that is involved.

- The activities are my own .it is I, myself, in action even though the action may be mainly in the body or mind or in spirit

THE BODY (male or female)

The body is the only visible part of me

- Has needs
- The body is made of bones which are alive and they perform many function, bones that protect the soft internal organs e.g. lungs, brain, spinal cord and support the whole body

THE MIND

- **(Ability to do the right and wrong) The mind is the part of self that gives meaning to our experiences and to our memory of them**
- **The various function of mind**
- **Memory**
- **Understanding (intellect)**
- **Will**
- **However, the will and decision making also involves deeper part of self –spirit.**

The processes of mind can be analysed as follows Awareness of experience

- Understanding and (giving meaning to the data)
- Judgement (reflecting on similar experiences and Looking at possible actions and results)
- Decisions (choosing according to value)

SPIRIT

- We cannot divide mind from the body nor can we separate mind from the spirit
- The power is not found in any particular place nor is it material. It is a spiritual power.
- The human person can say I am more than body and mind 'it is spirit or soul, that makes us a little less than God
- The greatest exercise of this power is through our ability to give meaning to life itself. Our destiny, our value, freedom, morality are all beyond the reach of the here and now.

I am unique

- I am the only one of kind God will never created anyone like me and will never create another like me.

- I am here because God wanted me to be here and found that I am good exactly the way I am.
- I may have some weaknesses but these together with my strong point are unique.
- If God in his wisdom decided that I should have them, then I lovingly accept myself as I am in that uniqueness.

I have a free will

- God does not impose himself on me. He leaves me free to choose Him out of my free will.
- I can refuse to choose him, however, is always so near me that He can help me along when I choose right.
- That is why he gave me soul and intelligence, so that I can make right decisions.
- I am a gift
- God has given me everything that I have; I am a gift to my parents and my country, and the people around me.
- But this can only be translated to what I am to them. How? By doing the right things, that way I give myself back to God.

FERTILITY AWARENESS - Girls (female) – Use Yellow Charts

Conception: fertilization takes place when Y-chromosomes from father joins X chromosomes from the mother.

- Everything that will be that individual female is there plus her fertility (ovaries eggs in miniature are there)
- A human female starts her life

Puberty: ovaries start function. One ovum (egg) ripens every cycle

- Function of ovaries result in production of female hormones that give the individual her feminine characteristics which include:
- Breasts skin complexion, female figure menstruation, hair under the arms and pubic. She starts thinking and behaving like a woman

Menstrual cycle: - Use yellow charts

- Duration between one bleeding to the onset of next
- The hormones produced oestrogen and progesterone will control the behaviour and moods variations of that girl, the girl goes through 3 main phases.

Bleeding phase

- Feels low esteem, dull, and may experience pain and discomfort.
- Sometime she may have irregular bleeding and dizzy expels, all these are normal feelings
- The girl should use her intelligence and experience and prepare herself emotionally so that she will remain cheerful, to do exercise to reduce discomfort etc. keep high standards of hygiene

Ovulation phase

- Immediately after bleeding oestrogen levels starts to increase and reach maximum when the egg is released (ovulation).
- This hormone make her easily excitable especially when the company of the opposite sex.
- She has high esteem of her self. In happy and pleasant mood and is very active

Pre-menstrual phase

- The level of oestrogen falls and progesterone increase in volume .
- The girl feels irritable tense, and may have temper tantrums
- Once the girl understands this, she will anticipate this phase and be ready to intelligently control her temper and manage her tension and irritability.
- NOTE the girl is an intelligent human being and has a soul that helps her to choose what is right.
- Animals use instincts
- Fertility/ sexual desires of the girl are normal and do not need drugs! It is not a disease to be treated
- It there and does not need to tested!!

FERTILITY AWARENESS - Boys (male) – Use yellow charts

- At conception Y chromosomes from the father joins X chromosomes from the mother— (Boy)
- All that makes that individual male, is except sperms that are produced later in life
- A male human starts his life
- At puberty production of male sexual hormones giving rise to deepening of voice, beards, hair, growth in muscle etc.
- Sperm cells are manufactured continuously till death!

- New experiences
- Interested in himself and the opposite sex
- Seeking identity with the peer group
- Seeking recognition and independence

Sexually Transmitted Diseases

1. HERPES

Type 1:

- This is associated with infection above the waist such as the common cold and sores on the lip

Type 2:

- This is associated with infections of the genital area, however, with the increased practice of oral sex, this distinction has changed.
- It has been estimated that a third to a half of the genital herpes infections are either without symptoms or infections are so mild they go unnoticed
- Those victims suffering symptoms typically experience painful blisters beginning 2 to 12 days after sex with an infected person
- The blisters then break down to form ulcers that generally heal in about 2 weeks
- Primary or initial infection can be more severe causing swelling, lymph node enlargement, fever, headaches, muscle aches and discharge / drainage from the genitals

2. CHLAMYDIA

- This organism is too small to be seen by a light microscope and is difficult to culture. An infected person may go long periods with no sign/symptom of the disease
- Infection may be so mild that the woman may not be aware that she has an infection. Nevertheless, over a period of time the infection may lead to complete blockage of the fallopian tubes and infertility due to the scarring of the infection.
- Many women in this situation will not know that something is wrong until they try to get pregnant and find that they are unable to.
- Chlamydia trachomatis is not only a major cause of Pelvic inflammatory disease (PID), but frequently causes miscarriages, premature labour, still births and post partum infections.
- In a new born child, Chlamydia can cause eye infections and pneumonia
- In males, Chlamydia can cause chronic prostrate infections and other infections of the male genitals such as Epididymitis, which can seriously affect a man's fertility. Most men develop a white discharge which is painful on urination

3. SYPHILIS

- Once considered a conquered disease, Syphilis has made an alarming resurgence
- While capable of causing complications, syphilitic infection typically begins with rather mild symptoms and signs.
- In the first of three stages not including the latent stages that occur between the second and third a small bump appears from nine to ninety days after transmission of the infection
- This bump slowly breaks down forming a painless ulcer.
- During the second stage which often occurs 3 weeks after the development of the first the individual may experience a flu like illness, fever, headaches, running nose and aches and pains

Latent Stage:

- The individual may develop destructive lesions called gummas, which involve breakdown of tissue such as skin and bone.
- The patient may also develop severe damage to the spinal cord and brain, marked memory loss and confusion

In Pregnant Women:

- Syphilis can lead to disastrous consequences for the unborn child.
- Studies indicate that a quarter of these children will die before birth and another quarter will die after birth.

4. GONORRHEA

- Gonorrhea has become the most common reportable disease in school age children.
 - People between the ages of 15 -19 years actually have the highest rates of Gonorrhea infection.
 - Unlike syphilis, which causes some of its most severe problems many years after the initial infection, Gonorrhea tends to cause problems early on.
 - It commonly causes discharge or drainage from penis or vagina as well as frequent urination.

In Females:

- Gonorrhea can spread into the uterus and fallopian tubes causing pelvic inflammatory diseases.
- The infections can lead to infertility, abdominal pain, pain during intercourse and ectopic pregnancies.

- In addition to gonorrhoea of the genital organs individuals can develop gonorrhoea of the rectum and pharynx. If they are involved in oral and anal sexual practices
- About 60% of women and 20% of men who have gonorrhoea infections will not show any symptoms. Thus making it difficult to control the spread

5. TRICHOMONIASIS

- Trichomoniasis seems to be easily passed through sexual activity as it is found in 80% of women who are sexual partners of infected males.
- Men often do not show any of the symptoms, they may develop a discharge from the penis.

In Men:

- Research has shown that men tend to suffer decrease ability to father children due to decreased mobility of their sperm

In Women:

- In women it occurs more in virgins.
- Roughly one quarter of women do not have any symptoms while others may have a heavy lime coloured discharge and experience severe itching
- The infection may cause pain during intercourse and urination plus cause problems during menstruation.
- Can be success fully treated with metronidazole (flagyl)

6. PEDICULOSIS PUBIS

- Is an infection similar to scabies but one that's caused by a tiny wingless insect called a crab louse, which are barely visible to the naked eye.
- The louse has claws on the second and third pair of legs that allow it to hold on the pubic hair while moving about.
- Pediculosis Pubis
- The symptoms involve itching that can sometimes be severe.
- The pubic louse feeds on the blood of the host. Treatment with lotions is usually effective in treatment of this parasite.

WHAT ARE FRIENDS FOR?

(FRIENDSHIP AND INTIMACY)

Objectives:

- To help the group think about degree of intimacy in friendship and to discuss the value of having friends they can really talk to.
- To help them see some steps they might take to make friends or deepen their friendship
- To help them reflect on themselves as friends and on the value and qualities they want to cultivate in themselves as friends

MATERIALS:

- Flip charts and markers.
- Sheets of papers.
- Overhead projector.

PROCEDURE:

- Introduction to intimate relationships
- Focus on friendship
- Brainstorm answer to the question 'What is a Friend?'
- Discuss the degree of intimacy using a circular diagram ask them in their own minds to put at least one aspect of themselves in each circle look at the extremes of lack of intimacy with anyone and inability to keep anything private.

Raise question of:

- What is good of about having intimate friends
- Distinguish three kinds of good things about having close friends

-Enjoyment and pleasure

-Usefulness and

-Concerns about the other persons values in him/herself

- Ask them to think about which of these is most important for them in their closest friendship.

- Discuss what this person wants in a friend and what kind of friend would be really good for him/her in the long run.
- Ask participants to think how they would like to be as friends and to write an advertisement for themselves as the friend they would like to be (anonymous if they wish)
- Some answers may focus on friends as people you can talk to about important things or share yourself with.
- Some answers may treat friends as people that are useful for oneself
- Others may concentrate more on what we can give them.

Point of concern

- It is natural for a boy and girl to feel attracted to each other, there is nothing to feel shy or quilt about. It is perfectly normal and everybody feels that way when growing up.

Points of emphasis

- Sex is not an instinct or uncontrollable mechanism it is not only a simple response to emotional and hormonal influence; it is a function of the mind.
- Sexual desires are normal, but we need to control them.

HOW ARE WE SEXUAL?

- To be human being is to be a sexual being, since we are not minds without bodies.
- We cannot avoid being male or female and this is not just a trivial issue.
- External aspect of who we are, like the colour of our hair or our eyes
- It is something that affects our whole way of being in the world

Being sexual, then, is an aspect of who we are in

- All our relationships we are male or female
- We male or female in our feelings in our ways of relating to the world
- We are male or female in our friendship, in our work in our relationships in our play, even in our prayer
- It is something that colours who we are and how we exist, and our sense of ourselves as bodily, emotionally alive, human being.
- We cannot help being sexual in our relation to people and the world.
- This is true whether we engage in sexual activity or not.

- It is just as true for celibate priests and nuns as for anybody else
- We express our sexuality in different way. Some may choose to get involved in sexual activity others may choose to be celibate. These are valid way of being sexual.
- A desire to be hugged and held is different to sexual desire. (Women)
- We may want to beheld and touched but we do not have to sexually involved if we don't want

YOUR SEXUALITY

- All human being are sexual from birth
- However, you have a choice concerning of how much of your sexuality you bring into the relationship
- Sexuality is at once both simple and complex.
- On one hand, nothing can feel simpler than being attracted to someone and wanting to hold them in your arms.
- On the hand, your sexuality consist of a complex interplay of psychological, physiological, social and cultural forces

INTIMATE

Definition:

- Innermost: internal: close: private: personal: closely acquainted: familiar: illicit sexual connection: encouraging informality and closer personal relations through smallness, exclusiveness intimacy a state of being intimate

Intimacy

- Emotional intimacy: when you are emotionally intimate you “feel” close to one another
- You feel supported and cared for
- There is a sharing of hurts and joys.
- Attentiveness and understanding seem to be characteristic of this dimension of intimacy.
- Social intimacy: when you are socially intimate, you have many friends in common as opposed to separate individuals
- This is not to say you do not have some separate friendships. ‘But separate friendships’ are not the totality of socializing.
- Having time together with mutual friends is an important part of your shared activities
- Sexual intimacy: true sexual intimacy involves mere than the mere sexual act.

- In truly intimate relationship, sexual expression is an essential part of relationship.
- It is a communication vehicle and not just a duty.
- If your relationship is sexually intimate you are satisfied with your sex life
- You are comfortable with each other and you do not see sexual activity as a routine.
- Genuine interests, satisfaction, ability to discuss sexual issues are some of the characteristics of a sexually intimate relationship.
- Intellectual intimacy: involves sharing ideals when you are intellectually intimate you talk to each other, more than just superficial conversations about weather.
- You seek inputs regarding important issues of importance such as work, money political issues global issues current affairs and so on.
- There is an attitude of mutual respect

Intellectual Intimacy: Feelings of being “put down” conversation being futile, or as though your friend is constantly trying to change your ideas are absent in intellectual intimate relationships.

- Instead conversation are stimulating and enriching

Spiritual intimacy: For you to be spiritually intimate, there are three criteria must be met: you must share common or similar beliefs about religion; these beliefs must be important or significant to your lives and you must honestly share where each one is in spiritual quest

Recreational intimacy: when you are recreationally intimate you enjoy and share in many of same ‘just fun’ activities.

- You have many similar interests. Whether they may be outdoor or indoor you like playing together.
- Even in the midst of hectic schedules you have time to do fun things together and in so doing, you feel closer to one another.

FRIENDSHIP (BOY GIRL RELATIONSHIP)

- In all the skill areas being a loving person you are likely to possess both strengths and weaknesses in varying degrees. For instance, in the skill of listening you may be good at understanding talkers but poor in showing them that you actually have understood
- The object of working on your skills is, in one or more areas, to help you shift the balance of your strengths and weaknesses more in the direction of strength
- It is preferable to think yourself as possessing skills strengths and weakness or a mixture of the two.
- If you make good choices in a skills area, for instance either in listening or talking about yourself, this is skill strength.

- If you make poor choices skills area this is a weakness

SKILL OF LOVING

■ In various relationships you need to use a repertoire of skills. For instance, the ability to say no to unreasonable request. Others of you may want to strength a skill in your repertoire: by being able to say no less aggressively.

- The skill of loving involves you in being authentic person
- Be yourself
- In others than being casual contact you are encouraged to avoid a superficial niceness in which you inhibit communicating what you really think and feel.
- However in loving others one requires self-awareness and discipline.

FRIENDSHIP AND INTIMACY

- What is good about having intimate friends to whom you are close enough to share a lot of who you are and who share a lot of themselves with you.
- It may be worthwhile to distinguish three different kinds of good things about having close friends:

What are friends for?

- The first: has to do with our own enjoyment and pleasure, what is really we generally enjoy having people to share things with. To go places with to do things with.
- The second: has to do with usefulness
- Close friends may help us in things we need to get done.
- They may also be useful when we need to share our troubles
- The third: has to do with what is really loveable and value in the person and how we can help them grow and develop and they can help us grow and develop
- How themselves they would like to be as a friend to someone?
- What qualities would they like to have?
- How they would like to behave when their friend was in trouble?
- When they themselves were in trouble?
- When their friend had a great success in something

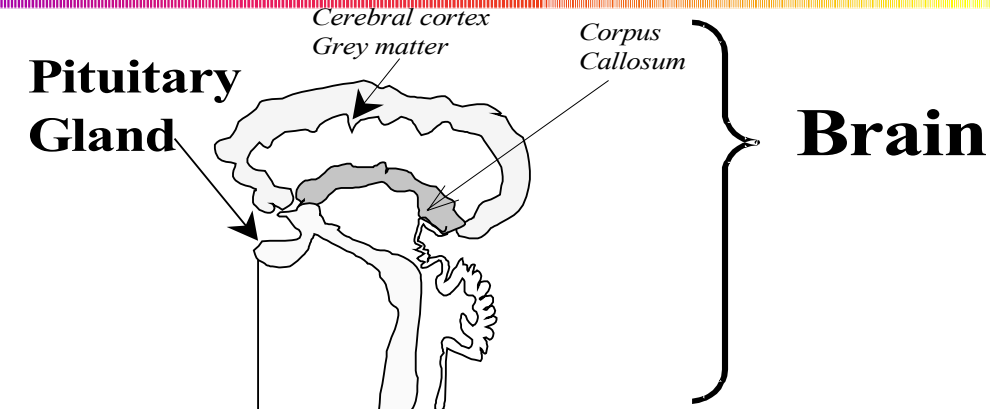
- Would they like to share much of what was going on in themselves with their friends for example if suffering from HIV/AIDS?

SEXUAL UNION

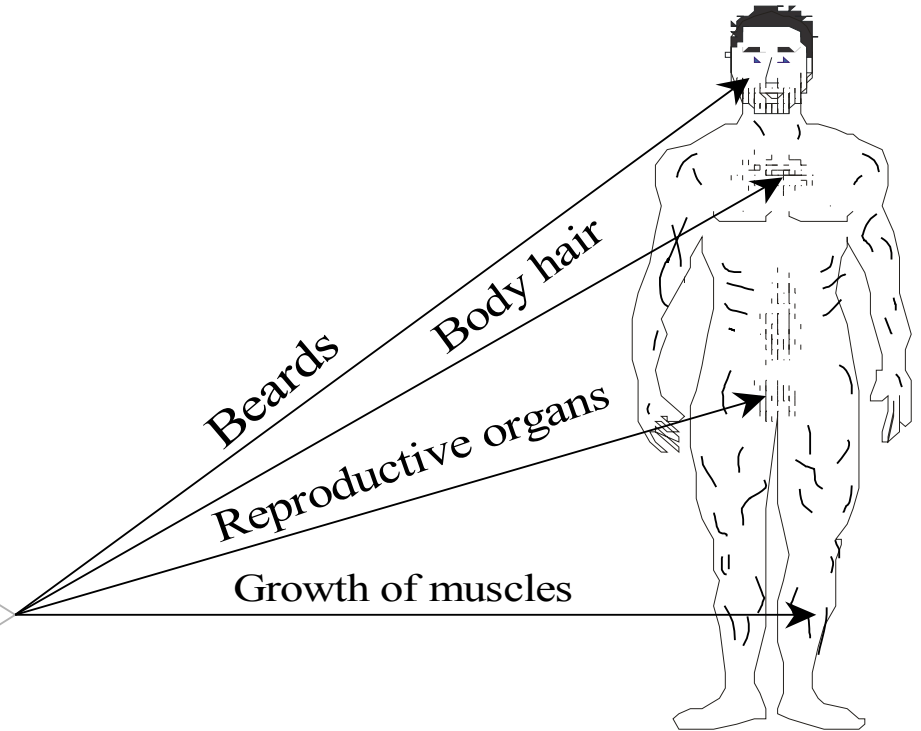
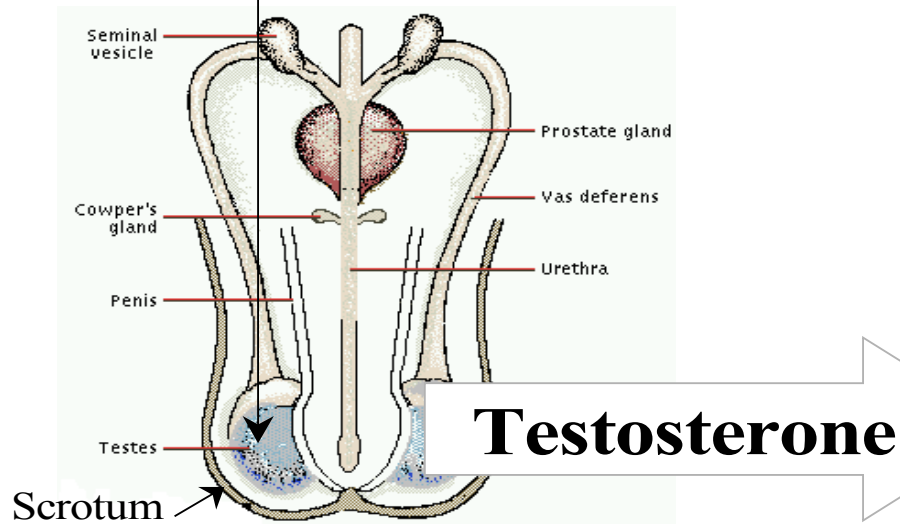
- Sexual unions were intended by God not only to secure the increase of the human race (through bearing children) but also to offer a source of human kind's, psychology emotional, social and spiritual satisfaction
- Passion and permanence should characterize all our sexual unions "until death do us part" Genesis 2: 2 declares a man should "cleave and stick" to his wife
- The above has two inclinations: first the sexual relationship should be monogamous. Although Adam had more than one rib, God took out only one and created one partner
- Secondly, the emotional, social, physical spiritual and sexual attraction to each other should always be a magnetic field effect so that "sticking" is almost natural at every moment of life together.
- Expression of sexual feelings and practical Sexual Union between "rightful" does not result into quilt shame remorse, fear and feelings of self-hate and emptiness.

THE ADOLESCEN T HEALTH AND SEXUALITY CHARTS

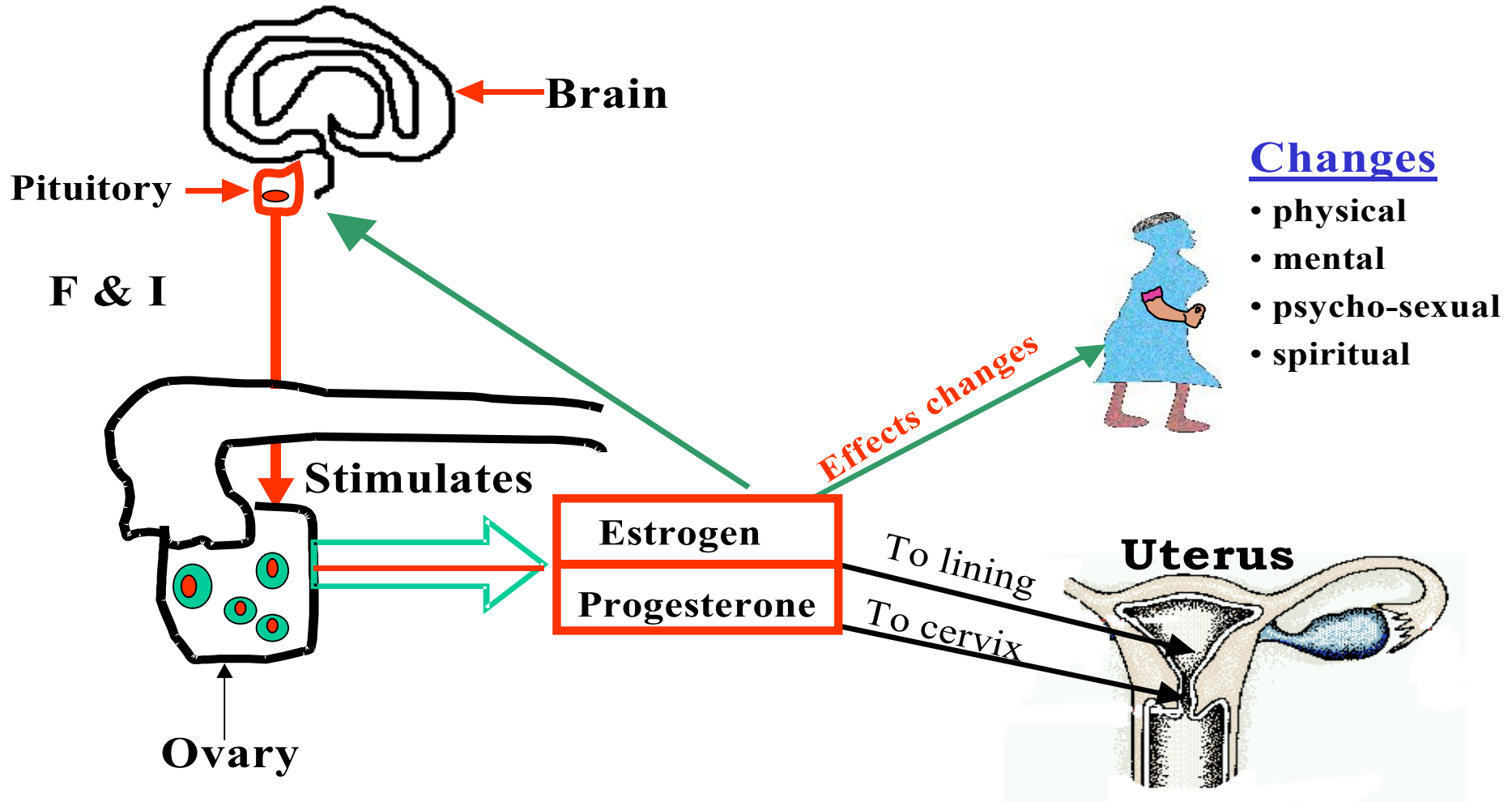
ACTIVITY OF MALE SEX HORMONE



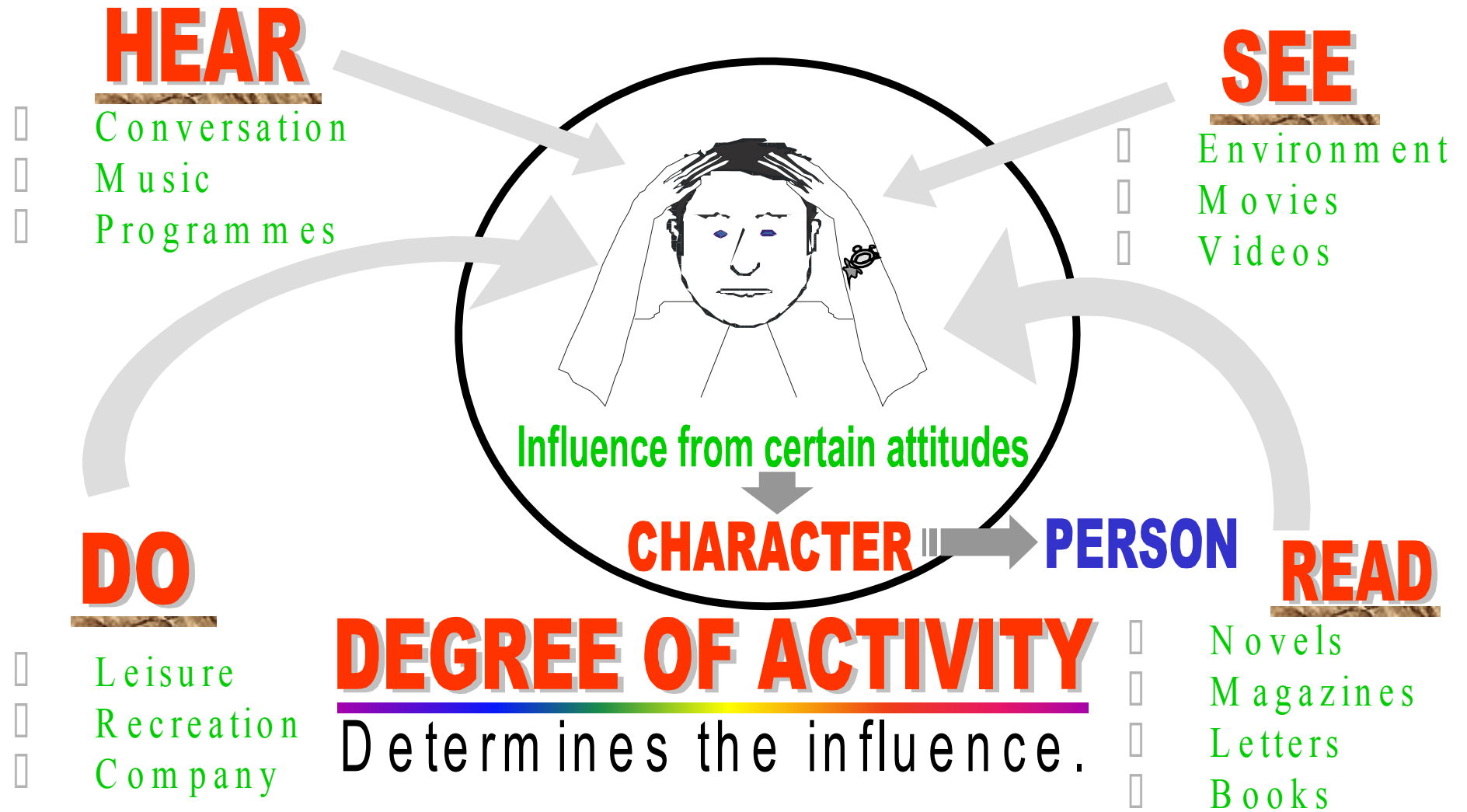
- ## CHANGES
- Physical
 - Mental
 - Psycho-sexual
 - Spiritual



ACTIVITY OF THE FEMALE SEX HORMONES



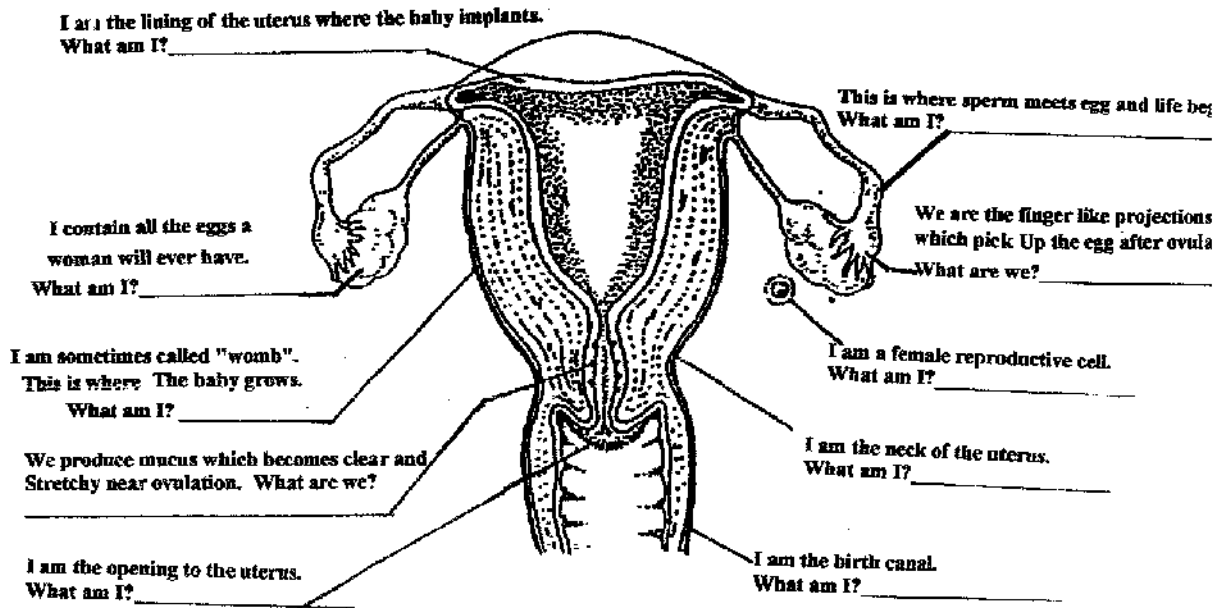
YOUR MENTAL WELFARE



Female Reproductive Anatomy Diagram

Fill in the blanks on the diagram with the words listed at the bottom of the page.

WHAT AM I?

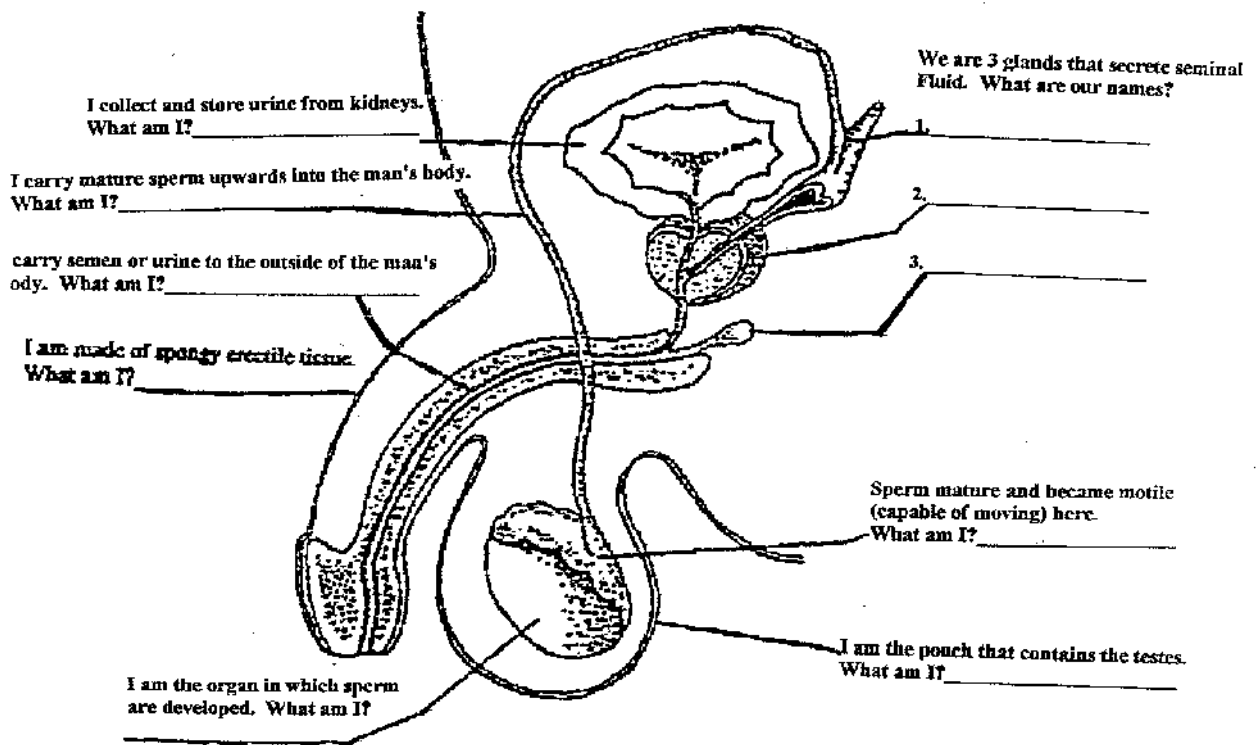


Female Anatomy

cervical os	cervical crypts	cervix
endometrium	vagina	uterus
ovary	fimbria	ovum
	Fallopian tube	

Male Reproductive Anatomy Diagram

Fill in the blanks on the diagram with the words listed at the bottom of the page.



Male Anatomy

Epididymis	urethra	seminal vesicle
Cowper's gland	vas deferens	prostate gland
Bladder	scrotum	testis
Penis		

7) ADOLESCENT HEALTH: AVOIDANCE OF RISK

(Total time: 2 hours)

SESSION OBJECTIVES	(2 min)
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- Identify reasons why adolescents are vulnerable to contracting STI/HIV/AIDS.
- Develop and enhance life skills that will assist the adolescent in avoiding risky behaviour.

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Session Objectives	Facilitator reads objectives from flipchart.	2 min	
TWO	Vulnerability <ul style="list-style-type: none"> • Why adolescents are vulnerable? 	<ul style="list-style-type: none"> • Brainstorm on what is vulnerability. • Harmonize and explain why they are vulnerable • Discussion why young women are at risk. 	20 min	
THREE	Adolescent and the Environment	<ul style="list-style-type: none"> • Presentation / Discussion on how the environment exposes the adolescent to risk. 	20 min	
FOUR	Reducing the risks of vulnerability	Discussion on skills used in resisting Peer Pressure.	30 min	
FIVE	Youth Problems	<ul style="list-style-type: none"> • That expose them to vulnerability 	25 min	
SIX	Need and interests of the youth	Brainstorm and list down the needs and interests of the youth. Facilitators captures the points on Blackboard / flip chart and harmonize	20 min	
SEVEN	Summary	Facilitator recaps on key areas	3 min	

Facilitator to lead a session based on the attached material.

YOUTH AND HIV/AIDS

CAN WE AVOID CATASTROPHE?

Today 's young people are the AIDS' generation. They have never known a world without HIV. Millions already have died. Yet the HIV/AIDS epidemic among youth remains largely invisible to adults and to young people themselves. Stopping HIV/AIDS requires comprehensive strategies that focus on youth.

Of the over 60 million people who have been infected with HIV in the past 20 years, about half became infected between the ages of 15 and 24. Today, nearly 12 million young people are living with HIV / AIDS. Young women are several times more likely than young men to be infected with HIV. In nearly 20 African countries 5% or more of women ages 15 to 24 are infected. Such statistics underscore the urgent need to address HIV/AIDS among youth.

WHY SO VULNERABLE?

Physical, psychological, and social attributes of adolescence make young people particularly vulnerable to HIV and other sexually transmitted infections (STIs). Adolescents often are not able to comprehend fully the extent of their exposure to risk. Societies often compound young people's risk by making it difficult for them to learn about HIV/AIDS and reproductive health. Moreover, many youth are socially inexperienced and dependent on others. Peer pressure easily influences them — often in ways that can increase their risk.

AIDS AND EDUCATION

Important components of AIDS education programme for youth include addressing peer pressure and norms that encourage risky behavior. Changing young people's risk-taking behaviour requires going beyond providing information to helping young people acquire the ability to refuse sex partners.

Researchers have identified key element of HIV/AIDS education programmes:

- Focusing on reducing specific risky, sexual behaviour.
- Using theoretical approaches to behaviour change that have proved successful for programme development.
- Having clear messages about sexual activity.
- Providing accurate basic information about risk of adolescents' sexual activity and about methods of avoiding intercourse.
- Dealing with peer pressure and other social pressure on young people to be sexually active.
- Providing modeling and practice of communication negotiation and refusal skills.
- Using a variety of teaching methods that involve participants and help personalize information.
- Using teaching methods and material appropriate to student age sexual experience, and culture.
- Selecting as teachers people who believe in the programme and then training them to be effective.

PEER EDUCATION

Many strategies for youth now make peer education a key approach perhaps the most important goal of peer education is to establish standards for acceptable behaviour change.

Most young people find trained peer educators credible because they communicate well with other youth and set believable examples of behaviour. Peers can also help other young people acquire such skills as sexual negotiation and assertiveness.

AN ADOLESCENT AND THEIR ENVIRONMENT

- For young people, the most obvious obstacle to their sexual and reproductive health is simply lack of accurate information.
- In sub-Saharan Africa however sex is generally considered a taboo subject for discussion within society and especially within the family.
- Mass media and entertainment industries present sexual images in way that are degrading (especially to women) and often convey factually incorrect information about sex.
- In the absence of accurate information about sexuality and reproduction, many young people rely mainly on information and advice from one another often with disastrous consequence.
- Parental attitudes and behaviour constitutes another factor, which can pose a threat to young people's sexual and reproductive issues. Parents often admonish their children to live moral lives and preach the value to of virginity especially for girls. Yet many parents (especially fathers) fail to set positive examples for their children in their own gender attitudes and sexual behaviour.
- Failure of government, international agencies and financial institutions to provide young people with employment is another external factor, which increases their vulnerability to HIV.
- Many young men and women are unable to find regular jobs and lacking clear direction in life, seek excitement and pleasure through alcohol, drugs and casual sex.
- When the future seems to hold little or no hope the risk of contracting AIDS through pleasurable sexual activity hardly seems important.
- Another external factor that increases vulnerability of young people to HIV is lack of access to health services especially to treatment for STD's. It is now well known the presence of an STD greatly increases the chances of person transmitting or being infected by HIV.

YOUNG WOMEN AT RISK

- Girls and young women in Sub-Sahara Africa are at even higher risk of contracting HIV and other STD's than their male counterparts (in Tanzania for example, researches found the 17% of young women aged between 15 and 24 in town of Mwanza were HIV positive, compared with only 5% of their male counterpart.
- This is not because more young women are involved in higher risk sexual behavior than young men.
- Survey in Africa countries has found that unmarried teenage women are in fact less likely than their male counterparts to be sexually active.
- The higher level of HIV infection among women is due to a combination of factors, which to a large extent are beyond their own control, Nor biological reasons, women are much more likely than men to become infected with HIV. Women have much larger genital surface area than men, and female genital tract retains semen for considerable period of time.
- Young women are at particular risk because of fragility of vaginal membranes.
- In addition, in some countries of Sub-Saharan Africa, women introduce drying or tightening agents into the vagina in order to increase male sexual pleasure.
- This custom increases the risk of abrasions during sex, which in turn heightens female vulnerability to HIV infection.
- For societal reason as well young women are more likely to be exposed to HIV than young women. Traditionally women tend to have older men as their sexual partners.
- With spread of HIV epidemic many African men are seeking out even young women and girls for casual sex — in the belief that this will reduce their own chances of contracting HIV.

RESISTING PEER PRESSURE

Peer pressure — the pressure we often feel from our friends and from others of our own age to do things that we don't approve of or that we don't really want to do.

Point out to the group that there are different ways of saying no and that how we say "no" can make a lot of difference to what happens.

(Demonstrate two ways: aggressive and passive)

Emphasize the importance of body language in this and point out that our body language may sometimes control our words. To show the importance of body language (demonstrate two ways of coming into a room aggressively and passively without saying anything.)

Ask participants to observe for the first storm in slamming the door, glaring around taking up more than your own share of space etc.

For the second, knock timidly enter quietly closing the door softly, tip-toeing to your seat, eyes down-cast, taking up as little space as possible, looking timidly around etc. (Ask for comments on what participants have noticed)

Point out that it is essential to find another way of saying "no" when you need to, a way that is neither aggressive nor passive. Show that there is a middle way, that can be expressed even in our body language by going back to the part of exercise in which different ways of coming into a room were demonstrated. Remind them of the aggressive and passive way and then demonstrate an assertive way. (Knock quietly but firmly, enter confidently but not disruptively, look around openly, take your place without shrinking away or taking over. Meet people's eyes say that your word for this is assertive.

DEFINITION

PASSIVE: 'giving up one's rights or position and going along with the position of someone else.'

Example

You are with some friends and one of your friends says let's go steal some beer from the store. You don't agree with him, but you go along anyway.

AGGRESSIVE: 'demanding one's right or position at the expense of others.'

Example

You are with some friends and you decide you want to go to a local store and steal some beer. Your friends do not think this is a good idea but keep pestering them and calling them chicken, until finally some of them agree to go.

ASSERTIVE: 'claiming and maintain one's rights and or position without compromising the rights of others.'

Example

You are with some friends and one of your friends says lets go and steal some beer from store, you don't agree with them... you do not plan to go along with them... they can do what they wish, but you will not go with them.

TIPS ABOUT ASSERTIVE BEHAVIOUR

1. Be clear on what you want, where you stand as regard doing whatever is in question.
2. Look for time, if you need it, to find out what you want. (You do not have to be rushed into hasty decision).
3. Say it and say it clearly. Say it concretely. (if you are saying "no" be sure you use the word "no" sometimes we think we are saying "no" but no clear message is given.)
4. Repeat it if necessary it may take time for the other person to hear)
5. Communicate what you are feeling if this seems relevant. (If you are feeling guilt or pressurized, etc, it can help communication and help the relationship to let the other person know how you are feeling).
6. Listen to, and acknowledge the other person's needs and wants. (This may involve some compromise but there are also times when you need to stick to your principles or what you need for yourself what is most important is to recognize both the other person and yourself as persons, as worthy of respect and having needs so there are times when to compromise or negotiate in order to find a way in which both people are satisfied. On the other hand, where you believe the behaviour in question is wrong compromise is neither is condemnation of the other person).
7. Do not get tangled in distractions (often we can get diverted from a simple request by response which brings in irrelevant logic or argumentative bait) e.g. you want to return defective goods you have bought. The shop assistant tells you "no one else complained" or "these never broke before" and so on. Don't get hooked into irrelevant argument or allow yourself to be distracted from the real issue.
8. Find a way of closing the issue when it is right. (Having said "no" or whatever you need to say, make it clear that the issue is closed rather than giving the message that you are waiting for a new round of persuasion. You will need, of course, to find a balance between this and cutting the other person off without hearing him/her)

ADOLESCENCE

Adolescence is a special group. They are starting sexual activities and can be guided into safe practices. Adolescents should be encouraged to delay sexual debut and practice abstinence. For those already engaging in sexual intercourse should be educated on how to discontinue sexual activities and engage in less risk practices.

Adolescence girls are more vulnerable biologically and socially to HIV transmission. The considerably higher rates of HIV infection in young women should alert counsellors to special circumstances and needs of young girls. The particular vulnerability of the girl child involved in commercial sex work should be considered by the VCT counsellor.

YOUTH PROBLEMS

Youth problems may originate from: -

- Home and educational environment which fail to provide adequate moral, religious/spiritual, cultural and human values, giving rise to misguided, scandalized and unprincipled.
- School and administrative system, which fail to educate the total person, emphasizing academic skills and ignoring formation values e.g. justice, hard work, respect etc.
- Economic problems of unemployment, inflation, discrimination, poverty etc. (is not always negative) frustrate the youth and lead them to crime, anger, black marketing shame, isolation, vagrancy etc.
- Crises and conflict in the youth themselves cause tension especially between
 - Modernity and traditionalism (we are member of both old tradition and the modern)
 - Oneself and others. Conflict about their growth parents priest and teacher
- Society and its institutions in general have little concern for youth activities.
- Old mentalities (children should be seen not heard)
- Youth activities are very important
- No organized youth activities
- No effective support for activities the youth organize for themselves. (We have to be involved and support their own activities and be careful with how far you can go)
- The youth have developed a life-style based on naiveté (immature) easy and permissive life.
- This has led to irresponsibility, selfishness etc.
- Urbanization has created an environment of poor morality where many youth lose the good values they may have acquired at home and school.
- Lack of continuous religious I spiritual education has brought about crisis of faith and religion (children have to utilize their faith. It has to be my faith and not my parents' faith.)
- Some youth have abandoned faith, as they do not see its meaning or relevance in their daily lives.
- Introduce the children in the family activities let them know the activities you are involved in and about how much money you need to do them and being out the budget.
- Communication is very important, so that when they go out you have formed them and nothing to worry
- We have to form our youth all around as total people (spiritually / religious)
- Until the parents get involved and are equipped with the skills to educate the children we shall not have total person.

NEEDS AND INTERESTS OF THE YOUTH

Needs and interest of the youth keep on changing as they develop and mature. Some of them are:

1. Recognition

- At puberty the youth discover that they are different i.e. they have their own identity from that of their parents. They are individuals
- They crave this recognition.
- They need affection, respect, interest and understanding due to them as individuals.
- Development of their self-esteem, self-confidence depends on how each one of them is recognized, respected and appreciated.
- We must recognize the youths needs and we must change them. (We must grow with them)

2. Sense of Belonging

- They feel great need of being taken as an important person, in the family, in the school, in the church community etc.
- They want an assurance that their presence or absence makes a difference
- Once they are assured that they 'belong'; they participate willingly and generously

- (Guide them slowly and let them feel they are part of the family, their role in family must be recognized, when you were away we missed your contribution)
- 3. Independence**
- It is a need to make decisions for themselves without control or judgement from the adults.
 - This comes as a process of growing to maturity.
 - Need for careful guidance so that eventually they are able to make mature and independent decisions.
- 4. New Experiences and Adventures**
- Expressed in acquisition of new friends, new interests etc. and even wanting to go to places. Confront them to make choices of their own. (But guide them)
 - Help them in these.
- 5. Privacy and Private Ownership**
- They have great need to privacy e.g. a room to oneself. (Girls alone / Boys alone)
 - They want to be left alone to do personal things.
 - They have an urge to own things - Responsibility and accountability
 - Recognize and grant where applicable. Train on responsibility
 - Look at the positive aspects of the individual child and capitalize on that (so that she can feel needed)
 - Freedom and decision they must take responsibility let him get in messes and out of them by themselves
 - Guide them to make independent, decision
- 6. Sympathetic Understanding**
- In search for independence, the youth may experience loneliness, insecurity, anxiety and sense of uncertain.
 - Craves for sympathetic understanding and support.
 - When given by adults, there should be minimum fuss as they can easily put them off.
- 7. Discovery of Oneself**
- The youth are going through self-transformation in their personality
 - A new person is emerging and they get confused before they get used.
 - They need understanding and loving guidance. They are in fact looking for role model in the adult world.
 - This new ego makes the youth feel a need to exert themselves.
- 8. Need for Friendship**
- Develops interest in the opposite sex.
 - Friends of both sexes mean a lot to the youth
 - How to have friends of both sexes without getting into anything major.
- 9. Reading**
- Develops a great scope of reading especially novels and magazines.
 - Need for guidance in selecting positive reading materials
- 10. Films, Dances, Videos etc**
- Again they need to be educated on choice of what they see
 - It is possible to organize activities that can train them on these e.g. at home, in school, at church under supervision yet not interfering.
 - Saying no to any of their activities must be explained

8 a) PEER SUPPORT (For Teachers)

(2 hours)

TRAINING MATERIALS

(Pre-prep)

Handouts:

- Peer Support

Materials:

- Flip charts.
- Checklists

SESSION OBJECTIVES

(3 min)

At the end of the session participants will be able to describe and appreciate peer support concepts in bringing about positive behaviour formation and managing change.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Session Objectives	<ul style="list-style-type: none"> • Facilitator reads through the objectives of session from flip chart. 	3min	
TWO	Introduction	<ul style="list-style-type: none"> • Participants brainstorm on 'who is a peer?' • Trainer leads participants through checklist of "who is a peer?" 	10min	
THREE	Benefits of youth Peer Support.	<ul style="list-style-type: none"> • Facilitator to lead the participants to discuss formation of youth peer groups and their importance. • Participants identify ways in which the peer activities can be incorporated within the school system. • Report Back. 	5 min 10min 10 min	
FOUR	Peer Support Activities.	<ul style="list-style-type: none"> • <u>In groups</u>, participants will use an example of a youth peer group and discuss how the activities operate in influencing positive behaviour change in relationship to abstinence – delay of the onset of sexual debut. • Fidelity of group norms • Avoidance of sexual intercourse • Taking VCT • Report back 	10min 15min	
FIVE	Strategies for sustainability of youth peer support activities.	<ul style="list-style-type: none"> • Participants identify the strategies for sustainability of peer support group activities. • Implementation of peer support group activities "what is to be done?" • Come up with possible activities for peer support. • Report back 	10min 10min 15min 15min	
SIX	Summary	Facilitator to emphasize the importance of peer support and the need to sustain the same through school health clubs, badges for common purpose, School Health Club Activity Kit - (introduced) etc.	7min	

REPORT FORMATS

Report Format 1: Influence of peer group activities on behaviour.

Activity	How It Operates	Influence on Positive Behaviour Change

Report Format 2: Action plan for sustaining peer support groups and activities.						
Activity	Target	Tasks	Responsibility	Time	BC Success Indicators	Monitoring Dates

Example of Peer Group 1.

	How	Who
<ul style="list-style-type: none"> • Delaying the onset of sexual activity 	Talks	
<ul style="list-style-type: none"> • Fidelity to group norms 	Sticking together	
<ul style="list-style-type: none"> • Avoidance of sexual intercourse. 	Group Activities	
<ul style="list-style-type: none"> • Value of taking VCT 	Talks / Education	

8 b) PEER SUPPORT **(For Students)**

(2 hours)

TRAINING MATERIALS

(Pre-prep)

Materials:

- School Health Club Activity Kit
- Formats 1 & 2 for report back

SESSION OBJECTIVES

(3 min)

At the end of the session participants will be able to describe and appreciate peer support concepts in bringing about positive behaviour formation and managing change.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Session Objectives	Facilitator reads through the objectives.	3min	
TWO	Introduction	Participants brainstorm on 'who is a peer?' Facilitator harmonizes.	10 min	
THREE	Benefits of youth Peer Support.	<ul style="list-style-type: none"> • Formation of youth peer groups and their importance. • Identify ways the peer activities can be incorporated within the school system. • Report Back 	5 min 10 min 10 min	
FOUR	Peer Support Activities.	<ul style="list-style-type: none"> • In groups, participants will use an example of a youth peer group and discuss how the activities operate in influencing positive behaviour change in relationship to abstinence – delay of the onset of sexual debut. • Avoidance of sexual intercourse outside of marriage. • Fidelity of group norms. • Taking VCT. • Report back. 	10min 15min	
FIVE	Strategies for sustainability of youth peer support activities.	<ul style="list-style-type: none"> • Participants identify the strategies for sustainability of peer support group activities. • Implementation of peer support group activities "what is to be done?" • Come up with possible activities for peer support. • Report back 	10min 10min 15min 15min	
SIX	Summary	Facilitator emphasizes the importance of peer support and the need to sustain the same through various activities e.g. school health clubs, badges for common purpose, School Health Club Activity Kit etc to enhance positive behaviour change.	7min	

REPORT FORMATS

Report Format 1: Influence of peer group activities on behaviour.

Activity	How It Operates	Influence on Positive Behaviour Change

Report Format 2: Action plan for sustaining peer support groups and activities.

Activity	Target	Tasks	Responsibility	Time	BC Success Indicators	Monitoring Dates

9) DEALING WITH EXTERNAL & INTERNAL CONFLICTING MESSAGES THROUGH SONG AND DANCE
(For Students & Teachers)

(2 hours)

TRAINING MATERIALS (Pre-prep)

Materials:

- Flip Charts – Objectives
 - Environmental diagram
 - A, B, C, D diagram
 - Discussion points.
 - Summary of the benefits of the song and dance.

SESSION OBJECTIVES (2 min)

By the end of the session, participants will be able to:

- Identify conflicting messages that can be a barrier to positive behaviour change
- Appreciate songs and dances as a tool of communicating positive behaviour change.
- Focus on the prevention messages through song and dance.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objectives	<ul style="list-style-type: none"> • Facilitator reads through the objectives using the flip chart 	2 min	
TWO	Introduction	<ul style="list-style-type: none"> • Facilitator will lead participants to appreciate the need to create an enabling environment for the youth to make the right choices in a conflicting environment, using the diagram below; <div style="text-align: center;"> </div>	8 min	
THREE	Myths Misconceptions	<ul style="list-style-type: none"> • Facilitator asks the participants to come up with myths and misconceptions about <div style="text-align: center;"> </div> <ul style="list-style-type: none"> • Facilitator discusses B, C, and D factual information on a chart. (Reference to project overview.) 	10min 15min	
FOUR	Song with conflicting	<ul style="list-style-type: none"> • Facilitator introduces and discusses the messages in the song “Swing, 	10 min	Note: Facilitator to learn song

	messages (Swing, Swing)	swing”, demystifying the conflicting messages. (Use discussion points)		before session.
FIVE	Formulation of Positive Song	<ul style="list-style-type: none"> In groups formulate songs on the factual messages (A, B, C, D) It can be in verses but must have a positive choice to take and norms to uphold. 	30 min	
SIX	Making Presentation	<ul style="list-style-type: none"> Participants make presentations in groups as facilitator makes side notes and prepares comments and appreciation The winning song should capture correct and accurate information in all four areas and have appropriate dance that supports the message conveyed. The messages must be supported by concrete inspirations and aspirations of the singer. 	35 min	Note choice of song and tune is facilitators creativity
SIX	Summary	<ul style="list-style-type: none"> Facilitators recap and stresses on the value of song and dance as a tool to communicate positive behaviour change messages. Facilitators need to emphasize the need for adults to role model. 	10 min	

Song: “Swing, swing”

Hata mimi mwenyewe najua
Kuna Madem wa kishua
Sura, macho, mbele na nyuma

Swing, swing muziki ni bumba, bumba
Talanta si dumba
We, rafiki wacha kuzubaa

Discussion Points

1. What is your view about the song?
2. Do you think the musician is sincere in the message he is sending?

Give reasons for answer.

3. Is the song entertaining/Educating?
4. Does it have messages that you could compare to other messages in the media?

Which ones?

5. Suppose you were the youth, who is being addressed by the song, how would you feel about it?
6. What challenges are our youth facing in music and dance? What can they do to address them?
 - Song and dance is good for entertainment.
 - It is healthy to sing and dance
 - Interpretation of messages in songs must be based on values that we uphold.

CHECKLIST ON MYTHS AND MISCONCEPTIONS (for trainers only)

A	B	C	D
If you do not play sex: <ul style="list-style-type: none">• your vagina will block• your penis will shrink• you will age faster	Having one partner: <ul style="list-style-type: none">• is a weakness• having many sexual partners is like eating a mixed grill	Using a condom: <ul style="list-style-type: none">• makes you sterile• proves lack of love	Using drugs: <ul style="list-style-type: none">• Stigma and fear• Have side effects.

10) ALCOHOL AND OTHER DRUGS OF ABUSE ***(To be presented by Doctors and Medics)***

(2 hours)

TRAINING MATERIALS

(Pre-prep)

Materials:

- Masking Tape
- Flip Charts

SESSION OUTLINE

INTRODUCTION:(15 mins)

- Definitions
- Prevalence of drug abuse in school and community
- Policy and strategy on drug abuse in Kenya.
- Commonly abused drugs.

FACTORS CONTRIBUTING TO SUBSTANCE ABUSE(10Mins)

EFFECTS OF DRUG ABUSE TO THE GENERAL HEALTH (20 mins)

11. HOW TO IDENTIFY DRUG DEPENDENCY /DRUG ABUSE.(10 Mins.)

BREAK (10 Mins)

RELATE DRUG ABUSE TO HIV/AIDS (5 Mins.)

SKIT (20 Mins)

HOW ONE CAN GET HELP (10 Mins)

SPECIFIC EFFECTS OF ALCOHOL, NICOTINE, CANNABIS SATIVA, CATHAEDULIS,HEROINE AND COCAINE (15 Mins)

QUESTIONS (5 Mins)

DRUG ABUSE

INTRODUCTION

A drug is a substance that when taken into a living organism modifies one or more of its functions. Drug abuse is persistent or sporadic excessive drug use inconsistent with or unrelated to medical practice.

Dependence is a state arising from repeated administration of a drug on continuous or repeated basis. It develops when the neurons adapt to the repeated drug exposure and only function normally in the presence of the drug. When the drug is withdrawn, several physiologic reactions occur. These can be mild (e.g. caffeine) or even life threatening (e.g. for alcohol.) this is known as withdrawal syndrome and the abuser will use the drug again to avoid the withdrawal syndrome.

PREVALENCE

A nation wide survey done (2004) by Prof.- Ndetei – showed the prevalence of abused drugs in Kenya to be as follows: -

Alcohol	36.3%
Nicotine	17.5%
Cannabis – sativa	9.9%
Heroine	8%
Catha edulis	2.8%
Cocaine	2.2%

Over 90% of people had a history of ever using drugs of abuse and majority were active users on daily basis. Average daily prevalence rate of (46.0%).

Oral (45.7% on average) and nasal (38%) were by far the most common modes of consumption of drugs, followed by parental administration (inject able) at 10.4% Ongany A.A(2004) did an assessment of the level and pattern of substance abuse among children and young persons in Nairobi and concluded that young males abuse drugs more than females by the ratio of 1:8.6. A wide range of drugs is abused, but alcohol is the most common with multiple drug use being a rule. The age of onset is about 8 years and social functioning is significantly affected as manifested by broken relationships, dropping out of school, and work absenteeism. **Abusers** suffer several physical and psychological problems whose level of severity is from moderate to severe. Substance abuse has permeated all sectors of the society and there are no significant differences on the basis of age, gender, education, income, family structure, religion or social class.

POLICY AND STRATEGY ON DRUG ABUSE IN KENYA

The National drug policy and legislation involves drug control legislation and the legal framework under which treatment and rehabilitation of drug abuse takes place. The National policy on drug abuse in Kenya was developed on the premise that Kenya Government ratified three major United Nations Conventions on Narcotic Drugs and Psychotropic Substances, namely:

1. The Single Convention on Narcotics of 1961.
2. The Convention on Psychotropic Substances of 1971.
3. The Convention against Illicit Trafficking on Narcotic Drugs and Psychotropic Substances of 1988

The Narcotic Drugs and Psychotropic Substances (Control) Act, 1994, is the latest Kenyan legislation against drug trafficking and abuse. This enactment was followed by the setting up of the Interministerial Drug Control Committee, whose responsibility was to evaluate drug policies in the country. The greatest achievement of the Interministerial Committee was the production of the Drug Master Plan in 1998 which was approved in early 2001. That same year the National Agency for the Campaign Against Drugs (NACADA) was formed to enhance advocacy against drugs of abuse in the country. Its major objectives were coordination, implementation, monitoring and evaluation of programmes on the campaign against drug abuse in Kenya. NACADA has been holding consultative meetings to develop a strategic plan that would include public awareness campaigns, interventions for special groups, counseling services and rehabilitation for the vulnerable, the youth and support services. These included: Institutional framework of drug abuse control, strategies of drug abuse treatment and in prevention education activities. NACADA has been working with all stakeholders, both in the private and public sectors.

COMMONLY ABUSED DRUGS

- Alcohol - (Tindi, Kanywaji, Kill me quick)
- Catha edulis - (Miraa, Khat, Marungi, Njiti, Ngomba)
- Nicotine - (Mozo, Fegi, Faga)
- Cannabis sativa - (Marijuana, Mjane, Bhang, Ganja, Kaya,Ngurai.
- Cocaine - (Cosmos, Shabash, Quawash, Gishuri)
- Hallucinogens – e.g. LSD.
- Inhalants – eg Glue, petrol, polish – solvents.

- Opioids – e.g. codeine, heroine (Horse, Smack, "H", Brown sugar)
- Phenylcyclidine (PCP) (Zibugizi).
- Stimulants (e.g. Amphetamine)
- Sedatives – downers, goofballs, seconals, Zibugizi.
- Hypnotics e.g. rohypnol (Zibugizi), Valium/Anxiolytics – rohypnol (Zibugizi)

FACTORS CONTRIBUTING TO DRUG ABUSE

- Peer pressure (e.g. drink so that you can tune a girl, smoke bhang so that you get guts)
- Cultural factors e.g. boys are encouraged to start drinking beer early in some cultures.
- An attempt to treat some underlying psychological/ psychiatric problems e.g. depression, anxiety.
- Personality (People with anti-social personalities and conduct disorder are associated with increased abuse of drugs.
- Genetic (e.g. alcohol dependence has been found to be familial.)
- Parenting style (not being there to observe your children and noticing abnormal behaviors, giving excess money than required, drinking while children are observing.
- Availability and accessibility to the drugs

EFFECTS OF DRUG ABUSE TO THE GENERAL HEALTH

Physical Complications

- Drugs affect virtually all systems in the body. However different drugs have different effects.
- Generally some of the physical effects of drugs are;-
 - Brain effects e.g. Loss of memory, confusion.
 - Physical injuries as a result of falls and accidents.
 - Severe infections (septicemia)
 - Muscle disease
 - Heart disease
 - Liver disease
 - Overdose leading to death
 - HIV –related disorders
 - Loss of inhibition leading to indulgence in risky sexual behaviour that exposes them to HIV/AIDS.
 - Intravenous drug abusers will expose themselves to HIV/AIDS through direct blood – to blood transmission by sharing of needles.

PSYCHOLOGICAL/ PSYCHIATRIC COMPLICATIONS

- Dependency (Drugs act on the reward system of the brain)
- Intoxication (Violence, abnormal behavior)
- Delirium (Confusion)
- Dementia (Loss of memory)
- Psychotic disorders (Violence, inappropriate behavior)
- Anxiety disorder
- Sexual dysfunctions (Married people)
- Sleep disorder

SOCIAL COMPLICATIONS

- Deterioration / inefficiency at work or school (absenteeism)
- Inter – personal relationships deteriorate
- Taking away the control of impulses resulting to aggressive behavior/risky sexual behavior and criminal acts
- Sale of personal possessions
- Child abuse (for parents)
- Financial difficulties

HOW TO IDENTIFY DRUGS DEPENDENCY / DRUG ABUSE

- Noticing the above physical, social and psychological complications
- When someone loses interest in important social and recreational activities
- When priorities are directed towards acquiring the drugs.

School students

- Asking for more money than before
- Stealing (Items disappearing from the house)
- Insisting for privacy in their rooms / locking themselves
- Deterioration of personal hygiene
- Deterioration of school performance.
- Noticing the above complications
- Change of personality
- Psychotic and other psychiatric disorders
- Positive toxicology screen.
- Change in eating habits
- Acquisition of unusual friends

WHAT IS THE RELATIONSHIP BETWEEN DRUG ABUSE AND HIV

Two main associations: -

1. People under the influence of drugs lose inhibition leading them to indulge in risky sexual behavior that expose them to HIV/AIDS
2. Intravenous drug abusers will expose themselves to HIV/AIDS through direct blood-to-blood transmission, through sharing of needles.

SKIT TITLE: KUNYWA ZAIDI TELEZA ZAIDI

Student is influenced to go out on a drinking spree. He loses his inhibitions, collects a woman to spend a night with. In the morning he is regretting why he went drinking because he discovers he indulged in unprotected sex.

HOW CAN ONE GET HELP TO STOP ABUSING DRUGS

- Drug dependence (addiction) is a disease of the brain and therefore one needs to get medical help. (Available at Mathari Mental Hospital and other private psychiatric hospitals and Drug Rehabilitation Centers)
- One needs to get treated to detoxify the effects the drugs have had in his/her body. This may involve having to move a client to an environment where he cannot access the drugs.
- Counseling to show the effects of drugs and help the person understand that they have a problem that needs help.
- Psychotherapy to change the acquired behavior
- Identification and treatment of any underlying emotional/psychological/ psychiatric disorder that the person might have been attempting to mask e.g anxiety/ mood disorders

NOTE 1. PRIMARY PREVENTION OF DRUG ABUSE IS THE BEST WAY OF DEALING WITH DRUG ABUSE PROBLEM SINCE MANAGEMENT OF DRUG DEPENDENCE AND ADDICTION IS VERY CHALLENGING.

NOTE 2: PARENTS AND TEACHERS NEED TO BE VERY KEEN TO IDENTIFY ANY CHANGES IN THEIR CHILDREN/ STUDENTS BEHAVIOR, WHICH MAY BE A POINTER TO THE POSSIBILITY OF DRUG ABUSE. THE EARLIER THE HELP IS GIVEN THE BETTER THE PROGNOSIS.

**SPECIFIC EFFECTS OF ALCOHOL, NICOTINE, CANNABIS SATIVA,
CATHAEDULIS, HEROINE AND COCAINE (15 Mins)**

ALCOHOL

MY NAME IS ALCOHOL!!

**I AM THE GREATEST CRIMINAL IN HISTORY, HAVE KILLED MORE MEN THAN HAVE
FALLEN IN ALL THE WARS OF THE WORLD.**

I HAVE TURNED MEN INTO BRUTES.

I HAVE MADE MILLIONS OF HOMES MISERABLE.

I HAVE TRANSFORMED MANY PROMISING YOUTHS INTO HOPELESS PARASITES.

I DESTROY THE WEAK AND WEAKEN THE STRONG.

I MAKE THE WISE MEN FOOLS AND TRAMPLE FOOLS TO DISASTER.

THE ABANDONED WIVES KNOW ME WELL.

THE HUNGRY CHILDREN KNOW ME WELL TOO!!

I HAVE WORRIED MILLIONS AND SHALL CONTINUE TO RUIN MILLIONS MORE.

I AM STRONG, ALCOHOL. BE AWARE

Immediate problems of alcohol.

- Lack of sleep
- Strong fears and worries
- Thinking is not clear
- Not able to control his walking or actions
- Feeling like vomiting
- Vomiting, mostly in the morning
- Falling into deep sleep
- Sudden death

Problems, which come later

- Loss of ability to control or stop one's drinking habit Becoming very fat
- Heart diseases
- High blood pressure
- Damage to the brain
- Damage to the nerves
- Seeing things that are not there
- Strong shaking of the body
- Easily gets sick
- Poor eyesight
- Liver damage
- Poor digestion
- Poor eating habits
- Loss of weight
- Loss of job
- Poverty
- Painful swelling of toes and fingers Having diarrhoea many times
- Increase of HIV / AIDS due to careless sexual behaviour

- Sex organs become smaller
- Lowering of sexual power in both men and women
- Wounds in the stomach from which serious bleeding can occur Vomiting blood
- Skin rashes
- Swelling of feet
- Accidents that could have been avoided
- Babies born below normal weight and with brain damaged
- Use of alcohol may lead to use of other drugs
- Feeling hopeless and wanting to kill oneself
- Killing oneself
- Early death

Warning Signs of the Disease of Drinking

- ❖ Drinking large amounts of alcohol without getting drunk
- ❖ Feeling sick if you do not drink
- ❖ Needing a drink frequently
- ❖ Drinking more than in the past
- ❖ Drinking more than you wanted at the start of drinking
- ❖ Feeling worried, angry and guilty about **your drinking**
- ❖ Finding that you cannot give up drinking however hard you tried
- ❖ Giving up important activities in your life because of alcohol
- ❖ Forgetting things that happened the night before while you were drinking
- ❖ Drinking in the morning to "start the day"
- ❖ Drinking alcohol knowing fully well that it will cause you the same problems that it caused you before.

What can be done to help?

Someone who has some or all of these signs is in danger of getting the disease of drinking, or is already suffering.

If you or someone you know is not **able** to control his or her drinking, you need help and support from the following:

- (i) Professional counsellors who understand the problem of drug and substance abuse
- (ii) Hospitals
- (iii) Drug - abuse treatment centres
- (iv) Alcoholic anonymous (**AA**)
- (v) **Al-Anon** Family groups
- (vi) Adult Children of alcoholic (**ACOA**)

AA MEMBERSHIP IS FREE The only requirement for membership is a desire to stop drinking,
AA HELP LINES:

Telephone: 020-784654

1) NICOTINE (CIGARS, CIGARETTES)

Prevalence increasing **in developing** countries.

Use usually begins in the teenage years.

When dependent one continues using it despite knowledge of risks, or one chain smokes.

Withdrawal leads to insomnia, irritability anxiety, and difficulty in concentration.

Predictors of difficulties in stopping **use**: -

- Smoking soon after waking
- Smoking when ill
- Reporting that 1st cigarette of the day most difficult to give up

80% smokers resist quitting

Most try and fail 3-4 times before finally quitting

25% quit on first attempt.

LONG TERM EFFECTS

The long-term effects of tobacco exposure results from nicotine itself and how it is taken.

Remember that tobacco is either chewed or smoked. The effects include: -

- Browning of teeth Lung cancer
- Lung diseases such as chronic bronchitis
- Exacerbate asthma symptoms in adults and children
- Cancer of the mouth and the tubes that lead to the lungs
- Cancer of the oesophagus, stomach, pancreas, cervix, kidney, urethra and bladder
- **Death** at an early age

In Pregnant women, carbon monoxide (a lethal gas) and the high doses of nicotine obtained when they inhale tobacco smoke interferes with oxygen supply to the foetus. Nicotine readily crosses the placenta, and nicotine concentration in the foetus, **amniotic** fluid, and breast milk can be high. This may lead to lower birth weights for infants carried to term, spontaneous abortions, still births, deformed babies or very early deaths of born babies.

WHAT CAN ONE DO TO HELP?

More than 70-90 % of smokers want to stop, but only 1 in 3 will succeed before the age of 65. It has been shown that behavioural changes can help. Avoid smokers and smoking environments or situations that compromise your plans to quit like drinking alcohol and receiving support from family and friends who have either quit or have not smoked. Nicotine substitutes (nicoderm, nicotrol) and some antidepressants like Bupropion (Zyban) have been shown to help.

BHANG

BHANG IS A MAJOR. DRUG OF ABUSE IN KENYA

Bhang means the leaves, flowers, and other parts of a plant known as **Cannabis Sativa**,

It is against the law to grow, have or use Bhang in Kenya. Bhang has 69 other, names like **Ganja**, Stone, Hashish, Marijuana, Pot, Grass, Weed, **Dagga** etc.

Bhang is usually used by smoking and has over 400 chemical substances most of which are harmful to the body. The most dangerous are called **Cannabinols**.

Bhang can remain in the body for a long time even when one has stopped using it.

Use of Bhang can cause immediate problems to the body and also problems later in life. Some of these are:

IMMEDIATE PROBLEMS

(a) *Mistaken Feelings of:* -

- **Being** well and happy
- Seeing better
- Hearing Better
- Improved sense of touch, hearing, smell and taste
- Added strength to the body
- Being a great person, leader or King
- Being able to do everything

(b) Dryness of the mouth and throat

(c) Stupid laughter - laughing at nothing

(d) Increased appetite or feeling very hungry

(e) Seeing things that are not there

(f) Wanting to sleep a lot

(g) Eyes becoming red and partly closed

(h) Poor memory

(i) Not able to control one's own actions

(j) Narrow **mindness** (thinking too much and too long about one single place or thing)

PROBLEMS, WHICH COME LATER

- Worry for little reason
- Fear without reason
- Feeling of being in an imaginary world
- Seeing things that are not real (a goat can look like an elephant)!
- Not able to do simple things

- Not able to tell either day or time
- Hearing funny sounds **that are not, there**
- Becoming dirty and not **taking care** of one **self**
- Painful periods in girls / women
- Women may take long or never become pregnant
- Babies die before they are born
- Babies are born before their time leading to their bad health and death.
- Men produce weak sperm which cannot fertilize the egg
- **Sex** organs become smaller
- Damage to brain, lungs, heart, liver, kidneys, and other organs
- Death

The use of Bangi becomes a problem to other people for example:

- Cause accidents that could have been avoided Families become poorer
- Children stop going to school
- There is more violence and **increased** crime
- Families may break up
- Careless sexual behaviour leading to increase in **HIV / AIDS** Poor health in the families
- More people die early in life

Most people who take **Bangi** easily start using alcohol (**pombe**), cigarette, **miraa**, and other bad substances.

Using of Bangi is a disease and users may find it hard to stop. If you take Bangi you need help. There are a few things that can be done to help stop use of Bangi:

- (i) Farmers should plant cash crops instead of Bangi because it is against the law to plant, use or sell Bangi.
- (ii) Those who use Bangi must know the dangers to their bodies and families.
- (iii) Customs and traditions must look at smoking of Bangi as harmful to people.
- (iv) Leaders must tell and remind the people that use of Bangi is a serious problem.
- (v) People must know that growing, having or using **Bangi!** is not allowed in Kenya and one can be put in jail for a very long time for doing this.

MIRAA

Miraa is an **evergreen** tree, which is grown in **East African Highlands** but can grow in the bush. It is also called Kat, Khat Khath, Qat, Gumbo, or Mairungi. It contains many substances, which can damage your health. Leaves and young twigs are chewed while still fresh.

Use of miraa can cause problems to the body either immediately or later.

Immediate problems:

- Feeling happy then very sad.
- Talking a lot and too fast.
- Not able to stay at rest.
- Loss of sleep.
- Feeling as if one is better than before.
- Feeling one is not tired in both mind and body.
- Poor thinking.
- Strong movement of muscles without one's will
- Death if big amounts are taken at once.

Problems that can come later

- The person becomes easy to annoy and hard to please
- The person can forget important things
- Loss of sexual power in both men and women
- Difficulties and pain when passing stool,
- **Seeing**, hearing, tasting, and feeling things that are not. there.
- Bad **smell from the** mouth; wounds and swellings or cancers in the mouth.
- **Teeth may** fall off as the gum becomes weak and brownish.
- Men or women may take long to get babies or the babies may die before they are born. Periods

may come at wrong times or be painful, Sexual intercourse also becomes painful or poor as sexual power becomes less.

- For men sperms may start coming out on their own.
- Those who chew Miraa do not sleep well.
- The sleep may disappear, come on and off or come at a time when one is doing important work. This way accidents may happen on roads, in factories or at building places.
- People who take Miraa easily start using other drugs such as alcohol, cigarettes or hospital drugs to reverse the effects of Miraa. Soon they bring more problems to themselves.
- The final result is that Miraa users lead poor lives and die early

6) OPIATES (MORPHINE, HEROIN AND CODEINE)

Heroin can be taken by mouth, inhaled or injected.

It gives a rapid, intensely pleasurable experience, often accompanied by heightened sexual arousal.

Physical dependence develops within weeks of regular use resulting in the need for higher and higher doses and a life that is centered on obtaining and taking the drug.

Users of injectable forms are prone to bacterial infections, hepatitis B, HIV through needle contamination. Accidental overdose is common.

The withdrawal syndrome presents with intense craving, running nose, tears, yawning, sweating, shivering, vomiting, diarrhoea, cramps, a fast heartbeat and high blood pressure.

Psychosis, anxiety, depression, sexual dysfunction and sleep disorder may occur.

2) COCAINE

Taken by needle injection, sniffing, or snorting. Crack cocaine can be smoked.

Gives a rapid stimulating effect.

Dependence develops very fast, hence frequent dosing to maintain a "high."

A "high" results in increased vigour, hyperactivity and talkativeness.

Psychosis, anxiety, depression, sexual dysfunction and sleep disorder may occur Hallucinations of touch are common.

1) INHALANTS (ORGANIC SOLVENTS, GLUE SNIFFING, GASOLINE. THINNER, SPRAY PAINT)

Increasingly popular, cheap and available.

70-80 % of the users are male.

Quickly produces acute intoxication characterized by euphoria, excitement, dizziness and a floating sensation.

Also causes belligerence, assertiveness, lowered judgement, in coordination and slurred speech.

Further inhalation leads to loss of consciousness. Death can occur from the direct toxic effect of the solvent or from lack of air/oxygen if inhaled from a plastic bag.

Psychosis, anxiety, depression, sexual dysfunction and sleep disorder may occur.

2) AMPHETAMINES

These have a central stimulating effect and are taken to produce increased energy, elevated mood and greater capacity for concentration.

They also suppress appetite and are sometimes used in obesity.

Withdrawal results in rebound depression, anxiety and fatigue. Chronic use may lead to Psychosis, anxiety, depression, sexual dysfunction and sleep disorder.

3) BENZODIAZEPINES (DIAZEPAM etc)

Are effective in reducing anxiety and inducing sleep , and are sometimes prescribed for these reasons.

It may be lethal if mixed with alcohol.

Intoxication and withdrawal are medical emergencies.

Withdrawal symptoms can occur if the drug is stopped abruptly and include anxiety, increased sensory awareness, and convulsions. Psychosis, anxiety, depression, sexual dysfunction and sleep disorder may occur.

Dependence occurs if the drug is taken for long.

13) LIFE SKILL ACTIVITIES **(For Students)**

(2 hours)

TRAINING MATERIALS

(Pre-prep)

- Hand out on role play (Pendo & Tamaa)
- A4 Fool Scaps
- Flash Cards for Memory Game
- Small Cards (Blank) for each participant
- Benefits of self-esteem
- Flip Charts – Session Objectives
 - Skills used by Pendo
 - 3 Cs
 - Format for Decision Making

SESSION OBJECTIVES

(2 min)

By the end of the session, participants will appreciate:

- Life Skills that are intended to strengthen their abilities and practices towards safe behaviour

CONTENT AND PROCESS

ROLE PLAY

Pendo and Tamaa

- Pendo is a fifteen-year-old orphan girl at Amiena Secondary School. Apart from her school work, she takes care of her three siblings without any support from her relatives
- Many times Pendo and her siblings go without food and other basic needs. Occasionally, Tamaa the shopkeeper offer her some foodstuff to take to her siblings, on agreement that one day she will pay back when she gets a job
- On this particular occasion, Pendo left school late after prep work and was passing by Tamaa's shop.

Tamaa : Hi Pendo, How are you? Please come and carry some food home.

Pendo : *(Comes shyly)* Hallo Mr. Tamaa, Good evening to you.

Tamaa : Just wait, I shall pack some food for you *(He packs some foodstuffs)*. Please come and collect them from here *(Pendo goes to the back of the counter to collect the food)*.

Tamaa : *(Takes out a beautiful dress and offers it to Pendo)* Look, Pendo, I bought this for you as a special present. Put it on.

Pendo: *(Very surprised and reluctantly puts the dress on)*

Tamaa: Wow, you look beautiful. Take it, it's yours.

Pendo : Sorry, I cannot take it, I can't pay for it.

Tamaa : Come on, Pendo, you don't need to pay for it. This is my present to you. Can I pack it for you? *(Tamaa touches Pendo)*

Pendo : *(Hesitates and thinks, then says shyly); Ok.. (She takes it off and gives to Tamaa).*

Tamaa : *(Packs the dress, while Pendo is lost in thoughts) He offers the packed dress to Pendo*

Pendo : Sorry Mr. Tamaa, I do not need the dress, please give me the foodstuffs and let me go home.

Tamaa : *(Very disappointed) You refuse my present? Are you sure you do not need the dress? Then I do not give you the foodstuffs!*

Pendo : *(Shocked and disappointed walks away)*

Activity 1 (45 minutes)

STAGE	CONTENT	PROCESS	TIME	FACILITATOR				
ONE	Facilitators reads through objective on the chart		2 min					
TWO	Decision Making (Case study Pendo and Tamaa)	<p><i>Case study</i></p> <p>Discussion and Interpretation</p> <ol style="list-style-type: none"> 1. Introduce the case study 2. Set the participants in groups to read 3. Ask questions to generate discussion for the purpose of finding skills used as follows: <table border="1"> <thead> <tr> <th>SKILLS USED BY PENDO</th> <th>WHERE USED</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	SKILLS USED BY PENDO	WHERE USED			<p>5 min</p> <p>5 min</p> <p>10min</p>	
SKILLS USED BY PENDO	WHERE USED							
THREE		<ol style="list-style-type: none"> 4. Lead the discussion to help the participants realize that decision making involves 3 questions i.e. <ul style="list-style-type: none"> ❑ CHALLENGES What were Pendo's Challenges? ❑ CHOICES What choices did she have? ❑ CONSEQUENCES What are the consequences of those choices? 	10 min					
FOUR	Summary	<ul style="list-style-type: none"> ❑ What would you have done if you were Pendo? ❑ What would you do if you were Pendo's Peer Supporter? 	8 min					

Total: 40 Min

Activity 2 (35 minutes)

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
1.	Self-esteem -Paper tearing activity (Destroying)	<ul style="list-style-type: none"> ❑ Facilitator issues A4 paper to each participant and gives the following instructions: (i) Tear the size of the piece of paper to represent how much of your self-esteem is damaged by what has been read out: <ul style="list-style-type: none"> ❑ Your best friend laughs at you when they hear you say that you are a virgin ❑ Your friends laugh at you when you give a wrong answer in class ❑ Your mother scolds you in the presence of your friends. ❑ You witness a fierce quarrel between your parents ❑ Your father has been sick for a long time and it is discovered that he is HIV positive ❑ You fail mathematics and your teacher tells you off in front of the class. 	15 min	
2.	Building	<ul style="list-style-type: none"> ❑ Participants use the shreds to build back their self-esteem 1. You are praised by the Head teacher as the best behaved student 2. An old man you helped comes home to thank you in the presence of your friends 3. You win a singing competition 4. You come home from school and you find your dad is on ARVs. 5. Your friends agree with you that abstinence is cool. 6. Your long lost friend sends you a card to confirm that abstinence works. 	15 min	
3.	Summary content	<ul style="list-style-type: none"> ❑ Your self-esteem is very important. ❑ Things that happen around us can build or destroy our self-esteem. ❑ We need to develop our self-assurance. ❑ We can do this by building on our self awareness ❑ We need to believe in ourselves. 	5 min	

Total: 35 Min

Activity 3 (45 minutes)

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
1.	Coming up with own mission statement	<p><i>Discuss: -</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> What is a vision? <input type="checkbox"/> What is a mission? <input type="checkbox"/> What is a mission statement? <p><i>(Give examples of heroes know to participants whose mission in life was good)</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Explain to participants that life is what we want to make it. <input type="checkbox"/> It is in our mind. We can choose to be whatever we want. All we need to do is believe in ourselves. <input type="checkbox"/> We choose what to think and do. It must be what will make us better persons or feel better. <input type="checkbox"/> The more positively you think the better person you become. 	10 min	
2.	Be Ambitious	<p>Memory game</p> <p><i>Using 20 items on flash cards or real items in a box let participants try and remember as many as possible. Give a chance to volunteers to try and get all 20.</i></p> <p>Goal, abstinence, guidance, peer, motto, vision, patience, inspiration, behaviour, self-esteem, counseling, misconception, responsibility, skill, mission, attitude, career, honesty, choice and support.</p> <p>How did this make you feel? (with individuals who do well and also those who do not do so well – discuss)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Be ambitious (how?), Aim high, set short and long term goals (example) <input type="checkbox"/> Work hard to achieve this <input type="checkbox"/> Try again when you fail <input type="checkbox"/> Never give up – Play the game again if there is time. This time read the list. 	10 min	
3.	Designing	<p>Using a flipchart</p> <p>Participants will be guided to come up with their mission statements</p> <p>“Who am I?” “How long do I wish to live?”</p> <p>“What do I want to be?”</p> <p>“What do I want to achieve in life?”</p>	20 min	
4.	Summary	<p>Participants will be given coloured cards to write their mission statement in life. The cards will be mounted on flipcharts and displayed.</p>	5 min	

CHECKLIST

Mission: - Particular work that one feels it is a duty to do e.g. your mission in life is to work with the homeless.

Mission Statement: - An official statement of aims of company or organization.

Vision: - An idea or picture in your imagination/ability to think about or a plan for future with great imagination and intelligence.

14) LIFE SKILLS AND LIVING VALUES **(For Students & Teachers)**

(2 hours)

TRAINING MATERIALS (Pre-prep)

- Handout on Living Value and Life Skills
- Flipchart: Three categories of Life Skills
- Facilitators Handbook pg 61
- Video: Sara saves a Friend
- Flip chart on skills
- Flip chart on core values

Note to facilitator: Refer to handout for detail in content

SESSION OBJECTIVES (5 min)

At the end of the session the participants will be able to:

- Appreciate the importance of life skills and living values in the development of young people
- Lay strategies at school and community to monitor and mentor the inclusion of life skills and living values in the school and its environment.

CONTENT AND PROCESS

LIFE SKILLS (25 min)

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
1	Objectives	Using flip chart read through objectives	3 min	
2	Definition of Life Skills	(i) Brainstorm and harmonize using flip chart. (ii) Participants site few examples of life skills. Facilitator harmonizes with checklist on the flip chart.	10 min	
3	Classification of Life Skills	Using a flip chart the facilitator will explain the 3 categories of Life skills giving examples of each category.	10 min	
4	Benefits of life skills in relation to HIV/AIDS transmission and prevention	Discuss and summarize using a flip chart.	10 min	
5	Definition of Living Values	Brainstorm and harmonize using a flip chart.	5 min	
6	Core Living Values	Participant cites examples of living values. Facilitator harmonizes with a checklist and goes through the 12 core living values creatively.	25 min	
7	Benefits of Living Values	Discuss and summarize using a flip chart.	10 min	
8	Video – Sara Saves a Friend	(i) Explain about the video (ii) Participants watch the video (ii) Discuss on skills and values seen in the video,	32 min	

		in groups' participants fill in the table displayed on the flip chart and report back.		
9	Life Skills and Living Values for Students in school	Discuss: (i) Importance of developing strong life skills and living values. (ii) How can we develop strong life skills and living values in schools? (iii) Do you think the students in school can be like Sara and Juma	10 min	
10	Summary	(i) What are the relationships between life skills and living values? (ii) Explain 3 Ts in developing life skills and living values in relation to Sara.	5 min	

Definition:

These are abilities for adaptive and positive behaviour that enable an individual to deal effectively with the demands and challenges of everyday life.

There are three categories of life skills, which are: -

1. Knowing and Living with Oneself:

Self-awareness – (understanding oneself, one's potential, feelings and emotions awareness of one's strengths and weaknesses)

Self esteem – self-confidence, self worth.

Coping with emotions – Love, anger, hatred, shyness, fear

Coping with stress – (physical emotional psychological)

2. Knowing and living with others:

Assertiveness – Standing up for what you believe in

- Respect yourself and others
- Be confident but not push

Empathy – Ability to understand and appreciate other people's situation and finding ways of helping.

Effective Communication – Ability to express oneself clearly and appropriately during interactions.

Negotiations – ability to cope with potentially threatening or risky situation

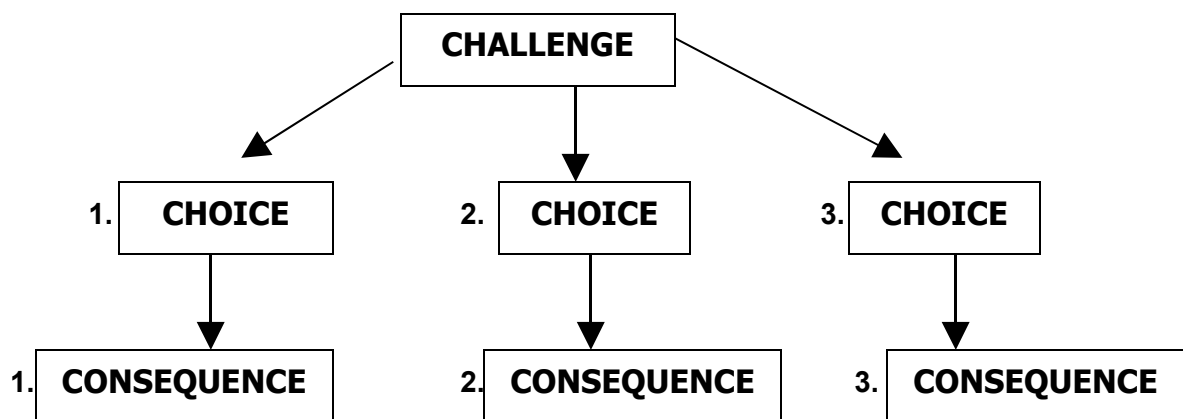
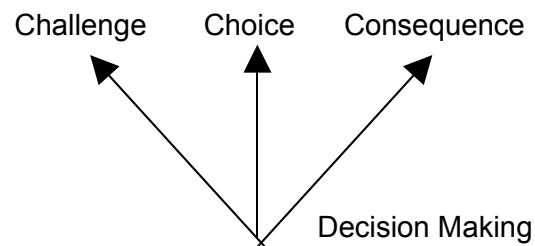
3. Effective decision making:

Critical thinking – ability to explore the possibilities of doing a task in more than one way when placed in unexpected or unfamiliar situations.

Creative thinking – involves coming up with new ways of doing things, ideas, arrangements or organizations.

Problem Solving – ability to identify, cope with and find solutions to difficult or challenging situations.

Decision-making:
Ability to utilize all available information to analyze a situation and make informed choices and decisions.



Why do you teach life skills to the youth?

A community that buries its old buries the past but a community that buries its young people buries the future.

This is particularly true when we consider that: -

- 66% of the Kenyan population are youths
- Majority of the new infections of HIV/AIDS reported in the youths.

If the above trend continues then the country will be faced with a generation gap – there is need to teach life skills.

What is the teachers’ responsibility in teaching life skills?

- Infuse skills in schemes of work and lesson plans.
- Teach life skills.
- Promote behaviour change
- Be a role model.

What is the responsibility of students?

- Communicate assertively
- Make informed decisions
- Practice healthy behaviour
- Avoid risky situations

- Build high self esteem

Benefits of life skills

- Emphasize the benefits of life skills as they relate to HIV transmission and prevention and put them on chart.
- Empowers one to have a greater control over his/her own life by: -
 - Promoting healthy behaviour
 - Delay early sexual involvement and pregnancies,
 - Avoiding high risks of HIV/STI transmission,
 - Building self-esteem, self worth and self-confidence.
 - Empower one to positively and effectively assert him/herself when confronted with difficult situations,
 - Promotes participatory teaching / learning methods which improve the academic performance.

LIVING VALUES	(30 min)
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Brainstorm with the participants on what 'living values' are.

Cite examples of living values - list them on the chart.

Note for facilitator: you must guide and correct ambiguities

Go through the 12 Core Living Values on flip charts (*see handout*)

Freedom, Peace, Love, Respect, Responsibility, Honesty, Humility, Happiness, Simplicity, Tolerance, Cooperation, Unity etc.

Display what each value stands for on charts.

Emphasize the benefit of the living values as they relate to behaviour formation and put them on the chart (*examples below*).

- Enable one to make socially conscious choices
- Are the treasures of life
- Bring happiness
- Bring self respect and dignity
- Increase independence and freedom
- Expand capacity to be self-sufficient
- Liberate one from external influences
- Offer protection
- Bring empowerment
- Open heart and human nature so that life is filled with compassion and humility

VALUES WEBS (15 min)

Emphasise the benefits of living values and relate them to HIV and AIDS messages in the curriculum.
Use value web on freedom on flip chart or handout.

Example: Freedom

What is freedom?

Empowerment to take responsibility. Note that there is no freedom without responsibility.

In the curriculum, freedom can be developed in Art and artistic impressions such as colour and mood. Freedom is a basic human right. Living peacefully with others. Children need to know that good healthy habits harmonize living with others peacefully.

Freedom in subjects such as:

Science: -living things growing and the need to provide an environment for healthy growing can be infused in science topics.

GHC: Explain the effects of war as it relates to the spread of HIV/AIDS and what and where children can have correct values instilled such as love, humanity, happiness and unity. With such values sexual exploitation, which leads to spread of HIV, would be controlled.

The web provides for other areas in the curriculum to be briefly discussed or mentioned. Finally: Values cannot be developed out of context. They should be infused and integrated in the teaching and learning environment.

VIDEO SHOW & DISCUSSION (55 min)
' Sara Saves a Friend '

Note for facilitator: put participants in groups before they watch the video. Give the participants the following task to do as they watch the video. (Video runs for 17 min)

What skills and values are evident in the video? (Discussion: 15 min)

SKILLS	WHERE IN THE VIDEO	VALUES	WHERE IN THE VIDEO

(Discussion: 10 min)

Discuss the importance of developing strong living values and life skills and why there is adult resistance to developing some of these in young people. (For example: assertive young people challenge adult authority; strong self-esteem is feared to lead to conceit and arrogance etc.)

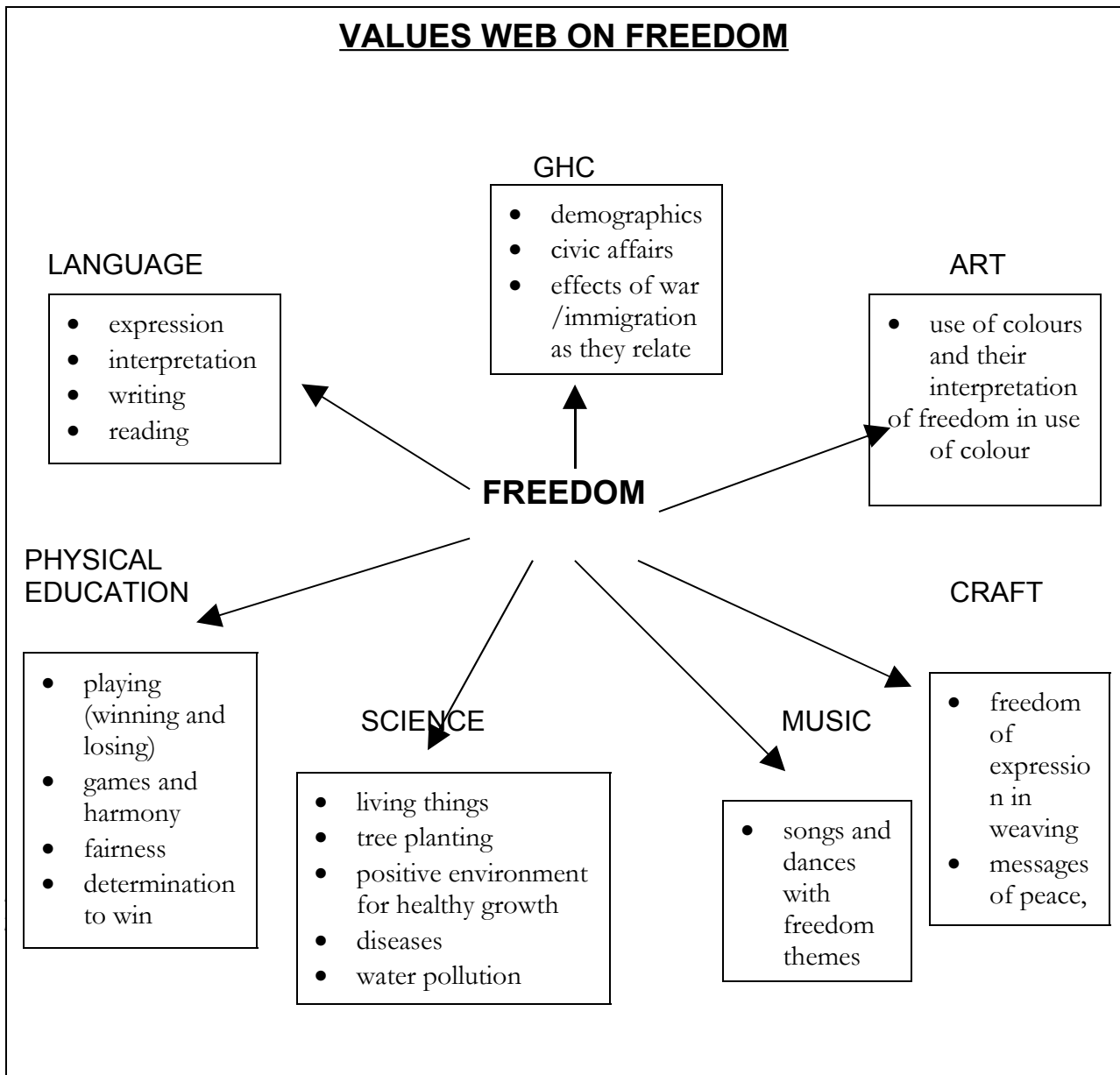
(Discussion: 10 min)

How can these life skills and living values be promoted in a school setting?

SUMMARY (5 min)

What is the relationship between living values and life skills and reducing the risk of HIV/AIDS transmission?

VALUES WEB ON FREEDOM



LIFE SKILLS AND LIVING VALUES (For Students & Teachers)

Purpose of Life Skills Education

Life skills enable individuals to translate knowledge, attitudes and values into actual abilities i.e. what to do and how to do it

- Psycho* - those skills dealing mainly with mental function and processes. These are the problem solving skills, which are carried out in the mind.
- Social* - those skills dealing with ones interaction with environmental and culture. They are the interpersonal skills culture.

Life Skills for Psychosocial Competence

Psychosocial competence is a person's ability to deal with the demand and challenges of everyday life. It is a person's ability to maintain a state of mental well-being and to demonstrate this in adaptive and positive behaviour while interacting with others, his/her culture and environment.

Psychosocial competence has an important role to play in the promotion of health in its broadest sense and in terms of physical, mental and social well-being. In particular, where health problems are related to behaviour, and where the behaviour is related to an inability to deal effectively with stresses and pressures in life, the enhancement of psychosocial competence could make an important contribution. This is especially important for health promotion at a time when behaviour is more and more implicated as the source of health problems.

The most direct interventions for the promotion of psychosocial competence are those, which enhance the persons coping resources, and personal and social competencies. In school-based programmes for children and adolescents, this can be done by teaching of life skills in a supportive learning environment.

Defining Life Skills

Life skills are abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life.

Described in this way, skills that can be said to be life skills are innumerable, and the nature and definition of life skills are likely to differ across cultures and settings. However, analysis of the life skills field. Suggest that there is a core set of skills that are at the heart of skills-based initiatives for the promotion of the health and well being of children and adolescents.

PROBLEM SOLVING SKILLS

These skills can be looked at as a process in which a challenge, demand or problem has to be solved. This process enables an individual to deal constructively with a problem in life.

Critical Thinking: This means an attempt to understand what really constitutes the problem. It also means analyzing the problem and what may have caused it to emerge.

Creative Thinking: Once the problem is understood and analyzed as to its cause and its components, the next step is creative thinking. This involves looking for solutions. One may come up with various options.

Decision Making: This involves weighing each option in which case, it goes back to critical thinking around each option. In weighing the options, it is necessary to look at each possibility in the light of:

- options foregone/discarded
- possible combinations of options
- outcomes of foregoing/discarded options
- outcomes of chosen options
- positively or negatively of outcomes of the chosen options.

Decision-making then means taking the best option out of all the possible options.

Although the above seem like internal mental functions which indeed, they are, it is possible for one who has a problem to solve to ask for advice from those who have had more experience and are trusted. When a decision has been arrived at, one should be able to steadfastly hold onto it and be committed to it. This ability to unwaveringly commit oneself to a decision is referred to as Assertiveness. Without having gone through the process of critical thinking, creative thinking and decision-making, assertiveness may not be possible. The process helps one to argue out his/her case where pressure has been exerted on his/her behaviour and/or values. Ability to argue out ones case is called Negotiation Skills.

Negotiation skills are important in conflict resolutions. These conflicts may be internally or externally created. Such internal conflicts come from desire or pressure on an act, which seem to have more than one option. The question of should I or should I not? This process helps in overcoming stress and emotions.

Although the psychosocial life skills are mental functions and processes, which cannot be separated into specific definable compartment within an individual's mind, for the purpose of training it is important to look at each one of them as a separate segment.

The process may also be laid down in a series of steps as a display on paper. This must be viewed only as a pedagogical exercise since as mental functions one cannot for example decide to carry out only creative thinking while critical thinking is put aside until later.

For this academic exercise therefore, it is possible to divide the life skills into two main areas namely:

- Psycho - those dealing mainly with mental function and processes. These are the Problem Solving Skills, which are carried out in the mind.
- Social - those dealing with ones interaction with environmental and culture. They are the Interpersonal Skills.
- We can illustrate this as shown on the next page.

LIFE SKILLS (PSYCHO-SOCIAL) STRUCTURE

Abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life.

SKILLS OF KNOWING AND LIVING WITH ONESELF

CRITICAL THINKING (understanding the problem)

CREATIVE THINKING (Weighing the options)

DECISION MAKING (Taking the best option)

- Conflict resolution
- Negotiation
- Assertiveness

SELF-AWARENESS (Understanding oneself e.g. emotions, response

to

stress etc)

SKILLS OF LIVING WITH OTHERS

EMPATHY (Understanding others)

COMMUNICATION (Creating commonness between you and others)

- Conflict resolution
- Negotiation
- Assertiveness

SKILLS OF MAKING EFFECTIVE DECISIONS

JUDGEMENT

COMMUNICATION

DECISION-MAKING

PROBLEM-SOLVING

INTERPERSONAL RELATIONSHIP SKILLS

These skills help us to relate positively with people with whom we interact.

Self-awareness: This includes recognition of ourselves, character, strengths, weaknesses, desires, emotions, capabilities etc. It helps us not only to overcome stress but also to decide on what is best for us.

Empathy: This is the ability to imagine what life is for others even in situations, which we have not experienced. Empathy helps us to understand others who are different from ourselves. It enhances our capacity in social interactions.

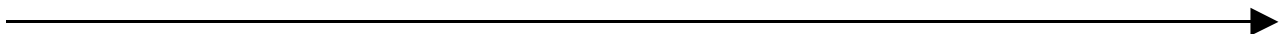
Effective Communication: This is the ability to express ourselves and to exchange ideas. One expresses his/her personal ideas and these must be an outcome of our self-awareness. Also, unless we have empathy, such ideas could be egoistic and hurtful to others.

From the above we see that in problem-solving, assertiveness, negotiation and conflict resolution are internal processes within Interpersonal relationships they are expressed to other people and are therefore external.

Teaching life skills as generic skills in relation to everyday life could form the foundation of life skills education for the promotion of mental well-being and healthy interaction and behaviour. More problem specific skills, such as assertively dealing with peer pressures to use drugs, to have pre-marital sex, or to become involved in vandalism, could be built on this foundation. There are research indications that teaching skills in this way, as part of broad-based life skills programmes, is an effective approach for primary prevention education. (*Errecart et al. 1991; Perry and Kelder, 1992; Caplan et al, 1992*)

The model below shows the place of life skills as a link between motivating factors of knowledge, attitudes and values, and positive health behaviour; and in this way contributing to the primary prevention of health problems such as HIV and AIDS.

Knowledge, attitudes and values Life skills (for psycho-social competence) Behaviour reinforcement or change Positive health behaviour Prevention of health problem



Life skills enable individuals to translate knowledge, attitudes and values into actual abilities i.e. “What to do and how to do it”. Life skills are abilities that enable individuals to behave in healthy ways, give the desire to do so and give the scope and opportunity to do so. They are not a panacea; “how to do” abilities are not the only factor that affect behaviour. If the model above were placed within a larger, more comprehensive framework, there would be many factors that relate to the motivation and ability to behave in positive ways to prevent health problems, social support, cultural and environment factors.

These factors include such things as effective acquisition and application of life skills can influence the way we feel about ourselves and others. Equally, they will influence the way we are perceived by others. Life skills contribute to our perceptions of self-effectiveness, our self-confidence and self-esteem. Life skills therefore play an important role in the promotion of mental well-being contributes to our motivation to look after ourselves and others, and the prevention of mental disorders and health and behaviour problems.

LIVING VALUES EDUCATION PROGRAM (Adopted from Unicef)

Living values and Educational Program was born when 20 educators from around the world gathered at UNICEF Headquarters in New York City in August, 1996, to discuss the needs of children, their experiences of working with values and how educators can integrate values to better and prepare students for lifelong learning. The Living Values “*Educators Kit*” was prepared and ready for piloting in February 1997 and Living Values has been gaining momentum since.

What Kind of Program is Living Values?

It is a values education program, which offers a variety of experiential values activities and practical methodologies to teachers and facilitators to enable children and young adults to explore and develop ii Key Personal and Social Values.

- *Cooperation*
- *Freedom*
- *Happiness*
- *Honesty*
- *Tolerance*
- *Unity*
- *Peace*
- *Respect*
- *Responsibility*
- *Simplicity*
- *Humility*
- *Love*

Living Values Education Program also contains special modules for parents, caregivers and refugees. Refugee’s module is specifically for children affected by war. LVEP is already in use at over 800 sites in 62 countries. Pilot results in schools indicate that students are responsive to the values activities and become interested in discussing and applying values. Teachers report not only a decrease in aggressive behaviour but also note that students are more motivated and exhibit an increase in positive ‘and cooperative personal and social skills.

The Purpose of Living Values Education It is to provide guiding principles and tools for development of the whole person recognizing that the individual is comprised of physical, intellectual, emotional and spiritual dimensions.

The aims are:

- To help individuals think about and reflect values and the practical Implications of expressing them in relation to themselves, others, the community and the world at large.
- To deepen understanding, motivation and responsibility with regard to making positive personal and social choices.
- To inspire individuals to choose their own personal, social, morel and spiritual values and be aware of practical methods of developing and deepening them.
- To encourage Educators and care givers to look at education as providing students with philosophy a/living, thereby facilitating their overall growth, developments and choices, so that they may integrate themselves into the community with respect, confidence and purpose.

The Call of Values

The values call is echoing throughout every land, as educators, parents, community and more and more children are increasingly concerned about and are affected by violence, growing social problems, the lack of respect for each other and the world around them, the lack of social cohesion.

Education has a fundamental role to play in personal and social development. Education is not a miracle cure or a magic formula opening the door to a world in which all ideals will be attained, but as one of the principle means available to foster a deeper and a more harmonious form of human development and

thereby to reduce poverty, ignorance, oppression and war. The program of “Living Values” has been produced in response to the call of values.

Need for Values

- Values bring happiness in life
- Values are the treasure of life. Making humans wealthy and rich
- A life filled with values is a life of self-respect and dignity. Values bring independence and freedom
- They expand the capacity to be self-sufficient
- They liberate one from external influences
- They offer protection and those who get it are able to share with others
- Values bring empowerment and remove weaknesses and defects
- They open the heart and transform human nature so that their life is filled with compassion and humility
- Students also thrive in a value-based atmosphere in a positive, safe environment of mutual respect and care. Where students are regarded as capable of learning to make socially conscious choices

Value activities can be utilized by teachers and parents. Students learn by example and are most receptive when the information and learning points are congruent with the behaviours of the person sharing

Values Activities

In the values activities for children, reflective and visualization activities teach students to access their own creativity and inner gifts:

Communication activities teach students to implement peaceful social skills.

Artistic activities - songs and dance inspire students to express themselves while experiencing the value of focus.

Game-like activities are thought provoking and fun, the discussion time that follows those activities, helps students explore effects of different attitudes and behaviours. Other activities stimulate awareness of personal and social responsibility and social justice. The development of self-esteem and tolerance continues throughout the exercises.

Teaching Values

- Living values are designed to motivate students and to involve them in thinking about themselves, others, the world and values in ways that are relevant.
- They are designed to provoke the experience of values within and build inner resources. Students are asked to reflect, imagine, dialogue, communicate, create, write about and play with values.
- Each student does care about values and has the capacity to positively create and learn when provided with opportunities.

Incorporating Values Into Existing Curriculum

This can be done in subjects at primary school. Values can develop through books and stories that are selected with heroine or a hero demonstrating the value of focus. A variety of methods and modalities can be used to enable students to explore each value in several ways. For example students can be asked to:-

- Reflect on the effects of each positive and the consequences when the value is not there.
- Experience values through visualization, play and songs etc.
- They can express their values artistically.

Values will touch the core of individual, perhaps inspiring positive change, which can contribute to world transformation. The world will automatically become a better place when each individual becomes a better person. As we develop values within the self, we share the fragrance of those values with the world around us and in this way move forward to a better world.

The 12 Core Living Values

LOVE

Where there is love, there is a world.
Love looks on all with a vision of equality.
Love is all giving without any thought of a return;
A heart that has love is able to accommodate
the whole universe and still has space for more.
Selfless love is truly unlimited;
It forgets and forgives the weakness
And sees only beauty and specialties in everyone.

HONESTY

Speak with honesty and you will get a chance to learn.
The one who is honest will speak about themselves first, not about others.
Others won't get impressed by your words,
or even by your face...
But by your honesty and truth.
To speak that which you think and to do that
Which you speak is honesty.

TOLERANCE

Where there is tolerance,
You are able to remain quiet and happy inside.
One who has tolerance has the power to
accept and accommodate all situations.
Only when you are content internally can there be tolerance.
When you are content,
then just like a mother who has love for her child,
There is no limit to tolerance.

SIMPLICITY

Simplicity is identifying and being comfortable with those elaborate
circumstances which shape our lives without worrying or
making matters complicated.
It requires facing any complexity with a plain and simple mind.
Simplicity starts with the self and overflows to everything else around us.
A life lived in simplicity is a satisfying life
which inspires everyone yet possessed by one.

PEACE

Peace is the original quality of the self.
In its purest form, peace is inner silence.
It consists of positive thoughts, pure feelings and good wishes.
To have peace you need patience.
When you are peaceful, you create an atmosphere of peace.
Peace in the world can only be realized
when there is peace in the minds of man.

HAPPINESS

There is happiness when each moment
is used in a worthwhile way.
Happiness is such nourishment that it can transform a person,
from weak to powerful, it makes
difficult things easy heavy things light.
To remain happy and share happiness with others is
the greatest act of charity.
No matter what happens, your happiness
should not be lost.

COOPERATION

It is based on faith, love, trust and understanding.
It is not a bargaining game, in which one person's success is
achieved at the expense of another's.
Real cooperation takes place
when there are good wishes
and pure feelings for each other.
The highest cooperation is to partake of God's task;
And in return He will cooperate with you forever.

HUMILITY

Humility is dedication to the extent that no
acknowledgement is sought for the self.
Humility allows you to learn.
There is great strength in humility.
It never holds on to anyone for support.
Everyone bows down to those who bow down first.
Humility is not subservience but greatness.
It is visible when there is love.
Have love for humility. It helps you to remain happy.

RESPECT

True respect is valuing one's own existence and the existence of others.

It is not connected to a person's role, social position, nor his capacities or talents. It is the awareness that everyone has value;

Everyone is unique.

When there is respect, there is understanding, giving and taking on basis of love.

Only when you give respect do you earn the respect of others.

RESPONSIBILITY

The world's a stage and we are all actors.

Each actor plays a unique part and

He is responsible for his own actions.

Responsibility means playing our part accurately no matter what the task may be.

Each one of us has a huge part in creating a better world.

Just respond to the abilities

Within you and become responsible.

FREEDOM

Freedom starts in the mind.

Understanding the self is the key to freedom.

The more one understand the self, the easier it is to be liberated from waste.

Freedom means to be uninfluenced, unaffected and to be at peace with the self.

True freedom is to experience the true essence of one's being and that is peace.

UNITY

Unity is harmony within and amongst individuals.

It is built from a shared vision for the common good.

Unity is appreciating the values of each individual and their unique contributions.

When there is the willingness within the self to accommodate others, Unity blossoms. When I take the first step to mend fences, others will also change.

15) GUIDANCE

(Total time: 2 hours)

TRAINING MATERIALS

(Pre-prep)

Handouts:

- Guidance for Goal Setting

Other:

- Scarves or blindfolds.

SESSION OBJECTIVES

(2 min)

At the end of the session the participants will be able to:

- Improve personal guidance skills as a mentor.
- Support good guidance practices in school (e.g. advising on selection of Guidance teacher).
- Continuously guide peer supporters.

CONTENT AND PROCESS

GUIDANCE ACTIVITIES

(20 min)

Activities (with blindfold – 20 min)

Select 10 people. Put them in pairs. Blind fold one among each pair. The ones not blind folded lead the others to walk around at a marked area.

The persons leading must NOT talk to the blind folded.

Repeat the activity with another group of 10 people. (This time the persons leading MAY talk to the ones who cannot see and give instructions.)

Discussion back in class:

- How did it feel to lead someone?
- How did it feel to be guided being able to see?
- How were the experiences different?

What guidance is? (Brainstorm) - 5 min

- Giving direction
- Leading
- Assisting / helping
- Giving information
- Empowering/giving advice
- Caring –providing
- Encouraging
- Giving assurance
- Instilling confidence

What guidance is NOT? (Brainstorm) – 5 min

- Judging
- Scorning
- Conditioning
- Condemning
- Misleading
- Sympathizing

Activity 3A (in groups - 25 min)

Discuss how to organize guidance at school (*use the guided questions*)

Trainers come up with scenarios that should generate discussion and conclude topics to be taught.

- At Kanagi Secondary school the teacher on duty found used cigarette butts in the form 2.
- At Sabaki Secondary school the teacher found a couple of love letters written by students to each other in form 3.
- In the school question box at Sulwet Secondary School there has been persistent accusations by students of sexual harassment.

School	Topic	Target Group	Expected Outcome

1. What is the topic that requires guidance to be given?
2. Who is the guidance intended for? (What do you expect to come out of it?)
3. Why does this group need guidance?

Questions to consider during discussion: -

1. When would be the best time to give the guidance sessions? (There is time in school if it is properly planned)
2. How should these sessions best be given? (What resources are needed – a chalkboard?)
3. Who should give the guidance sessions? (The audience needs to recognize the speaker as a source to be trusted. The speaker also needs time to prepare and must know what is expected of them, who they are to talk to, what the purpose is, how long they have etc.)
4. Where should the guidance sessions be held? (Consider the size of the audience, how long they are expected to attend, where will they sit, is there a big enough room etc)

Report back – 15 minutes

Activity 4

Facilitator's introduction to activity 4 - (20 min)

General benefits of guidance are to: -

1. Give knowledge
2. Create awareness
3. Influence behaviour
4. Offer emotional support
5. Offer chance of discussion – discussion should focus on learning points to bring out the intended behaviour change.
6. With suggested topics below that could benefit from guidance, in groups, class/participants will discuss: -
 1. Methods/approaches to be used in the guidance of these topics.
 2. Suggested facilitators.

Suggest topics that could benefit from guidance (Through group or class discussion. Show method to be used and suggest facilitators)

Topics at school	Method (Examples for Trainers)	Facilitator (Examples for Trainers)
STIs among the youth	Discussion Video – Silent Epidemic, Sexual Networking Experiment.	Community Health Worker, Guidance & Counseling Teacher, Peer Support Trainer
Reproductive health in adolescence	Discussion Charts of Adolescent Health	Home science Teacher/Guidance & Counseling Teacher,

		Headteacher
Drug Abuse	Drama/role play (Pg 84 to Pg 87) Discussion/lecture	CRE Teacher, Guidance & Counseling Teacher, Peer Support Trainer, Church Leader
Living values and Life skills	Talk, Life skill activities, integration Discussion, Video-Sara Saves a Friend	Invited Guest Speaker Headteacher, Class teacher
Value of co-curricular activities	Discussion, talk, practical activity. Video-Banana	Professional speaker Games Teacher, Class teacher, Headteacher, Guidance & Counseling Teacher, Peer Support Trainer.

Report back – 15 minutes

SUMMARY

(13 min)

- Using handouts, facilitator reads and leads a discussion on rights of Children and Abuse.
- Points to touch on when guiding a young person.
- Forms of child abuse.

GUIDANCE FOR GOAL SETTING (further reading)

POINTS TO TOUCH ON WHEN GUIDING A CHILD

- That every career is good and children should not overlook any
- Every career has opportunities and challenges
- Careers compliment each other. No career is less important than the other
- They should always look for alternatives. For example if you can't be a doctor, you can be a nurse, a volunteer, or First Aid activists etc
- Children should be encouraged to go for vocational training
- They can change careers at any stage of life
- Anything done well will be rewarded in future and they should always do the best they can in whatever they do
- A career is one of the life choices they must make while growing up
- They should not let anything stand in their way of achieving a certain career (assertiveness)

WHY IS CAREER GUIDANCE AND COUNSELING NECESSARY IN OUR SCHOOLS?

- For maximum identification and development of talents and gifts in individuals
- To help the children cope with challenges in future and gives them encouragement
- Help them make correct choice
- Make children live a fulfilling life
- Helps in confidence and moral building and motivates children to high goals
- Help children to make good use of their gifts
- Appropriate utilization of available resources
- Encourages positive healthy competition in schools
- Help learners to understand and appreciate the role of education
- We can introduce Career Guidance and Counseling through discussion of different jobs on the market

FORMS OF CHILD ABUSE

Physical Abuse : Anything that is done to inflict bodily pain on the child

- Harsh Punishment
- Defilement / Rape
- Child Labour
- Involving children in war
- Burning hands / fingers or any other part of the body
- Battering
- Flogging
- Pressing child's private parts / breasts
- Rape and Female Genital Mutilation (FGM)
- Child abduction
- Torture like corporal punishment
- Puncturing
- Cutting private parts of a child

Sexual Abuse : An act done to manipulate the child into sex below the age

- Rape
- Defiling
- Touching private parts
- Giving material for sex
- Bad language
- Pornography
- Indecent touches / fondling
- Female Genital Mutilation
- Sexual Language
- Indecent dress, walk

Emotional Abuse : Any act that is done with an intention of hurting a child's feelings

- Denying the children access to information concerning their lives e.g. name of father, relatives, disabilities e.g. using demoralizing words to a child
- Bullying
- Reprimanding
- Child neglect
- Intimidation
- Seduction
- Child abduction

WHO ARE THE CHILD ABUSERS?

- Parents)
- Teachers)
- Community) The society
- Siblings)
- Peers)

HOW TO HELP AN ABUSED CHILD

- Don't put the blame on the child
- If physical abuse, the child should be taken for medical check up
- If emotional, allow the child to narrate his / her experiences without being hurried i.e. allow emotions to flow freely e.g. anger, hatred, crying, hopelessness
- Be empathetic when dealing with sensitive issues like defilement, incest etc
- Inform the authorities about the abuse

EMOTIONS ASSOCIATED WITH CHILD ABUSE

- Find out the problem of the child
- Blaming oneself
- Guilt about the act
- Anger – on the abused
- on the abuser
- Hopelessness
- Anxiety
- Depression and stress
- Fear
- Disbelief etc

16) QUESTION BOX MANAGEMENT DURING THE WORKSHOP
(For Students and Teachers)

(1 hour)

TRAINING MATERIALS	(Pre-prep)
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Materials:

- Question Box
- Objectives on a chart

SESSION OBJECTIVES	(2 min)
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By the end of the session, participants will be able to:

- Appreciate the use of the question box in addressing their health challenges.
- Discuss the management and norms of the question box and handling during training.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objectives	<ul style="list-style-type: none"> • Facilitator goes through the objectives 	2 min	
TWO	Question Box - Introduction	<ul style="list-style-type: none"> • Introduction of the question box (use sample question box) • Explain the purpose of the question box using the checklist. 	15 min	
THREE	Question Box Management	<ul style="list-style-type: none"> • Discuss the management and norms of the question box during this workshop using the checklist. 	13 min	
FOUR	Questions (Personal Activity)	<ul style="list-style-type: none"> • Give participants time to write personal health questions related to HIV/AIDS and put in the question box. 	15 min	
FIVE	Summary	<ul style="list-style-type: none"> • Facilitator informs participants that most of their questions will be answered during HIV/AIDS sessions and some during Question Box Session. • Stress the importance of the use of the question box as a means of addressing health challenges • Questions must be related to the theme and objectives of training, which is, 'reducing HIV / AIDS transmission'. • Taking leadership as peer supporters in giving information on STI / HIV / AIDS. 	15 min	

PURPOSE OF THE QUESTION BOX IN TRAINING:

- Give the students and teachers an opportunity to ask HIV/AIDS and sexual health related questions freely.
- Help trainers to address the individual health needs of the participants if time allows.
- Empower students and teachers with knowledge on health issues.
- Nurtures the value of responsibility in students and teachers.
- To assist trainers and participants to respond to their varied questions.

NORMS

- The questions should be anonymous.
- No victimization
- All questions should be answered with due respect.
- Documentation of questions and answers be done.
- The teachers should discuss and answer the questions in groups.
- Answers should be accurate and factual
- Confidentiality should be observed.

NOTE: Facilitators in charge will handle the questions. Demonstrate examples.

17) GOAL SETTING (For Students)

(2 hours)

TRAINING MATERIALS	(Pre-prep)
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Materials:

- River of life on flip charts
- Flip charts

SESSION OBJECTIVES	(2 min)
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By the end of the session the participants will be able to: -

- Appreciate the benefits of setting goals in life.
- Motivate young people to come up with short and long term goals.
- Achieve set goals by supporting each other

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objectives	Facilitator reads through objectives on the flip chart. Brainstorm what is a goal? Harmonize with flip chart. <u>Definition:</u> A goal is an end result towards which efforts are directed.	2 min	
TWO	Set goals of a farmer	The facilitator takes an example of a maize farmer and asks the following questions (Brainstorm): - <ul style="list-style-type: none"> • What are the long-term goals of the farmer? (good harvest) • What are the short-term goals of the farmer in order for him to achieve the long – term goals? 	8 min	
THREE	Individual Activity on Goals	This is a personal reflection: - <ul style="list-style-type: none"> • Individually think, what is your long-term goal in life? • What are your short-term goals in life that will assist you achieve the long-term goal? <p>NOTE: We need in life to have goals. To achieve these goals we need to plan. Our plans include short-term goals that we must achieve in order to realize our ultimate goals. If we fail and we often fail, the challenge is not in the failing but in how quickly we get up and start again.</p>	10 min	
FOUR	River of life group activity	<ul style="list-style-type: none"> • Brainstorm • What are the benefits of a river? • What can interfere with these benefits? 	10 min	
FIVE	Group activity on goal setting	<ul style="list-style-type: none"> • Facilitator gives the scenario of the river of life. • <p>SCENARIO N/B: Fish must reach to the ocean in spite of the river having the following:</p> <ul style="list-style-type: none"> • Snakes, crocodiles, stones, sand, Fishermen nets and hooks. 	10 min	

CHECKLIST

- **Long term goals:**
 - good harvest/yield
 - good market
 - good income
- **Short term goals:**
 - Weather
 - Type of seeds
 - Weeding
 - Fertilizer
 - Ploughing
 - Planting
- **Benefits of a river:**
 - Water for irrigation
 - Rains
 - Beauty
 - Re-creation
 - Means of communication
- **What can interfere with the benefits:**
 - Erosion
 - Cutting of trees
 - Over cultivation
 - Pollution
- **The possible strategies to be put in place for the fish to reach the ocean of life:**
 - Tree planting
 - Stopping pollution
 - Avoid cultivating or overgrazing along river banks
 - Firm government policies
 - Education afforestation
 - Control terraces
 - Cover crops
 - Controlled human settlements
- **Challenges that the youth may face:**

Drug and substance abuse	STI/HIV/AIDS
Peer pressure	Fees
Rape	Up Keep
Sex with simultaneous partners	Death of Parents
Sex with older persons	Early Pregnancy
Sex for pleasure	Media
Sex for money/gifts	Lack of Role Models
Culture	Broken families
Irresponsible Parents	Inadequate career guidance

- **Strategies to assist the youth to safely reach the ocean of life:**

Knowing the benefit of abstinence	Create awareness
Guidance	Seek for treatment for STIs
Avoidance of substance abuse	Encourage dialogue of all stakeholders
Peer support	Teach life skills and living values
Dancing without sexual acts	Provide factual information
Proper use of leisure time	Organize for games and sports
Informed choices	Set short term and long term goals
Serious study	Formulate rules and regulations
Spending time in the company of good friends without sex	Establish IGLAs.
Avoiding risky situations where sex may happen	

- **Summary (checklist)**

- Planning
- Critical thinking
- Decision making
- Prioritizing
- Peer Support
- Overcoming peer pressure
- Meeting desired goal

RIVER OF LIFE ILLUSTRATIONS

RIVER 1 ILLUSTRATION

RIVER 1 SOURCE	GOOD FEATURES	POLLUTANTS	ACTION
Mount Elgon	<ul style="list-style-type: none">• Hotel• Small Scale Farming• Water Project• Irrigation Scheme• Dam• Kambi animal & human watering point	<ul style="list-style-type: none">• Overgrazing• Leather factory• Chemical factory• Kambi animal & human watering point• Forest logging• Gas station• City Dumping• Soil erosion• Sewage Deposit	

ACTIVITY I

Brainstorm: -

If this river is contaminated, what sort of water purification project would you put in place?

RIVER 2 ILLUSTRATION

RIVER 2 (River Athi)	YOUTH SEXUAL NORMS & PRACTICES	WHEN AND HOW IT HAPPENS	ACTION
<p>Young people's sexual activities in: -</p> <ul style="list-style-type: none"> • Families • Schools • Communities • With varied belief and practices about sexuality 	<ul style="list-style-type: none"> • Group norms to have sex • Experimentation • Sexually active age group • Risk behavior of drugs and alcohol • Knowledge of condoms and how to obtain them • Do not want to use condoms • Simultaneous partners • Older partners (men & women) • Not cool to abstain • Norm of being in control of their sexual activities & decisions • Sex is practiced for pleasure • Sexual experience valuable than virginity • Youth need sex. 	<ul style="list-style-type: none"> • After dark • School outings • Holidays • Sent home for school fees • Insecurity in school compound/home • While drunk/under influence of drugs • Peer pressure • Rapes and sexual assaults 	

18) CAREER GUIDANCE
(For Teachers)

(Total time: 2 hours)

TRAINING MATERIALS (Pre-prep)

HAND OUT

Materials:

- Career Guidance
- Career Booklets
- Purpose driven Tree Chart

SESSION OBJECTIVES (2 min)

- Appreciate the importance of career guidance skills.
- Continuously guide students to identify and nurture their individual talents and gifts.

CONTENT AND PROCESS

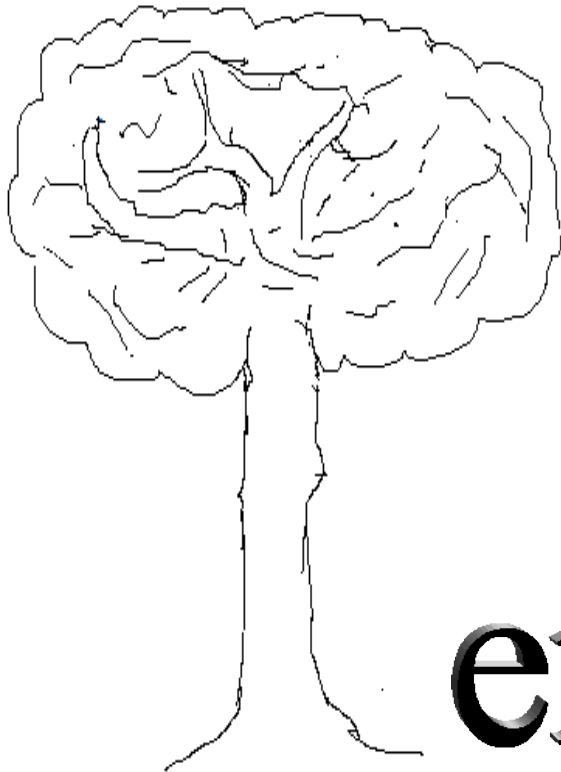
STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objectives	Facilitator reads through the objectives on flip charts.	2 min	
TWO	Definition	Brainstorm on what is career and what is guidance. Facilitator harmonizes with a flip chart on what career guidance is.	5 min	
THREE	Aspiration The purpose grown tree	<p>1. Brainstorm an aspiration e.g. who inspired you to be what you are? (Follow the inspiration and record). What aspirations did you have? Follow the aspiration and record on the flip chart.</p> <p>2. Facilitator gives the following guidelines:</p> <ul style="list-style-type: none"> • Choose a tree you like most • What do you expect from the tree you have chosen? • Draw the tree you have chosen • Facilitator displays different purposes of trees as follows <ul style="list-style-type: none"> - fruit tree - timber tree - beauty tree - fuel tree - non-classified tree <p>• Ask participants to fall in purpose tree groups.</p>	5 min 5 min 8 min	

		<p>3. In groups the participants discuss and list the stages and activities to be put in place. Realize the full potential of your purpose grown tree.</p> <p>4. Report back.</p> <ul style="list-style-type: none"> Facilitator harmonizes with checklist on flip chart. <p>5. Checklist – Choice of seedling, preparation of seedbed, planting, transplanting, nurturing/water, choice of fertilizer, top dressing, mulching, grafting, pruning, protection of flowers and fruits and market.</p>	<p>10min</p> <p>5 min</p>	
FOUR	How the purpose tree relates to students' career guidance	Facilitator displays the purpose grown tree market and through discussions asks participants to compare points on the purpose grown tree in relation to students' career guidance.	40 min	

	STAGES AND ACTIVITIES	GUIDING QUESTIONS ON HOW CAREER GUIDANCE RELATES TO PURPOSE TREE
	<p>Choice of Seedling</p> <p>Preparation of seed bed/farm</p> <p>Planting/transplanting</p> <p>Nurturing/Water</p> <p>Choice of fertilizer</p> <p>Top dressing</p> <p>Mulching</p> <p>Grafting, Pruning, Protection of flowers/fruits</p> <p>Find market</p> <p>N/B: Facilitator should give two examples, i.e.</p> <ul style="list-style-type: none"> • How do you identify students career: <ul style="list-style-type: none"> - through student observation - students dislikes and likes - subject performance - Value Added Progress (V.A.P.) • When do you observe these factors? <ul style="list-style-type: none"> - Continuously - While teaching - If requested - Bringing up discussions 	<ul style="list-style-type: none"> • How do you identify student's career. • When do you do choosing? • What are the benefits of the career guidance • When do you prepare a student to realize their potential? • What do you put place in for career guidance to take root in individuals. • What factors must be considered • Whose responsibility is to enhance knowledge skills and attitudes? • How can you create an enabling environment for career development? • Whose responsibility is it to guide and protect the student? • What factors are crucial in the development process? • Do you have the capability of preparing students for the job opportunities on the labour market?

FIVE	Research and findings	<p>The Facilitator discusses research findings and its challenges with the participants. The research shows: - Students sexual activity is high because of having: -</p> <ul style="list-style-type: none"> • Simultaneous sexual partners e.g. in school, other schools, at home e.t.c • Older partners • Sex for money • Sex for pleasure with or without emotional attachment. • Know about the condom but don't use • Know about abstinence but do not want to say 'No'. • Not having sex for religious reasons. 	20 min	
SIX	Summary	<p>Facilitator reminds the participants about the purpose grown tree.</p> <ul style="list-style-type: none"> • TENDER • RICH • ENDOWED • EMPOWERS <p>The facilitator stresses that to realize the full potential of their students: -</p> <ul style="list-style-type: none"> • All teachers must participate in their students' career guidance development. • Teachers should be able to identify: - <ul style="list-style-type: none"> - Talents/Gifts - Failings - Weaknesses - Opportunities - Threats <p>Facilitator underscores that the teachers have the power to direct students to their vision. Where there is lack of vision people literally perish.</p>	15 min	

PURPOSE DRIVEN TREE



ender

***R*ich**

***E*mpowers**

***E*ndowed**

CHECKLIST

What is a Career?

It is a job or profession especially one with opportunities for progress promotion.

What is Guidance?

- Giving advise
- Assisting or helping
- Giving direction
- Giving information

What is Career Guidance?

- A process of helping an individual to choose the right profession.
- Showing one the way to reach / attain the desired job / profession.

Guiding Questions on How Career Guidance Relates to Purpose Tree

Choice of Seedling

- How do you identify the like and dislikes of the students?
- Find out the likes and dislikes of the students – by the way they interact with one another (observation)
- Subject performance (V.A.P) – Value Added Progress.

Preparation of Seed-bed / farm

- Benefits of career guidance
 - Enable the student to grow and work towards developing the relevant career. (Performance in subject cluster)
 - Creates confidence in students as they pursue their desired careers.
 - Motivates the student to be focused.
 - Gives fulfillment in higher goals in the life of a student.
 - Helps the students to make correct choices.
 - Helps students to maximize their talents and potentials.

Nurturing / Watering

- Expose the child to the whole curriculum
- Adequate coverage of syllabus
- Selection of the subjects (guided)
- Extra tuition and individualized attention of students.
- Proper environment from teachers and parents.
- Proper monitoring of students' performance.
- Recognizing and rewarding for performance.
- Choice of subjects to start at a lower level or at an early stage.
- Teacher to love or who love to the students.

Choice of Fertilizers

Factors to consider when applying fertilizers

*Fertilizers add value to crop.

- Identify the need of the particular student
- Identify the talent / potential of the student
- Identify the level / class / stage of the student
- Identify the suitable skill/ value required to serve the purpose
- Identify the other viable factors required to enhance the purpose for which the value is basing uncalculated. (e.g. you apply fertilizer when its raining / wet)

Top Dressing

Who is responsible in enhancing knowledge, skills and attitudes?

- The teacher – remedial teaching, assignments
- Fellow students – peer support, discussion group, team work
- Surrounding community – Guest speakers, resource purpose, role models, and family.
- Enabling environment – Relevant books, learning material, research findings.

How to create an enabling environment for career development

- Functional guidance and counseling
- Incalculable of desired values and themes / messages.
- Equip with enabling skills.

Mulching

Whose responsibility is it to guide and protect the student?

Note: the mulching material should be dry – a mature person

- Home – Parents, brothers and sisters
- School – Principal, guidance and counseling teacher, class teacher, games teacher, club / society patrons, other students, invited speakers, clinics to guide parents.
- Community – Role models, professionals, mass media.

Grafting, Pruning and Protection

- Grafting: - implanting one species of a tree onto another to improve quality.
Application: Attained through focused discussion groups made of students of varied abilities.
 - Grouping should be based on similar career orientation.
 - Means marrying talents to improve quality.
 - Role of the teacher to guide in appropriate grouping.
- Pruning: - Removal of excessive branches to allow the tree to grow healthy.
Application: Refers to selection of subjects / based on abilities – to be career oriented.
 - Means shading away subjects that are not directly related to career to ease workload.
 - Concentrate on subjects related to career.
 - Emphasize on co-subjects.

Role of guide/teacher is to help select subjects appropriately.

Protection

Tree needs to be protected to realize potentials.

Application: - A student may have a career / goal but should be aware that there are destructors e.g. peer pressure, drug abuse, pregnancy, HIV/AIDS, mass media e.t.c.

- Role of guide / teacher is to empower the student with knowledge, skills, values that will protect them from destructors.

Do we have the capability to prepare students for the job opportunities on the labour market?

Yes: Because – structures are available e.g. department of guidance and counseling

- Director of studies, class teachers etc
- Personnel - those managing the department
- School policies – motto, mission, statement, rules etc
- Sponsors – offer guidelines

In spite of these, there are hindrances such as:

- Unawareness
- Laxity
- Lack of follow up
- Curriculum demand

19) COMMUNICATION APPROACHES **(For Teachers)**

(2 hours)

TRAINING MATERIALS

(Pre-prep)

Handouts on:

- 10 Keys of Good Communication.
- Information Corner, Question Box and School Health Club
- Flipcharts
- Felt pens
- Facilitators Handbook

SESSION OBJECTIVES

(5 min)

At the end of the session the participants will be able to:

- Identify various communication approaches that can be used for AIDS education in schools
- To encourage appropriate use of features of a responsive school

CONTENT AND PROCESS

EFFECTIVE COMMUNICATION

(30 min)

What is Communication? (Brainstorm – 5 min)

(Message, Sender, Receiver, Channel, Effect, Feedback (Refer to Pg 53 Facilitator's Handbook - read from book)

Message passed between sender and receiver. Some feedback. A channel (written information; verbal information; gestures; signs; symbols.) Practical elements.

Talking about communication involved in passing messages about HIV. 96% awareness, but AIDS continues to spread. Messages being sent but not necessarily received. These practical things are essential, but other features or qualities are necessary.

What is Effective Communication?

The 7 C's of effective communication (10 keys to effective communication for prevention of AIDS are given for reference only - see handout)

- *Command Attention*
- *Clarify Message*

Communicate a Benefit

- *Consistency Counts*

Create Trust

- *Cater for the Head and the Heart*
- *Call for Action*

10 Keys for effective communication for AIDS prevention (See Handout)

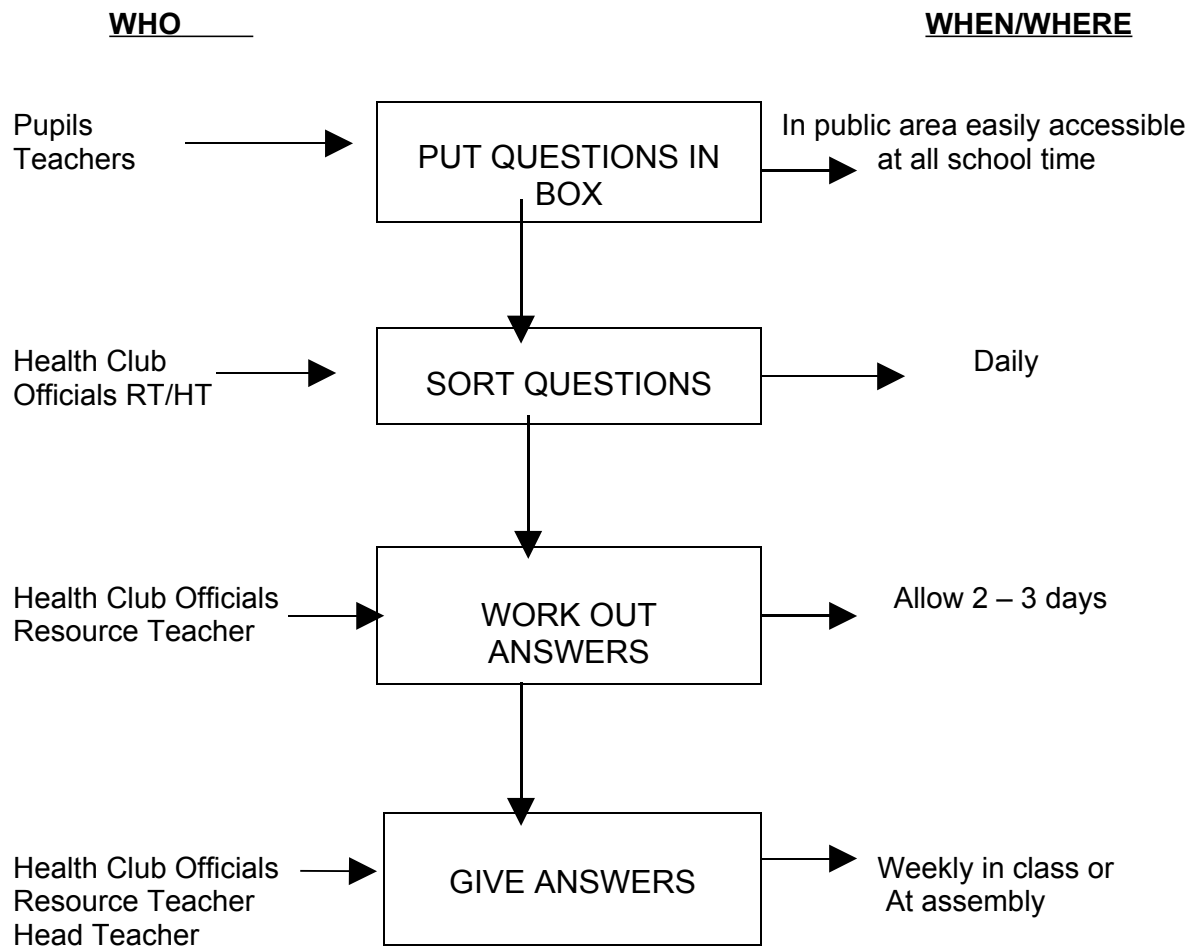
What are the Barriers to Effective Communication? (Internal/external).

Enlist information from your participants (e.g. age difference, distractions like noise, mixed roles in one person)

Communication Methods in Schools.

In relation to behaviour change, what are the features of a good . . . ? : (10 min)

- Question Box)
- Guidance and Counseling) what they are and how they work
- School Health Club) See overleaf
- Information Corner)



NOTE: Every school to establish a Question and Answer booklet

GUIDANCE AND COUNSELLING

What is happening in schools now about the Guidance and Counseling? (*Brainstorm*)

What should be happening? (*Brainstorm*)

- When should it be timetabled?
- Who should handle guidance and who should handle counseling?
- Should it be blocked? (Guidance and Counseling) - Separately and why.
- Should the time be used for answering questions from the question box?
- What are the benefits of Guidance to examination performance of individual students?
- What is the significance of Guidance and Counseling to the mean score?

What should be the content of the lesson? (*Brainstorm*)

Are schools preparing schemes of work in Guidance?

Is counseling handled, as it should be?

Stress 1 Scheme of Work should be maintained for Guidance Sessions.

 2 The Scheme of Work should sequence the factual information about HIV/AIDS and STI

 4 Content of the lesson – can accommodate all those topics not infused nor integrated during teaching

 5 Should be used to promote behaviour change and sexual health education.

EXTRA & CO-CURRICULAR ACTIVITIES

(25 min)

In relation to behaviour change, what are the features of a good . . . ? : (*Group Work*)

- Guidance session
- Assembly
- Class Teacher Time in Secondary Schools
- Games and Sports

In groups, discuss the 3 activities above stating:

SCHOOL 1			
	Current Situation	Desired Change	Action
True Love			
School Health Club			
Question Box			
Co-curricular Activities			
Extra Curricular Activities			
Thematic Games and Sports			
Class Teacher Time	Used for calling register, and discipline. Teachers are shy about discussing other issues	Guidance and counseling be intensified. Behaviour change messages be passed and discussed.	
School Rules and Regulations			
Guidance Sessions			
Counseling			
Assembly	Used for administration instructions; flag raising; punishment and payers. Very little behaviour change messages are passed.	Specific behaviour change messages on risky situations; activities of School Health Club and Question Box be addressed. Special assembly for behaviour change messages be set aside.	
Performances	Parents are not responsive – songs, drama etc are treated as mere entertainment activities	The messages in the shows (songs/drama) should be explained in detail before and after the presentations. Teachers and peer supporters to take a lead as role models. Performances that correspond to the three Ts of Transmission, Transaction and Transformation.	

SCHOOL 2

	Current Situation	Desired Change	Action
1. True Love			
2. School Health Clubs			
3. Question Box			
4. Co-curricular Activities			
5. Extra Curricular Activities			
6. Thematic Games and Sports			
7. Class Teacher Time	Health Clubs, Information Corners and Question Box are in place in this school.	Follow up on the usages of QB/IC/HC. Each club to have a QB and IC. Empower students to be able to come up with songs, poems and drama, which can bring about behaviour change. IC comes up with statements which need action	
8. School Rules and Regulations			
9. Guidance Sessions	All teachers not involved	All teachers should be involved.	
10. Counseling			
11. Assembly	On selected / specific days HT/TOD talk about AIDS message	The talk should be more often. Invite speakers including pupils to formulate songs, poems/mashairis about risky behaviours.	
12. Performances	Messages are still sent on parents' days, prize days and public days	Follow up discussion in homes e.g. chiefs at barazzas People living with AIDS to come out openly and talk about it. Income generating activities to be encouraged to avoid illness. Performances that correspond to the three Ts of Transmission, Transaction and Transformation.	

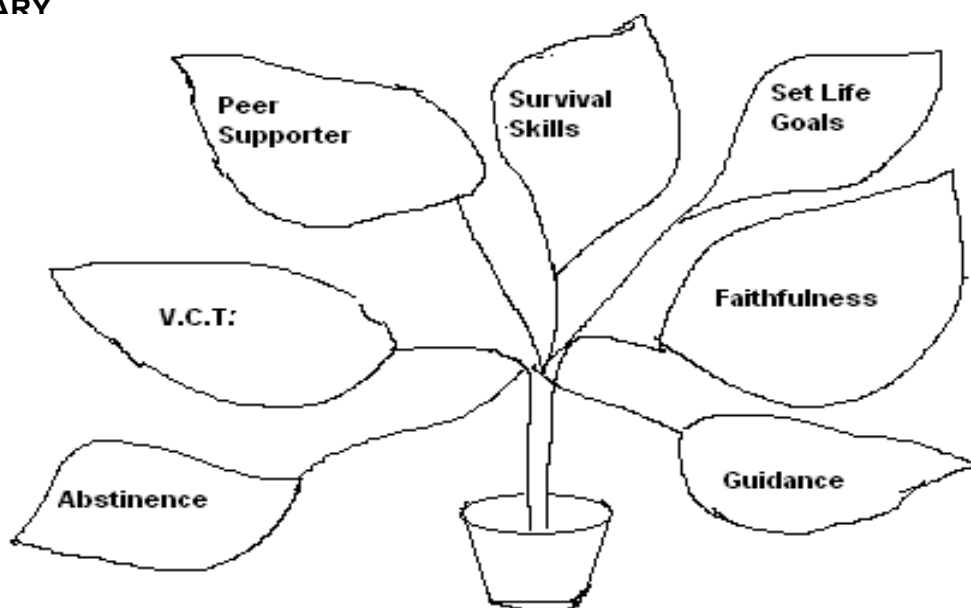
INFORMATION CORNER

What is put at the information corner: -

- Cut outs from newspapers and magazines on current health issues.
- Posters
- Students write up and art items on health issues (should be vetted)
- The information should be updated regularly.
- The information should be in an open area where it is accessible to the school and communities e.g. notice board/corridors.
- Health club member's leaders and the patron should take charge of the information corner.
- Establish a bush tree with current information on HIV/AIDS and general health issues.

SUMMARY

(5 min)



Effective Communication Approaches encouraged by SSABH Programme are: -

- Question Box
- Information Corner
- School Health Club
- Guidance and Counseling
- Quality –collaborative approach in activities
- Assembly
- Performances that correspond to the three Ts of Transmission, Transaction and Transformation
- Class teacher involvement in Behaviour Change, Development and Modification

CHECKLIST

Information Corner – Word ‘Bush’

- VCT
- Creative thinking
- Manage sexual energy
- Secondary virginity
- Peer support
- Reduce stigma
- Abstinence
- Faithfulness
- Cooperation
- Simplicity
- Humility
- Drug free
- Survival Skills
- Dispel Myths
- Effective Decision Making
- Guidance
- Honesty
- Responsibility
- Freedom
- Tolerance
- Personal values

COMMUNICATION

Communication is the process of exchanging ideas and information among people.

The Communication Process

- Sender
- Receiver
- Channel
- Feedback

A Good Message will Follow the 7 C's of Effective Communication

- Command Attention.

Statements that are interesting claim people's attention. Sometimes questions that make them think can be used. People do not give attention to things they have heard many times, like 'AIDS is a pandemic and there is no cure'.

- Clarify Message

It is important to speak or write in a way that people can understand. Unusual or difficult words need to be explained. Don't just assume that people have understood – give enough detail to make sure they have got the whole message.

- Communicate a Benefit

As you talk or write, show people how the information you are giving can help them and how they can use the new knowledge to their advantage.

- Consistency Counts

When people hear or read things that contradict what they have otherwise been told, they start to doubt what is true. It is important not to confuse people by being inconsistent.

- Create Trust

If your audience is to take notice of your message, they must have trust that you are a reliable source of information. It is important to have all your facts correct and not to pass inaccurate pieces of information so that they can trust you.

- Cater for the Head and the Heart

Your messages need to address people's emotional response (Heart) as well as what they think (Head). You can use your own experiences to understand how people feel, perhaps the feelings that stop them from changing their behaviour. Even if someone knows something is good for them, they may still fear change.

- Call for Action

End your message with a clear statement of what you want your audience to do – be faithful to their marriage partners, talk to their children, be responsible role models etc.

External Barriers must also be Overcome: (e.g. noise, age difference, mixed roles in one person etc.)

The Role of the Communicator:

- find ways to encourage AIDS prevention as part of daily life
- raise public consciousness so that people think about AIDS prevention as an issue for their neighbours and for society
- raise individual consciousness so that people think about AIDS
- address prevention as an issue that has impact on their personal behaviour

An effective communication program must also be concerned with feelings, incentives, obstacles, and the ways this can be manipulated through messages to help people

TEN KEYS TO EFFECTIVE COMMUNICATION FOR AIDS PREVENTION

Whatever strategy is chosen it is important in effective communication to include.

1. Define the person practicing high-risk behaviour

These persons are audience for your messages. Depending on the particular strategies you select, your audience could be one or all of the following: the sexually active population, school children, or persons practicing high-risk behaviours. However each separate target group will require completely different communication approaches; segmenting your audience before you begin will help to ensure that your messages and strategies will affect those you are trying to help.

2. Determine the existing levels of knowledge, attitude, and types of high-risk behaviours within your target groups.

Understand what correct information they already have and how they behave.

3. Specifically define what behaviours must be changed.

What information needs to be changed, and what attitudes require changing, in order for people to protect themselves? This is the crucial step of strategy development.

4. Determine the relative benefits of each behaviour.

Which behaviours are currently practiced as compared to those you will be promoting? View this as

though they were products competing for the individual's attention.

5. Select the benefits of the correct behaviour.

Which benefits are most competitive in the minds of those most at risk? This step requires an in depth understanding of what motivates your target audience. Is your audience most concern about:

- protecting themselves
- protecting their children
- protecting their families

6. Craft messages and appeals that highlight specific benefits.

Make sure that there is consistency across all of your messages and materials.

7. Pretest messages and appeals that highlight specific benefits.

Try to learn whether the members of your audience understand, believe, and are motivated by the messages.

Do the visual images in the materials support the words?

Do the images represent people, places, or products with which the audience is familiar?

How can the messages be changed to improve the likelihood that they will influence behaviour change?

8. Select channels that most persuasively reach the audiences at risk.

How can school children and your audience (parents) compliment each other for better sources of information to benefit both and have a larger impact.

9. Organize the effective delivery of the messages through the selected channels.

What is the "language" of your target audience?

10. Monitor delivery for mistakes and unexpected changes in the audience.

Are drawings, illustrations giving the correct information and are they displayed?

Are teachers giving the right directions to their pupils? Are the pupils interpreting the messages correctly?

Are your audience members reached a point of saturation with information, but do they fell unable to perform the behaviours you are promoting?

NB: Communication is flexible and fluid; it can change, grow, develop, and continue to influence throughout this process. The challenge is to utilize limited resources in a way, which informs, motivates, and sustains the behaviours that are most crucial to AIDS prevention programs.

A successful age of prevention includes three principles:

- Put the audience first
- Target the behaviour to be developed, modified or changed
- Integrate diverse strategies

The challenge for us now is to move to beyond denial, beyond information, toward more targeted and integrated programs of prevention, using communication as a means to understand, reach and influence the youth and the society.

20 a) SEXUALITY AND TOUCH CONTINUUM ***(For Teachers and Students)***

(2 hours)

TRAINING MATERIALS

(Pre-prep)

Flip Charts:

- Flip charts with objectives
- Flip charts with circles of sexuality or Over head projector
- Handouts on sexuality
- Chalkboard/Chalk
- Circles of sexuality
- Handouts on touch continuum

SESSION OBJECTIVES

(5 min)

By the end of the session the participants will:

- Be able to identify and categorize the five main circles of sexuality.
- Discuss touch continuum to show the need for attitude development in sexuality.

Note to trainer: *this session is meant for adults being trained. The participants will be guided through what they already know and may have practiced. The session is supposed to prompt their own practice and appreciate the right way to look at own sexuality in order to guide the youth in the right way.*

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Session Objectives	<ul style="list-style-type: none"> • Using flip chart the facilitator reads out the session objectives. 	5 min	
TWO	Sex and Sexuality	<ul style="list-style-type: none"> • Brainstorm – what is sex? • What is sexuality? • Get feedback and harmonize with the checklist. 	20 min	
THREE	The five main circles of sexuality	<ul style="list-style-type: none"> • Facilitator takes the participants through the five main circles of sexuality giving relevant examples for students (ref. Attached checklists.) <ul style="list-style-type: none"> - Sensuality - Sexual Intimacy - Sexual Identity - Sexual Health and Reproduction - Sexualization 	1 hr	
FOUR	Touch Continuum	<ul style="list-style-type: none"> • Using flip chart, facilitator explain the touch continuum using practical examples (relevant to students) • Lack of touch • Nurturing touch (good) • Confusing touch • Exploitative touch <p>N/B: It is important to learn to differentiate between good and bad touches.</p>	15 min	
FIVE	Touch Continuum Activities	<ul style="list-style-type: none"> • Conduct the individual activity on touch, using flip chart. • Lead participants to share experiences 	15 min	

		on: - Nurturing touch - Confusing touch and - Exploitative touch.		
SIX	Summary	<ul style="list-style-type: none"> Summarize by encouraging nurturing touch Keep, safe respectful distance when dealing with opposite sex. 	5 min	

Checklist - Sexuality is much more than being male or female. It involves: -

- Feelings
- Thoughts
- Behaviours of being male or female
- Being attractive
- Being in love
- Being in relationship
- Being in relationship that includes sexual intimacy and physical and sexual activity.
- It is referring to one's reproductive system
- Sexual behaviour as male or female
- It has to do with biology
- Anatomy
- Physiology

5 CIRCLES OF SEXUALITY (60 min)

Take the participants through the five main circles of sexuality with the use of a flip chart in the following order. *Note for the facilitator: refer to handout for content on each circle*

- Sexual Identity
- Sexual Health and reproduction
- Sexualization
- Sensuality
- Intimacy

THE TOUCH CONTINUUM (30 min)

Facilitator explains the touch continuum using practical examples: -

- Lack of touch
- Nurturing Touch (good)
- Confusing Touch
- Exploitative Touch (bad)

It is important to learn to differentiate between good and bad touches.

Conduct the individual activity on touch, using handout. (Activity: 15 min)

Lead participants to share experiences on a, b and c (15 min)

SUMMARY (5 min)

Summarize and encourage nurturing touch

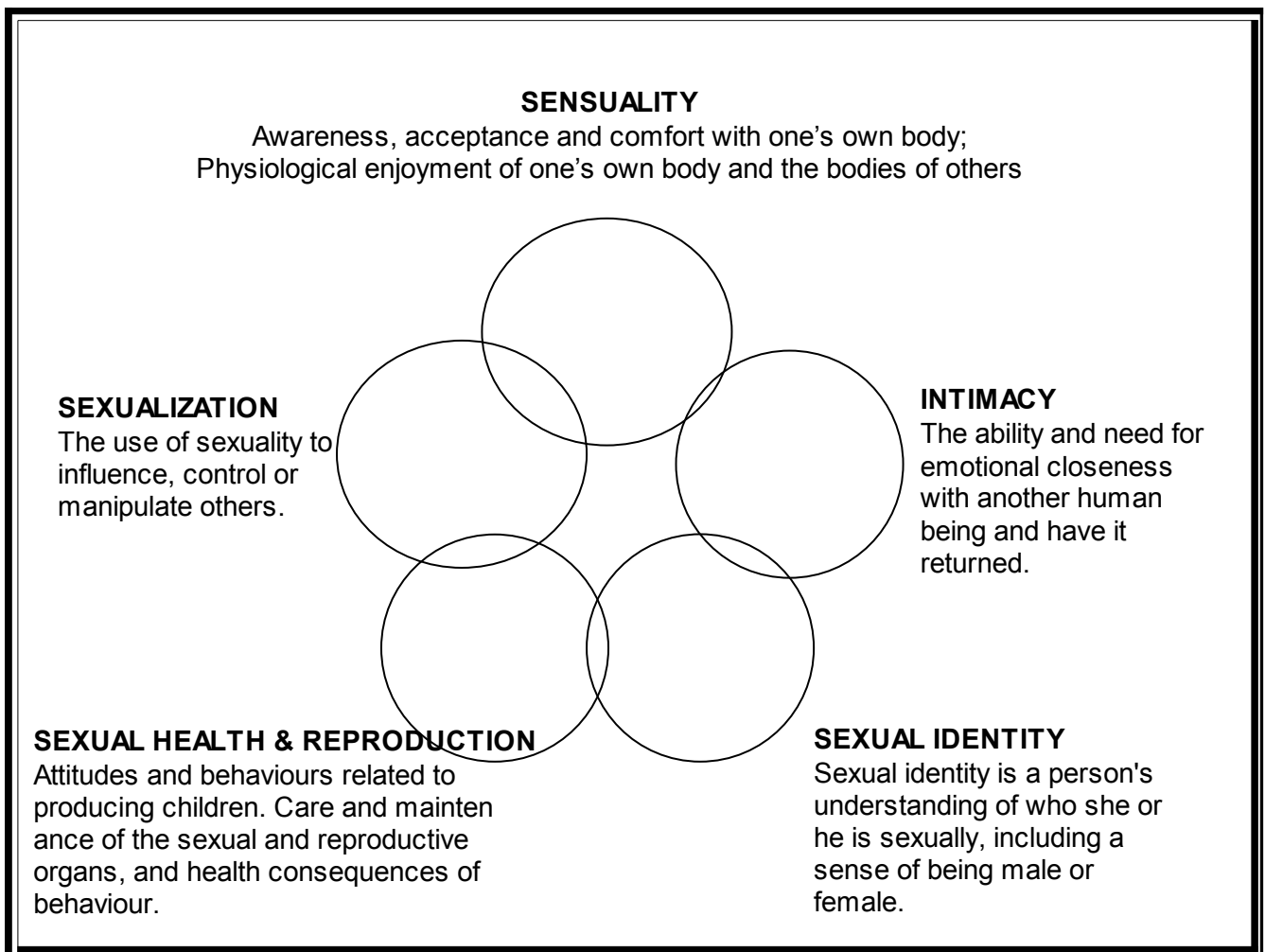
Note for the facilitator: Good touches are a crucial element in everyone's sexuality.

(The material on Sexuality and the Touch Continuum is derived from training materials produced by the Program for Appropriate Technologies for Health, PATH, Kenya Office)

SEXUALITY

When most people see the words 'sex' or 'sexuality' they think of intercourse and other kinds of physical sexual activity. It is important to tell the learners that sexuality is much more than sexual feelings or sexual intercourse. It is an important part of who a person is and what she or he will become. It includes all the feelings, thoughts and behaviours of being female or male, being attractive and being in love, as well as being in relationships that include sexual intimacy and physical and sexual activity. Sexuality begins when a person is born and ends when he/she dies. On the other hand, sex refers to one's reproductive system and gender behaviour as male and female. It has to do with biology, anatomy, and physiology. It is a crucial element in everyone's sexuality.

Five main circles of Sexuality



An Explanation of Circles of Sexuality

Circle 1 - Sensuality

Sensuality is awareness and feeling about your own body and other people's bodies, especially the body of a sexual partner. Sensuality enables us to feel good about how our bodies look and feel and what they can do. Sensuality also allows us to enjoy the pleasure our bodies can give us and others. This part of our sexuality affects our behaviour in several ways:

- It shows the need to understand anatomy and physiology.
- It reflects our body image whether we feel attractive and proud of our own body.
- It helps us to experience pleasure and release from sexual tension.

- It satisfies our need for physical closeness – to be touched and held by others in loving and caring ways.
- It satisfies our need for physical attraction for another person – the centre of sensuality is not in the genitals, but in the brain.
- It helps us to have fantasies about sexual behaviours and experiences.

Circle 2 – Sexual Intimacy

Sexual intimacy is the ability and need to be emotionally close to another human being and have that closeness returned. Sharing intimacy is what makes personal relationships rich. While sensuality is about physical closeness, intimacy focuses on emotional closeness. Aspects of intimacy include liking or loving another person. To have true intimacy with others, a person must open up and share feelings and personal information. As sexual beings we can have intimacy with or without having sexual intercourse.

Circle 3 – Sexual Identity

Sexual identity is a person's understanding of who she or he is sexually, including the sense of being male or female. Sexual identity can be thought of as three interlocking pieces, that together, affect how each person sees himself or herself. These 'pieces' are:

- | | | |
|---------------------------|---|--|
| <i>Gender identity</i> | - | knowing whether you are male or female; |
| <i>Gender role</i> | - | knowing what it means to be male or female or what a man or woman can or cannot do because of her gender; |
| <i>Sexual orientation</i> | - | whether a person's primary attraction is; to people of the same gender (homosexuality), the other gender (heterosexuality) or both genders (bisexuality). In Africa, a person's primary attraction is predominantly to the other gender (heterosexuality). |

Circle 4 – Sexual Health and Reproduction

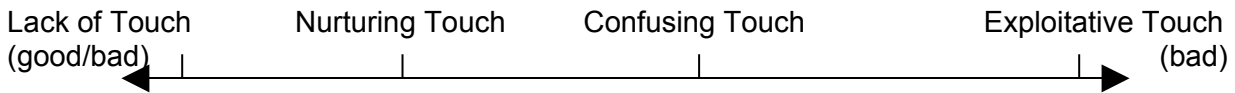
Reproduction and sexual health are the capacity to reproduce and the behaviours and attitudes that make sexual relationships healthy, physically and emotionally. Specific aspects of sexual behaviour that belong in this circle are:

- Factual information about reproduction
- Feelings and attitudes
- Sexual intercourse
- Information on the prevention and control of STDs
- Responsible sexual practices and contraceptive information

Circle 5 - Sexualization

Sexualization is using sex or sexuality to influence, manipulate or control other people. Behaviours include flirting, seduction, withholding sex from a partner to 'punish' or to get something you want, offering money for sex, selling products with sexual messages, sexual harassment and sexual abuse or rape.

TOUCH CONTINUUM



The Touch Continuum is the range of touch – from lack of touch to nurturing touch to confusing touch to exploitative touch.

The **lack of touch** can be good or bad. If a person does not get any touch, yet needs or wants it, this lack of touch can be bad. If a person simply does not want to be touched, that is an individual right. In this case, lack of touch can be good.

The **nurturing touch** is a positive and good touch. A touch that feels like something is being given or shared with you – hugs, kisses and some games are examples of good touch.

The **confusing touch** is any touch that is not clearly good or bad. Both good or bad touches may become confusing. Therefore, confusing touches cannot be labelled. Any touch may become confusing when:

- We are not sure what the person means by it
- When the person is saying something that does not fit in with the way he or she is touching us (we are getting a double message)
- When we are not used to the touch or the touch doesn't fit in with our values, or we simply do not want to be touched
- When the touch is equated with sex

The **exploitative touch** is a tricked or a forced touch – a touch that feels painful, or as if something were being taken away from you, or as if you were being used. Kicks, hits, slaps and sexual abuse are kinds of exploitative touches. Even simple touches or games like wrestling or tickling may become bad or confusing touches if someone is hurt or forced.

Activity on Touch

a. Write down what you think are:

Examples of Nurturing Touch:	Examples of Confusing Touch:	Examples of Exploitative Touch:

b. Describe how you feel about touch:

How do you feel when a touch is nurturing:	How do you feel when a touch is confusing:	How do you feel when a touch is exploitative:

c. Write what you do about the touch:

What do I do when I get a nurturing touch:	What do I do when I get a confusing touch:	What do I do when I get an exploitative touch:

POINTS OF EMPHASIS

What sex is – Put points on flip chart or chalkboard.

- Be humorous but serious to get an answer.
- Rub their contributions and
- Harmonize with checklist.

What is sexuality? – Note the contributions on flip charts or chalkboard.

- Go through them.
- Rub
- Harmonize with checklist

The five main circles of sexuality

- The inter-relationship
- One circle may interfere with the others
- Has to be enjoyable yet educative.

Sexuality – Need to understand

- Anatomy } Give examples
- Physiology }

Sexual Intimacy – focuses on emotional closeness.

- Has nothing to do with sexual intercourse (*No strings attached)
- Sharing likes and dislikes / feeling / personal information
- Openness
- Too much intimacy can be confusing

Sexual identity – biological

- Gender roles should not be manipulative.

Sexual Health & Reproduction – Stress on early pregnancy and consequences.

- Stress on attitude
- Should be positive on marriage and child-bearing
- Give contraceptive information and emphasize consequences.
- Emotional attachment – petals from a flower being removed.
- Information on control of STDs / STIs

Sexualization – rides for sex is the beginning of prostitution

- Gifts between boys and girls
- Gifts between teachers and students
- Using sex to make friendship
- Sex for marks
- It is the cause of sexual abuse and even rape.

TOUCH CONTINUUM

- Examples for students and teachers should be different.
- Choose easy examples.
- Use male to male or female to female to demonstrate the touches

Nurturing touch – Should be positive

- Should not be confusing (No strings attached)
- Limits in terms of opposite sex.

* Do the activity especially the individual activity then report to plenary.

21) SCHOOL HEALTH CLUB ACTIVITIES **(For Students)**

(2 ½ hour)

TRAINING MATERIALS	(Pre-prep)
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- Flip charts
- Chalkboard
- Chalk
- A diagram of an umbrella or tree, as per sample but without cards displayed.

SESSION OBJECTIVES	(5 min)
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By the end of the session, students will be able to

- Appreciate the need to participate in a School Health Club at their school to enhance positive behaviour change.

CONTENT AND PROCESS

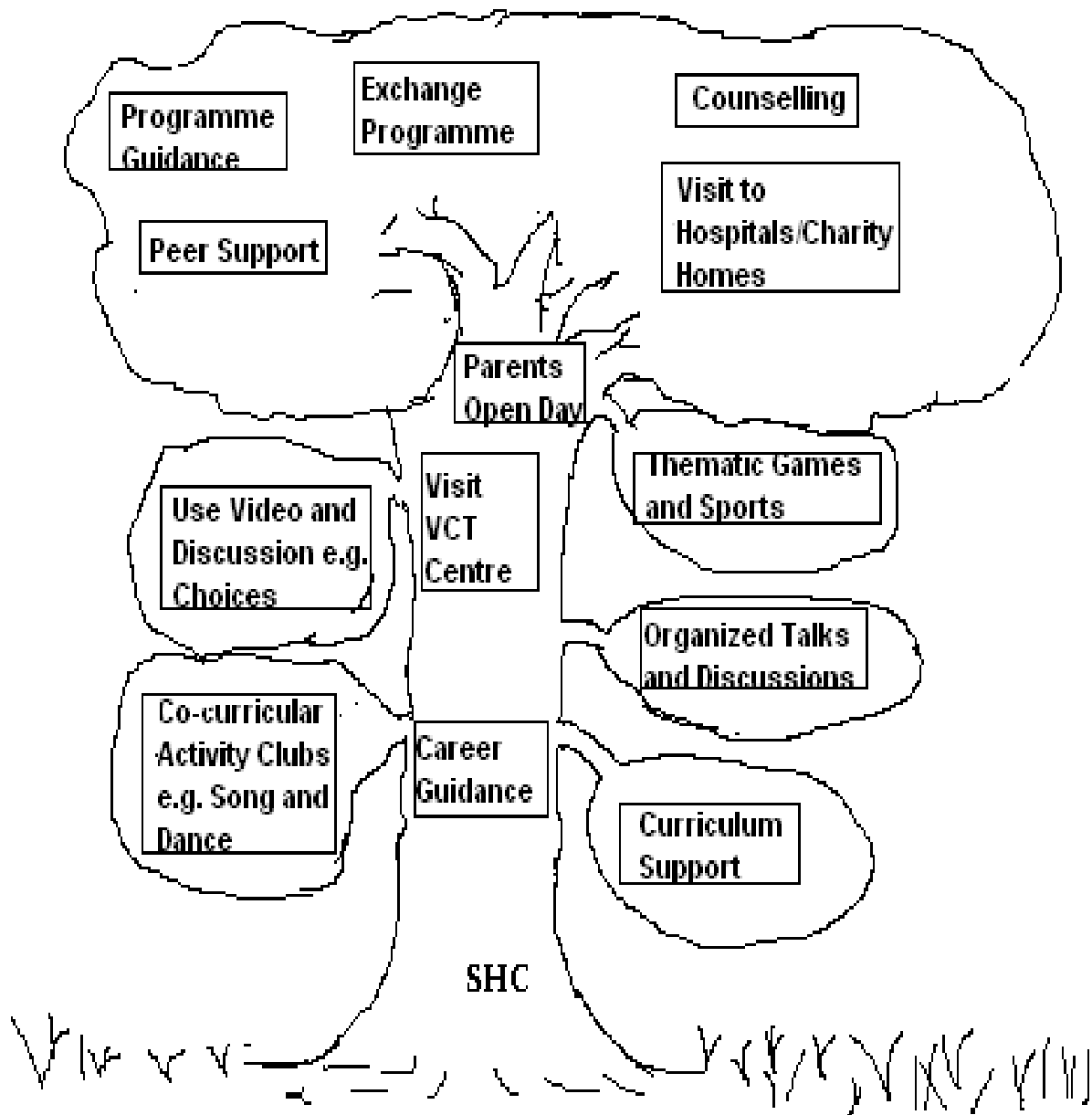
STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Objective	<ul style="list-style-type: none"> • Facilitator reads through the objectives from the flip chart 	5 min	
TWO	Introduction	<ul style="list-style-type: none"> • Students will be asked to name some clubs that exist in schools • This will be harmonized by the checklist e.g. debating, 4K (G/B) Scouts – Information corner, Question box. 	5min	
THREE	Why Clubs are formed	<ul style="list-style-type: none"> • Participants brainstorm reasons for forming clubs e.g. generate income, encourage hygiene and build healthy skills and practices 	10 min	
FOUR	Formation of a School Health Club (Making it happen)	<ul style="list-style-type: none"> • Facilitator leads participants to plan for the formation of a School Health Club using the following suggestions: <div style="margin-left: 20px;"> <p>Tasks</p> <ul style="list-style-type: none"> — Sensitization — Mobilization — Committee formation </div> <ul style="list-style-type: none"> (i) Assigning responsibilities (ii) Identifying people or groups in the school and community (iii) Develop a time line (iv) Discuss possible problems 	15 min	
FIVE	Video “Choices”	<p>View the video choices and follow it with discussion points below: -</p> <ul style="list-style-type: none"> • Do you know boys like Musa and Jackson? Please elaborate. • What do you understand by the word “boyfriend”? • Do you think it’s common for girls to have boyfriends? (Probe: do girls look down on someone who doesn’t have girlfriends? Kindly elaborate. • What do you think Sara-Musa 	20 min 20 min	

		<p>relationship? Is this common.</p> <ul style="list-style-type: none"> • Do you think Musa was Sara's boyfriend? Why/why not? • Are there girls who would behave the same way as Sara? Why/why not? • Do you think it's possible to have friendship with boys without having sex with them? Why/why not? • Why do you think teenage girls engage in sexual relationships with their age mates/older men? • Do you think friends create pressures on one another to form sexual relationships? Is it true for both boys and girls? • Can sexual relationships spread HIV/AIDS and other STIs? How does your community treat girls who get infected with HIV/AIDS and other STIs? • What do you think can be done to encourage girls to say "no" to sexual advances? Who can guide them? • What do you think of Tamala? Do you know girls like her? • What happens when girls get pregnant? What options do such girls have? • What about boys who impregnate girls? 		
SIX	What to expect from School Health Club	<p>The facilitator introduces school Health activities with the following example (See the table provided)</p> <p>The facilitator is expected to reproduce activity one on flip chart. Activity one message is: -</p> <ul style="list-style-type: none"> □ Avoid early pregnancy 	1 hour	
SEVEN	Summary	Facilitator issues cards to place on the School Health Club tree. These are activities specifically discussed during the session and those summarized on the activity chart.	15 min	

Stage 4 Checklist (Formation of School Health Club)

1. Seek permission
2. Sensitize and mobilize school community
3. Recruitment of members
4. Elect officials
5. Formulate rules and regulations
6. Formulate mission, motto and objectives.

SCHOOL HEALTH CLUB ACTIVITY



NOTE: The School Health Club activity tree is blank initially.

CHECKLIST (formation of School Health Club)

- Seek permission
- Sensitize and mobilize the school community
- Recruitment of members
- Elect officials
- Formulate rules and regulations
- Formulate mission, motto and objectives.

SCHOOL HEALTH ACTIVITY

MESSAGE	KNOWLEDGE	ATTITUDE	VALUES	SKILLS AND PRACTICE	HOW
7. HIV/STI 8. FREE YOUR CHOICE	<ul style="list-style-type: none"> • Benefits of abstinence/condom use related to avoidance of risk including health, social, religious and physiological reasons 	<ul style="list-style-type: none"> • What is my outlook on abstinence • Why do I think it is good for me 	<ul style="list-style-type: none"> • What values do I uphold on abstinence 	<ul style="list-style-type: none"> • Self esteem • Decision making • Self awareness • Assertiveness 	<p>Discuss strategies for abstinence e.g.</p> <ul style="list-style-type: none"> • Good company • Good use of leisure time • Management of sexual energy through sports and games • Parents open day on thematic sports day.
3. HIV IS REAL	<ul style="list-style-type: none"> • Factual information on transmission and prevention of HIV/AIDS • Disease progression • Anti-Retrovirals • MTCT • HIV/AIDS management • Home Based Care • VCT Centres being established • Number of orphans going up • People taking ARVs • Increased Household expenditures on foods and drugs. • Awareness campaign on the 	<ul style="list-style-type: none"> • Willingness to visit the VCT. • Abstinence • Assisting those who need Home Based Care. • Sharing information on what we know on HIV/AIDS 	<ul style="list-style-type: none"> • Self respect • Chastity • Love • Faithfulness • Freedom • Responsibility • Empathy 	<ul style="list-style-type: none"> • Self control • Critical thinking • Decision making • Assertiveness • Negotiation • Communication 	<ul style="list-style-type: none"> • School visits to hospitals • Voluntary work of mercy by students Form 1, 2 and 3 (e.g. in Starehe boys organize talks for students possibly with young people living with HIV/AIDS • Managing sexual energy through sports, games, clubs. • Good Company • Involvement in awareness campaigns • Attending sessions on guidance and counseling.

	<ul style="list-style-type: none"> increase Groupings of People Living with AIDS 				
4. BE DRUG AND ALCOHOL FREE	<ul style="list-style-type: none"> What drugs are? Dangers of drugs i.e. short term and long-term effects. Being addicted Harmful drugs Benefits of being drug / alcohol free 	<ul style="list-style-type: none"> Benefits of drug free i.e. to myself e.g. good health, sound mind, presentable, non-extravagancy, moral and spiritual uprightness. 	<ul style="list-style-type: none"> Self-respect Responsibility Honesty Love Happiness 	<ul style="list-style-type: none"> Self awareness Coping with emotions Decision making Assertiveness Negotiations 	<ul style="list-style-type: none"> Good company Proper use of leisure Adhere to the budget Peer support networking Avoid drug / be in a alcohol free zone Prioritization Have focused goals / missions
5. VCT	<ul style="list-style-type: none"> What is VCT? When do I need to go for VCT What are the benefits of VCT? 	<ul style="list-style-type: none"> The knowledge of my HIV status is to my advantage and others 	<ul style="list-style-type: none"> Love self Love others Respect self and others 	<ul style="list-style-type: none"> Self awareness Skills of knowing and living with self and others 	<ul style="list-style-type: none"> School organized talks on VCT Visit VCT centers as members of the School Health Club Sharing experiences Use of Video
6. AVOID EARLY PREGNANCY	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Parents participation Give guidance and counseling

22) THEMATIC GAMES AND SPORTS

(4 hours)

TRAINING MATERIALS

(Pre-prep)

Materials:

- Games equipment/materials
- Thematic sports training notes

SESSION OBJECTIVES

(5 min)

- Appreciate the use of thematic sports for character building
- Provide opportunity for physical development and fitness.
- Have fun.
- Increase discussion about sexual health in the context of HIV/AIDS.
- Allow young people to talk about their aims and goals.
- Provide positive experience for young people, contributing towards their personal development.

CONTENT AND PROCESS

STAGE	CONTENT	PROCESS	TIME	FACILITATOR
ONE	Introduction	<ul style="list-style-type: none"> • Assemble students • Go through objectives • Give instructions and set them in groups to match to the field according to colours led by the team managers. 	10 min	
TWO	Warm-up Activity	<ul style="list-style-type: none"> • Team managers to take participants through series of warm-up activities. • Form teams in their groups guided by team managers 	15 min	
THREE	Demonstration of Activities	<ul style="list-style-type: none"> • Facilitator leads demonstration of activities of the full circuit. • A team of five judges demonstrates the game round the circuit with team leaders while team managers station their teams at the starting point. • Judges and all officials take positions. 	15 min	
FOUR	Teams Participation	<ul style="list-style-type: none"> • Five groups go through the circuit at a time. • Teachers match in to join the students lead by their class facilitator 	90 min	
FIVE	LUNCH		50 min	
SIX	Teams Participation	<ul style="list-style-type: none"> • Students and teachers go through the circuit 	1 hr	
SEVEN	Group Discussion	<ul style="list-style-type: none"> • Team manager organizes and leads team through discussion 	45 min	
EIGHT	Summary	<ul style="list-style-type: none"> • All the teams assemble and the lead trainer announces the values displayed by various teams 	15 min	

		<ul style="list-style-type: none"> • The Course organizer appreciates the teams for the displays • Clearance of the field by the teams. 		
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DISCUSSION POINTS:

- 1) What have you learned from the activities (Selected activities)? Discuss each activity/game e.g. Equator skiing, Beam balance.

- 2) a) Discuss each game and share experiences.

- c) How do you relate the experience to your own life and avoidance of sexual risky behaviour?

- 3) What do you feel about the activities?

- 4) Do you think you would carry similar activities at home and in school with your peer?

- 5) What have you learnt about peer support in healthy choices?

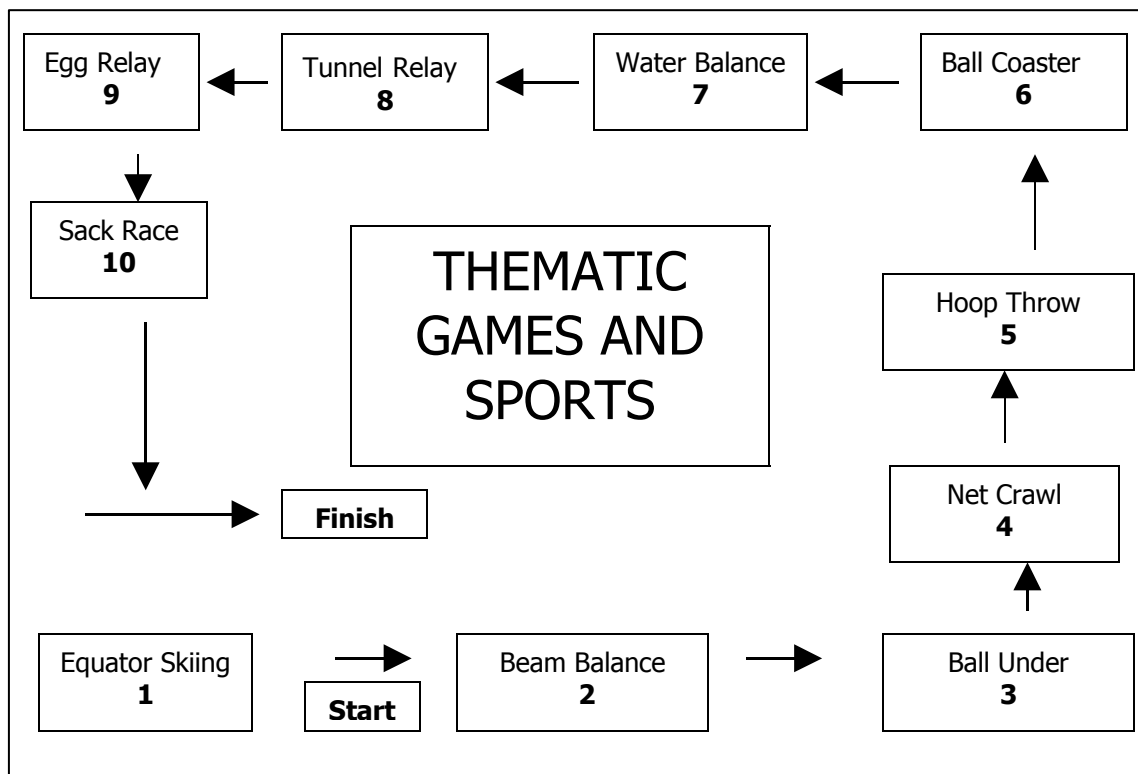
CHECKLIST

Thematic Sports and Games

Definition:

- Are games and sports focused on particular life themes to be developed among the learner for sound character building.
- They teach values that have a positive influence on behaviour for reducing vulnerability to HIV / AIDS.
- Meant for fun, enjoyment and relaxation of the mind.

THEMATIC SPORTS AND GAMES



Points to Consider When Designing a Circuit:

- Is space available?
- Choice of activities. (With value, challenging)
- Alternate challenging and less challenging activities.
- Enough spacing between stations.
- Speed governor activities.
- Extra materials be put in the middle of the field.
- Time available.
- Safe apparatus be chosen.
- Pre-test the apparatus.

THEMATIC GAMES AND THEMES / VALUE

GAMES	THEMES / VALUES
Equator Skiing	Teamwork coordination
Net Crawl Tunnel Crawl	Humility
Water balance Egg balance	Care Composure
Hoop Throw	Focus
Beam Balance	Patience Determination Concentration
Baller Coaster	Honesty Cooperation

23) THEMATIC SONG AND DANCE

(2 hours)

UKIMWI TUVUTE CHINI (Words and music by Eric Wainaina)

BOY:

Will you come for a walk with me little girl?
I've got plans for you and for me little girl
I will give you gifts, sweet things and promises
Hugs and kisses and all that you dream of
Will you come for a walk with me little girl?

GIRL:

I've been warned before about people like you my friend
Who promise the world and sweet things that turn bitter in the end
I have dreams of becoming a doctor (Oh yes)
A pilot, a colonel or teacher (Oh yes)
I don't believe your plans are going to help this little girl (No)

CHORUS:

Ukimwi tuvute chini (Chini! Chini!)
Lazima tulenge juu (Juu! Juu)
Ukimwi tuvute chini (Chini! Chini)
Mimi na wewe ndugu

BOY:

How can I prove my love for you little girl?
If you won't let me whisper my thoughts in your ear pretty girl

GIRL:

You can prove your love by taking your hands off me
By getting to know me and keeping yourself for me

CHORUS:

Ukimwi tuvute chini (Chini! Chini)

BOY:

But when boys like me get the urge it must be satisfied
We can't let the feeling go to waste, tell me should we be denied?

GIRL:

That I believe my friend separates the men from the boys
Having the power of control separates the men from the boys

CHORUS:

Ukimwi tuvute chini (Chini! Chini!)
Lazima tulenge juu (Juu! Juu)
Ukimwi tuvute chini (Chini! Chini)
Mimi na wewe ndugu

UKIMWI TUVUTE CHINI

**APPENDIX A: DAILY REPORT FORMAT
CENTRE FOR BRITISH TEACHERS (CfBT)**

DAILY REPORT FORM	
<u>COURSE:</u>	<u>DISTRICT:</u>
<u>DATE:</u>	<u>DAY:</u>
<u>SESSIONS:</u>	<u>FACILITATORS:</u>
<u>DAYS PROCEEDINGS.</u>	<u>EMERGING AND INTERESTING FEATURES:</u>
CONCLUSION AND SUMMARY.	
Report Prepared by:	

APPENDIX C: EVALUATION SHEET

SECONDARY SCHOOL ACTION FOR BETTER HEALTH
PEER SUPPORTERS TRAINING

EVALUATION SHEET – STUDENTS ONLY

Dear Participant

We should be grateful if you would provide feedback on the following questions. Please answer the question and write any comments that you feel would be useful in improving the training for other young people in the future in the spaces provided.

Thank you.

The facilitators.

1. Benefits of training to myself:

2. Things I have learnt that I can share with my peers:

3. What more would you like to be taught

4. Do you have any concerns you would like your school to address?

Any other comments?

SECONDARY SCHOOL ACTION FOR BETTER HEALTH (SSABH)

PEER SUPPORTERS TRAINING EVALUATION SHEET - TEACHERS ONLY

Dear Participant

We should be grateful if you would provide feedback on this workshop. Please rate the various aspects of the workshop listed below by placing a tick in the appropriate box.
(G= Good, S= Satisfactory, U= Unsatisfactory)

Write any comments that you feel would be useful in improving the training workshop in the future in the space provided.

Thank you.

The facilitators.

How would you rate the following aspects of the workshop?	G	S	U
1) Clarity and achievement of the training objectives			
2) Relevance of the activities to the overall purpose.			
3) The length of individual sessions			
4) The effectiveness of individual presentations			
5) Planning and organization of the workshop.			
6) Usefulness of the teaching notes and other references			
7) My own personal participation			
8) Group participation			
9) My readiness to implement key features of the project			
10) Facilities of the venue			
11) The meals and snacks.			
No. of Respondents:			

Benefits of training to myself:

Areas I would like to Apply to my job:

Any other comments:
