



INTER AIDE - MALAWI

HIV/AIDS

TRAINING GUIDELINES

YOUTH HEALTH PROJECT

- Version 2005 -

NOTES TO THE TRAINER

PURPOSE

This training manual is part of the **Comprehensive Reproductive Health and Family Planning Training Curriculum** for the teachers.

It is designed to prepare the trainers (teachers) to provide quality reproductive health services to adolescents in the clubs.

All of the modules in the curriculum are designed to actively involve participants in the learning process.

Included in each module is a set of knowledge assessment questions, trainer resources, participant materials, training evaluation tools.

USING THE MODULES

- The modules provide **flexibility in planning, conducting, and evaluating** the training course.

- The curriculum allows trainers to formulate their own training schedule based on results from the training needs assessments.

- The modules can be used independently of each other.

- In order to foster changes in behaviour, learning experiences have to be in the areas of **knowledge, attitudes, and skills**. In each module, general and specific objectives are presented in terms of achievable changes in these three areas.

- **Training references and resource materials** for trainers and participants are identified.

- This module is divided into two volumes, **the *Trainer's Manual on Knowledge* and the *Trainer's manual on Life skills***.

- The *Trainer's Manual* contains the **“Training Guide”** and the **“Appendix.”**

The **“Training Guide”** presents the information in two parts:

The first part, “Content,” contains the necessary technical information. The second part, “Training/Learning Methods,” contains the training methodology (lecture, role-play, discussion, etc.) to be used and the time required to complete each activity.

😊☹️ DO'S AND DON'TS OF TRAINING

The following “do’s and don’ts” should ALWAYS be kept in mind by the trainer during any learning session.

😊 DO'S

- Do** maintain good eye contact
- Do** prepare in advance
- Do** involve participants
- Do** use visual aids
- Do** speak clearly
- Do** speak loud enough
- Do** encourage questions
- Do** recap at the end of each session
- Do** bridge one topic to the next
- Do** encourage participation
- Do** write clearly and boldly
- Do** summarize
- Do** use logical sequencing of topics
- Do** use good time management
- Do** K.I.S. (Keep It Simple)
- Do** give feedback
- Do** position visuals so everyone can see them
- Do** avoid distracting mannerisms and distractions in the room
- Do** be aware of the participants’ body language
- Do** keep the group focused on the task
- Do** provide clear instructions
- Do** check to see if your instructions are understood
- Do** evaluate as you go
- Do** be patient

☹️ DON'TS

- Don't** talk to the flip chart
- Don't** block the visual aids
- Don't** stand in one spot — move around the room
- Don't** ignore the participants’ comments and feedback (verbal and non-verbal)
- Don't** read from the curriculum
- Don't** shout at the participants

TRAINING GUIDE

A- INTRODUCTION

Place:

- Be convenient to both children and trainers
- Be well spacious to promote participatory approaches e.g. as groups, games and some energizers
- Well ventilated with enough light
- Without communication barriers like noise
- In relation to the expected status of the people to be trained

Target group:

- Clearly communicate with them about objectives, venue, starting time, finishing time...
- How many will attend
- Training assessment is quite essential

Resources requirements:

- Markers
- Flipchart
- Pens/pencils
- Masking tape
- Exercises books

Work for trainers to do in advance:

- Introduction
- Content
- Knowledge/Attitudes/Skills
- Training/Learning Methods
- Time Required

Introduction to the participants:

The trainer(s) should:

Greet participants and introduce yourself.

Introduce: the content of the training and the time required

During the training:

The trainer should:

- Ask the children for suggestions, example, and ideas for effective participation.
- Give the children additional suggestions or concretely example.
- Ask children to record the suggestions of the group.

After the training:

The trainer should:

- Check if he/she has reached the unit training objectives and specific learning objectives, for each unit.

The next training:**WHERE ARE WE?**

Starting each day with "Where Are We?" is our opportunity to review the previous days' material, especially the key points of each session.

Each day one participant will be assigned to conduct the exercise.

This person should take some time to write down the key points from the day before. The participant who is assigned should briefly present these key points and then ask participants for any additions.

REFLECTIONS

After a full day of activities, we need to take time to look over what we have done and examine what it means to us individually.

The "Reflections" activity is an opportunity for the trainers and Px to share feedback on the training activities and to identify areas that need reinforcement or further discussion.

Pre-test and Post-test

The trainer should:

- Explain to children that a test will be given before and after 3 trainings.
- Explain that the purpose of the test is to evaluate the training.
- The test before training helps the trainer focus the training on the right topics. The test after training is a reflection on how good the training was based on whether the children improved their knowledge of the subject matter.
- Distribute the pre-test or post-test.
- Allow the children 30 minutes to complete the pre-test or post-test.
- Give the answer for the test.

TABLE OF CONTENTS**FIRST YEAR****KNOWLEDGE TOPICS**

- 1.1. HIV/AIDS + AIDS in Malawi
- 1.2. STIs
- 1.3. Adolescent Development & “Am I at risk?”
- 1.4. VCT¹ care & support

LIFE SKILLS TOPICS

- 1.5. Communication
- 1.6 Decision making
- 1.7 Self Esteem
- 1.8. Drama creation

SECOND YEAR**KNOWLEDGE TOPICS**

- 2.1. Sexuality and early pregnancy
- 2.2. Family planning and condom use
- 2.3. Drug abuse
- 2.4. Human Right, sex abuse and rape

LIFE SKILLS TOPICS

- 2.5. Negotiation
- 2.6. Sarah
- 2.7. Bridge model
- 2.8. Drama creation

¹ Voluntary Counselling and Testing

FIRST YEAR

KNOWLEDGE TOPICS

- 1.1. HIV/AIDS + AIDS in Malawi
- 1.2. STIs
- 1.3. Adolescent Development and “Am I at risk”
- 1.4. VCT care & support

LIFE SKILLS TOPICS

- 1.5. Communication
- 1.6. Decision making
- 1.7. Self Esteem
- 1.8. Drama creation

1.1. HIV/AIDS, AIDS in Malawi

RATIONALE FOR HIV/AIDS EDUCATION IN SCHOOLS

INTRODUCTION

Malawi like most countries in the world is grappling with the HIV/AIDS pandemic and STIS, drug and substance use and moral decadence. The school curriculum has been modified to accommodate HIV/AIDS education. AIDS education has been introduced in primary and secondary schools as an intervention measure whose purpose is to raise awareness of the AIDS pandemic amongst the youth. AIDS education intervention programs have included the incorporation of AIDS prevention messages into some academic carrier subjects like health science and introduction of extra curricula clubs handling AIDS prevention mostly through the peer education method like health clubs and girls groups in most of the schools.

Inter Aide a non governmental organization is complementing government efforts by undertaking AIDS awareness programs in schools. It is indeed imperative that teachers and health surveillance assistants are empowered with the necessary information and skills to recognize and undertake their major roles as information providers to pupils and out of schools youth on HIV/AIDS and act as role models of good behaviour. Therefore the guidelines have been drafted to assist to deliver accurate information.

HIV/AIDS, AIDS in Malawi

SESSION OBJECTIVES (13:00-13:10)

This session will enable participants to:

- ✓ Define the terms HIV and AIDS
- ✓ Explain the relationship and the difference between HIV/AIDS and STIS
- ✓ Explain current information on HIV/AIDS in Malawi
- ✓ Explain how HIV is transmitted
- ✓ List down some of the conceptions about HIV/AIDS
- ✓ Explain factors that are fuelling the pandemic
- ✓ Describe stages for HIV infection
- ✓ Describe the major and minor signs of AIDS
- ✓ Explain how HIV/AIDS can be prevented

MATERIALS NEEDED

- ✓ Flip charts or board
- ✓ Condoms
- ✓ Markers or chalk
- ✓ Papers of handshake game

CONTENT

ACTIVITY 1: DEFINITION (13:10-13:15)

The facilitator should ask the participants to brainstorm the meaning of HIV and AIDS and thereafter should summarise by giving the following responses.

DEFINITIONS

HIV is a virus that destroys the immune system of a person and causes AIDS. HIV weakens the immune system by entering and destroying white blood cells. As increasingly white blood cells are killed the body becomes less and less able to fight off many different infections.

| | |
|---|-------------------|
| H | Human |
| I | Immuno deficiency |
| V | Virus |

AIDS is a combination of illnesses that result from specific weaknesses of the immune system. The immune system defends the body against infection and diseases. The immune deficiency is caused by infections with a virus.

| | |
|------------|--|
| ACQUIRED | Become infected |
| IMMUNE | The immune system |
| DEFICIENCY | Weakened by the virus |
| SYNDROME | The illness with a variety of symptoms |

AIDS IN MALAWI CURRENT DATA (13:15-13:35)

GENERAL INFORMATION ON HIV/AIDS

1981 cases diagnosed in America
 1981 Cases reported from USA, Europe and other Countries
 1985 First HIV/AIDS case discovered in Malawi
 Malawi's population is 11 million
 The estimated HIV/AIDS prevalence among adults 15-49 is 14.4%
 One out of ten Malawians is infected
 One out of six adults is infected
 Life expectancy has decreased from 45 yrs (1995) to 39.3 yrs (1998)
 Number of infected adults = 760,000 (2003)
 Number of infected children 0-14 = 70,000 (2003)
 Number of infected over 50 = 60,000 (2003)
 Orphans due to HIV/AIDS 380,000 (2003)
 267 newly infected occur daily (2001)
 The death rate per year for adults 15-49 due to HIV/AIDS = 70,000 (2003)
 Total HIV positive = 900,000 (2003)
 Comparatively the HIV prevalence in Malawi is lower than in most countries in Southern Africa where the HIV prevalence is 20% to 35% (2003)
(Have to be combined with the figures of the youth centres)

ACTIVITY 2: GROUP WORK (13:35-13:50)

The trainer should divide the participants into three groups and they should be assigned to answer the following questions. Each group should answer two questions.

GROUP 1

1. Explain how HIV/AIDS is transmitted
2. Explain the factors that are fuelling the pandemic

GROUP 2

1. Describe the stages for HIV infection
2. Describe minor and major signs of AIDS

GROUP 3

1. List down some of the misconceptions on HIV/AIDS
2. Explain the relationship and the difference between HIV/AIDS and STIs

ENERGISER (13:50-14:00)

The facilitator should do something to entertain the participants before going into plenary sessions.

PLENNARY SESSIONS (14:00-14:30)

The facilitator should lead the participants in a plenary session and thereafter summarise by giving the following possible answers:

Q1. MODE OF TRANSMISSION

- ✓ Having unprotected sexual intercourse with an infected partner
- ✓ By an infected mother to her unborn baby during delivery or child when breastfeeding
- ✓ By transfusion of infected blood, or by infected blood or needles or syringes

Q2 FACTORS THAT ARE FUELLING THE SPREAD OF THE PANDEMIC

- Cultural practices i.e. wife inheritance, fisi, traditional dances at night and kulowa kufa (cleansing rituals)
- Initiation ceremonies – some young people undergo procedures with unsterile equipment and environment leading to infections. Others are told to go and have sexual intercourse since they are grown up
- Poverty or economic status of women
- Behavioural practices i.e. peer pressure, drug and alcohol abuse
- Lack of knowledge and skills
- Gender inequalities or gender roles that do not permit women to participate in sexual or reproductive decisions
- Physiology of women that make them more vulnerable to HIV/AIDS

- Lack of access to preventive services i.e. condoms, VCT²
- Low risk perception

Q3 STAGES OF HIV/AIDS INFECTION

- ❖ Transmission stage – HIV enters the blood stream
- ❖ Reproduction stage 12 weeks
- ❖ Asymptomatic stage – 2 – 12 years
- ❖ Symptomatic stage 6 months to 2 years
- ❖ Full blown AIDS
- ❖ Advanced HIV stage
- ❖ Death

Q4 MAJOR SIGNS

- ❖ Weight loss greater than 10% of the body weight
- ❖ Fever for longer than one month
- ❖ Diarrhoea for longer than one month

Q4.1. SPECIFIC INFECTION

- ❖ Kaposi Sarcoma
- ❖ ...

Q5 MISCONCEPTIONS

- ❖ You can't contract HIV if you have sex with a disabled person
- ❖ Some herbalists have a cure for AIDS
- ❖ You can't get HIV by sharing food with one infected with HIV
- ❖ You can't contract HIV if you have sex once
- ❖ HIV affects sinners

Q6 THE RELATIONSHIP BETWEEN HIV/AIDS AND STIs

- ❖ Mode of transmission is through unprotected sexual intercourse
- ❖ If we have an increased number of STIs then we have a high number of HIV/AIDS cases as well
- ❖ STIs and HIV/AIDS can be prevented

DIFFERENCE BETWEEN HIV/AIDS and STIs

STIs have a cure while AIDS does not have a cure.

² Voluntary Counselling and Testing (for HIV/AIDS test)

ACTIVITY 3: HANDSHAKE GAME (14:30-14:45)**PURPOSE**

To increase awareness of how quickly HIV can be spread and how it can be prevented. It also analyses the risk you take whenever you decide to have sex without having enough information about whether your partner is HIV negative or not.

MATERIALS

- ❖ One card should be marked with an X
- ❖ Two cards marked with C
- ❖ One card marked 'DO NOT PARTICIPATE'

ACTIVITY 4: PREVENTIVE MEASURES AND IMPACT OF HIV/AIDS (14:35-15:00)

To further support the need for behaviour change, the facilitator should brainstorm with the participants the impact of HIV/AIDS at different levels. Thereafter he should give the following answers:

- ❖ Low productivity in agriculture, education and health sector since skilled people are dying/Reduced productivity at all levels
- ❖ Increased morbidity
- ❖ Increased mortality
- ❖ Increased number of orphans
- ❖ Reduction of life expectancy
- ❖ Increased number of child headed households
- ❖ Loss of income
- ❖ Development of projects is affected since a lot of people take care of patients
- ❖ Change in life style due to death of parents or guardians including prostitution, living in the streets...

COMMENTS AND SUMMARY

1.2. SEXUALLY TRANSMITTED INFECTIONS (STIs)

GOAL (13:00-13:10)

The purpose of the session is to equip young people with information about sexually transmitted infections and encourage them to delay the onset of sexual activity and enable them to resist peer pressure and partner pressure.

This session will enable participants to:

- ✓ Mention examples of common sexually transmitted infections in Malawi
- ✓ Understand how sexually transmitted infections are spread
- ✓ Describe risky behaviours that contribute to the spread of the diseases
- ✓ Explain the effects or dangers of sexually transmitted infections
- ✓ Explain how to protect oneself from sexually transmitted infections
- ✓ Practice skills needed to avoid sexual risk taking

MATERIALS NEEDED

Flipcharts, markers, condoms, chalk and chalk board

INTRODUCTION

The facilitator should brainstorm with the participants in the meaning of the definition of STIs (or STDs : sexually transmitted diseases). Thereafter he should explain that STI means sexually transmitted infections. He should further ask the participants to give examples of common sexually transmitted infections which include the following: HIV/AIDS, Gonorrhoea, Syphilis, Chancroid, bubos

The facilitator should stress that STIs are a global issue. Infections such as HIV/AIDS, gonorrhoea and syphilis are mostly widely known. The advent of HIV has increased the importance of STIs still further.

ACTIVITY 1: GROUP WORK (13:10-13:30)

Divide the participants into three groups and each group should answer two questions

GR 1

1. Please explain how STIs are transmitted from one person to another
2. Mention risky behaviours which are contributing to the spread of the infections

GR 2

3. Explain the signs and symptoms of sexually transmitted infections
4. Explain the link between STIs and HIV/AIDS

GR 3

5. Explain the dangers of sexually transmitted infections
6. Explain preventive measures to protect oneself from sexually transmitted infections

PLENNARY SESSIONS (13:30-14:00)**SUGGESTED ANSWERS TO THE QUESTIONS****1. MODES OF TRANSMISSION**

1. The infection is acquired through three modes but the main way of transmission is through unprotected sexual intercourse with an infected person. Other modes are : from mother to child in the womb through the placenta, during delivery when the baby and the infected blood comes into contact and during breast feeding and lastly direct blood transfusion of untested blood or sharing needles

2. RISKY BEHAVIOURS

- ❖ Having multiple sexual partners
- ❖ Harmful traditional practices i.e. wife inheritance, Fisi, kulowa kufa
- ❖ Unprotected sex

3. SIGNS AND SYMPTOMS

The following are the common signs and symptoms of STIs in both men and women.

- Sores on the genitals
- Urethral discharge and burning when passing urine (Gonorrhoea)
- Vaginal itching or itchness of the penis
- Painless sores on penis or vagina (syphilis).
- Swelling and pain around groin area like boils (bubos)
- Vaginal discharge
- Non itching rash on body (syphilis)
- Hair loss, fever or chills (syphilis)
- Yellow-green discharge or white discharge form the penis or vagina (Gon)
- Possible swelling in the area of the testicles

4. THE LINK BETWEEN STIs AND HIV/AIDS

The link is that the mode of transmission is through unprotected sex.

There is an increased acceleration in the progression of HIV infection in
The presence of other STIs

5. EFFECTS OF STIs

Death

Causes infertility

Indirectly STIs kill through spontaneous abortions, ectopic pregnancy
and cervical cancer

Social consequence like divorce when a wife is infertile

High chances of contracting HIV if you have STI

Eye infections or blindness amongst infants

6. PREVENTIVE MEASURES

Abstaining from sexual activity

Being faithful to one uninfected partner

Using condoms correctly and consistently

Promoting STIs health seeking behaviour

Rapid and effective treatment of a person with STI

ACTIVITY 2: DEBATE (14:00-14:45)**Time: 30 Minutes**

Divide the participants into two groups to answer the following questions and award marks to each group for a correct answer

STI FACTS TRUE OR FALSE BUT SHOULD EXPLAIN

1. A person can always tell if she or he has an STI
FALSE: People can and do have STIs without having any symptoms. Women often have STIs without symptoms because their reproductive organs are internal
2. Condoms are the most effective to safeguard against the spread of STIs
FALSE: Abstinence is the best way.
3. Using condoms will help prevent the spread of STIs
TRUE: Condoms can help prevent the spread of STIs but they must be used correctly and consistently
4. It is possible to contract some STIs from kissing
TRUE: It's rare but possible to be infected by syphilis through kissing if the infected person has small sores in or around the mouth
5. The most important thing to do if you suspect that you have been infected by an STDs is to inform your partner
FALSE: The most important thing is to seek immediate medical treatment. Symptoms of an STDs may never appear or may go away after a short time but the infection continues inside the body.
6. Only people who have intercourse can contract an STD
FALSE: Infants can contract STDs such as herpes, gonorrhoea and HIV infection during the birth process or during breastfeeding.
7. A woman using oral contraceptives should still insist that her casual partner use a condom to protect against STDs
TRUE: Oral contraceptives do not prevent STDs so a condom would be necessary for protection.
- 8 You cannot contract an STD by masturbating, or by holding hands, talking, walking or dancing with a partner
TRUE: STIs are only spread by close sexual contact with an infected person. Anyone can be infected by oral, anal or vaginal intercourse with a partner who is infected.
9. ARVs can cure AIDS
FALSE: ARVs just prolong the life span but do not cure HIV/AIDS
10. STIs can cause infertility among adults and blindness amongst infants
TRUE: STIs if left untreated for a long time can cause devastating effects to the people.

COMMENTS AND SUMMARY

ADOLESCENT DEVELOPMENT & “AM I AT RISK”

GOAL (13:00-13:20)

The purpose of the session is to introduce to the participants the concepts of adolescence, youth and young people and equip them with information concerning physical changes during adolescence, needs of the youth and problems that affect them.

SPECIFIC OBJECTIVES

The session will enable participants to:

- ❖ Define the following terms
 - Adolescent
 - Adolescence
 - Youth
 - Young people
- ❖ Describe physical and psychosocial changes in male and female during adolescence
- ❖ Discuss needs of the youth
- ❖ Discuss problems that affect the youth and their possible solutions

MATERIALS NEEDED

Pictures, flipcharts, markers, chalk, chalkboard

CONTENT

The facilitator should assess participant’s knowledge on youth by asking them to brainstorm the definitions of the following terms: Adolescent, Adolescence, Youth and Young people.

ACTIVITY 1: DEFINITION

After participants have given their answers the facilitator should discuss with the participants using the following definitions:

1.1. ADOLESCENT

According to the WHO³ definition an adolescent is any person aged 10-19.

1.2 ADOLESCENCE

It is the period of transition between childhood and adulthood during which the body develops in size, strength and reproductive capabilities.

1.3 YOUTH

Any person aged 14- 25 (Malawian National Policy). This encompasses everyone in this age group regardless of marital status, economic status and whether one has children or not.

1.4 YOUNG PEOPLE

This term encompasses both adolescents and youth that are between 10 -25 years of age

ACTIVITY 2: GROUP WORK (13:20-13:30)

Divide the participants into three groups and each group should answer one question listed below:

Gr. 1 Write down all the physical and psychosocial changes that take place in boys during adolescence

Gr. 2 Write down all the physical and psychosocial changes that take place in girls

Gr. 3 Discuss the causes of teenage pregnancy and their possible solutions

PLENNARY SESSIONS (13:30-14:00)

Ask the participants to present what they have discussed in plenary. The facilitator should summarise by adding the following information.

³ World Health Organization

PHYSICAL CHANGES THAT OCCUR DURING ADOLESCENCE**BOYS**

- Enlargement of the testicles and penis
- Growth of underarm, pubic and facial hair
- Wet dreams
- Gain in muscular strength
- Increase in height
- Weight gain
- Voice change
- Skin problems (ACNE) may develop
- Body shape takes on the characteristics of an adult

GIRLS

- Onset of menstruation
- Breast development and growth of underarm and pubic hair
- Increase in height
- Weight gain
- Skin texture changes
- Body shape takes on characteristics of an adult
- Growth of bony pelvis

PSYCHOSOCIAL CHANGES

| BOYS | GIRLS |
|---|--|
| Develop interest for the opposite sex | Develop interest for the opposite sex |
| Experimenting sexual feelings | Experimenting sexual feelings |
| Eating habits change (eat more) | Eating habits change (eating more) |
| Some have less interest in personal hygiene | Interest in personal hygiene to look more attractive |
| Increased sexual desires | Increased sexual desires |
| More aggressive and open | Shyness with opposite sex, very secretive |
| Substance abuse may increases | Substance abuse may increases |
| May change friends | May change friends |
| Look for independence | Look for independence |
| Self centredness | Self centredness |
| Rebellious | Rebellious |
| Lack of foresight | Lack of foresight |
| Uncomfortable with own appearance | Uncomfortable with own appearance |

The facilitator should discuss with the participants the various issues that arise during adolescence. During this period the youths are really at risk and it is important to target them based on the following:

1. Rapid physical growth and development
2. Physical, social and psychological maturity but not all at the same time
3. Sexual maturity and the start of sexual activity
4. Trying out experiences for the first time
5. Frequent lack of knowledge and skills to make healthy choices
6. Thinking patterns where immediate needs overshadow long term implications
7. The start of behaviours that might become life time habits that may result in diseases years later.

ACTIVITY 3: GROUP WORK (14:00-14:10)

Divide the participants into two groups and assign each group to answer one question

GR 1 Discuss the needs of the youth

GR 2 Discuss problems that affect the youth

PLENNARY SESSION (14:10-14:20)

Let the participants present in plenary. The facilitator should conclude by saying that youth need empowerment and this can only be achieved by ensuring that the following needs of the youth are met:

1. Information, education and communication
2. Love – need to love and be loved
3. Nutrition
4. Shelter
5. Quality education and training
6. Parental care and guidance
7. Security
8. General counselling
9. Recreational facilities
10. Sports equipment
11. Indoor games
12. Health care
13. Community based RH services
14. Life skills
15. Income generating activities
16. Employment
17. Vocational skills
18. Reproductive health needs

PROBLEMS THAT CAN AFFECT YOUNG PEOPLE

1. STIs including HIV/AIDS
2. Early and unplanned pregnancies
3. Abortions
4. Poverty
5. Substance use and abuse
6. Rape and defilement
7. Violence
8. Poor quality education
9. Lack of parental care and guidance
10. Child labour
11. Prostitution
12. Peer pressure
13. Unemployment
14. Harmful cultural practices
15. Restrictive religious beliefs
16. Lack of life skills

SOME OF THE SOLUTIONS TO PROBLEMS FACED BY THE YOUTH

1. Income Generating Activities (IGA)
2. Youth Group – Anti-Aids clubs
3. Recreation facilities
4. Life Skills
5. Parents should be taught on the dangers of some cultural practices

COMMENTS AND SUMMARY

4-VOLUNTARY COUNSELLING AND TESTING (VCT)

BROAD OBJECTIVES

To create awareness on VCT and enable the youths to make their own informed decisions to go for VCT at their own will

SPECIFIC OBJECTIVES (13:00-13:15)

By the end of this session participants should be able to:

1. *Understand the meaning of VCT*
2. *Know importance of VCT*
3. *Know who should go for VCT*
4. *Mention the kind of assistance one can get from counselling*
5. *Know where to get VCT services*
6. *Identify the possible consequences of VCT*
7. *Importance of support and care*
8. *Describe some of the misconceptions of VCT support and care*
9. *Know who should provide and receive support and care*

PRE TEST (13:15-13:35)

1. Define VCT (1)
2. Mention 2 reasons to explain the importance of VCT (2)
3. When should one go for VCT? (1)
4. Name 2 places where one can get VCT services (2)

ACTIVITY 1: DEFINITION (13:35-13:45)

VCT: Voluntary Counselling and Testing

Voluntary – *doing something out of your own choice or will without being forced*

Counselling – *a sharing relationship or discussion with someone (counsellor) in order to help a person with a problem to make a good decision or find a good solution to the problem.*

- ❖ Its helping relationship between two parties, on one hand the counsellor and on the other hand the client with the objective of improving the clients mental state of well-being

Testing – *a process of giving blood to be checked for HIV.*

- ❖ The goal for example of a VCT is to enable clients make a free and informed choice to get their blood tested

ACTIVITY 2: GROUP WORK ON VCT (13:45-14:00)

Divide the participants into groups to discuss the following questions:

- Q1. Discuss the importance of VCT
- Q2. When should someone go for VCT?
- Q3. What type of assistance can you expect from a counsellor/VCT center?
- Q4. Where to get VCT services
- Q5. Possible consequences of VCT
- Q6. Importance of support and care
- Q7. Describe some of the misconceptions on VCT support and care
- Q8. We should provide and receive support and care

PRESENTATION (14:00-14:10)**SUMMARY (14:10-14:20)**

ENERGIZER (14:20-14:25) The facilitator should do something to entertain the participants

DEBATE (14:25-14:40)

Participants can debate on the following:

- Everyone should get an HIV test whether they like it or not. Discuss.
- Helping each other in caring for the sick is bad because they are not our relatives. Discuss

QUESTIONS AND ANSWERS (14:40-15:10)**GROUP WORK**

Divide the participants into groups to discuss the following questions

Q1. IMPORTANCE OF VCT

- Knowing sero –status
- Planning the future
- Help infected people to live a reasonable and respected life and enable family members to recognize and accept their sero positive status.
- Assist the people at risk against being infected and those infected to be accepted and not infect others.
- Helps to promote self esteem
- Helps people to change their behaviour
- Helps to prevent HIV as can choose what he/she wants to do

Q2. WHEN SHOULD SOMEONE GO FOR VCT

- Intending to marry
- Individual wishing to enter a new relationship
- Couples planning to have a child
- Pregnant women
- Individuals wishing to access early care and support
- When you want to make plans for the future

Q3. TYPE OF ASSISTANCE YOU CAN GET FROM VCT CENTRE/COUNSELLOR

- Seek information on HIV/AIDS
- Positive living
- Understand where to get support if positive.
- Seek medical help wherever he/she falls sick
- Counselling services
- Career guidance
- Blood test
- Health sessions
- STI treatment
- Access to condoms

Q4. PLACES WHERE PEOPLE CAN GET VCT SERVICES

- VCT centres
- Inter Aide Youth Centre
- Inter Aide mobile VCT sites
- Macro
- Light house
- The following health centres: ...

Q5. WHAT CAN HAPPEN AFTER VCT

- A person can commit suicide
- Can continue to spread the virus
- Stigma and discrimination
- Break up of marriages / relationships
- Die suddenly because of anxiety
- Destroy property or use money in a very extravagant manner
- Doesn't not want to hear anything concerning HIV/AIDS
- Helps in having future plans (abstinence,...)

Q6. WHO SHOULD GIVE CARE AND SUPPORT

- Trained people
- Hospital staff
- Family members
- Community members

Q7. WHO CAN RECEIVE CARE AND SUPPORT

- The elders
- The poor
- Orphans
- Chronically ill patients

Q8. IMPORTANCE OF CARE AND SUPPORT

- Reach sick people who cannot go to hospital
- Integrate care with HIV education
- Promote long term family support and strengthened family bonds
- Promote acceptance of people with Aids
- Discourage stigma and discrimination

COMMENTS AND SUMMARY (15:10-15:20)

1.5. COMMUNICATION SKILLS

INTRODUCTION (13:00-13:05)

GOAL

To assist the pupils acquire effective communication skills right from the time they young.

OBJECTIVES (13:05-13:10)

By the end of this session participants should be able to:

1. *Define communication*
2. *State what communication involves*
3. *Identify skills required for effective communication*
4. *Explain reasons for communication*
5. *Describe communication process/elements of communication*
6. *Explain communication methods*
7. *Explain barriers to effective communication*
8. *Design strategies to overcome barriers to effective communication*

ACTIVITY 1: DEFINITION OF COMMUNICATION (13:10-13:20)

The trainer will ask the participants through brainstorming the definition of communication. Thereafter he should summarise by giving the following answers

COMMUNICATION

- Is a process by which human beings share information, knowledge, experiences, and ideas from a sender to a receiver through a medium to ensure a common understanding.
- Is the transmission of information, thoughts, and feelings through words, actions or signs from one person to another or to a group

COMMUNICATION PROCESS

Sender/Source – Message – Channel – Receiver- Feedback

Communication involves sending a message through a channel to a receiver who then gives a feedback

ACTIVITY 2: GROUP WORK (13:20-13:40)

The facilitator should divide the participants into group to discuss the following questions:

Group 1

-Describe skills required for effective communication

- Role play : the pupils should play a situation which would require the use of effective communication skills.

Group 2

Explain communication methods

Group 3

Explain and give some barriers to effective communication

Role play: ask pupils to play a situation where there are a lot of barriers.

Group 4

Explain why people communicate

ENERGIZER (13:40-13:45)

The facilitator should do something to entertain the participants e.g. song, game and dance

PRESENTATION (13:45-14:15)

Participants will present what they discussed in their groups. Allow them to ask questions and give comments.

SUMMARY (14:15-14:40)

The trainer should conclude this activity by giving the following possible answers

Q1. EFFECTIVE COMMUNICATION SKILLS

Active listening

Speaking clearly

Interpretation of messages

Sending clear messages

Patience

Questioning

Use of a language

Ability to share another feelings

Q2. COMMUNICATION TYPES

| VERBAL | NON VERBAL |
|------------------|-------------------|
| Radio | Touch |
| Personal (voice) | Body movements |
| Word of a mouth | Eye contact |
| Telephones | Drum beating |
| Books | Whistling |
| Newspapers | Flag |
| Drama | Dressing |
| Songs | Facial expression |
| Role-plays | Gestures |
| Poems | |
| Television | |
| Videos | |

Q3. BARRIERS TO EFFECTIVE COMMUNICATION AND THEIR SOLUTIONS

| BARRIERS | SOLUTIONS |
|-----------------------------|--|
| Lack of knowledge or skills | Use of proper language |
| Religious and culture | Understand and respect religion and culture of the target group |
| Time | Allow time for contributions and questions |
| Meeting place/venue | Repeat the message if necessary, choose a suitable place |
| Language used | Use appropriate language |
| Behaviour | Be observant to the audience |
| Economic status | Understand and respect target group |
| Sex | Understand and respect target group. Discuss Gender issues. Promote peer to peer communication |
| Age | Promote peer to peer or communication between the same age groups |
| Attitude | Promote a positive and respectful attitude. |
| Fear | Promote trust and confidence. Promote self confidence by being kind and reassuring. |
| Too many messages | Be brief and straightforward on what you want to say |

Q4. REASONS WHY PEOPLE COMMUNICATE

- To deliver messages
- To promote development
- To create and promote relationship
- To share and gain experience e.g. culture and development
- To share information e.g. on HIV/AIDS
- To share ideas and feeling about something
- To improve their communication skills e.g. writing letters.

ENERGIZER (14:40-14:50)

ACTIVITY 3: ROLE PLAYS (14:50-15:20)

The trainer should put the participants in situations where they can think about different ways to communicate in a situation and try to find the better one for themselves

1. Anne dresses improperly (seductive dressing) in order to attract boys. James, her schoolmate has been aroused. How should James convince Anne on the consequences of improper dressing and importance of dressing properly in relation to HIV transmission?
2. Joyce was on her way coming from school. Suddenly Frank comes out of the bush asking her to have sex. What should Joyce do to convince Frank not to have sex?
3. You want to conduct an outreach activity in a village. How do you communicate with the community to have a large attendance? Make a role-play.
4. A girl is tempting a boy to have sex because he is the best football player. How can the boy communicate with the girl in order not to have sex?

PLENARY SESSION (15:20-16:00)**COMMENTS AND SUMMARY**

The trainer should summarise the topic

The trainer has to help them prepare different arguments they can choose in any situation. He has to be sure that in the roleplays everybody respects the views of others, listen when someone is speaking and afterwards try to convince him with arguments.

1.6. DECISION MAKING SKILLS

INTRODUCTION (13:00-13:10)

BROAD OBJECTIVE

To assist participants to make/informed decision, when they are in difficult situations.

SPECIFIC OBJECTIVES

By the end of this session participants should be able to:

1. *Define decision making*
2. *Describe situations where a person can make a decision (challenge)*
3. *Explain consequences of making good or bad decisions*
4. *Discuss factors that influence a person to change a decision*
5. *Explore steps to making effective decisions*

CONTENTS

ACTIVITY 1: DEFINITION (13:10-13:15)

The trainer should ask the participants to brainstorm on the definition of decision making. Decision making is the process of thinking and deciding something out of life firmly.

ACTIVITY 2: BAG GAME (13:15-13:35)

ACTIVITY 3: GROUP WORK (13:15-13:30)

The trainer should divide the participants into four groups. Each group will discuss and answer the following questions.

1. Describe situations where one can make a decision
2. Explain consequences of making decisions
3. Discuss factors that influence a person to change a decision
4. Explore steps to make effective decisions

PLENARY SESSION

1. Situations whereby one can make a decision

- (i) What time to get up/bathe
- (ii) What to wear
- (iii) What/when to eat
- (iv) What time to go to school/work
- (v) When to marry

2. Consequences of making a decision

Making decisions and knowing the consequences are important skills young people need. Some decisions warn you right away to choose something else like a risk to health or to your own life. Some decisions can give you positive or negative results.

| Negative consequence | Positive consequence |
|---|--|
| Getting HIV/STIs | Avoid getting HIV/STIs |
| Getting unwanted/early pregnancy | Avoid getting unwanted/early pregnancies |
| Dropping out or being dismissed from school | Avoid dropping out from school |
| Chased by parents/relatives | |
| Imprisonment | Avoid imprisonment |
| Poverty and hunger | Reduces hunger and poverty |
| | Helps to plan your future |
| | Promotes development |

3. Factors that influence a person to change a decision

- Peer pressure
- Poverty and hunger
- Counselling
- V.C.T.
- Cultural and traditional beliefs
- Religious beliefs
- Education/ignorance
- Economic status
- Curiosity

4. Steps to make effective decisions

There is need to follow steps to making effective decision in order to avoid negative consequences. The following are some of the steps to making effective decisions.

- Take some “time out”
- Identify the problem
- Think about the situation
- Seek advice from other people
- Listen to the advice given
- Consider personal/family values
- Consider cultural practices and religious beliefs
- Consider all the options and alternatives available
- Imagine the consequences and possible outcomes for each options
- Think about the situations you are in

ENERGIZER (13:30-13:35)

The facilitator should do something to entertain the participants e.g. song, game or dance

PRESENTATION (13:35-14:00)**ENERGIZER (14:00-14:05)**

The facilitator should perform a game with participants

ACTIVITY 4: ROLE PLAYS (14:05-14:35)

1. Amina is a 15-year old school girl whose parents provide her with basic needs (food, fees, clothes). She admires her friends who can spend money on luxuries such as like hair curls, etc. Her friends tells her how they get these things and convince her to do so. What should Amina do? What do you think could be the consequences of her decision?
2. Kwenda is a young man who is 21 years old. He likes wedding ceremonies (mchezo) because of music (dances). His friends tells him that having fun goes well with smoking and drinking beer. Kwenda agrees to smoke and drink. What do you think will be the consequences of his decision?
3. You have decided that a condom is your best protection against HIV/AIDS and STIs. You want to use a condom during sex but your partner would not like to use a condom and will try to persuade you not to use it. Use all the arguments you believe are relevant to support your decision.

SUMMARY (14:35-14:45)**ACTIVITY 5: BAG GAME (14:45-15:00)****OBJECTIVES OF THE GAME**

- To enable participants to practice decision-making when they are in difficult situations.
- To enable participants to practice resisting pressure to change a decision.

PROCEDURE: THE FACILITATOR SHOULD

1. Put four different bags of different contents on the table or floor where everyone can see them.
 - Ask for three volunteers to come in front and choose his/her own bag by standing behind it.
 - Tell the volunteers not to touch the bags
 - Explain that now the rest can influence the volunteers to make good decisions/choice.
2. Ask the volunteers to select the bags one more time and that they can do anything except looking inside (fragile)
 - Let them exchange the bags before they make a final decision.
 - Explain that if two or three volunteers have chosen the same bag, they are allowed to be together (one behind the other)

3. Allow the volunteers to open the bags they have chosen and take out the contents.
 - The facilitator should open the bags that were not chosen.

POINTS FOR DISCUSSION

The facilitator should:-

- Ask the volunteers why they picked the bags for the first time?
- Ask them to explain why they made the second choice?
- Ask them how they felt when the group was pressurizing them to change their decisions
- Ask them which bag they would have chosen if the bags had been open, and why?
- What do you think is important in decision making? What are other things that can influence people to make decisions?

CONCLUSION

- The facilitator should conclude by giving the following points, some people have difficulties when it comes to making decisions (good decision). However it is important to:
 - follow information and time
 - examine your optional choices
 - know/find possible consequences, whether negative or positive
 - know misinformation
 - know possible dangers
- Actually follow steps to decision making (refer to “life skill manual” page 79)
- Other things that influence people to make decisions are, friends/parents, values, wishes, alcohol, luck, culture and religion.

COMMENT AND SUMMARY (15:00-15:15)

1.7. SELF ESTEEM

INTRODUCTION (13:00-13:10)

OBJECTIVES

By the end of this session participants will be able to:-

1. *Define the following term: self esteem*
2. *Mention factors that contribute to self esteem.*
3. *Explain the importance of self esteem and relate it with relationship.*
4. *Identify qualities of a good relationship*
5. *Factors that destroy self esteem*

ACTIVITY 1: DEFINITION

The trainer should brainstorm with the participants on the term SELF ESTEEM

It is the way one thinks of him/herself

It is a feeling of oneself; it is also the same as a good self-image.

ACTIVITY 2: GROUP WORK & PLENARY SESSION (13:10-13:40)

To be followed giving the above summary by trainer. After the summary the trainer can conduct this activity with the participants.

Divide the participants into groups to discuss the following questions

Q1. Explain the importance of self-esteem e.g.

- (a) One refrain from peer pressure like
 - sexual behaviour
 - substance use
- (b) One can easily pave way to a brighter future if his/her principles are kept stable
- (c) One can keep him/herself from
 - early pregnancies
 - STIs including HIV

Q2. Explain factors that enhance self-esteem

- (a) Empowering the youths with life skills
 - challenging temptations
- (b) Self confidence
- (c) Taking responsibility
- (d) Accomplishment of a task
- (e) Having a friend with good manners (role model)
- (f) Being loved
- (g) Being pleased and encouraged

Q3. Explain factors that destroy self esteem

- (a) Lack of life skills
- (b) Lack of recognition
- (c) Child abuse
- (d) Poverty
- (e) Ignorance
- (f) Sickness and death
- (g) Lack of self confidence
- (h) Being easily swayed
- (i) Yielding to bad habits

ENERGIZER (13:40-13:45)

The facilitator should do something to entertain the participants

DISCUSSION (13:45-14:00)

List down qualities of a good relationship e.g.:

- (a) Respect and love

A good friend has to respect your rights. He/she needs to express affection and tell you in a satisfied way how much he/she loves you.

- (b) Understanding point of view

A good friend has to be able to understand your point of view when discussing. Need to know what you like and what you dislike.

- (c) Responsibility and care

A good friend needs to play a part in a relationship

- (d) Hard working/putting much effort

Be encouraging to each other on what ever you are doing and when one is in trouble.

- (e) Fidelity/Faithfulness

Love each other and trust each other. Don't go with other men/women to avoid contracting STIs (including HIV/AIDS) and infect your partner.

ACTIVITY 3: ROLE PLAYS (14:00-14:20)

- Imagine that 'Tikondane' is a church in which Pemphero (a 14 year old girl) and Chikondi (a 19 year old boy) are choir members. They are also from the same community and lived together most of the time as friends. After sometime Chikondi develops sexual feelings towards Pemphero and tried to propose her sex. Now Pemphero is stranded, what should she do: accept or refuse! Why

- Ntadala is told by her friends at school to have a “Sugar Daddy” because she cannot afford to buy good clothes and plait her hair, as she comes from a poor family. But now, because of her self-confidence, she refuses to have a sugar Daddy and chooses to concentrate on her education.
- Andrew has finished his education. During the holiday he meets his aunt who forces him to marry one of her daughters. If you were Andrew, how could you resist this pressure?
- Mavuto is an orphan, his friend Mayeso asked him to join him to do peace work rather than going to school. Mavuto challenges Mayeso saying being an orphan is not an excuse to stop going to school.

DEBATE (14:20-14:35)

Is it proper for girls to discuss about sex openly?

- Should parents give priority to boys in various activities at home? (Trainers should give some examples: education...)
- Is it true that boys are more intelligent than girls?
- Does counselling promote self esteem?

ENERGIZER (14:35-14:40)

The facilitator should do something to entertain the participants

COMMENTS AND SUMMARY (14:40-15:00)

A trainer can summarise the session with the points above

1.8- DRAMA AND STORY CREATION

INTRODUCTION (13:00-13:05)

BROAD OBJECTIVE (13:05-13:15)

To transmit knowledge and skills to participants so that they can formulate/create and perform good songs, poems, dances and drama.

SPECIFIC OBJECTIVE

By the end of this session participants should be able to:

- *Define the following terms*
 - (a) *story*
 - (b) *and drama creation*
- *Explain how stories and drama can be created*
- *Describe qualities of good drama, story, poems and dances*
- *Relate drama and development*
- *Know the importance of drama and stories*
- *Create and perform an interactive drama*

CONTENTS

ACTIVITY 1: DEFINITION (13:15-13:25)

DRAMA is a collection of ideas or feelings put together and presented to other people through actors/actress.

Story is collection of ideas or feelings put together and presented to other people either verbally or written.

Members have to brainstorm on the difference between

- (a) Role play and drama

POSSIBLE ANSWERS

A role-play is a simple drama whereby actors act on particular situation while drama can have a lot of situation and messages. There are more actors in drama than in a role play and a role play (comedy) settles climate for real drama.

ACTIVITY 2: GROUP WORK (13:25-13:45)

A facilitator will divide the participants into groups and discuss the following questions

- Q1. Explain how you create drama and stories when you are presenting during outreach activities and drama competition (origins)
 Q2. Discuss qualities of good drama, songs, poems and dances
 Q3. Explain the importance of drama, stories in development (HIV, Family Planning and sanitation hygiene).

ENERGIZER (focus on theatre games, funny games) (13:45-13:50)

PRESENTATION (13:50-14:10)

Comments and contributions

SUMMARY (14:10-14:30)

The trainer should summarise by giving the following possible answers:-

ORIGIN OF STORIES/HOW ARE STORIES CREATED

1. From pictures/observations
2. From imaginations
3. From other stories (history)
4. Noise (what you hear)

QUALITIES OF A GOOD DRAMA/STORY

- (a) Educative – carries quality message to educate people
- (b) Entertaining – it should attract people and must be full of creativity
- (c) Short enough – people get bored and loose interest when the play/song/dance or poem is too long. But should not be too short, it should give enough information
- (d) Simple/direct – the message should be easy to get by anyone
- (e) Use people’s language – the language has to be the one spoken/used in the area.
- (f) Not offending people’s culture/not disappointing e.g. body or physical contact.
- (g) Remove misconceptions and give people some hope/create more awareness

IMPORTANCE OF DRAMA/STORIES IN DEVELOPMENT

Drama/stories are used as effective tools to carry developmental activities

- Drama/stories simplify difficult development messages e.g. about condom use, VCT, Family Planning
- Drama/dances (theatre) attracts, mobilizes communities to start participating in development activities after getting the message i.e. unites and motivate people in development.
- Drama/stories empowers the community because there’s education/information e.g. HIV prevention, VCT, HBC, history.
- People learn easily through dramas, stories, poems, dances, pictures, even the illiterates.

Importance of Drama/Story

- Keeping the body and brain awake and flexible
- It acts as a medium of participatory communication between the development initiator and the targeted community.
- Keeping the youth busy, active and free from immoral behaviours e.g. substance use, stealing, sexual relations.
- Promotes people's rights to participate in development activities
- Brings/develops a relationship between the facilitator and the community working with
- It can become an income generating activity for the actor/actress
- Promotes unity among people of different status

ACTIVITY 3: INTERACTIVE DRAMA (14:30-14:40)

This is play in which actors ask questions to the audience to comment while they are on stage

- If the audience remains quiet, the actor should act following the audience's expectations or against the audience's expectation, in order to make them react. During discussion, stop acting and when the discussion is over, continue from where you stopped (forum theatre).

ACTIVITY 4: GROUP WORK NO 11 (14:40-14:50)

Divide the participants into three groups and they should come up with;

Group 1 –Drama (15 minutes)

Group 2 – Comedy/poem (5 minutes)

Group 3- Role play (5 minutes)

PRESENTATION (14:50-15:10)

As the actors/actresses are on stage ask the other participants to critically observe areas of interactivity, education, entertaining and if it's really realistic. Ask them to jump into the shoes of characters, let them ask questions and ask them how they feel with the play.

At the end the leaders and the trainer should summarize the whole session.

Emphasize on the voice, interactivity and the quality of the message.

COMMENTS AND SUMMARY

SECOND YEAR

KNOWLEDGE TOPICS

- 2.1. Sexuality and early pregnancy
- 2.2. Family planning and condom use
- 2.3. Drug abuse
- 2.4. Human Right, sex abuse and rape

LIFE SKILLS TOPICS

- 2.5. Negotiation
- 2.6. Sarah's life skills
- 2.7. Bridge model
- 2.8. Drama creation

2.1- SEXUALITY AND EARLY PREGNANCY

INTRODUCTION (13:00-13:10)

OBJECTIVES

By the end of this session participants should be able to:-

1. *Define the following terms:-*
 - *Sexuality*
 - *Early pregnancy*
 - *Abortion*
2. *Explain reasons why youths have sex*
3. *Explain consequences of early pregnancies (Health/Social)*
4. *Explain reasons for terminating pregnancy*
5. *Explain effects of abortion on an individual*
6. *Understand consequences of indulging in sex at very early age*

PRE-TEST (13:10-13:30)

- Q1. Explain four reasons why youths indulge in sex. (4 marks)
 Q2. Explain consequences of indulging in sex at very early age. (4 marks)
 Q3. Explain briefly the four consequences of getting early pregnancies. (4 marks)
 Q4. Explain the four reasons why youths decide to abort (4 marks)
 Q5. What can be the three consequences of abortion on an individual? (3 marks)

CONTENT (13:30-13:40)

ACTIVITY 1: DEFINITIONS

The trainer together with the participants, have to brainstorm the definition of the following terms:-

(a) Early Pregnancy

Defined as being conceived while the two (boy/girl) haven't yet made a decision to have pregnancy and when they are not matured.

(b) Abortion

Defined as the termination of pregnancy or expulsion of foetus, from the womb, before it is sufficiently developed to survive.

(c) Sexuality

Sexuality expresses who a person is and what they will become. It includes all the feelings, thoughts and behaviours of being male and female, being attractive as well as being in a relationship.

Self awareness is also part of sexuality, for a example when one compliments you on how smart you look or how you look or how well you have done ,it makes one aware of their own body and capabilities and this may also lead one into a relationship.

ACTIVITY 2: GROUP WORK (13:40-13:50)

The facilitator should divide the participants into groups to discuss the following questions:-

- Q1. List down reasons why youths get might become pregnant too early
- Q2. Explain possible consequences of having sex
- Q3. Explain possible consequences of early pregnancies
- Q4. List down some of the reasons why youths decide to terminate pregnancy
- Q5. Explain effects of abortion on an individual

ENERGIZER (13:50-14:00)**PRESENTATION (14:00-14:15)****COMMENTS/CONTRIBUTIONS****SUMMARY (14:15-14:45)**

Some of the possible answers may include;

- Q1. Reasons why youths have sex and get pregnant too early
 - (a) Need for a baby
 - (b) Pressure from friends and parents
 - (c) Curiosity for sex (experimentation)
 - (d) Poverty and hunger
 - (e) Ignorance
 - (f) Rape and date rape
 - (g) Prostitution
 - (h) Cultural beliefs and practices
- Q2. Possible consequences of having sex
 - (a) HIV/Aids
 - (b) STIs
 - (c) Early pregnancy
 - (d) Abortion
 - (e) Drop out from school
 - (f) Poverty and hunger

Q3. Possible consequences of getting early pregnancies (social/health)

- (a) drop out from school
- (b) ex-communicated from church
- (c) chased away from home
- (d) labeled as prostitute in a society
- (e) Resorts to prostitution due to lack of social needs
- (f) Anaemia
- (g) Early and unplanned marriages
- (h) Low birth weight of baby
- (i) Incomplete physical development and growth
- (j) Death during delivery
- (k) Decides to commit suicide and abortion

Q4. Reasons why youths might decides to terminate pregnancies

- (a) fear of being chased away from home
- (b) fear of being ex-communicated from church
- (c) fear of being dismissed from school
- (d) fear of being laughed at by friends/society
- (e) fear of facing charges by chiefs
- (f) when the girl/woman was raped
- (g) when the man denies responsibility
- (h) fear of being divorced

Q5. Possible effects of abortion on an individual

- (a) anaemia (due to loss of blood during abortion)
- (b) death of mother
- (c) loss of uterus
- (d) causing infertility
- (e) jailed
- (f) loss of personal dignity
- (g) labeled as prostitute by society

ENERGIZER (14:45-14:50)

The facilitator should do something to entertain participants e.g. song, game or dance

ACTIVITY 3: ROLE PLAYS (14:55-15:10)

1. Mnenanji had a boy friend, they are both at school/same church and they are all curious about sex. Mnenanji is pregnant and told her boy friend. Her boy friend is afraid to face the charges at the chiefs court and tries to convince her to abort it. If you were Mnenanji what could you say
2. Mwaleyi is a 14 years old girl still at school and she falls in love with Chibwe a famous businessman in the same area. He used to supply her with presents and cash in turn Chibwe had sex with her for many times. She is now pregnant but Chibwe is worried if his wife discovers it. What do you think Chibwe said to her (Mwaleyi) and what are the consequences.
3. Participants have to come-up with their own role plays (2 of them)

PRESENTATION (15:10-15:30)**COMMENTS AND SUMMARY (15:30-15:40)****POST TEST (15:40-16:00)**

2.2-FAMILY PLANNING AND CONDOM USE

INTRODUCTION (13:00-13:05)

OBJECTIVES

By the end of this session participants should be able to:

1. *Define the term Family Planning*
2. *Mention Family Planning methods*
3. *List down examples of each method of Family Planning*
4. *Explain how they work including advantages and disadvantages*
5. *Relate Family Planning methods to HIV/AIDS and youths*
6. *Explain barriers to family planning (fears and rumours)*
7. *Explain benefits of family planning:*
 - *Mother*
 - *Child*
 - *Family*
 - *Nation*

PRE TEST (13:05-13:20)

CONTENT (13:20-13:30)

Before the session begins the participants should review what they covered during a session on early pregnancy/abortion focusing on reasons why youths might get pregnant too early, possible consequences of getting early pregnancy, reasons for abortion and effects.

ACTIVITY 1: DEFINITION

The trainer has to brainstorm on the definition of Family Planning with participants

Defined as the process of girl or couple deciding when to have a baby and what method to use to postpone pregnancy.

The participants should understand that the purpose of family planning is to promote the health status of the community (mothers, children and the whole family)

ACTIVITY 2: GROUP WORK (13:30-13:45)

The facilitator should divide the participants into groups to discuss the following questions:

- Q1. Mention Family Planning methods that you know
- Q2. List down examples of each Family Planning method
- Q3. Relate Family Planning methods to HIV and youths
- Q4. Explain barriers to family planning (fears and rumours)
- Q5. Explain the importance of Family planning for: Mother/Child/Family/Nation
- Q6. They should be able to demonstrate how to use condoms

ENERGIZER (13:45-13:50)

The facilitator should do something to entertain the participants

PRESENTATION (13:50-14:05)**COMMENTS/SUMMARY (14:05-14:30)**

The trainer has to summarise by giving the following possible answers

Q1. The three types of Family Planning methods.

- (a) Natural
- (b) Traditional
- (c) Modern

Q2. Examples of Family Planning methods**(a) Natural**

- Abstinence
- Withdrawal

(b) Traditional

- use of local plants and substance
 - soaked herbs
 - medicated strings
- behaviour pattern of practice
 - postpartum abstinence – lactation
 - polygamy
 - journeys (husband going away)
- Grand motherhood (abstain if you are grandmother)

(c) Modern

- Pills
- Depo provera (injection)
- Norplant
- Condoms

Q3. Relationship of Family Planning with HIV and Youths

Most of the family planning methods are meant for pregnancy prevention and not STIs including HIV/AIDS. Refer to table below (ref 2002 Family Planning guideline)

| Name | How it works | Advantages | Disadvantages |
|---------------------------|---|---|---|
| Abstinence | No contact between sperm and eggs | *Most reliable method *No risk of AIDS and pregnancy | No penetration but soft sex, (massage, kissing, masturbating, no penetration) gives sexual satisfaction. |
| Natural methods | Abstinence from sex on days that pregnancy is most likely to occur. Each girl must know her menstrual cycle. The first day of menstruation is day 1 and from day 10 to day 19 it is very risky to have sex. | *It can only be successful if the girl's periods are regular and if she follows the rules seriously *It is cheap (free) | *It is not a good method, as it does not work for girls who have irregular periods or for girls who have cycle longer than 28 days. *It does not protect against STIs and AIDS |
| Condoms | Prevents contact of semen with vagina | *Condoms can be bought in many places *Can be used by everybody *Very reliable when used correctly *Prevents against AIDS/STIs | *There are many misconceptions *They can only be used once *It can burst if not correctly used * It can lower sexual satisfaction |
| Pills | Prevent the maturation of the egg (shown on poster) and so fertilization cannot occur | *Prevents anaemia because it reduces menstrual flow *It is a very reliable method and is easy to use *Reduces menstrual pain | *A pill must be taken everyday and so can be forgotten. If a woman forgets to take a pill, then she must use another contraceptive method for the rest of her cycle to prevent pregnancy |
| Depo provera (injections) | It stops eggs from being released from the ovaries | *It is a reliable method. *It is very easy to use | *Must remember to get new injection every 3 months *Does not prevent AIDS/STIs *It takes a few months to become fertile once you stopped the injections *It can cause irregular periods, spotting and other side-effects |

Q4. Barriers to family planning

- Knowledge gaps and low risk perception about SRH issues
- Lack of community dialogue
- Harmful cultural practices
- Poor client / provider relationship

Fears and Rumours of family planning

- Women on pills and injections become barren
- Women who practice family planning become prostitutes
- Women who had done tubal ligation will suffer from abdominal pains
- If a man does vasectomy will lose erection
- If you insert loop it travels to the heart
- If you use a condom there is less sensation
- If a woman gets injection the husband does not feel good

Q5. Importance of family planning

- Mother: enough time to rest between pregnancies, to participate in development activities, health life
- Child: enough love, attention, care from parents
- Family: enough time to participate in development activities, love
- Nation: reduction of infant mortality

Q6. Demonstration on how to use a condom

- By using a wooden demo and a condom, facilitators should demonstrate to the participants a correct use of condom

NOTE: Abstinence is the best method for preventing pregnancy and STIs

Among the modern methods of family planning, pills and condoms are the most suitable and adapted for the youths. These methods have no serious side effects

ACTIVITY 3: ROLE PLAYS (14:30-14:50)

1. Dorothy is in love with Chikondi (sexual relation). Chikondi always insist to use condoms whenever they want to have sex to avoid pregnancy but according to Dorothy she believes in using medicated string as a way of avoiding it as told by her mother. How can Chikondi convince her to use condoms rather than the traditional method?
2. In Tilere village Mrs Moyo practice Family Planning using modern methods while Mrs Dzozi does not undergo any type of Family Planning as she want to have many children to help her with her work. How can Mrs Moyo convince her to be using Family Planning methods? What can you say is the impact of Family Planning?

ACTIVITY 4: PRE POST TEST (14:50-15:05)

1. Mention three Family Planning methods that you know. (3 marks)
2. What can be the examples of each Family Planning method mentioned above. (3 marks)
3. Explain briefly the importance of practicing Family Planning (2 marks)
4. What can be the consequences of not practicing Family Planning methods (2 marks).

2.3.- DRUG ABUSE

INTRODUCTION (13 :00-13 :10)

OBJECTIVES

By the end of this session, participants should be able to:-

1. *Define the term 'substance abuse'*
2. *Mention all substances that youth may abuse.*
3. *List down reasons why some youth abuse the substances.*
4. *Explain consequences of substance abuse*
5. *Design strategies to overcome problems of substance abuse.*

CONTENT (13:10-13:20)

ACTIVITY 1: DEFINITION

Definition: Defined as chemical substances that alter or modify behaviour and cause addiction.

Substance Abuse: This is the excessive or wrong use of substances (chemical substance) to alter behaviour.

Drug: This is any addictive substance that stimulate the nervous system and modify ones' s behaviour.

ACTIVITY 2: GROUP WORK (13:20-13:45)

Divide the participants into groups to discuss the following questions

- Q1. List down all substances that youth may abuse?
- Q2. Explore reasons why some youth abuse substances?
- Q3. List down some of the consequences of substance abuse
- Q4. Design strategies to overcome problems of substance abuse.

ENERGIZER (13:45-13:50)

The facilitator should do something to entertain the participants

PRESENTATION/COMMENTS/SUMMARY (13:50-14:10)

Some of the possible answers to the above questions.

Q1. Substances that young people abuses are:-

- (a) Nicotine – chamba/hemp
- (b) Alcohol – carsberg, powers No 1, Cathy, castle larger, chibuku, chikalo, kuchekuche, napolo, kadamsana, brandy, wine and kachasu.

Q2. Reasons why youths abuse substances

- Peer pressure
- Idleness
- Curiosity/experimentation
- They believe that it increases strengths and knowledge
- Ignorance, etc.

Q3. Possible consequences that youth can face after abusing substances

- Insanity – run mad
- Dropout from school
- Drowns economy
- Loss of self-control and lead to rape
- (a) Pregnancies
- (b) STIs
- (c) HIV/AIDS
- Become less productive
- Liver disease

Q4. Possible solutions (strategies designed)

- Refrain from pressure
- Be aware of the effects, risks and possible consequences of substance abuse
- Create rehabilitation facilities
- Prevent young people from drug abuse

Question and answer time (14:10-14:30)

The teacher can allow participants to ask questions and he can summarise.

ACTIVITY 3: ROLE PLAYS (14:30-15:00)

The teacher should divide the participants into three groups so that they can come-up with drama, songs and poems on the topic and the teacher has to comment.

SUMMARY

2.4- HUMAN RIGHTS, SEX ABUSE AND RAPE

BROAD OBJECTIVES (13:00-13:25)

The purpose of this session is to introduce the youths to the concept of human rights, sex abuse and rape in the context of HIV/AIDS and give them knowledge and skills on the issues that affects them.

SPECIFIC OBJECTIVES

By the end of the session the participants should be able to:

1. *Define the terms human rights, sex abuse and rape*
2. *Explain the rights of children and young women*
3. *Explain how the rights of the children are abused.*
4. *Explain why people are sexually abused and raped*
5. *Explain factor that may lead to sexual abuse and exploitation*
6. *Explain the consequences of sex abuse and rape*
7. *Explain what they should do when their rights are abused (sex abuse and rape)*

PRE TEST (13:25-13:45)

1. Explain the rights of children and young women (4 marks)
2. Explain how the rights of the children are abused (2 marks)
3. Explain why people are sexually abused and raped (2 marks)
4. Explain the consequences of sex abuse and rape (2 marks)
5. Explain two factors that may lead to sexual abuse (2 marks)
6. Explain what they should do when their rights are abused (2 marks)

ACTIVITY 1: DEFINITIONS (13:45-14:05)

INTRODUCTION TO HIV/AIDS AND HUMAN RIGHTS

- Through brain storming ask the participants to define human rights, sex abuse and rape. After the participants have given different answers, the trainer has to conclude by giving his/her definition.
- Human rights are the entitlements that individuals have by virtue of being humans.
- Sex abuse and rape: This is when you force somebody to have sex while he/she doesn't want OR when sex has been done in a wrong way (dishonestly and violently)

ACTIVITY 2: GROUP WORK (14:05-14:25)

Divide the participants into 4 groups to discuss the following questions;

1. Explain the rights of the children and the responsibility of the government
2. Explain the rights of women and girls
3. Explain how their rights are abused
4. Explain why and how people are sexually abused and raped
5. Explain the consequences of sex abuse and rape
6. Explain what they should do when their rights are abused or sexually abused

ENERGIZER (14:25-14:30)

The facilitator should do something to entertain the participants

PRESENTATION (14:30-15:00)

After presentation by different groups and getting comments from other members the trainer should give the following possible answers.

1. THE RIGHTS OF THE YOUTHS

- Communicate with anyone
- Make decisions by their own
- Negotiate sex e.g. condom, abstain
- Have quality education/information
- Have enough security
- Have adequate standards of living (food, accommodation, health care, etc.)
- Associated with anyone

2. RIGHTS OF YOUNG WOMEN

- Girls and young women have the right to:
- Have equal access to education and trainings
- Participate in decision making
- Enter into marriage only with their free and full consent
- Participate in recreation activities
- The same employment opportunities
- Protection from commercial sexual exploitation

3. HOW HUMAN RIGHTS MAY BE RESTRAINED

- Ignorance on HIV/AIDS and rights of members of family or society
- Cultural practices and values (early marriage, *fisi*, etc.)
- Cruelty of guardians of orphans
- Restrictive religious values (choice on use of condoms or Family Planning, relationship)
- Lack of life skills (ability to say no to sex, rape, peer pressure, early marriages)

4. REASON WHY PEOPLE ARE SEXUALLY ABUSED

- Substance and drug abuse
- Lack of self assertiveness (life skills)
- Poverty and hunger
- Job seeking
- Tribal wars
- Harmful cultural practices
- Lack of youth friendly services
- Improper dressing

Therefore people are abused and raped by;

- Forcing them to follow traditional beliefs and practices e.g. fisi.
- Giving them money
- Teachers ask pupils to meet in their offices, or to be assisted for examinations
- Bribe during interviews
- Making him/her drink a lot of beer or take drugs
- By using herbs

5. POSSIBLE CONSEQUENCES OF SEXUAL ABUSE AND RAPE

- HIV/AIDS and STIs
- Early pregnancy and abortion
- Dropping out from school
- Poverty and hunger
- Orphanage
- Imprisonment

6. WHAT WE SHOULD DO IF OUR RIGHTS ARE ABUSED / IF WE ARE SEXUALLY ABUSED

- Reporting to parents, chiefs, police, nearest health facilities
- Reporting to human rights organizations e.g. NICE, GENDER
- When they are raped they should make sure that they do not bathe until medical examination

QUESTION AND ANSWER TIME (15:00-15:10)

ACTIVITY 3: ROLE PLAY (3 role plays) (15:10-15:40)

1. Malita is a young girl who is an orphan because of AIDS and now she stays with her grandparents who are very poor. Her grandparents advised her to become a prostitute so that she may bring money and other items.

What should Malita tell her grandparents in order to let them know about her rights?

2. Zakeyu is a 14 year old boy who is an orphan. He cannot continue with his education because he has no money. Mr Mwale volunteered to pay his school fees and he also asked Zakeyu to stay with him. Some duties that Zakeyu does at Mr Mwale's house include carrying 3 bags of maize to sell at the market and farming a very large piece of land. How can Zakeyu discuss about his rights.

3. Elube has just reached puberty and her mother and her aunt organized for her to meet with a fisi. They advise her to be ready.

How can Elube use her rights to protect herself from catching HIV/AIDS from that fisi.

ACTIVITY 4: POST TEST (15:40-16:00)

COMMENTS AND SUMMARY

2-5- NEGOTIATION SKILLS

INTRODUCTION (13:00-13:05)

OBJECTIVES

By the end of this session participants should be able to:-

1. *Define negotiation skills*
2. *Know the importance of using negotiation skills when solving conflicts in a community*
3. *Negotiate through role plays and debate on factors that stimulate young people to get involved in risky behaviour that may endanger their life*
4. *Relate HIV/AIDS and culture (African) so that condom use can be negotiated.*

ACTIVITY 1: DEFINITION (13:05-13:15)

- The trainer with the participants has to brainstorm on the definition of 'NEGOTIATION' and at the end he/she should give the summary.
- Negotiation is a way of communicating or talking to others (either a person or group of people) in order to try to come-up to an agreement or settle an argument.
- Negotiation is the best way of solving problems and conflicts in a community.
- A trainer needs to give practical examples of the things and situation where negotiation skills can be applied. e.g.
 - (i) at market i.e. mango price
 - (ii) family problems
 - (iii) land distribution
 - (iv) sexual issues

ACTIVITY 2: GROUP WORK (13:15-13:35)

Divide the participants into groups to discuss the following questions:

Q1. Explain the importance of negotiation skills when settling down an argument (why should people negotiate)

- Make people understand the causative agent and solution of problem
- Promote mutual relationship amongst many communities
- Developmental programmes can be enhanced where there is peace as negotiation promote peace
- Decisions about HIV and early pregnancies can be easily adopted positively in a relationship.

Q2. According to our African culture and religious values with the situation of HIV/AIDS today should condom awareness and use be promoted among youths? YES OR NO Explain why?

POSSIBLE ANSWERS (13:35-13:45)

- (a) With fisi business many young girls can get HIV or early pregnancies as the fisi does not use condoms and die at tender age.
- (b) According to social demographic studies many youths between ages of 15 to that have unprotected sex, that might make them get HIV and early pregnancies, as they do not use condoms.
- (c) Religious leaders promote abstinence among youths and faithfulness among married couples but many people receiving these messages are having problems to abstain and become faithful to their wives and husbands; as a result HIV is also spreading as condoms are not used since it is restricted by their faith.
- (d) With economical problems many girls go for elderly men for presents and money and in turn men propose them sex. In this case condoms are mostly not used and HIV and early pregnancies resulted.

*Therefore it is important for everyone to understand the role and importance of condoms in our communities as not to promote promiscuity but to prevent HIV and STIs and early pregnancies if people are failing to abstain.

ENERGIZER (13:45-13:50)

The facilitator should do something to entertain the participants

ACTIVITY 3: DEBATE (13:50-14:10)

Devils Advocate Statement

Devil advocacy is a game that allows participants to think and develop answers to difficult situations and questions.

Steps to the activity

- Explain that the exercise will help us to communicate, make decision and manage relationships better. And we will focus on how to think and debate well.
- Divide the group into four groups of 2 pairs and mind gender
- Each pair will get one card and one will read out the statement written on it, the other one will disagree while the leader will be defending the statement until they run out of ideas.

RULES OF THE EXERCISE

- Relay on facts instead of opinions
- Discourage speaking louder than the other

- Try to reach a compromise by agreeing with the other person's statement
- Present possible consequences of the following statements:

STATEMENTS

- As a youth I need to have sex before marriage to prove my fertility...true/false.....why?.....
- If a girl dresses improperly that can arouse my sexual feelings, its good to rape her. She deserved it. True/false...
- If a girl begs me money, I have the right to propose sex inturntrue/false.....??
- If you really loves me let's have sex to prove your love for me.....true/false??
- If I am in deep concerns/thoughts or want to go for fun, I need to smoke or drink beer.....true/false
- Condoms are meant for elderly men not for us youths, let's do it without condom
- Women have no rights to ask men to use condoms, is it true?

SUMMARY OF THE DEBATE (14:10-14:20)

The facilitator should summarize according to the results of the debate

ACTIVIY 4: ROLE PLAYS (14:20-14:45)

1. Marita is a form 1 girl at Mwatibu CDSS. She has fallen in love with a shop owner who gives her all she needs. The shop owner pressurizes Martha to have unprotected sex. How can Martha convince the shop owner to have protected sex?
2. Timve and Tsala have been friends for a number of years. They agree to get married in future. Tsala is still at school for ten months, Timve proposes to have sex with her, how can Tsala convince to wait until she finishes her education?
3. Tinyade lost her father when she was in standard 8. Now the family faces financial problems and the mother forces Tinyade to get married. How can Tinyade convince her mother to continue with her education?
4. A standard 8 teacher proposes one of the pupils in STD 8. He proposes her to have sex and promised to assist her during examinations. How can the girl convince the teacher on the bad consequences of pre-marital sex?

SUMMARY BY THE TRAINER/TEACHER (14:45-15:00)

2-6- SARA LIFE SKILL

INTRODUCTION (13:00-13:25)

Sara is an African girl who has a friend called Amina. She is an orphan because of AIDS. She decides to leave school. With the help of Sara, she continues with school.

OVERALL OBJECTIVE

- (a) To increase the knowledge of pupils about behaviour change
- (b) To summarize the life skills
 - Communication skills
 - Decision making skills
 - Negotiation skills

SPECIFIC OBJECTIVES

By the end of this topic pupils should be able to:-

- (a) *Know how to overcome the problem of lack of parental care*
- (b) *Discuss some of the reasons why girls get attracted by men*
- (c) *Know the importance of sharing problems with boys/girls*
- (d) *To know what they can do to rescue a friend who is in problem*
- (e) *Know the consequences of making choices*

CONTENT

ACTIVITY 1: BRAINSTORMING (13:25-13:30)

The participants should brainstorm problems they face due to orphanage and how they can get assistance.

ENERGIZER

The facilitator should do something to entertain the participants

ACTIVITY 2: GROUP WORK (13:30-14:00)

The participants will be divided into groups according to sex.

PHASE 1.

Example 1

Amina has no parents and she has no money to pay her school fees. She thinks of the following things in order to solve her problems.

- To stop going to school and join her elder sister to work in a bar.
- Or to just stay at home
- Or going to town to find work as a house girl

GROUP WORK

The participants will be divided into groups.

- (a) If you were Amina what would you do to solve the problem?
- (b) What do you think will be the consequences of Amina's choices?

Example 2

Mabvuto is an orphan and he has thought of selling his parent's belongings. He has started drinking and smoking. Then he has thought of going to town to find work but he also wants to get married.

GROUP WORK

The participants will be divided into groups according to sex.

- (a) If you were Mabvuto what would you do to remove these problems?
- (b) What do you think will be consequences of Mabvuto's choices?

PHASE II**Example 1**

Amina's elder sister works in a bar. Some of the people who go to the bar are sugar daddies from town, rich farmers and teachers. They go to the bar to drink and enjoy themselves with girls. Sara and Amina are coming from school and Amina thinks of visiting her sister in a bar. While on their way they see two young men who are well dressed going to the bar. Sara explains to Amina what she heard from Juma at school that these two young men like to sleep around with girls when they are drunk and most of the girls are HIV positive and have STIs as well. Amina was very surprised that Sara was discussing about these things with a boy (Juma).

GROUP WORK

The participants will be divided into groups (gender must be respected).

- (a) How do you feel sharing problems with boys
- (b) Is it important sharing problems with boys and why?
- (c) What are some of the issues you think you can discuss with boys freely
- (d) What are some of the things that attract girl?

Example 2

Mabvuto goes to the market to do some work in order to earn some money. When he gets money he goes to bars to see prostitutes. He starts drinking and smoking.

GROUP WORK

The participants will be divided into groups according to sex.

- (e) How do you feel sharing problems with girls
- (f) Is it important sharing problems with girls and why?
- (g) What are some of the issues you think you can discuss with girls freely
- (h) What are some of the things that attract boys?
- (i) What do you think are the consequences of Mavuto's behaviour?

PHASE III**Example 1**

Amina and Sara enter the bar while wearing school uniform. Some men start to laugh and call them to come and chat with them but they refused and went quickly to see Amina's sister. Grace looked tired and Amina and Sara volunteered to help her serving beer. Grace was not happy because she did not want them to work while wearing school uniforms but Sara left Amina in the bar and went home while Amina continued to serve beer to men. Amina started telling Grace that she is not going to school anymore and she will also work in the bar. But Grace refused and told her that there is no work suitable for her. Then Amina started chatting with men in the bar and these men told her she could find work in town. One man volunteered to take Amina to town and find work for her. Then Amina started to get drunk then agreed to go to town with the men without telling her sister.

GROUP WORK

- (a) How can you feel to get in a bar while wearing a school uniform
- (b) If your friend who is working in a bar gave you beer what would you do? Why?
- (c) If a man told you that would find work for you in town what would you do?
- (d) If you were Grace what would you do to stop Amina from deciding to work in the bar?

Example 2

Mabvuto thinks of starting to work in a bar. He starts drinking and smoking. He gets drunk and is attracted by the dancing prostitutes in the bar.

GROUP WORK

- (a) How can you feel to work as a barman assistant
- (b) What can you do if your friend offers you beer?
- (c) You are intoxicated and a prostitute pressurizes you to have sex, what can you do?
- (d) If you were a friend of Mabvuto, what could you do?
- (e) What do you think are the consequences of Mabvuto's behaviour

PHASE IV**Example 1**

When Sara left the bar she went to Juma's house to tell him what had happened to Amina. Juma decided to tell his elder brother Themba so that they should go together to get Amina.

GROUP WORK

- (a) Do you think Sara did well by leaving Amina alone at the bar.? Why,
- (b) Apart from Juma who else could Sara tell her problem to. Why?
- (c) Why do you think Sara and Juma decided to tell Themba to help them get Amina?

Example 2

Together Themba, Juma and Sara stop Amina from going to town. And Amina is given the opportunity to sell tea at Themba's shop.

GROUP WORK

- (a) Do you think Themba, Uma and Sara did something good by making Amina go back to the village?
- (b) What could have happened to Amina if she had gone to town?
- (c) What lessons have you learned from this story?

PHASE V**Example 1**

Mabvuto is an orphan. He sold his parent's property and started drinking and smoking. He started working as a barman assistant. He earned some money but he always used it for buying beers. He also started spending time with prostitutes.

GROUP WORK

- (a) Was it a good decision for him to sell his parents property? Why?
- (b) Is it good for the teenagers to work in a bar? Why?
- (c) What do you think are the possible consequences for teenagers working in a bar?
- (d) What have you learnt from the story?

ACTIVITY 3: SARA SUMMARY**POSSIBLE ANSWERS (14:00-14:45)****PHASE 1****Example 1**

- (a) To find a job e.g. housemaid
 - Seek help from other government departments
 - Just stay at home
 - Seek help from relatives
- (b) Possible consequences
 - She can get AIDS and STIs
 - She can get pregnant too early
 - She can be of bad influence to her brothers and sisters

Example 2

- (a) Avoid selling parents' properties
- Avoid stealing and smoking
 - Avoid early marriages
 - Should not go to town to find a job but continue with education
- (b) Possible consequences
- Madness
 - Imprisonment
 - Poverty/hunger
 - Become parent too young

PHASE II**Example 1 and 2**

- (a) You learn more ideas/things
- you are assisted to solve some problems
- (b) Yes
- you learn more things
 - you are assisted to solve some problems
- (c) Education
- problem solving
 - facts about HIV
 - religious issues
- (d) Dressing skills
- cash, background
 - education, behaviour, employment
 - appearance, culture, religion
- (e) Possible consequences of Mabvuto's behaviour
- madness
 - poverty/hunger
 - HIV/AIDS and STIs
 - Ignorance
 - Become a parent while young

PHASE III**Example 1 and 2**

- (a) It is shameful
 - you can be suspected to be a prostitute
 - you can spoil school reputation
- (b) Refuse – because you can become intoxicated and develop bad behaviours e.g.
 - smoking
 - prostitution
 - drop out from school
- (c) Ex1: Refuse to be employed in town. Ex 2: Refuse to have sex with her.
- (d) I could tell her the dangers of living in a bar.
 - become prostitute
 - can get pregnancy
 - can get HIV/AIDS and STIs
- (e) Ex 2: contracting STIs and HIV
 - unable to plan your future

PHASE IV (Sarah and Amina)**Example 1**

- (a) Yes
 - she could have learned bad behaviours
 - she could get HIV and STIs
 - she had already given some advice to Amina before going to the bar
- (b) she could also tell her parents and Amina's relatives
- (c) Themba was older than them

PHASE V (Sarah and Amina)**Example 1**

- (a) Yes
 - she would have become a prostitute
 - she would get HIV/AIDS
 - she would get early pregnancy
 - she would have married earlier
 - she would have been raped
- (b) Lessons learnt from this topic
 - youths have to listen to their friends' advice
 - youths have to be able to resist pressure
- (c) Youths have to be able to use decision making skills
 - children should not be allowed to visit pubs or play around pubs (bar)

PHASE VI (Mabvuto)

(a) No

- it brings poverty
- they used the money carelessly

(b) No

- they can get STIs and HIV and early pregnancies
- they fail to plan their future and might become
 - drunkards
 - prostitutes

(c) Refer to phase v, question 1 b (rape, being forced to drink alcohol, being involved in fights)

(d) Lessons learnt from Mabvuto's story

- youths have to be able to resist pressure
- youths have to be able to use decision making skills
- children should not be allowed to visit or work in bars
 - drinking/smoking
 - sexual behaviour
- orphans should not sell properties left by their parents as a way to earn a living because this could lead to bad behaviours (drinking and smoking)
- youths have to give a good example as peer educators

ENERGIZER (14:45-14:55)

The facilitator should do something to entertain the participants

ROLE PLAYS (14:55-15:30)

Members have to come up with role plays from the content discussed

COMMENTS AND SUMMARY (15:30-15:45)

2-7- BRIDGE MODEL LIFE SKILL

GOAL (13:00-13:10)

The purpose of this session is to review and evaluate if the participants did understand the life skills covered during the year and emphasise that information alone is not enough to make informed decisions and refrain from risky behaviour.

Specific objective

1. Explain the type of information they need to keep themselves safe from risky behaviour.
2. Describe problems young people face, and that block them from leading a positive and healthy life.
3. Demonstrate through role plays that information alone is not enough to avoid risky behaviour.
4. Describe life skills young people need to make informed decisions.
5. Explain the importance of life skills.

INTRODUCTION

ACTIVITY 1: GROUP WORK (13:10-13:25)

1. Explain the type of information young people need to keep themselves safe from risky behaviour
2. Mention problems that young people are facing that block them to lead a positive health life.
3. Mention some of the important life skills that young people need to make informed decisions.
4. Explain what young people should do to overcome the problems they face.

ENERGIZER (13:25-13:30)

SUMMARY (POSSIBLE ANSWERS) (13:30-14:00)

1. Some of the information young people need;

- HIV/AIDS and STIs
- Life skills
- Sexual reproductive health
- Sanitation and hygiene
- Counselling
- Parental guidance

2. Some of the problems young people are facing;

Sexual transmitted infections / HIV/AIDS

- Poverty / hunger
- Sexual abuse
- Child labour
- Harmful traditional, cultural practices
- Rejection by parents
- Unwanted pregnancy
- Peer pressure

3. Some of the important life skills that young people need to make informed decisions may include;

- Decision making skills
- Self-esteem & relationship
- Negotiation skills
- Communication skills

4. Some possible solutions to problems faced by youths

- Should join youth groups
- Practice life skills
- Resist peer pressure

ACTIVITY 2: ROLE PLAY (14:00-15:00)

Story or Role play creation

The trainer has to come up with a role play or story which has to keep the participants in real life situation and the role play should be linked with HIV/Aids and summarise the topic.

Sylvia, a Form 4 girl who dropped out of school due to early pregnancy, has been advising her friend, Lucy, to stay in school and to avoid boyfriends, sex, etc, before completing her education.

Jenipher is a Form 1 girl who is doing very well in class. Despite her friend's warning, she has fallen pregnant and has come to break the news to her friend.

Sylvia is sitting outside her house. She is rocking a baby in her arms. As she sits thus, she talks about how tiring nursing a baby is.

Jenipher walks up and shouts "Odi! Odi!" She is welcomed warmly by Sylvia and she is given 'mphasa' to sit on. She enquires after the baby's health and Sylvia tells her that the baby has been sick and has not slept through the night. The friends chat for a time before Sylvia ask Jenipher why she is not at school, but Sylvia changes the subject by talking about the baby. When Sylvia asks Jenipher again, she avoids the topic once more by asking about Sylvia's boyfriend, Innocent. Sylvia responds by saying that she

hasn't heard from Innocent since the birth of the baby. She has heard that he is now studying in the U.K, but he has never come to see her or the baby. Sylvia reminisces that she too, could have been in U.K for studies had she not fallen pregnant. She therefore reminds Jenipher how important it is to avoid boys and concentrate on school.

After asking for the third time why Jenipher is here on a school day, Jenipher says something like this: "my friend, do you remember the advice that you have been giving me?"

Sylvia responds by saying: "Of course I do! Don't make the same mistake that I did. Forget boys until such time that you are through with your education and could make mature decisions. Abstaining from sex is the best way to avoid getting pregnant or getting diseases – even HIV! And as I already told you, if you can not abstain, then use condoms." At this point Jenipher breaks down and starts weeping.

Jenipher, in tears, tells Sylvia that she is pregnant. This angers Sylvia and recalls all the advice that she had been giving Jenipher. Jenipher protests with facts like: "But he loves me! He has promised to marry me!" Sylvia reminds Jenipher of her own ordeal and that Innocent also promised the same things. She asks why Jenipher had sex with her boyfriend after all she had been told. Jenipher says that that was the only way her boyfriend said he could prove that she loved him. He threatened to otherwise leave her. Sylvia then asks why they couldn't use condoms and the answer she gets is that her church is against use of condoms and besides, her boyfriend refused to use them. Finally, in defence of herself, she says; "Well, why wait? Why not having a baby now? My boyfriend is going to be a doctor and I will be his wife! What is the difference if I finish school or not? Besides, there are no jobs these days!"

Stop the story. Make clear to the participants that Jenipher was exposed to much information to keep her safe from pregnancy, STIs, HIV / AIDS, yet she got pregnant anyway. Why?

The trainer now should **hang the poster of the blank bridge model**. Explain that young people are standing on top of all knowledge they need to keep themselves safe from the risky behaviour of life. Ask them to read with you the knowledge currently possessed by most young people (HIV / AIDS, information about STIs, family planning, etc.). Emphasize that even though young people have the knowledge, that does not mean that they do not engage in risk behaviour.

Now, draw attention to the other side. This is "Positive, Healthy Life" side of the Bridge. Tell the youths that, as teachers, trainers, counsellors, peer educators, we want them to use the knowledge that they have to live a stronger and healthier life.

- Show them the 'sea of problems,' where they can fall if they are only equipped with knowledge. Ask them what it can be: pregnancy, STIs, HIV / AIDS, drug addiction, death...
- The trainer has now to help the participants to find out what is missing. How can they go from one side to the other? How can youths use their knowledge to lead a better life? Try to refer to Jenipher and Rita's story with questions like 'What was Jenipher missing?'

What did she need to help her to use the information she had to make the right decision?
You have to guide the group.

- Each time someone gives a suggestion, it becomes a “plank” in the bridge. Keep brainstorming until the bridge is completed (there should be many, many ideas).

When the bridge is finished and all ideas are exhausted , explain to the group that these planks are ‘Life Skills’ , the tools a person needs to help translate the knowledge that they have into healthier behaviour and happier lives .

**ACTIVITY 3: FINAL SUMMARY OF THE TOPIC WITH THE BRIDGE GAME
(15:00-15:30)**

Information young people may have

- HIV & STIs facts
- Fear of pregnancy
- Religious & cultural beliefs
- Family planning
- Importance of education

Goal

Positive and healthy life

SEA

(without life skills they fall in the sea)

- death, HIV/Aids
- substance and drug abuse
- expelled from school
- violence, sex abuse
- early pregnancy & abortion

The trainer should hang the flip chart and ask the participants to mention the information young people need to keep themselves safe from risky behaviours. Emphasize that though they have that information / knowledge but without practicing life skills they can fall into the sea of risks like HIV, STIs and death, ask them to mention the important life skills they need so that they may not fall in the sea e.g. decision making skills. Explain that these life skills if practiced are planks that can build the bridge to a **POSITIVE HEALTHY LIFE**. Therefore these planks are life skills- tools a person needs to help translate the knowledge that they have into a healthier behaviour – positive healthy life.