Tuko Pamoja

A Guide for Peer Educators
This guide is made possible by the generous support of the American people through the United States Agency for International Development (USAID) to the Population Council for the Kenya Adolescent Reproductive Health Project (KARHP). The contents of this guide are the sole responsibility of PATH and do not necessarily reflect the views of USAID or the United States Government.

_Tuko Pamoja: A Guide for Peer Educators_ was developed by PATH and is part of the Kenya Adolescent Reproductive Health Project’s Tuko Pamoja (We are together) series. It is based on, and complements, KARHP’s Adolescent Reproductive Health and Life Skills Curriculum. This guide was developed by Stephanie Martin with significant input from Margaret Brawley, Irene Chami, Japeth Nyambane, Humphres Evalia, Eva Muthuri, Winnie Osulah, Rikka Transgrud, and Alfayo Wamburi. All illustrations are by Eric Muturi-Kioi and graphic design and layout was done by Gifted Hands, Ltd. Shelley Minton provided proofreading services.

Special appreciation is expressed to Alfayo Wamburi, Lidya Kerubo, Valarie Muma, Hazel Obat, and Robert Silali; the students and teachers from Kibos Sugar Research Primary school and Nyaboroba Secondary school; youth from Tuungane youth network centre Kibuye; and Marani division youth. Their contributions during pre-testing significantly enhanced this guide. We also wish to thank the Ministry of Education, Science, and Technology; the Ministry of Gender, Sports, Culture and Social Services; and the Ministry of Health for their continued support.

Copyright © 2007, Program for Appropriate Technology in Health (PATH). All rights reserved. Any part of this guide may be photocopied or adapted without permission, provided that the parts copied are distributed free or at cost (not for profit) and that credit is given to KARHP, PATH, and Population Council.

July 2007

**PATH**

ACS Plaza, 4th Floor  
Lenana Road  
P.O. Box 76634-00508  
Nairobi, Kenya  
Tel: 254-20-3877177  
kenyainfo@path.org  
www.path.org

**Population Council**

General Accident Insurance House  
Ralph Bunche Road  
P.O. Box 17643  
Nairobi, Kenya  
Tel: 254-20-2713480
## Contents

Using this guide ................................................................. 1
Who is a peer educator? ....................................................... 3

1. Getting started ............................................................ 6
2. Values .......................................................................... 8
3. Adolescence .................................................................. 10
4. Male reproductive system ............................................ 16
5. Female reproductive system ........................................... 18
6. Gender ....................................................................... 21
7. Sexuality ..................................................................... 24
8. Liking yourself ............................................................ 29
9. Good relationships ....................................................... 31
10. What is love? .............................................................. 33
11. Standing up for yourself ............................................... 37
12. Making decisions ........................................................ 39
13. Setting goals .............................................................. 41
14. Saying no to sex ........................................................ 43
15. Sexual violence .......................................................... 45
16. Why wait to have children? ......................................... 47
17. Preventing pregnancy ................................................... 49
18. Condoms .................................................................... 54
19. Sexually transmitted infections (STIs) ......................... 57
20. HIV and AIDS .......................................................... 61
21. Getting Tested for HIV .............................................. 66
22. Caring for people with HIV ........................................... 69
23. Stigma ....................................................................... 73
24. Managing stress ........................................................ 76
25. Managing anger and conflict ....................................... 80
26. Drugs ....................................................................... 83
References ..................................................................... 91
Using this guide

This guide will help peer educators share information and lead discussions with their peers on physical and emotional changes during adolescence, staying healthy, planning for the future, making good decisions, and preventing pregnancy and HIV and AIDS. This guide can be used to help facilitate discussions with peers and as a reference for peer educators to learn more about the different topics. The information in this book can be shared widely among students. However, not all material may be appropriate for younger students. Talk with your teachers to plan what subjects you will talk about in your groups. Also, talk with your teachers if you have any questions about any of the information in this book or need any more information.

This guide is divided into 26 different sections. Each section has the following parts:

**Objectives**
Objectives help peer educators stay focused during the section by thinking about what members of their group should be able to do after participating in that section.

**Session guide**
The session guide gives instructions for peer educators to follow when they are leading a discussion with their group. The session guide has questions that can be asked to get people talking about the topic.

**Activity**
Some sections have activities or games to play with your group. Activities allow group members to continue learning about a topic in a fun way.

**Background notes**
Peer educators should read the background notes before they lead a discussion with their peer group. Background notes can also be used to answer group members’ questions during a session.

**Main points**
There is a lot of information in the background notes section, and the information in the main points section helps peer educators know which is the most important. The main points list the information that group members should know when that meeting is finished.
Some sections can be talked about during one group meeting; others can be divided up and talked about during several group meetings. Peer educators can decide how much information they want to talk about at one time. It is normal for some topics to take longer and other topics to take less time. Each group is different and can do things in their own way and on their own schedule. Some topics will be more interesting to the group members than others and this is also normal. Also, feel free to do sections out of order. If group members are interested in a topic that is later in the guide, talk about it first and then go back to the other topics. It is better to talk about topics that are of the most interest to the group first. However, there are some topics that should be covered before beginning others. The graphic below shows different ways to plan when you will study different topics. If you have any questions about how to plan your topics, talk with your teacher.

**Everyone should begin with the session**

1. Getting started

The following sessions can be done at any time and in any order:

2. Values
6. Gender
8. Liking yourself
9. Good relationships
10. What is love?
11. Standing up for yourself
12. Making decisions
13. Setting goals
15. Sexual violence
17. Preventing pregnancy
18. Condoms
19. Sexually transmitted infections
20. HIV and AIDS
21. Getting tested for HIV

The following sessions should be done in order, but can be done in any order within each column. For example if you want to talk about HIV and AIDS. It is best to have talked about all of the topics in 1, 2, and 3 before you begin.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Adolescence</td>
<td>5. Female reproductive system</td>
<td>7. Sexuality</td>
<td>17. Preventing pregnancy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16. Why wait to have children</td>
<td>19. Sexually transmitted infections</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>20. HIV and AIDS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>21. Getting tested for HIV</td>
</tr>
</tbody>
</table>

This manual is very flexible and should be used in the way that works best for you and your group. If group members want to talk about HIV and AIDS and you have not talked about all six of the suggested sessions yet, you can decide to talk about HIV and AIDS first. Just be sure you have read all the background notes from the other chapters so you are able to answer group members’ questions that may come up.
Who is a peer educator?

A peer educator is someone who likes sharing information, leading talks, and supporting their friends and agemates. A peer educator is not a teacher and is not expected to know everything. Peer educators share information but do not tell others what to do. They do not judge or talk badly about peers to others. Peer educators help members of their groups talk about their thoughts, feelings, and experiences, and also help them think about how they will use the new information in their lives. Peer educators listen to others with interest and respect.

Qualities of good peer educators

- Friendly
- Honest
- Good listeners
- Respectful of others and people who are different from themselves
- Comfortable talking with a group and leading discussions
- Do not judge others
- Comfortable talking about issues related to health, relationships, growing up, and sex
- Want to help other people
- Interested in learning and sharing information
- Know when to ask for help
- Make good decisions and can help others to do so
- Admired by peers
- Supportive of others
- Will not talk about group members private information outside of the group

Facilitation

Peer educators must also be able to lead a group discussion. Below are tips to help with that.

How to lead a group discussion

- When a person talks, thank them for speaking. People like to feel that they have been listened to.
- Do not interrupt people when they are talking. If you must stop someone who is talking too long, be sure to apologize.
- Try to have as many different people talk as possible, one at a time. Encourage people to talk by saying, “Does anyone else have something to say?”
- Listen carefully when people are talking.
- When a person gives a very short answer to a question, you can encourage him or her to say more. You could say, “Can you tell us more about that?”
Making people feel comfortable

- Do not judge or embarrass people in front of others.
- Some topics may be difficult to talk about in a group. Be careful not to use words or movements that are offensive.
- Some topics may be emotional. Pay attention to people’s feelings.
- Look people in the eye and show that you are listening. You can do this by facing them, leaning forward, and nodding your head.
- People need to feel that their ideas are important. Thank people when they talk.

Sharing information

- Prepare for your talk before it begins. Review the session guide and background notes and think about what you will say or do. Try to avoid reading straight from this guide during a group meeting.
- Do not speak too quickly because it can be hard for people to listen and understand what you are saying.
- Do not speak too slowly because they may get bored.
- Look at your peers when you are talking. Even if you are reading the information, look up from time to time so that people do not feel ignored.
- If people seem confused, stop and ask them if they have any questions.

Asking questions

The kinds of questions you ask and the way you ask them can make people want to talk. Good questions are open-ended. This means that they cannot be answered yes or no; instead they need to be explained. Good questions often start with “what” or “how.” It is important to think about the kinds of questions you ask and how you ask them.

Responding to questions

In your peer education groups, people should be encouraged to ask questions. Remember:
- Listen carefully to understand why someone is asking the question.
- Do not answer too quickly. Take a moment to think about your answer.
- Repeat the question (to be sure that you understood it and that the group has heard it).
- Thank the person asking the question.
- Never make fun of someone who asks a question.
- If you do not know the answer to a question, admit it, and promise to look for more information.
- Ask another student, or the group, to answer the question or to give their opinion.
- Try to take questions from all members of the group.

Asking for help

It is important to ask for help when you need it. It is good to share your experiences and challenges with other peer educators. If a member of your group has a problem that requires help from an adult, act quickly by talking with a teacher, administrator, or other trusted adult. Asking for help shows that you are responsible and care about the members of your group.
Role play

In role plays, group members use their imagination to create and act out characters, conversations, and stories. Role play is a way to talk about experiences, feelings, and beliefs in a safe environment. Anyone can participate in a role play – it does not require any special skill or talent. In role plays people act out a scenario in front of a group. Group members volunteer to act as a certain character. If a person is acting it does not mean that they are like that character. In fact, girls can play the roles of boys, students can play teachers, and young people can play elders. All we need is our imaginations. Role plays are not like dramas. They are not practiced before and they should not last for a long time. Peer educators should never comment on the quality of the role play but instead they should thank people who volunteer. Role plays are a good way to explore a problem or situation on a certain topic. For example, group members can play the roles of a teacher and a girl and the teacher is offering to give the student a better grade if she has sex with him. The person playing the girl can think of what she would do in that situation.

Steps for a role play

1. Read a situation to the group.
2. Ask for volunteers to play the roles of the characters in the story in front of the other group members.
3. Ask the volunteers to act out the situation.
4. Ask group members to talk about the role play.
   - Do they agree with what the character decided to do?
   - Would they have done anything differently?
5. Ask for another set of volunteers to act out the same situation.
6. Talk about this role play and compare it to the one before.
7. Summarize the actors’ decisions and lead a discussion about the role plays. Ask group members:
   - Is what happened similar to what would happen in real life?
   - How will the decisions the actors made influence their lives?
   - Who else could the actors have turned to for help or advice?
1. Getting started

Objectives

By the end of this session, group members will be able to:

- List the ground rules for their group.
- Decide on topics for the first six meetings.

Background notes

You can use your first meeting to get to know the members of your group better. It is a chance for you to know what they hope to learn by participating in the group. This first meeting can also be used to decide on what topics group members are most interested in and help you to create a schedule of topics for your first several meetings.

The purpose of a peer education group is to give young people a place where they can talk openly about issues related to their health, relationships, and plans for the future. This group will focus on health topics, but there are many other areas that influence our health that can also be talked about in the group. For example, communication skills and goal setting can influence our relationships, our future, and our health, so it is important to learn skills that can help us to have a happy and health life.

Session guide

1. Once all of the members of your group have come together, ask everyone to sit in a circle.
2. Introduce yourself and explain why you wanted to be a peer educator and share your hopes for this group.
3. Ask each person to say their name and what they hope to learn from this group. Write down what everyone says about their hopes. After everyone has shared their hopes for the group, talk with them about whether or not their hopes are realistic. If it will not be possible to talk about a topic mentioned by someone in this group, explain why. Share the topics from this guide with group members so you can all decide which topics you will talk about during the first six meetings.
4. Ask group members to suggest and agree on rules for the group. For example, no one will talk about anything anyone says with people who are not in the group. Once all the suggestions are made, ask if everyone agrees with the rules. Write the rules on a piece of paper and remind group members of them as needed. Also talk about attendance, reminding group members how often you meet and that you hope they will commit to attending and participating.
Activity: Community treasure hunt

This is a fun game that you can play over a few hours or over a whole term. It can be done with your peer education group or with several groups, or even the whole school. Group members go around their community to collect information, signatures and other items. During play, group members will learn about useful resources in their community.

1. Ask group members to name places, people, and services in the community that are helpful to youths. They can name specific places or types of places. For example, health clinic, youth centre, pharmacy/chemist kiosk, library, school, social service centre, park, playing fields, natural attractions (beach, lake, forest), businesses and restaurants (with an emphasis on healthy foods, good value), newspapers, and bulletin boards.

2. Then ask group members to list unhealthy places, including high crime areas, bars where older people prey on youths, and places where drugs are used or fights break out.

3. The next step is to make a list with questions about each resource: how to get there, what is the cost, what services are available, how to make appointments, hours, safety concerns, supplies, other things to know (youth rights to buy condoms, which doctor is the friendliest).

4. Each player or team writes down the list of community resources and questions to be answered about each one. Players are required to get proof that they visited the place. They can ask for signatures or stamps from representatives, take a brochure, make a drawing, or write a few paragraphs to describe the place.

5. Announce the amount of time teams have to complete their lists — anywhere from a few hours to a few weeks, depending on the size and scale of the list and the community.

6. At the end allow all the teams to present the information they learned. The team who visited the most places wins. Lead discussions about the different community resources and give players a chance to share their findings.

7. Use the information teams have collected to create a booklet or posters so it can be shared with more people.
2. Values

Objectives
By the end of this session, group members will be able to:
• Define the word values.
• List values that are important to them.
• Explain how values affect behaviour.

Background notes
Values are:
• Things we believe in and are willing to stand up for.
• Beliefs, principles, or ideas that are important to us.
• Beliefs, ideas, and rules that guide our behaviour and lives.
• Things we support or are against (for example, I value a girl’s right to go to school or I value my decision to wait until I am married to have sex).
• Chosen freely, but often are influenced by our families, religious teachings, culture, friends, or the media.

Session guide
1. Facilitate a discussion by asking group members the following questions:
• What are values?
• Where do we get our values?
• What is one example of a value your family feels is very important?
• Which of your values come from your cultural beliefs?
• What is a national value that may be less important in other countries?
• Can you think of a value someone else has that you do not share? What is it?
• What are your values?
Main points
- Values are beliefs, principles, or ideas that are important to us.
- Our values guide our behaviour, decisions, and opinions.

Activity: Take a stand

Group members vote with their feet as they “take a stand” on different issues. Group members move to the side of the meeting space to show whether they agree or disagree with a statement.

1. Read a statement aloud and ask players to go stand to the right side of the space if they agree and the left side if they disagree. Remind group members that these are opinions so there are no right or wrong answers. After each statement, ask people from each side to explain why they agree or disagree.

After each statement and discussion ask group members to come back to the middle and read the next statement. You can also ask group members to each write one statement on a piece of paper and collect them and read those out. Ten to fifteen statements are enough.

Sample statements:
- Youths under age18 should not be allowed access to contraceptives.
- Boys should be allowed to have premarital sex but girls should not.
- A man loves his wife if he uses a condom with his girlfriend.
- A prostitute who gets AIDS deserves it.
- Only promiscuous girls buy condoms.
- HIV testing is a good idea.
- If a wife does something wrong, like burn the food for dinner, it is ok for her husband to hit her.
- Girls who wear short skirts are asking to be raped.
- I would be friends with someone who is HIV positive.
- Being faithful to one partner is easier for girls than boys.

2. After all of the statements have been read and discussed, ask group members the following questions:
- What values did you think about when you were voting?
- Were there any statements that you felt strongly about (either in agreement or disagreement)?
- How do our values influence our thoughts and feelings?
- Did you find that any of your opinions changed after listening to the other point of view?
3. Adolescence

Objectives

By the end of this session, group members will be able to:

- Define adolescence.
- List physical changes that happen to boys during puberty.
- List physical changes that happen to girls during puberty.
- List emotional changes that happen during puberty.

Background notes

Adolescence is the time in everyone’s life when they change from a child into an adult. This includes changes in our bodies and changes in our thoughts and feelings. Adolescence is the time between 10 and 19 years.

Puberty

Puberty is a time when the bodies of boys and girls change – bodies grow bigger and taller, sex organs mature, and hair often starts growing in new places. During puberty, a girl is able to become pregnant and a boy is able to father a child. New chemicals produced by the body, called hormones, create changes in the body and turn young people into adults.

Puberty normally starts between ages 8 to 13 in girls, and ages 10 to 15 in boys, although some young people start puberty a bit earlier or later. People are different, so everyone starts puberty at their own pace. During puberty, young people grow a lot. Puberty lasts for about 2-5 years. Some people grow 10 cm or more in one year! This growth during puberty is the last time the body will grow taller. When the growth period is over, young people will be at their adult height.

Body changes in boys

Boys’ shoulders grow wider, and their bodies become more muscular. Some body parts (especially hands and legs) may grow faster than others. Some boys have uncomfortable pains in their arms and legs as the bones grow faster than the muscles can stretch to keep up with them.

Some boys develop swelling under their nipples, which looks like the start of breasts. This is normal and it happens because of hormones that are active throughout the body. It will usually go away with time.

During puberty, boys will start to have erections and wet dreams. An erection is when the penis gets stiff and becomes bigger than usual. Boys can get erections sometimes when they do not want them.
A wet dream is when a boy’s penis becomes erect and he ejaculates when sleeping. There are other changes as well, like the penis becoming longer and wider and the testicles becoming bigger. These are all a normal part of growing up.

**Body changes in girls**

During puberty, girls’ bodies usually become rounder and more womanly. They gain weight on their hips, and their breasts grow, starting with just a little swelling under the nipples. Sometimes one breast might grow faster than the other, but over time the slower one catches up. Girls may have more fat on their bodies and may sometimes have pain in their breasts as they start to grow. This is normal. Gaining some weight is part of becoming a woman, and it is unhealthy for girls to go on a diet to try to stop this normal weight gain.

About one to two years after girls’ breasts start to grow, they usually have their first menstrual bleeding. Also, girls might see and feel a white or clear liquid from the vagina. This does not mean anything is wrong; it is usually just another sign of their changing body and hormones.

**Hair in new places and skin changes**

One of the first signs of puberty is hair growing in the armpits and on and around the sex organs. Young men also start to grow hair on their faces and chests. Acne (pimples or spots) often starts around the beginning of puberty and can remain all through adolescence. It usually gets better or disappears by the end of adolescence. Young adults should wash their faces each day with soap and water to keep their skin clean.

**Smells and sounds**

Adolescents will notice a new smell from under the arms and other places on the body. This smell is normal. The puberty hormones change glands in the skin, and the glands make chemicals that have a strong smell. Bathing or washing every day helps reduce this smell, and so do perfumes and deodorant. Boys may notice that their voices “break” and get deeper. Girls’ voices might also get a little deeper. Boys’ voices will stop breaking as they get older.

**Feelings**

During puberty, young people might notice a change in their thoughts and feelings and how they react to things. It is normal to feel worried or uncomfortable with how our bodies look and are changing. Losing tempers more than usual and getting angry with friends or family members happen more easily. It is common to feel sad sometimes. Young people should talk with adults they trust about any feelings of anger or sadness they may have.

During this time, it is normal to become more aware of the opposite sex and start to feel attracted to them. In boys, the main sign of sexual feelings is when the penis becomes hard. In girls, it is when the vagina becomes wet. Having sexual feelings is normal and is nothing to feel guilty about. However, having sex is a big responsibility. Sex can lead to pregnancy, HIV, and other sexually transmitted infections (STI). Having sex can also change how we feel about ourselves and our partner. It is a big decision and best to wait until we are older and ready.
### Physical changes

<table>
<thead>
<tr>
<th>Boys</th>
<th>Girls</th>
<th>Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shoulders broaden</td>
<td>Hips widen</td>
<td>Grow</td>
</tr>
<tr>
<td>Facial hair</td>
<td>Breasts develop</td>
<td>Gain weight</td>
</tr>
<tr>
<td>Voice deepens</td>
<td>Menstrual bleeding begins</td>
<td>Pubic and underarm hair</td>
</tr>
<tr>
<td>Sperm production and ejaculation</td>
<td></td>
<td>Sex organs enlarge</td>
</tr>
<tr>
<td>Wet dreams</td>
<td></td>
<td>Acne</td>
</tr>
</tbody>
</table>

### Emotional changes

- Sexual feelings
- Changes in mood (sometimes feeling happy then suddenly feeling sad or angry)
- Feel embarrassed easily
- Feel closer to friends than family
- Better able to solve problems
- Rebel against parents, want to feel independent
- Wondering if our bodies and feelings are normal
- Wanting to try new things

### Remember!

- All of these physical and emotional changes are normal.
- Everyone develops at their own pace; some earlier, some later. It is important not to tease others who may develop earlier or later.
- Young people often feel uncomfortable, clumsy, or embarrassed because of the changes in their bodies.
- Menstruation and wet dreams are normal.
- During puberty, a girl becomes physically able to become pregnant and a young boy becomes physically able to father a child.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - How do boys’ bodies change during puberty?
   - How do girls’ bodies change during puberty?
   - What are changes that happen to both boys and girls during puberty?
   - What emotional changes happen during puberty?

2. After discussing all of the questions, share the information from the Background Notes section. Below are answers to some common questions young people have about adolescence. Use these to answer any questions your group members may have.

Main points

- Adolescence is the time when people change from children to adults. It is from age 10 to 19.
- Puberty is the word used to describe how the body changes. During puberty girls are able to become pregnant and boys are able to father children.
- Adolescence is a time when many physical and emotional changes take place.
Common questions about adolescence & puberty

Is it normal for some boys’ and girls’ bodies to change earlier than others?
Yes, some boys start puberty as early as 10 years old, but others not until they are 14 or 15. Some girls start puberty as early as age 8, and others start when they are 13 or 14. If a girl does not start menstruating by the age of 16, she should see a health provider.

Why do some parts of the body mature more quickly than others?
During puberty, changes to our body usually happen in order. For girls, breasts begin to grow first; for boys, growth of the testicles is usually the first sign. Sometimes changes will happen in a different order and this is also normal.

Why do some boys have sore breasts during puberty?
Sometimes one or both of a boy’s breasts can be a little swollen or sore. This is normal, because during puberty we have more hormones in the body that are helping our growth and this can cause pain.

Why do some teenagers have skin problems?
During puberty hormones cause changes in our skin. Oil produced by the glands blocks skin pores and mixes with bacteria to cause pimples or spots. To help keep skin clear, we should wash our faces and hands often.

How long does it take for breasts to be fully developed?
It takes a different amount of time for each girl. If a girl’s breasts grow slower than other girls, it does not mean that her breasts will always be smaller. There is no connection between what size breasts will be and when they start to develop.

Do boys get a period?
Boys do not get a period, or menstruate, because they have a different reproductive system than girls. Menstruation is the breaking away of the lining of the uterus – the place where a pregnancy develops. Since only women have a uterus, only women have periods.

What is the normal length of the penis?
Penises do not have a normal size, shape, or length. Some are fat and short. Others are long and thin. There is no truth to the idea that a bigger penis is a better penis.

Is it normal to have one testicle hanging lower than the other one?
Yes. Most men’s testicles hang unevenly.

Is it a problem for the penis to curve a little bit?
It is normal for a boy or man to have a curving penis. It normally becomes straight during an erection.
How does a girl know when her period is about to start?
Most girls get their first menstrual period between the ages of 12 and 14. Some may start earlier and others may start later. The best way a girl can know is to look for signs. Underarm hair and a whitish discharge from the vagina are signs that the period probably is not too far away.

What if a girl’s period never starts?
Periods will start sooner or later. However, if a girl reaches age 16 and has not yet had her first period, she should visit a health provider.

Can a girl get pregnant when she has her period?
Yes. If a woman has a short cycle – 21 days from first day to last day – then she is ovulating on day seven of her cycle (the seventh day from the first day of her period). Because some periods last seven days, it is possible that her period is ending when she is ovulating.

Can a girl get pregnant the first time she has sex?
Yes. It is possible to get pregnant each and every time one has unprotected sex, even if it is the first time.

Does menstruation hurt?
Some young women feel some cramping in their stomachs before and during their monthly period. This pain is usually not a serious problem and can be treated with panadol or other pain relievers, exercise, a hot shower/bath, or a hot water bottle. Sometimes the pain is worse than other times. A young girl may also experience back pain, headaches, vomiting, and not being able to go to the toilet. The pain usually lasts just two or three days at the beginning of the period. Period pain is usually worse during adolescence and may become less as the young woman becomes an adult.

What are hormones?
Hormones are special chemical messengers that tell your body how and when to change and to grow. We have many different kinds of hormones. Our bodies are always making hormones. For example, growing much taller during adolescence is caused by a growth hormone, which is released by the brain. Sex hormones also start to be released during puberty. For girls, the sex hormones are produced in the ovaries, and for boys, they are produced in the testicles. These sex hormones cause the difference between the shape of men’s and women’s bodies. Other hormones control the menstrual cycle or help maintain and support a pregnancy.
4. Male reproductive system

Objectives

By the end of this session, group members will be able to:

- List the main organs in the male reproductive system.
- Explain how sperm is produced and ejaculated.

Background notes

Under the penis there is a small bag of skin containing the testicles. There are two testicles and they produce sperm and testosterone. Testosterone is the male sex hormone. Testosterone makes pubic hair grow and boys’ voices become deeper. Semen is the fluid that carries the sperm. Sperm makes babies when it joins with women’s eggs. Most of the time sperm is inside the body. There is only one way sperm can get out of the body, which is through the hole at the end of the penis, called the urethra. When the penis is soft, that hole is used to urinate; when it is hard, it is used to release semen.

An erection is when the penis fills with blood and becomes hard and straight. This happens when a boy is sexually excited. Erections happen sometimes as boys dream and think about sexual things, or sometimes for no reason at all. Boys do not have any control over when this will happen. It is very common for boys to wake up with an erection in the morning. While asleep at night, a boy’s penis will probably become erect and then go down about five to seven times. This is completely normal and healthy. Having erections is not a sign that a boy needs to have sex.

When the penis is erect, a boy will find that he cannot urinate easily because a muscle closes off the bladder. He will have to wait until the erection goes down before he can urinate. Ejaculation is when semen comes out of an erect penis due to sexual excitement. A man does not have to ejaculate every time he has an erection. If he waits, the erection will go down on its own.

When a boy begins puberty, the semen is usually slightly clear or slightly yellow. As the boy grows into an adult, he begins making a large amount of mature sperm, and his ejaculation will become whiter. Boys are not born with sperm; they begin to produce them during puberty. Men produce sperm their entire life. If the sperm is ejaculated into the woman’s vagina, she may become pregnant. The semen can also carry diseases that could infect another person.

A wet dream is when a boy’s penis becomes erect, and he ejaculates while sleeping. This causes the boy’s underwear or the bed to be a little wet when he wakes up. If a boy does not know about wet dreams, he could be worried or confused. Wet dreams are completely natural and normal. A boy cannot stop himself from having wet dreams.
Main points
Sperm is produced in the testicles. Sperm leaves a boy’s body through the hole at the end of the penis. Semen is the fluid that carries sperm.

Session guide

Activity: Body Mapping

1. Ask for a boy to volunteer to lie down on a large piece of newsprint or pavement. Have another volunteer draw around his body using a pen or chalk so there is an outline of a boy.

2. Ask all group members to talk about and draw the following body parts: eyes, nose, mouth, heart, lungs, and stomach.

3. Ask group members to draw the male reproductive organs (where sperm are produced, where the sperm travel through, what is used for sexual intercourse).

4. As people are drawing, do not make any comments or correct any mistakes.

5. Ask for a volunteer to present the drawing and explain the different parts.

6. After the group has talked about the drawing, show them this picture of the male body and reproductive system. Ask them if their drawing looked like this one and if there is anything they would like to change.
5. Female reproductive system

Objectives

By the end of this session, group members will be able to:

• List the main organs in the female reproductive system.
• Explain the process of menstruation and fertilization.

Background notes

The female sex organs that are on the outside of the body are called the vulva. The vulva includes the two folds of skin called the labia, the clitoris, and the vagina.

The labia have two sets of rounded folds of skin called the outer and inner lips. The labia cover and protect the vagina. The inner and outer lips come together in the pubic area. Near the top of the lips, inside the folds, is the clitoris, which is small and round. The clitoris is made up of the same type of skin as the tip of the penis and is very sensitive. The clitoris has no other function than to help a woman have sexual pleasure. The urethra is a short tube that carries urine from the bladder to the outside of the body. The opening to the urethra is very small, and can be hard to find by touch or sight. It is right above the opening to the vagina.

The vagina is below the urethra. Menstrual blood and babies come out of the vagina. The vagina is the place where a man puts his penis during sexual intercourse. The vagina can stretch wide enough to allow a baby to pass through.

Every female is born with thousands of eggs in her ovaries. The eggs are so small that they cannot be seen by the naked eye. Once a girl has reached puberty, a tiny egg matures in one of her ovaries and then travels down a fallopian tube on its way to the uterus. This release of the egg from the ovary is called ovulation. The uterus prepares for the egg’s arrival by developing a thick and soft lining like a pillow. If the girl has had sex in the last few days before or the day after she ovulates, by the time the egg arrives in the fallopian tube, there might be some sperm waiting to come together with the egg. When an egg comes together with the sperm this is called fertilization. Then the fertilized egg travels to the uterus, and attaches to the lining of the uterus. This is called implantation and is when a pregnancy begins. If the egg is not fertilized, there is no pregnancy and the uterus does not need the thick lining it has made to protect the egg. It discards the lining, along with some blood, body fluids, and the unfertilized egg. All of this flows out of the vagina. This flow of blood is called the “period” or menstruation and usually leaves the body slowly over three to seven days every month.
Menstruation and ovulation

Menstruation happens for most women about once a month, and that is why it is commonly called the “monthly period.” It usually lasts between three and seven days. It is a sign that a girl or woman can become pregnant any time she has sexual intercourse. Menstruation stops when women are pregnant and breastfeeding.

Just as some girls begin puberty earlier or later than others, the same is true for periods. Some girls may begin to menstruate as early as age 9 or 10, but others may not start their period until a few years later. A woman knows that she has started her period when a little blood comes out of her vagina. The blood does not come out like water from a tap. It comes out slowly, like a dribble. Usually by the time she has noticed a feeling of unusual wetness, her panties have absorbed any blood that has come out. It is important to know when she will start her period each month so she can wear a sanitary pad or other protection to prevent the blood from staining her clothing.

The amount of blood that comes out of the vagina is different for each woman. Usually, an entire period only has a few to several spoonfuls of blood. The blood often starts off as a brown colour and then gets redder. It lightens to a brownish colour again until it stops. The amount of blood can also be different from day to day, some days there will be more blood than others.

The menstrual cycle is the period of time beginning on the first day of a woman’s period until the day before she begins her next period. Since this happens regularly, it is called a cycle. The length of the menstrual cycle (the time between one period and the next) is different for each woman. For some, the cycle is as short as 21 (or even fewer) days. For others, it is as long as 35 days or more. Irregular periods are common in girls who are just beginning to menstruate. It may take the body a while to adjust to all the changes taking place.

For example, a girl may have the same length cycle for two months, then miss a month, or have two periods with fewer days in between them. Her menstrual cycle will probably become more regular, although she may continue to have irregular periods into adulthood. Sometimes she might have some spotting of blood for a day or two in the middle of her cycle. This is usually nothing to worry about. It is important to note that a regular menstrual cycle can become irregular with stress or infections.

Ovulation is the release of an egg from the ovary. The time from ovulation to the next period is 12 to 16 days and is controlled by hormones. The two weeks or so before ovulation and the two weeks after make a menstrual cycle about four weeks or a month in length.

Girls can sometimes notice a whitish liquid on their underpants or feel wetness. Girls often notice this liquid around the time of ovulation, when the body is ready to receive and nurture a fertilized egg. This liquid helps sperm travel through the uterus to meet the egg to become fertilized. Paying attention to vaginal liquid helps girls understand their bodies. Knowing what is normal for the body helps girls know when things are not normal. For example, yellow or strong-smelling liquid is not normal. This can be a sign of infection, and she should visit a health worker.

Menopause

Menopause is when a woman’s menstruation ends. It ends because the hormones that cause eggs to mature in her ovaries stop. When this happens, women can no longer become pregnant. Menopause usually happens when women are around age 45. But, menopause can take place earlier or later than this. Some women may stop menstruating when they are 35 and some not until they are over 50.
Main points

Menstrual blood and babies come out of the vagina. The vagina is the place where a man puts his penis during sexual intercourse. The vagina can stretch wide enough to allow a baby to pass through.

Ovulation is when an egg travels from an ovary down a fallopian tube to the uterus. The uterus develops a thick and soft lining. If the girl has had sex a few days before or the day after she ovulates, there might be some sperm waiting to come together with the egg. When an egg comes together with the sperm this is called fertilization. Then the fertilized egg attaches to the lining of the uterus. This is called implantation and is when a pregnancy begins.

If the egg is not fertilized, there is no pregnancy and the uterus discards the lining, along with some blood, body fluids, and the unfertilized egg. All of this flows out of the vagina slowly over three to seven days. This is called menstruation.

Session guide

Activity: Body mapping

1. Ask for a girl to volunteer to lie down on a large piece of newsprint or pavement. Have another volunteer draw around her body using a pen or chalk so there is an outline of a girl.

2. Ask all group members to talk about and draw the following body parts: eyes, nose, mouth, heart, lungs, and stomach.

3. Ask group members to draw the female reproductive organs (where the egg matures, where egg and sperm unite, where a baby grows, where sex occurs).

4. As people are drawing, do not make any comments or correct any mistakes.

5. Ask for a volunteer to present the drawing and explain the different parts.

6. After the group has talked about the drawing, show them this picture of the female body and reproductive system. Ask them if their drawing looked like this one and if there is anything they would like to change.
6. Gender

Objectives
By the end of this session, group members will be able to:
• Explain the difference between sex and gender.
• Describe how gender roles can be harmful.

Background notes
Each person is born with a girl’s body or a boy’s body. These differences determine a person’s sex. Sex is the word to describe a person as a male or a female. The following things determine whether a person is a male or a female:
• Type of sex organs (penis, testicles, vagina, womb).
• Type of hormones in the body.
• Ability to produce sperm or eggs.
• Ability to give birth and breastfeed children.

Gender is not the same as sex. Gender is the ideas and expectations people have about men and women. These include ideas about what is considered feminine and masculine and how men and women should behave. A person’s gender is complicated, and is made up of roles, duties, appearance, speech, movement, and more. Ideas about gender are learned from family, friends, teachers, religious leaders, advertisements, the media, and community leaders.

What are gender roles?
Gender roles are the kinds of activities that a community considers appropriate for people because of their sex. Each community expects women and men to think, feel, and act in a certain way, simply because they are women or men. In most communities, for example, women are expected to prepare food, fetch water and fuel, and care for their children and husband. Men are often expected to work outside the home to provide for their families and parents in old age, and to protect their families from harm. Gender roles can make us feel like we have to act a certain way or do certain things because of our sex. Gender roles are not necessarily correct; girls can do the things boys do and boys can do the things girls do. Gender roles are always changing. We do not need to obey gender roles. We can do what we want to do and be who we want to be.

How gender roles are learned
Gender roles are passed down from parents to children, as well as learned from other family members and people in the community. From the time we are very young, parents treat girls and boys differently – sometimes without even knowing it. As we grow up, we often accept these roles because we want to please our parents and community. Gender roles can help us to know who we are and what is expected of us, but gender roles can also limit the choices we have and activities we can participate in. These limitations can make people feel bad and unimportant.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   • What are things that only men are expected to do? Why don’t women do them? Are they not able to? Could they do them if they wanted to?
   • What are things that only women are expected to do? Why don’t men do them? Are they not able to? Could they do them if they wanted to?
   • How would you define gender?
   • What do we mean by gender roles? What are some examples?
   • How do gender roles affect your life in a good way?
   • How do gender roles affect your life in a bad way?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

• Gender means the ideas and expectations people have about men and women, including what is considered feminine and masculine and how men and women should behave.
• Gender roles are the ways women and men are expected to think, feel, and act by their families and communities.

Gender activity

Read the three stories below, one at a time.

After each story ask group members to come up with a solution to the problem. Allow several group members to share their ideas about how to solve the problem before reading the next story. For each of the stories, be sure that group members are giving good advice. Allow them to share their ideas as they start discussing the problem, but in the end the group should agree on advice that challenges gender roles but should also be realistic.

1. Julia has been offered a place at the polytechnic to study masonry. She is the only girl in the class and the boys are always teasing her about a girl trying to do a man’s job. When she scored higher than the boys in the exams, the boys stopped talking to her. She is feeling sad because she has no friends in the class. What should Julia do?

2. Jesse wants to make a doll for his younger brother, but his friend Joseph says “No way!” Jesse explains that dolls help teach boys to take care of someone, but Joseph argues that they just teach boys to be cowards. Jesse knows he is right but he’s worried about what Joseph might say to their friends. What should Jesse do?
3. Owen has been Carole’s boyfriend for six months. Both just finished Form 4 and will be going to university in different parts of the country. Owen has told Carole that he wants to show her how much he loves her before they part. Carole has heard about the importance of safe sex. She asks her friend Mary to go with her to the chemist to buy some condoms. Mary tells her that girls shouldn’t buy condoms; it’s the boy’s duty. What should Carole do?

Gender game: An alien has landed!

Group members explain the differences between men and women to a visiting alien.

Materials: Flip-chart paper, markers, and masking tape.

1. Explain to the group that an alien landed at their school. It came to visit Earth and to know its people. It was confused, because it had heard that there were men and women on Earth, but it was not able to tell the difference.

2. Ask the group to list all of the things that men and women have in common and why the alien could be confused.

3. Ask the group to list all of the differences between men and women. Draw a line down the middle of a large piece of paper or a chalkboard. On the right side, write the word man; and on the other side, the word woman. Write all the ideas given by the group members.

4. When the list is finished, tell them that the alien wants to know which of all the ideas won’t change through time or place. Underline all ideas that apply.

5. Use the differences that are underlined to define the word sex (physical and biological differences between males and females) as those things that don’t change through time or place. Then define gender as the ideas and expectations people have about men and women that are influenced by culture.

6. Lead a talk by asking group members to answer these questions:
   • How would you explain the difference between sex and gender?
   • What items on our gender list do you think are different in other cultures?
   • Was there anything on the list that you were surprised was a part of culture, not nature?
   • Which gender differences are the most harmful to women? To men?
   • Which gender differences are harmless?
   • If you could change one gender difference, what would it be, and why?
   • How could you change people’s beliefs about gender? For example, if a father believes his daughter should not go to school because girls should work at home, what would you say to him?
   • What can you do to change gender roles in your family? In your school? In your community?
7. Sexuality

Objectives
By the end of this session, group members will be able to:

• Define sexuality.
• Describe how to be sexually healthy.
• Explain how to set limits for sexual activity.

Background notes
Sexuality can be complicated to understand. Sexuality includes our thoughts and feelings about sex, feeling attractive, being in love, religious and cultural views on sexual activity, feelings about a changing body during adolescence, sexual dreams, crushes, hugging, kissing, touching, how we define what is male or female, how we love, and being physically close in other ways. Just like there are many parts that make up our personality, there are many parts that make up sexuality. Our culture, traditional beliefs, and gender roles play an important part in defining what we consider normal sexual feelings and behaviour for men and women.

What is sex?
Sex is a word used to describe whether a person is male or female, but sex is also used to talk about sexual intercourse. Sexual intercourse is when a penis goes into the vagina. Other sexual activities are oral sex, when a person touches their partner’s genitals with their mouth, and anal sex, when a penis goes into the anus. All of these sexual activities can put people at risk for HIV and other sexually transmitted infections. Sexual intercourse puts a girl at risk for pregnancy. Sex is both emotional and physical. In addition to physical risks, there are emotional risks. Sex is attached to many emotions, and after sex people can feel disappointed.

Sex should be between two people who respect and care for each other. Sex is an emotional act. It should feel good to both people. Sex should not be used as a reward or to get something from someone. Sex should be agreed on by both people. If one person says no or stop, then it should stop. No one should be forced to have sex.

Being sexually healthy
There are things we can do to be sexually healthy. We can learn as much as possible about sex and reproduction. Most importantly, we can take the time to think about choices related to sexual activity. One of our choices is to say no to sex. When we decide to have sexual intercourse, we can remain faithful to one partner, as well as protect ourselves from pregnancy and infections.

Most people feel shy or even embarrassed about some aspects of sexuality and may not want to ask questions or talk about changes in their bodies. It is important to know that these feelings
are completely normal. Many young people also feel guilty, ashamed, or bad about their sexuality. If you feel guilty feelings, ask yourself if what you are feeling guilty about is something that is harmful (or could be) to yourself or others. If it is not, then let go of the guilty feelings.

Sometimes it is hard to remain sexually healthy. We are not taught in school or at home what this means. Most young people get their information from friends, older brothers or sisters, music, and magazines, which can be incorrect and confusing. An important part of healthy sexuality is being able to tell the difference between sexual behaviours that are healthy and those that are harmful. Before acting on sexual feelings, it can help to think about what could happen if you do something.

We can ask ourselves:

- Will I or anyone else be put at risk for unwanted pregnancy, HIV, or other sexually transmitted infections (STI)?
- Will acting on my sexual feelings cause any other problems, such as misunderstandings or miscommunication in our relationship?
- Will it make me or my partner feel uncomfortable?
- Will anyone’s feelings get hurt?

Being sexually healthy means taking the time to think about these things before acting on sexual feelings. Being sexually healthy also includes our emotional health. Sex is attached to many emotions. Sometimes you might want to have sex to feel closer, but you can end up feeling disappointed.

**Setting limits**

Some people think sex is a powerful and uncontrollable force that just happens, like lightening, but having sex is a decision. When people have sex it is not nature overcoming them. It is people making a decision. We have control over our bodies. People make many decisions about sex: When? With whom? Why? Where? How often? With a condom? Without?

Sex is a big decision. It is important to make sure it is your own decision. Ignore those other people who say, “Everybody is having sex.” “Everybody” is not having sex. In fact most adolescents have not had sex.

When deciding whether or not to have sex, it is important to think about if you are ready to use a condom correctly every time you have sex, if you are willing to go for HIV counselling and testing, if you know how to prevent pregnancy, and more. Most adolescents are not ready to handle all these responsibilities. If you are not prepared to deal with the consequences of having sex, then you should not have sex.

It is important to remember that we are the ones responsible for the decisions we make, especially about sex and sexual intercourse. It is up to us to protect our own bodies and make choices that help us to stay healthy.

**Deciding to have sex**

Deciding when it is the right time for you to have sex is one of the most important decisions you will make. Each person must use his or her own judgment and decide when it is the right time and the right person. Knowing when it is the right time is something that only you and your partner can decide.
Many personal and moral questions are involved. Are you both committed to each other and willing to do what is best for the other? Are you both ready to take responsibility for any consequences of having sex, including emotional consequences? How does this decision correspond to the values you each have or were raised with?

If you are not sure, it means you are not ready. Many people look back and regret the decision to have sex early. Very few regret having waited.

It is important to remember that sex involves many emotions for both partners as well as several health risks, like HIV, other sexually transmitted infections, and pregnancy. If you do decide you are both ready to have sex, use a reliable form of birth control as well as condoms to protect against infections. You will be safest if the male uses a condom each and every time, and the female uses a second reliable method of birth control.

Session guide

1. Facilitate a discussion by asking group members the following questions:
   • What is the difference between sex and sexuality?
   • What is the difference between feelings and behaviours? Do our feelings influence our behaviours?
   • Can feelings of sexuality lead to sexual behaviours? Do they have to?
   • What does it mean to set limits on sexual activity? How can we do this?
   • What should someone think about before having sex?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

• Sexuality includes thoughts and feelings about sex, feeling attractive, being in love, feelings about puberty, sexual dreams, kissing, touching, how we love, and being physically close in other ways.

• To be sexually healthy we should learn as much as possible about reproduction and sex and think about our own choices about sexual activity.
Activity 1: Setting sexual limits

1. Ask for two volunteers to act out the roles of Robert and Agnes.

Robert: Agnes, we have known each other a long time. You know I have always liked you. It would be so nice to have sex with you.

Agnes: Robert, I know myself and I am not ready to have sex.

Robert: What do you mean? Now is a good time to try it. I will even take you out for a treat after.

Agnes: This may be a good time for you, but it is not the right time for me. I want to wait.

Robert: Ok, that’s fine, if that is what you want. But you don’t know what you are missing.

2. After the role play ask the group: What else do you think Agnes could have said to Robert?

Some examples could be:
- I will not trade my body for a treat!
- I do not want to become pregnant.
- I am not even in love with you.
- I don’t want to get HIV, or other STIs.

3. Ask the group: Have you heard of boys or men in your community acting like Robert? Can you tell us what happened?

Activity 2: Setting sexual limits

1. Explain to your group that you will read a situation to them and they will turn to the person sitting next to them to decide what advice they would give to the characters in the situation. We will discuss two different situations.

Situation 1

Your friend Margaret has a boyfriend named Daniel. Margaret tells you that Daniel is pressuring her to have sex. Daniel says that he loves Margaret and that sex is a natural thing to do when two people love each other. Daniel says that Margaret has to have sex with him or he will get a new girlfriend who will. Margaret does not feel ready for sex, but she likes Daniel and does not want to lose him.

2. Explain to the group: You and your partner have 2 minutes to talk about what advice you would give Margaret.

3. Ask the group to come together and ask for 3-4 volunteers to share the advice they would give Margaret.

4. After discussing the different options, read situation 2.
Situation 2
Your friend George has a girlfriend named Susan. George tells you that Susan is telling him that she wants to have sex. Susan says that all of her friends are having sex and she does not want to be the only one who hasn’t. George does not feel ready to have sex.

5. Explain to the group: You and your partner have 2 minutes to talk about what advice you would give George.

6. Ask the group to come together and ask for 3-4 volunteers to share the advice they would give George.

7. After discussing the different options, ask the group if there is any difference between the advice given to Margaret and George. Is there any reason why it might be harder for George to want to delay having sex?
8. Liking yourself

Objectives
By the end of this session, group members will be able to:

- List things they like about themselves.
- Describe ways to feel better about themselves when others put them down.

Background notes
How we feel about ourselves can influence the kinds of decisions we make. Adolescence is a time when we have to make many decisions and it is important we make decisions that are best for us and our futures. When we feel good about ourselves, we make decisions that help us to have a happy, healthy, and productive life. You should be proud of your abilities and the things that you are good at.

It is normal to have things about ourselves that we are not happy with or would like to change. It is important to remember that we have many good qualities that we like about ourselves and that others like about us. When you are feeling down about something about yourself, try to think about things that you like and are proud of.

Imagine that we are born with an empty treasure chest. As people love us, say nice things about us, appreciate us, play with us, and learn with us, we build up our treasure. As people say bad or mean things about us, shout at us, and put us down, we lose our treasure. As the put-downs build up, the treasure chest can lock and keep us from feeling good about ourselves. To keep the treasure chest open, it is important for us to think about all of the things that we like about ourselves and feel good about.

Session guide
1. Facilitate a discussion by asking group members the following questions:
   - What do you think is your greatest personal achievement to date?
   - What do you like most about yourself?
   - What are two things about you that your friends most admire?
   - What are the three things you are good at?
   - What is one thing you would like to improve about yourself?
   - If you died today, what would you most like to be remembered for?

2. After discussing all of the questions, share the information from the Background Notes section.
Main points

- It is important for us to think about all of the things that we like about ourselves and things that make us feel good about ourselves.
- It is normal to have things that you would like to change about yourself. When you are feeling bad about these things, think about ways you can change them or other things that you are happy about.

Activity

Ask each group member to sit on their own and write 10 sentences about themselves. The first sentence should start, “I am” and then continue with sentences that describe who they are. The sentences should focus on things they like about themselves and things they are good at. Tell them that they are writing this for themselves and we will not share them with others. When everyone has finished, ask them how it felt to think about things that they were good at and like about themselves.
9. Good relationships

Objectives

By the end of this session, group members will be able to:

• List qualities of a good relationship.
• Describe ways to make a relationship healthy.

Background notes

Good relationships are based on love, respect, honesty, and good communication. In a good relationship, both people are honest with each other. Both people feel safe in the relationship and do not worry that the other will betray his or her trust. Both people find enjoyment and pleasure in the relationship, and neither person tries to control the other person or make them do things that they do not want to do. Neither person takes advantage of the other. The best relationships result from both people contributing all of these qualities. But many relationships are far from perfect. The healthiest ones are those that people work to develop, and those that are based on respect, responsibility, understanding, cooperation, caring, and good communication.

Respect: To respect another person means to honour them, think well of them, and to treat them as if they are important even if they are different from you.

Responsibility: To be responsible means that others can depend and rely on you, you do what you say you will do, and you know the difference between right and wrong. For example, you take responsibility for taking care of your own health and that of your partner and your family.

Understanding: To be understanding means to be knowledgeable about another person, to try to relate to his or her feelings, or to listen and support someone. It means trying to understand what life is like for someone else.

Cooperation: To be cooperative means to work with someone to have a good relationship, and not take the other person for granted.

Caring: To be caring is to be concerned and interested in another person’s feelings and needs, and to want what is best for that person. It means feeling love or a liking for a person and wanting to protect that person.

Good communication: Being able to express your thoughts, feelings, preferences, dreams, and goals, as well as listening to the other person when they express themselves.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is a relationship?
   - What qualities are most important to you in relationships?
   - How can we make sure our relationships have these qualities?
   - How would you feel about a friend who did not respect you? Who did not put much effort into the relationship? What could you do?
   - How would you feel if a parent or guardian didn’t understand you? What would you do to improve the relationship?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Good relationships are based on respect, being responsible, understanding, cooperation, caring, and good communication.
- If someone truly loves you they will listen to what you want and not try to talk you out of it.

Activity: Relationship role play

1. Ask group members to give examples of situations where a parent or friend did not respect them.

2. Once you have four different examples, ask for volunteers to play the roles of the characters in the first situation, acting out how they would respond to someone treating them that way.

3. After the volunteers have acted out the situation, ask group members to talk about the role play.
   - Do they agree with what the character decided to do?
   - Would they have done anything differently?
   - How could the relationship be improved?
   - Is what happened similar to what would happen in real life?

4. After talking about the first role play, repeat the steps above with the other situations.
10. What is love?

Objectives

By the end of this session, group members will be able to:

- Explain the difference between love and attraction.
- Name qualities they would want in a boyfriend or girlfriend.

Background notes

Love is a feeling that can be hard to explain and can mean different things to different people. To most people, love means a deep feeling of liking, attraction, respect, caring, and understanding for another person, even with their weaknesses. It is important to remember that sexual intercourse is not necessarily a way to show you love someone. Having sex does not mean that two people are in love or will fall in love. Remember, love is about respect and caring for each other. Love is never a good reason to do anything that puts your health and future at risk.

Good friendships and relationships help people feel good about themselves. Good friends help with problems and share dreams for the future. Good friends can be people of the same sex or people of the opposite sex. Boys and girls, men and women, can be good friends without having a sexual relationship. The words “boyfriend” or “girlfriend” do not necessarily mean that the relationship is a sexual one. Two people can have a close and loving relationship without sex.

Getting along with the opposite sex can be difficult and confusing because many men and women are not sure what the other wants in a relationship. Remember, most people want the same thing in a relationship. They want respect, trust, honesty, understanding, and caring. Building a good relationship takes time and patience. Sex is not a good way to build a close relationship. Having sex does not mean that two people love each other or that they are close. Sex without true friendship is dangerous for a person’s health and heart.

Two people can spend time together and become very close without having sex. By talking and sharing experiences, they can learn important things about each other. They can learn how each views life, how they would make decisions together, what kind of partner and parent each person would make, and how each feels about the other’s plans for life. Touching each other (without sexual intercourse) can be satisfying by itself and is not dangerous as long as it does not lead a person to lose control and to have sex before he or she is ready.

It can take a long time to develop a good relationship, but one of the most important things in a relationship is good communication. In order to
understand and care for each other, people need to be able to talk with each other and make their feelings understood. By talking to each other and being honest about their feelings, two people might discover that neither one really feels ready to have a sexual relationship. They might find that both of them want to wait until they are sure it is the right time.

Sex is an act you can control. Sex does not equal love, but sometimes people will use this idea to pressure you to have sex. If someone really loves you, they respect you, want you to protect you, and want you to be happy. If someone really loves you, they will not pressure you into sex. If you say no, they will listen to you and accept that.

**Love and attraction**

Love is a word that is used often but people do not talk about what they mean by love. It is normal to mistake being attracted to someone for being in love with someone. We can feel a very strong attraction and think it must be love. This can get us in trouble, because being attracted to someone is not the same as having a caring and loving relationship with someone.

This table helps to show the difference between loving someone and being attracted to someone.

<table>
<thead>
<tr>
<th>LOVE</th>
<th>ATTRACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>It happens slowly as people spend more and more time together</td>
<td>It happens suddenly after two people meet</td>
</tr>
<tr>
<td>Each person respects the mind and body of the other</td>
<td>Is based on how a person looks</td>
</tr>
<tr>
<td>It is based on knowing each other well</td>
<td>There is a focus on touching and feeling good</td>
</tr>
<tr>
<td>It thinks of the other person, wants to protect him/her and does things to make him/her happy</td>
<td>Each person does not need to know a lot about the other</td>
</tr>
<tr>
<td>It is trustful, calm, secure, hopeful, and self-confident</td>
<td>It can make the other person jealous and also not feel very good about him/herself</td>
</tr>
<tr>
<td>It lasts for a long time</td>
<td>It can change quickly</td>
</tr>
<tr>
<td>Understanding of peoples’ weaknesses and mistake</td>
<td>May not accept flaws or mistakes</td>
</tr>
</tbody>
</table>

It is important to understand the difference between being in love with someone and being attracted to someone, especially when deciding to have sex with someone. When it comes to sex, remember that you have control over your own body; and you have a lot of time to wait until you are totally sure that you are ready.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is love?
   - What is attraction?
   - How can you tell the difference between love and attraction?
   - How do you know you love someone?
   - How do you know someone loves you?
   - How do you want a boyfriend or girlfriend to treat you?
   - Do you have to have sex to show you love someone? Why or why not?
   - Why is it hard to say no to sex?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Love is a deep feeling of liking, attraction, respect, caring, and understanding for another person, even with their weaknesses. Having sexual intercourse does not mean that two people will fall in love. Love is never a good reason to do anything that puts your health and future at risk.

- It is normal to feel a strong attraction to another person, but remember that these feelings are often temporary and based only on physical attractiveness and not an emotional connection. Being attracted to someone is not the same as being in love.
Activity: Tree of consequences

1. Ask group members what would happen if they behaved well and got high marks at school. How would they feel?
2. Ask group members to explain what would happen if they broke a rule at school. Is it a good feeling or a bad feeling?
3. Explain that these are the consequences of breaking a school rule. Every decision we make has consequences. Sometimes consequences are good, but sometimes consequences are bad.
4. Ask group members to talk about the consequences of having sex before you are ready.
5. Draw a picture of a tree with roots, a trunk, and branches. Explain that the trunk is having sex. The branches are the consequences. Leaves and fruits can be the consequences of the other consequences. Ask group members to explore each of the different branches.
6. Ask group members to talk about the causes – what led to the decision to have sex? Write these on the roots.
7. Ask participants to work in groups of 2-3 people to draw an issues tree for the decision to wait to have sex.
8. After 5-10 minutes, ask each small group to share their drawings with the whole group.
11. Standing up for yourself

Objective
By the end of this session, group members will be able to:
- Express their thoughts and feelings with confidence.

Background notes
Being able to stand up for yourself can help you to get along with others and feel good about yourself. It is good to be honest with yourself and others about what you need and want. This can help you protect yourself from dangerous situations and can help you say no to things that you are uncomfortable doing.

How to stand up for yourself
- Decide what you feel or want and say it. Do not be afraid to be honest about your feelings. Being confident about your own feelings will encourage others to respect them as well. Someone who truly loves you will not want to do things that make you feel bad or unhappy.
- Maintain eye contact. Looking someone in the eye tells the other person that you are serious about what you are saying and that you are paying close attention to whether or not they are listening to you.
- Do not make excuses. Your feelings are the best reasons; avoid using other people as excuses. Say what you really feel.
- Do not try to please others. If you do not want to do something, say so clearly and do not ask if it is okay. Show other people that you know your own mind.
- Do not get confused by the other person’s argument. Keep repeating what you want or do not want. Stand your ground and do not give in.
- Remember you have a right to change your mind. Perhaps you and your boyfriend talked about sex a few days ago and you told him that you would have sex with him. But now you feel sure that the time is not right – you are not ready and the relationship is not ready. He says: “But you agreed that we could have sex.” Tell him: “I’ve changed my mind; I’ve decided I don’t feel ready.” If he truly loves you, he will respect your right to change your mind, and he will wait until you feel ready.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   • Was there a time in your life when you stood up for yourself? Can you tell us about it?
   • What you would say to someone who wanted to have sex with you before you were ready?
   • What would you say to someone who offered you alcohol?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

• Be honest with yourself and others about what you need and want. Do not be afraid to say what you think and feel.
• You have a right to your feelings and other people should respect them.

Activity: Role play

1. Ask group members to volunteer to act out how they would say no in the following situations in a role play for the group.
   • Teacher and a student: Teacher offers a better grade in exchange for sex.
   • Two friends: One friend wants the other friend to steal something from the market while the vendor is distracted with a sale.
   • Two friends: As they are walking to school, one friend suggests skipping school and going to a video den.

2. After the volunteers have acted out the situation, ask group members to talk about the role play.
   • Do they agree with what the character decided to do?
   • Would they have done anything differently?
   • How could the relationship be improved?
   • Is what happened similar to what would happen in real life?

3. After talking about the first role play, repeat the steps above with the other situations.
12. Making decisions

Objective

By the end of this session, group members will be able to:

- List the steps for good decision making.

Background notes

A decision is a choice that we make between two or more options. We all make decisions every day. We will need to make more and more decisions as we become older and some of these decisions will affect us the rest of our lives.

One of the most important parts of decision making is looking ahead to imagine what might happen if you do something. The better you are at thinking about what could happen, the better you will be at making decisions that will turn out how you want.

Steps for good decision-making include:

1. Describe the problem or situation that needs a decision.
2. Get more information if you have questions about the situation.
3. Think about what might happen if you make a decision.
4. Think about your personal and family values.
5. Think about how your decision may affect other people.
6. Choose the decision that seems right based on your knowledge, values, morals, religious upbringing, and present and future goals.
7. Re-think the decision and how you feel about it. Be sure you carefully considered all the alternatives and feel comfortable with the choice you made.

Talking with a friend, family member, or trusted adult can also help you to make a good decision.
Session guide

1. **Ask:** Does anyone have a decision that you are facing now and would like to share with the group? It can be big or small.

2. After he or she has explained the situation ask the other group members to give them advice. Remind them to think about how the different decisions could affect the future.

3. Allow several different group members to give advice.

4. Explain that sometimes making a list of the good things that will happen if you make a certain choice and comparing it to a list of the bad things that will happen if you make a certain choice can also be helpful.

5. Allow other group members to share other decisions that they have to make and are struggling with and help them to make their good and bad lists.

---

**Main points**

- A decision is a choice that we make between two or more options.
- When making a decision, it can help to imagine what will happen in the future if you decide to do each of the different options.
- Talking with other people can also help you make a good decision.

---

<table>
<thead>
<tr>
<th>Should I have sex?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Good</strong></td>
</tr>
<tr>
<td>Make us closer</td>
</tr>
<tr>
<td>Feel like an adult</td>
</tr>
<tr>
<td>Feel good</td>
</tr>
<tr>
<td>Know what it is like</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
13. Setting goals

Objectives

By the end of this session, group members will be able to:

- Explain what a goal is.
- List steps towards reaching a goal.

Background notes

A goal is something that you want to achieve. It can be something to do, someplace to go, or something to have. Goals give us something to look forward to and can give us energy. To set a goal, we must gather information and make decisions and choices. We must learn about what we want to achieve. Goals should be specific, practical, and have a deadline. To achieve a goal, it is helpful to make a plan and also think about possible difficulties and how they can be overcome. To reach our goals, we need to work hard, believe that we can do it, and be determined.

To reach our goals, we need to work hard, believe that we can do it, and be determined.

To help someone with a goal, ask them these questions:

- When do you want to reach this goal?
- If you reach this goal, in what ways is it going to help you?
- What are the steps that you will have to take to reach your goal?
- What are the things that might prevent you from achieving your goals?
- What actions can you take to overcome these difficulties?

When people work toward a goal, they often write a “contract” that describes what they plan to do and what they will get in return once they reach their goal. A contract could look like the one here. If you tell someone about your goal, they can give you support and encouragement.

Contract

Name:
Goal:
Steps to achieve it
1)
2)
3)
Target date:
Reward:
Witness:
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is a goal?
   - What are examples of goals?
   - Why do people set goals?
   - When do people set goals?
   - How can you reach a goal?
   - What are good things about having a plan?
   - Do all people set goals for their lives?
   - What happens to those who do not?
   - Do we have to set goals to achieve them?
   - Do most people achieve all their goals?
   - Why or why not?
   - Who are the people who can help you reach your goals?

2. After discussing all of the questions, share the information from the Background Notes section.

3. Ask each group member to create a contract with another student for one of their goals.

Main points

- A goal is something that you want to achieve.
- To reach our goals, we need to work hard and believe that we can do it.
- Writing down our goals can also help us to achieve them.
14. Saying no to sex

Objectives

By the end of this session, group members will be able to:

• Define the word abstinence.
• Identify abstinence as the only way to completely prevent pregnancy and infection with HIV and other STIs.
• Imagine ways to say no to sex in different situations.

Background notes

Saying no to sex can be difficult. Friends may say “everyone” is having sex, or partners may argue that sex is the best way to prove love and affection, or older friends and relatives may say having sex is a way to show that you are an adult.

You may not feel that you have many choices, but you can always say no to sex if you are not ready. One way to feel comfortable saying no is to imagine situations you could be in and imagine saying no.

Abstinence is a decision not to do something. When talking about sexual intercourse, HIV, and unwanted pregnancies, abstinence means not having sexual intercourse. Abstinence is the best and only certain way to prevent HIV transmission and unwanted pregnancy. For a young person who has not yet had sexual intercourse, abstinence is defined as not having sexual intercourse until marriage. Even people who have already had sexual intercourse can decide to abstain from now on.

Remember: Abstaining from sexual intercourse is the only way to completely prevent unwanted pregnancy and sexually transmitted infections, including HIV.
Session guide

1. Ask group members to imagine a friend came to them and said one of the statements below. After reading each statement ask for a few volunteers to tell the group what they would tell him or her to do or say.
   - My boyfriend really wants me to have sex, and we love each other.
   - I’m going to have sex someday, anyway. What’s wrong with now?
   - I’m afraid I will lose my boyfriend if we do not have sex. If he breaks up with me, I’ll just die.
   - My girlfriend really wants to have sex, and she says she loves me.
   - My girlfriend said we could use a condom if we have sex.
   - Everyone else my age is doing it. What’s the big deal?

2. Ask group members the following questions to have a discussion about making decisions about sexual activity.
   - What influences the decision about whether to have sex? (Possible answers: sexual feelings, partner’s desires, media messages, parents’ teachings, religious beliefs.)
   - What are the best arguments for saying ‘no’ or ‘yes’ to having sexual intercourse?
   - Can someone who decided to wait to have sexual intercourse change his or her mind?
   - Can someone who has already had sexual intercourse decide that they want to abstain from now on?
   - What is the worst thing that can happen to a teenager who says ‘no’? One who says ‘yes’?
   - What does a young person need to know or be prepared to do if she or he is going to say no to sexual intercourse? (Possible answers include: feeling good about themselves, communicating clearly, following through with a decision, or their future goals.)

3. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Abstinence is a decision not to do something. For a young person who has not yet had sexual intercourse, abstinence means not having sexual intercourse.
- People who have already had sexual intercourse can decide to abstain from now on.
- Abstaining from sexual intercourse is the only way to completely prevent unwanted pregnancy and sexually transmitted infections, including HIV.
15. Sexual violence

Objectives

By the end of this session, group members will be able to:

• Define rape, date rape, and incest.
• Explain what to do if raped.

Background notes

For many young people, sex is not a choice. Some young people are forced to have sexual relations. They may have sex in exchange for good grades, pocket money or gifts; are beaten if they refuse to have sex; or sell sex in order to survive. Everyone should know that his or her sexual organs are private. Nobody should touch them without permission.

Defilement is when someone has sex with a girl below age 16 or a boy below age 14 with or without his or her permission. Often young children are the victims of incest. Incest is when a young person is forced to touch, kiss, or feel the sex organs, or have actual sexual intercourse with a relative. Because of the older person’s position in the family, he or she may be able to force the child into doing sexual things without actually having to use force. These crimes are not the fault of the victim or child.

Rape is defined by the Kenyan law as having sex with a woman or girl without her permission; this could involve threats, force, or violence. Date rape means a rape that happens between individuals who are in a relationship or who know each other. Sexual violence includes the use of sexual contact by one person to another against his or her will. It can cause serious injuries, emotional problems, unwanted pregnancy, and infection with STIs, including HIV. Sexual violence cause physical and emotional damage. If you know someone who was raped, you should go with them to a hospital or health centre. At the hospital they will have a medical exam, their injuries will be treated, they will receive counselling, and they will be given medicine to prevent HIV infection and pregnancy.

If someone has been raped they can use emergency contraceptives (EC) to prevent pregnancy within 120 hours (5 days). They can also get medicine to help prevent HIV infection. These medicines are a combination of antiretroviral drugs that are taken for 28 days. Both the medicines to prevent pregnancy and HIV should be started as soon as possible.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is incest?
   - What can someone do if he or she is a victim of incest?
   - What is rape?
   - What should someone do if he or she is raped?
   - Can anything be done to prevent getting HIV if you are raped?
   - Can anything be done to prevent pregnancy if you are raped?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Rape means having sex with someone without permission; this could involve threats, force, or violence.
- If someone has been raped they should go to a health facility immediately for treatment. They can use Emergency Contraceptives (EC) to prevent pregnancy within 120 hours (5 days). They can also get medicine to help prevent HIV infection.

What to do if raped...

- Do not shower. Do not wash any clothes, including underwear.
- Talk to a parent or trusted adult.
- Go to the nearest hospital or health facility for a medical exam and treatment. A doctor should provide treatment, confirm the rape, and obtain evidence. A PRC1 (Post Rape Care) form should be completed in duplicate at this time. A PRC1 form allows the P3 form to be completed effectively because it contains all clinical notes. You should be given the original PRC1.
- Take the PRC1 to the police station where a report is entered into the Occurrence Book. You will be given a P3 form, which should be free of charge. An OB number should be given to you. Bring the clothes worn at the time wrapped in newspaper (not nylon or plastic). If hurt, the police should be asked to visit the health facility with a P3 form to record the crime.
- The police record your statement and that of any witnesses.
- Sign it when you are satisfied with what is written.
- Take the P3 form to be completed by an authorized health worker based on the PRC1 form. (If up country, go to the District Government Hospital.) The P3 form does not have to be completed immediately. This can be done at a later date after the medical evaluation is completed.
- Identify the accused for arrest and attend court when the accused is charged.
16. Why wait to have children?

**Objectives**

By the end of this session, group members will be able to:

- List health reasons to wait to have children.
- List social reasons to wait to have children.

**Background notes**

There are many medical and social reasons to wait to have children.

Some medical reasons to wait to have children are:

- A young woman under age 16 has not reached physical maturity. If her pelvis is too small, she may suffer during labour or have an infection that could cause the death of the mother or the infant.
- Young women, especially those under age 15, are more likely than women over 20 to not have a healthy pregnancy or baby.
- First births are more risky than other births. Women giving birth for the first time have a higher chance of developing a variety of problems.
- Babies born to adolescents have a much higher chance of dying.

Some social reasons to delay childbearing include:

- It can give young women the chance to pursue education, work outside the home, and achieve their future goals.
- Men who delay the start of their families can pursue education and jobs without the worry of providing for a family.
- Delayed pregnancy can mean smaller families and can offer economic benefits.
- Pregnant girls are often expelled from or drop out of school and few girls return to school after giving birth.
- Having to care for a child and not having finished school can limit a young woman’s chances for a good job and income.
- They may not be supported by the father of the child or even by their own families.

Adolescence is a time to enjoy your life, learn about yourself, and make plans to reach your goals. Young people can plan to have a family when they are ready – both emotionally and financially. A child needs a stable parent who can take care of him or her.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   • At what age do you want to have children?
   • What can you do to make sure you do not have children before you are ready?
   • How would having a child now change your life?
   • What would you like to do before you have children?
   • What are qualities of a good parent?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

• Young women (under age 20) are more like to have health problems during pregnancy and give birth to a baby with health problems than older women.
• Waiting to have children can give girls the chance to finish their education, work, or try to reach other goals for their future.
17. Preventing pregnancy

Objectives

By the end of this session, group members will be able to:

• Define contraception.
• List ways young people can prevent pregnancy.

Background notes

What is contraception?

Contraception means preventing pregnancy. A contraceptive is a drug, item, or a method used to prevent pregnancy or reduce the chances of getting pregnant without avoiding sexual intercourse. There are many different contraceptive methods. With most methods a woman will be able to become pregnant after she has stopped using it. Some methods, such as sterilization, are permanent, meaning a woman cannot become pregnant ever again. Other words for contraception are birth control and family planning.

All contraceptives are designed to work in one of two ways: either they prevent the man’s sperm and the woman’s egg from coming together, or they prevent the fertilized egg from implanting in the womb. Contraception allows women and men to determine the number of children they have and when they have them.

Adolescents can safely use any contraceptive method. While all methods are medically safe for young people, some may be more appropriate than others. Sterilization is not a good option for young people because it is permanent.

Contraceptive choices

There are many different kinds of contraceptive methods. Each of these has their advantages and disadvantages. Some provide temporary contraceptive protection while others are permanent. Some, such as the male and female condom, protect the user against HIV and other sexually transmitted infections, while others do not. Some are for women and some for men. Some must be used at the time of sexual intercourse, while others are used independently of intercourse.

Some contraceptive methods work very well at preventing pregnancy and others work less well. How well a method prevents pregnancy depends on how carefully people follow instructions and if they use them all the time. Health workers can explain how to use them. If you are thinking about having sex, you should talk with a health worker to learn about which contraceptive method is best for you. You should not be embarrassed to talk to a health worker. You are showing that you are responsible.
Contraceptive methods

The following table has information on popular contraceptive methods. Talk with a health worker to learn more about the different ways to prevent pregnancy as well as the advantages and disadvantages of different methods. How well a method works to prevent pregnancy depends on two things: one, how well the method itself works to prevent pregnancy; and two, how well users follow instructions. Some people always use their method correctly, but many users do not.

For many methods, how well it works to prevent pregnancy depends on how well users follow instructions. Remember, only condoms protect against both pregnancy and HIV infection, and only abstinence is 100 percent effective in preventing pregnancy.

<table>
<thead>
<tr>
<th>Method</th>
<th>Description</th>
<th>How well does it work?</th>
<th>Why it might be a good choice</th>
<th>Why it might not be a good choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstinence</td>
<td>Do not have sexual intercourse</td>
<td>Perfectly</td>
<td>Best choice to prevent pregnancy and STIs</td>
<td></td>
</tr>
<tr>
<td>Male condom</td>
<td>Soft, rubber tube that fits over erect penis and does not allow sperm to go inside vagina. If used correctly every time: 3 out of 100 women will become pregnant; if not used correctly 15 out of 100 women will become pregnant.</td>
<td>Well if they are used correctly every time you have sex</td>
<td>Easy to buy and easy to use. Protects against HIV.</td>
<td>Must be used correctly every time you have sex, which can be hard to do</td>
</tr>
<tr>
<td>Female condom</td>
<td>Soft, plastic pouch put inside vagina. Does not allow sperm to go in vagina. If used correctly every time: 5 out of 100 women will become pregnant; if not used correctly 21 out of 100 women will become pregnant.</td>
<td>Well if they are used correctly every time you have sex</td>
<td>Protect against HIV</td>
<td>Must be used correctly every time you have sex.</td>
</tr>
<tr>
<td>IUD Intrauterine device</td>
<td>Small item put inside the womb by a trained person. Stops sperm from joining egg or stops fertilized egg from growing in the womb. 1-2 out of 100 women will become pregnant.</td>
<td>Very well</td>
<td>Work very well and can stay in place for 12 years</td>
<td>Does not protect against HIV and other STIs</td>
</tr>
<tr>
<td>Method</td>
<td>Description</td>
<td>How well does it work?</td>
<td>Why it might be a good choice</td>
<td>Why it might not be a good choice</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------------</td>
<td>-------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Implants</td>
<td>Tiny capsules with artificial hormones put under the skin of the arm. Capsules slowly release hormones and stop ovaries from releasing an egg each month. Not even 1 out of 100 women will become pregnant.</td>
<td>Very well</td>
<td>Work very well and can stay in place for 5 years</td>
<td>Does not protect against HIV and other STIs</td>
</tr>
<tr>
<td>Injectables</td>
<td>Artificial hormones injected by a doctor or nurse. Stops ovaries from releasing an egg each month. Not even 1 out of 100 women will become pregnant.</td>
<td>Well</td>
<td>Can get one shot every 3 months</td>
<td>Must remember to go for shots.</td>
</tr>
<tr>
<td>Pills</td>
<td>A tablet made of artificial hormones taken by a woman every day. Stop ovaries from releasing an egg each month. 3 out of 100 women will become pregnant.</td>
<td>Well</td>
<td>Can make periods easier (less bleeding and cramping)</td>
<td>May not be a good choice for girls under 18. Must remember to take it every day. May cause weight changes, spotting.</td>
</tr>
<tr>
<td>LAM Lactational Amenorrhea Method</td>
<td>A temporary method for women who are breastfeeding exclusively. It works for the first 6 months after giving birth if a woman’s periods have not started again. 2 out of 100 women will become pregnant.</td>
<td>Well</td>
<td>Free and gives baby proper nutrition</td>
<td>Can only be used by women who have given birth. Temporary and if menstruation begins can no longer be used.</td>
</tr>
<tr>
<td>Fertility awareness methods</td>
<td>Couples do not have sexual intercourse (or use condoms) on days when the woman is fertile. To know when a woman is fertile she can keep track of her cycle using a calendar, taking her temperature or testing mucus. 20 out of 100 women will become pregnant.</td>
<td>Not so well</td>
<td>Free</td>
<td>Must be very familiar with your body. Must have a cooperative partner.</td>
</tr>
<tr>
<td>Method</td>
<td>Description</td>
<td>How well does it work?</td>
<td>Why it might be a good choice</td>
<td>Why it might not be a good choice</td>
</tr>
<tr>
<td>------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------</td>
<td>------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Spermicides</td>
<td>Chemicals inserted into the vagina before intercourse. They are available in different forms (foam, jellies, film, cream, etc). They block the entrance to the uterus and also kill sperm. 21 out of 100 women will become pregnant.</td>
<td>Not so well</td>
<td>Available from chemists</td>
<td>Must be put in shortly before sex. May irritate penis and vagina.</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>Man pulls his penis out of the vagina before he ejaculates. About 27 out of 100 women will become pregnant.</td>
<td>Not so well</td>
<td>Free</td>
<td>Difficult to practice. Requires a lot of self-control by man.</td>
</tr>
</tbody>
</table>

Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What are some of the contraceptive methods that you have heard of?
   - What are some myths that you have heard about contraceptive methods? Use the table above to find out the truth about these methods.
   - Where can you go to get more information about contraceptives?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Contraception means preventing pregnancy.
- A contraceptive is a drug, item, or a method used to help prevent pregnancy when having sexual intercourse.
- Adolescents can safely use any contraceptive method, though some may be more appropriate than others.
### Activity: Contraception true or false

1. Ask group members to stand in the middle of the meeting space.
2. Explain that you will read a statement. If they think it is true they should remain standing. If they think it is false they should sit down.
3. After each statement ask those standing to say why they think it is true. Then ask those sitting why they think it is false.
4. After each side has had a chance to explain their position, read the answer.
5. Ask everyone to stand up again and read the next statement.
6. Follow the same instructions for each statement you read.

<table>
<thead>
<tr>
<th>Statement</th>
<th>True or false</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. A girl cannot get pregnant the first time she has sex.</td>
<td>FALSE: Any time a girl has sexual intercourse she can get pregnant, even if it is her first time.</td>
</tr>
<tr>
<td>2. Condoms have holes that let HIV pass through.</td>
<td>FALSE: Condoms do not have holes that let HIV pass. There are strict rules for making condoms and condoms are tested in the factory to make sure they will work properly. If a condom does not work or breaks, it is almost always because a person is using it wrong, such as using oil-based lubricants; using old, expired condoms; leaving them in the sun or a hot place; or tearing them with your fingernails and teeth when opening the package.</td>
</tr>
<tr>
<td>3. Injectable contraceptives can cause infertility.</td>
<td>FALSE: Injectable contraceptives do not cause infertility. Though there can be a delay between the last injection and getting pregnant, women are able to become pregnant after stopping injections.</td>
</tr>
<tr>
<td>4. A girl cannot get pregnant if she has sex during her period.</td>
<td>FALSE: A girl may get pregnant at any time during her menstrual cycle, because her period may not be very regular. Also, in some girls and women, emotional stress may bring on ovulation at any time.</td>
</tr>
<tr>
<td>5. Some IUDs can be left in place for 10 years.</td>
<td>TRUE: Some IUDs can be left in place for 10 -12 years.</td>
</tr>
<tr>
<td>6. Since they are taken every day, oral contraceptives (the pill) build up in a woman’s body and can make her sick.</td>
<td>FALSE: Pills dissolve in a woman’s stomach, just like other medicine. They do not build up in her body and are not poisonous.</td>
</tr>
<tr>
<td>7. It is not safe for girls under age 18 to use contraceptives.</td>
<td>FALSE: Contraceptives are medically safe for women at any age. Some are more appropriate than others. For example, sterilization is not a good option for young women because it is permanent and could be regretted.</td>
</tr>
<tr>
<td>8. Having sex without a condom can result in HIV infection.</td>
<td>TRUE: If either person is infected, having sex without a condom can infect the other partner. Young men and women have to be very careful and always practice ‘safe sex’ if they want to have sex.</td>
</tr>
<tr>
<td>9. As long as a boy pulls his penis out of the vagina before he ejaculates a girl cannot become pregnant.</td>
<td>FALSE: Before ejaculation the penis releases fluid that may have sperm in it and can cause a girl to become pregnant.</td>
</tr>
<tr>
<td>10. A girl of 12 years can become pregnant.</td>
<td>TRUE: Any girl who has begun menstruation can get pregnant, even if she does not yet have regular periods.</td>
</tr>
</tbody>
</table>
18. Condoms

Objectives

By the end of this session, group members will be able to:

• List the steps for proper condom use.
• Explain ways to use condoms so they do not break.

Background notes

Abstinence is the best and only certain way to prevent STI and HIV infection and unwanted pregnancy. However, if young people have decided to have sexual intercourse or are already sexually active, they should have information about how to use condoms correctly to reduce the risk of HIV transmission. Using condoms the right way every single time you have sexual intercourse reduces the risk of HIV transmission, STIs, and unwanted pregnancy.

There are currently two types of condoms available for use: a male condom and a female condom. A male condom is a soft tube made out of a type of rubber called latex. It is put on a man’s erect penis before sexual intercourse. When the man ejaculates, the sperm is deposited in the condom. Because the sperm is collected in the condom, there is no contact between the man’s and the woman’s body fluids. This reduces the risk of STIs, including HIV, and unwanted pregnancy. Condoms should only be used once and then thrown away.

A female condom is a plastic pouch that goes inside the vagina during intercourse to prevent HIV, STIs, and unwanted pregnancy. Female condoms have two flexible rings, one attached to each end. One ring, at the closed end, is placed inside the woman’s vagina and keeps it in place during sex. The other ring at the open end stays outside the vagina and covers parts of the lips of the vagina. It is also used once and then thrown away. The condom catches the man’s sperm so that it does not enter the vagina.

Many people are afraid to use condoms because they do not know how to use them or because they are uncomfortable or worried about talking with their partner about using them. Condoms offer protection to both partners. Using a condom is a sign of trust, respect, and caring for your partner.

To protect against pregnancy and HIV, condoms must be stored properly and used the right way every time someone has sex. Latex condoms provide protection against STIs that are transmitted through body fluids, like HIV. They do not protect as well against STIs that are transmitted through skin-to-skin contact (like herpes or warts) because the condom may not cover the entire affected areas.
Condom facts

- No penis is too big or too small for a male condom. Male condoms can be stretched to fit over an arm.
- Asking a partner to use a condom does not mean you do not trust your partner. You are making a responsible statement about both your futures by using condoms.
- HIV cannot pass through latex or rubber condoms; but, the virus can pass through sheepskin or animal skin condoms.
- There is a correct way to use condoms. Not using a condom correctly may lead to pregnancy or infection with an STI including HIV.
- Never leave condoms near a window, in a wallet, or in your back pocket that you sit on continuously. All these storage methods will cause the condom to tear or lose its lubrication.
- Condoms are tested in the factory. They usually will not break if they are stored properly before they are used. Keep them away from heat or sunshine.

It is very rare for a condom to break or come off when they are used by people who are experienced using condoms. When male condoms do break or slip, it is usually because people were not using them properly. It is important to practice putting a condom on properly. The following tips can help make condoms work best:

- Never open the condom package with sharp objects like teeth, scissors, knives, and pencils.
- Never unroll a condom before putting it on. Condoms should always be unrolled onto the penis, rather than pulled on like a sock.
- Having intercourse for more than 20 minutes or having very intense intercourse can increase the risk that a condom may slip off.
- Carefully check the condom package to be sure that it is not damaged. Check the expiry date on the package. Do not use a condom that is brittle or dry or if it has changed colour.
- Use only water-based lubrication such as K-Y jelly, spermicidal gels or creams, or saliva. Oil-based products such as petroleum jelly, hand lotion, or mineral or vegetable oils should never be used because they can weaken latex, making the condom more likely to break.
- Use a new condom for each act of intercourse. A male condom should never be washed and reused.
- Starting to unroll the condom wrong side out on the penis and then flipping it over to put it on correctly may contaminate the outside of the condom. If this happens the condom should be thrown away and replaced with a new one.
- Many condoms have a space on the end for semen. If the condom does not have one, some recommend holding the end of the condom while unrolling it onto the penis. This creates a space for the semen.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is the best way to prevent pregnancy and HIV infection? (Answer: Abstinence)
   - Do you think condoms are effective in preventing pregnancy and HIV infection? Why or why not?
   - How do you use a condom?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Abstinence is the best and only way to completely prevent STI and HIV infection and unwanted pregnancy.
- To protect against pregnancy and HIV, condoms must be stored properly and used the right way every time someone has sex.
19. Sexually Transmitted Infections (STIs)

Objectives
By the end of this session, group members will be able to:

- Define STI.
- List ways to prevent STI transmission.
- List symptoms of STIs.

Background notes
Sexually transmitted infections (STIs) are infections transmitted by sexual contact with an infected partner. STIs are some of the most common diseases in Kenya, particularly among young people. HIV is an STI that leads to AIDS, which is fatal. In addition to HIV, there are more than 20 other diseases that can be sexually transmitted.

A sexually transmitted infection happens when bacteria, viruses, or other germs pass from one person to another. STIs can cause serious health problems, including not being able to get pregnant (or get a woman pregnant), pain, cancer, and in some cases, death. Also, some STIs can be transmitted to infants during pregnancy or birth.

It is possible to catch an STI even after only one act of sexual intercourse with an infected person. Some STIs can no longer be treated successfully with the medicines that were used in the past, because the germs that cause the disease are now used to the medicines. For these reasons, STIs are becoming more common in many areas.

The only completely effective way to prevent infection with an STI is to abstain from oral, anal, and vaginal sexual intercourse. Contact with another person’s body fluids can result in STI infection. Condoms can protect against many, but not all, STIs.

Signs and symptoms of STIs
- Redness or soreness of the sex organs.
- Pain at urination or cloudy or strong-smelling urine.
- A sore or blisters on or near the sex organs, anus, or inside the mouth.
- A lot of itching or a rash.
- Abdominal cramping/pain.
- A fever and an overall sick feeling.
- A sexual partner with symptoms.
If you have STI symptoms:
- Go to a health centre for testing and treatment as soon as possible.
- Finish all of the medicine you receive.
- Ask your partner to be tested as well.
- Abstain from sex or practice safe sex until both you and your partner finish your treatment.

Session guide
1. Facilitate a discussion by asking group members the following questions:
   - What are the signs and symptoms of STIs? (Answers include: redness or soreness of the sex organs, pain when urinating (mostly with men), strong smelling or cloudy urine, unusual discharge from the penis or vagina, sores or blisters on or around the sex organs, mouth, or anus, a sexual partner with symptoms.)
   - What are the two most effective ways to avoid STIs? (Answers should include: abstain from sexual intercourse of any kind, use condoms every time you have intercourse, or be faithful to one faithful partner.)
   - What three things should you do if you are worried that you have been infected with an STI? (Answers should include: seek medical treatment right away, inform your sexual partner(s), and abstain from sexual contact until there is no evidence of infection.)
   - How could you bring up using condoms if you were to have sexual intercourse with a partner you cared about? How would you feel if your partner brought up condom use when you were about to have sex? What would you say to him or her?

Main points
- Sexually transmitted infections (STIs) are infections transmitted by sexual contact with an infected partner.
- STIs are some of the most common diseases in Kenya, especially among young people.

HIV is an STI that leads to AIDS. In addition to HIV, there are more than 20 other diseases that can be sexually transmitted.
- The only way to prevent STI is to abstain from oral, anal, and vaginal sexual intercourse. Condoms can protect against many, but not all, STIs.
- It is important to go to a health facility if you think you have an STI. Be sure to finish all of the medicine you receive and ask your partner to be tested as well.
Activity: STIs - True or false

1. Ask group members to stand in the middle of the meeting space.
2. Explain that you will read a statement. If they think it is true they should remain standing. If they think it is false they should sit down.
3. After each statement ask those standing to say why they think it is true. Then ask those sitting why they think it is false.
4. After each side has had a chance to explain their position, read the answer.
5. Ask everyone to stand up again and read the next statement.
6. Follow the same instructions for each statement you read.

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, but men may also have no symptoms. People with HIV have no symptoms for some time, even years, after infection.

2. With the right medicines, all STIs except HIV can be cured.
   **False.** Genital warts and herpes, which are two kinds of STIs caused by viruses, cannot be cured at the present time.

3. The organisms that cause STIs can only enter the body through either the woman’s vagina or the man’s penis.
   **False.** STI bacteria and viruses can enter the body through any mucus membranes, including the vagina, penis, anus, mouth, and in some rare cases, the eyes. HIV can also enter the body when injected into the bloodstream from needles that have been used by others and were not sterilized. It can also be passed from mother to child during pregnancy, delivery, or through breastfeeding.

4. It is good to clean yourself after having sexual intercourse.
   **True.** While personal cleanliness alone cannot prevent STIs, washing away your and your partner’s body fluids right after intercourse is good hygiene. Washing does not prevent pregnancy or stop HIV or other STIs from entering the body.

5. It is possible to contract some STIs from kissing.
   **True.** It is rare, but possible to be infected by syphilis through kissing if the infected person has small sores in or around the mouth. The herpes virus can be spread by kissing if sores are present.

6. Only people who have sexual contact can get an STI.
   **False.** Babies can get STIs such as herpetic, gonorrhoea, and HIV in the womb or during delivery or breastfeeding.
7. Condoms are the most effective protection against STIs.
False. Abstinence from sexual intercourse is the best way to prevent the spread of STIs. Condoms are the next best thing, but only abstinence is 100 percent effective.

8. Using latex condoms can help prevent the spread of STIs.
True. Latex condoms can help prevent the spread of STIs, but they must be used correctly and for every sexual act. Latex condoms are not 100 percent effective because they can occasionally break or come off during intercourse. Lambskin condoms do not protect against STIs and should not be used. The only 100 percent effective way to prevent STIs is to abstain from sexual activity.

9. A woman using oral contraceptives should still make her partner use a condom to protect against STIs.
True. Oral contraceptives do not prevent STIs. A condom would be necessary for protection unless both partners know they are faithful to one another and are currently infection-free.

10. Abstinence is the only method of contraception that is 100% risk free.
True. Avoiding sexual intercourse of any kind is the only way to avoid pregnancy or an STI.

11. Once you have had gonorrhoea, you cannot get it again.
False. A person can get gonorrhoea as many times as he or she has sex with an infected person. It is important therefore that anyone who is treated for gonorrhoea or any other STI makes sure that his or her sexual partner be treated as well.

12. There is still a big risk of HIV transmission with condoms, since condoms have holes that are large enough for the virus to pass through.
False. Some groups have reported inaccurate research findings that suggest HIV can pass through condoms, but it is not true. Latex condoms have been dipped in latex at least twice and the HIV virus is too big to pass through any pores. There is a manufacturing process that is followed when making condoms.

13. You will not get HIV if your girlfriend or boyfriend is clean.
False. A person’s risk of HIV cannot be determined by looking at a person and checking her or his reputation. Some people get HIV when they have only had sex once or with one partner.

14. Having sex with a virgin cleans a man of HIV and cures him.
False. This is no cure for HIV. Having sex with a virgin only risks giving HIV to that person and will not cure the man.

15. If you have unprotected sex with a person who has HIV you will definitely catch it.
False. Not everyone who has unprotected sex with someone with HIV will catch it. Some people can stay in a relationship with a person who has HIV for a long time and not catch it, others catch it the first time they have sex with someone who is infected. Catching HIV is always a risk, but it is important not to assume that just because a person’s partner has HIV that they will have it too.
20. HIV and AIDS

Objectives

By the end of this session, group members will be able to:

- Explain what HIV and AIDS are.
- Describe how HIV is transmitted.
- Explain the difference between HIV and AIDS.
- List ways HIV is not transmitted.
- List ways to prevent HIV transmission.
- Explain what HIV positive means.
- Describe the “window period.”

Background notes

HIV stands for Human Immunodeficiency Virus. HIV is a virus that is passed between people through contact with infected blood, semen, vaginal fluids, and breastmilk. HIV weakens the immune system, making it easier for people to become sick. When a person with HIV becomes sick with many illnesses that do not get better with medicine, he or she is said to have AIDS. AIDS stands for Acquired Immunodeficiency Syndrome. Acquired means that you get the disease from somewhere else; it does not develop on its own. Immunodeficiency means the immune system is weak and unable to fight off infections and illnesses. Syndrome means a combination of symptoms and diseases, such as weight loss combined with skin cancer and pneumonia. AIDS is the word used for the most serious stage of a person’s infection with HIV. There is no cure for HIV or AIDS.

How is HIV transmitted?

HIV is passed between people in three ways:

- Sex with an HIV-infected person where the penis enters the vagina, anus, or mouth of another person.
- Blood to blood. From an HIV infected person’s blood to another person’s blood through an opening in the body such as a cut, from a transfusion or by sharing something that cuts or pierces the skin (knife, razor, or needle). This includes sharing circumcision knives, needles, or ear piercing, with someone who has HIV.
- Mother to child. HIV can be passed from a mother who is HIV infected to her baby during pregnancy, at the time of birth, or through breastfeeding.

The majority of people are infected with HIV by having sex with someone who is HIV infected. A person with another STI is much more likely to contract HIV.
You cannot get HIV infection from:

- Touching, hugging, talking to, or sharing a home with a person who is HIV infected or has AIDS.
- Sharing plates, utensils, glasses, or towels used by someone with HIV or AIDS.
- Using swimming pools, toilet seats, door handles, telephones, or other items used by people with HIV or AIDS.
- Having someone with HIV or AIDS spit, sweat, or cry on you.
- Being bitten by mosquitoes.
- Donating blood.
- Being coughed on by a person with HIV or AIDS.

Young people are becoming infected with HIV faster than in any other age group. The only certain way to protect yourself against HIV transmission is to abstain from sexual intercourse.

What is safer sex? People who have decided to be sexually active can make choices to practice safer sex. Safer sex describes a range of ways that sexually active people can protect themselves from sexually transmitted infections, including HIV. Practicing safer sex also provides protection against pregnancy. There are lots of ways for loving and sexual feelings to be shared that are not risky. Some of them include:

- Hugging
- Holding hands
- Kissing
- Touching each other
- Rubbing against each other with clothes on
- Talking about sexual dreams and thoughts
- Touching your partner’s sex organs, as long as males do not ejaculate near any opening or broken skin

Being in a relationship where both people are faithful or using condoms to protect their partner and themselves can reduce the risk of infection with HIV or other STIs. A faithful relationship needs the commitment of both partners. Being faithful is a way to protect partners who are married. Faithfulness is not a way for young people to protect themselves. When someone has a faithful relationship for a short time and then starts a new relationship with someone else there is still a risk because the person has many partners.

Sexual intercourse without a condom allows body fluids where HIV can live to come into contact with another person’s body fluids. Using a latex condom correctly for every act of sexual intercourse is called protected sex because when used correctly for each sexual act, condoms can really reduce the risk of HIV infection. Although condoms reduce the risk of transmission, they are not 100 percent effective in preventing HIV infection.

**What does HIV positive mean?**

When the body’s defence system (immune system) comes into contact with a disease, it produces germ fighters, called antibodies. Antibodies fight and destroy viruses and germs that enter the body. When someone becomes infected with HIV, the defence system begins to produce antibodies.
to fight HIV. HIV tests look for HIV antibodies, because HIV antibodies are proof that HIV lives in
the body. If a blood test shows that the body is making antibodies to fight HIV, it is proof that HIV
lives in the body and the person is considered HIV positive.

It takes the body some time to start producing antibodies to fight HIV, so a person could be HIV
infected but it would not show up on a blood test. This time when someone is infected with HIV but
does not test positive is called the “Window Period.” It is possible for someone to test HIV-negative
during the window period but still be infected with HIV. During this time, people who are HIV
infected are able to transmit the virus to others. The window period is usually 3 months, but in very
rare cases could be 6 months. People who have a negative test result and have had unprotected sex
during the past 3 months are advised to go for another test in 3 months. During this time, they
should not have unprotected sex.

**When are people with HIV infectious to others?**

People with HIV can infect others as soon as they are infected with the virus. People with HIV may
not know they are infected and may look, act, and feel healthy for a long time, possibly more than
10 years. It is impossible to tell from looking at someone if he or she is infected.

**From HIV to AIDS**

The body has an immune system that helps keep out infections. The immune system keeps out
infections the way a house protects the people inside from rain and cold. HIV attacks the immune
system. HIV enters the body slowly and invisibly and breaks down the immune system. When the
immune system can no longer protect the body from disease, HIV has turned to AIDS.

---

The body becomes like a house that falls apart and can no longer protect from rain and cold. At this
point, people become very sick from different illnesses, including colds (homa), skin infections,
cancer, or tuberculosis.

Most people who have HIV do not become sick right away. In some cases, it can take as many as
10 years or more for a person to develop AIDS. People can stay healthy longer by eating well and
getting treatment of illnesses and infections quickly.

People with AIDS have a weak immune system and are more likely to get sick with other diseases
such as tuberculosis, pneumonia, skin infections, or cancer. But, not everyone with tuberculosis
has AIDS. People with AIDS may also experience:
• Weight loss.
• Fever for more than one month.
• Diarrhoea for more than one month.
• Sores on sexual organ for more than one month.
• Cough for more than one month.
• Skin infections that keep coming back.

Remember: Although the above can all be symptoms of AIDS, just because a person has any of them does not mean that they are infected with HIV. The only way to tell if a person is infected with HIV is by testing, because the above can be symptoms of other illnesses or diseases.

Questions about HIV and AIDS

• Can HIV be transmitted through kissing? There are no reported cases of people becoming infected with HIV just from kissing. It might be risky to kiss someone who has bleeding gums or other sores in their mouth. It would be even more risky if both people had bleeding cuts or sores in their mouths. People should wait until any sores or cuts have healed before kissing.

• Can a person get HIV infection from a mosquito? When mosquitoes bite someone they do not inject the blood of the previously bitten person into the next person. Diseases like malaria are spread through mosquito saliva. HIV gets digested in the mosquito’s stomach before it can find its way to the saliva.

• If a person tests negative for HIV does it mean he or she cannot catch it? A negative HIV test result means the person is not infected at the time or possibly that they have the infection and it is still in the window period. They can still become infected if they have unprotected sex with someone who is infected.

• Is there a cure for HIV? There is still no cure for HIV.

Session guide

1. Facilitate a discussion by asking group members the following questions:
   • What does HIV stand for?
   • What does AIDS stand for?
   • What is the difference between HIV and AIDS?
   • How is HIV transmitted?
   • What are some ways that HIV is not transmitted?
   • How can HIV be prevented?
   • What does it mean to be HIV positive?
   • What is the “window period”?
   • How can someone know if they are infected with HIV?

2. After discussing all of the questions, share the information from the Background Notes section.
Main points

- HIV is a virus that is passed between people through contact with infected blood, semen, vaginal fluids, and breastmilk.
- HIV weakens the immune system, making it easier for people to become sick. When a person with HIV becomes sick with many illnesses that do not get better with medicine, he or she is said to have AIDS.
- People with HIV can infect others as soon as they are infected with the virus. People with HIV may not know they are infected and may look, act, and feel healthy for a long time. The only way to know if someone is HIV infected is through testing.
- HIV can be prevented by abstaining from sexual activity.
- The risk of HIV infection can be reduced by being in a relationship where both people are faithful to each other or using condoms.

Activity: Wildfire

Description: Two secret HIV carriers interact with a larger group who are shaking hands. After the game, many players are surprised to learn they have been unknowingly “infected.”

Materials: Several pieces of paper: Cut and fold one piece of paper for each person. On three of the pieces of paper, write the letter “C.” On one piece of paper write the letter “X.” Leave all the other pieces of paper blank.

1. Carefully fold the pieces of paper, mix them up, and give one to each person. People should look at their paper without letting anyone else see it.
2. Ask the group to stand and each person shake hands with three people. After everyone has done this, have the group sit down.
3. Ask the people with the “X” on their pieces of paper to stand up. Ask everyone who shook hands with this person to stand up. Ask everyone who shook hands with a standing person to stand up as well. Continue until everyone is standing.
4. Now ask the group to imagine that the person with the paper marked “X” was infected with HIV or another STI. Ask them to pretend they had sexual intercourse with the three people they shook hands with. (Remind the group that this is imaginary, and that they do not really have an infection.)
5. Ask the group to check if they had a “C” on their paper. Explain that these people used condoms correctly, so they had protected sex and can sit down. Everyone else who had a blank piece of paper had unprotected sex.
6. Lead a discussion by asking the following questions:
   - How does this relate to real life?
   - If you had really been infected with HIV, how serious would that be?
   - How did the first people standing (the ones with the “X”) feel when they learned that the X meant they had HIV? What could they do now?
   - How did the others feel when they had to stand?
21 Getting Tested for HIV

Objectives

By the end of this session, group members will be able to:

- Describe the process of HIV testing.
- List reasons for getting tested for HIV.

Background notes

It is not possible to know if people have HIV by looking at them. The only way for people to know if they have HIV is to have a test for HIV. In Kenya, HIV testing comes with counselling, which means talking about HIV and the test with a trained person. During this talk, people learn how to take care of themselves if they are HIV positive or prevent HIV infection if they are negative. This process is called voluntary counselling and testing, or VCT.

The HIV test is safe and painless. The health worker takes a small amount of blood from a person’s finger. The person tested cannot get weak from blood loss because very little blood is taken. HIV tests look for HIV antibodies. If the body is making antibodies to fight HIV, then someone is considered to be HIV positive.

The window period is the time between when HIV enters the body and the moment when the HIV test can detect HIV antibodies. Usually the test can detect antibodies within 3 months of infection and in rare occasions, it can take up to 6 months. This means that for months after infection, the test may not be able to tell whether or not someone is infected. These months are known as the window period. During this window period, it is possible to infect others with HIV.

There are many reasons to get tested for HIV. If a person has had unprotected sex and is worrying about HIV infection and is worried about every spot or cough, the only way to put his or her mind at ease might be to have an HIV test. If a person has had sex with someone who has fallen sick and has AIDS, then that person will also worry. Perhaps the only way for that person to put his or her mind at ease is to go for VCT. People should never assume that they are infected or that they are not infected. They should always go for a test.
People should be tested for HIV if they have:

- Sexual activity with many partners.
- Encounters with sex workers.
- Previous treatment for STIs.
- Blood transfusions.
- Anal sexual activity (male or female).
- Injection drug use.
- Sexual activity with partners having any of the above.
- Children born to women with any of the above.

It is normal for people to not want to go for testing because they are afraid. The sooner someone knows their status, the easier it will be to make choices to stay healthy. If they are positive, there are many ways to stay healthy longer. If they are negative, they can make choices to help stay that way.

Session guide

1. Facilitate a discussion by asking group members the following questions:
   - How can you know if someone is HIV infected?
     - What does VCT mean?
     - What is the window period? How long does it last?
     - Why are people afraid to get tested?
     - Who should be tested for HIV?

2. After discussing all of the questions, share the information from the Background Notes section.
Main points

• The only way to know if someone is HIV infected is to be tested.
• VCT stands for voluntary counselling and testing and means that a person receives counselling before and after the HIV test.
• The HIV test is safe and painless.
• It takes some time for the body to produce enough antibodies for HIV to be noticed in an HIV test. This means that someone can be infected with HIV but will not test positive. This time is called the “Window Period.” The window period is usually 3 months but in very rare cases could be 6 months.
• People who are HIV infected are able to transmit the virus to others during the window period.
• People who have a negative test result and have had unprotected sex during the past 3 months are advised to go for another test in 3 months. During this time, they should not have unprotected sex.

Activity: Role play

1. Divide group members into pairs.
2. Explain that they will role play the following situation. One partner is afraid he or she may be HIV infected but does not want to go for VCT. The other partner counsels the friend.
3. After 5 minutes ask group members to switch roles and start a new role play.
4. With the whole group, ask group members to talk about the advice they gave to their partner during the role play. Lead a discussion with group members to talk about whether they think the advice given is helpful.
22. Caring for people with HIV

Objectives

By the end of this session, group members will be able to:

• List ways to provide support to people living with HIV and AIDS.
• List ways people with HIV can stay healthy.
• Describe why hygiene is especially important for people with HIV and AIDS.
• Explain how ART works.

Background notes

People who are HIV positive need support from friends and family members. When people learn they are HIV positive, it is normal for them to feel worried, stressed, scared, and angry. We can help them to feel better by listening to and talking with them. Remember that HIV is not passed through normal, everyday contact, so we can play together, eat together, live together, share the same bathrooms, and sit next to each other. It is important for people who are HIV positive to know that you care about them and are there to help them if they need it.

Staying healthy

People with HIV and AIDS need to eat healthy foods to fight infection and to stay strong. People who are HIV positive and do not eat healthy foods are more likely to develop AIDS faster, because their bodies are weak and cannot fight infection. People with HIV and AIDS need to pay attention to the food they eat, because often they eat less, have infections that require more energy, and their bodies do not use food properly.

People with HIV and AIDS need to eat more than people who are not infected. Eating small meals often and eating a variety of healthy foods can help people with HIV and AIDS to get all the energy and vitamins they need.

People with HIV should:

• Eat at least three meals a day, and have snacks between meals.
• Eat even when they are sick or have no appetite. Eating small but many meals can help to do this.
• Eat many fruits and vegetables of different colours.
• Eat fats, oils, and sugars in small quantities and limit processed foods, salt, coffee, tea, and sodas.
• Avoid alcohol, smoking, raw eggs, raw fish, and undercooked meat.
Practicing good hygiene is important for everyone to avoid infection. It is especially important for people with HIV and AIDS because their immune system is weak and they are more likely to fall sick. The following should be done to practice good hygiene:

- Handle and store food and water properly to avoid contamination and further infection.
- Only use water from a clean source, and store it in a container with a lid.
- Boil water for at least 5-10 minutes to kill germs before drinking it.
- Always wash hands with soap before and after touching food.
- Cook all animal products (meat, chicken, fish, and eggs) at high temperatures until completely cooked.
- Wash utensils and surfaces used for preparing and cooking foods.
- Use clean water to wash all fruits and vegetables that will be eaten raw or remove the skin.
- Store cooked food at most for one day and re-heat before eating.
- Only use bowls, plates, glasses, and utensils that have been cleaned and well dried.

Infections can be avoided by practicing good personal hygiene:

- Take baths every day to keep the body clean.
- Wear shoes to avoid small injuries that could result in infection.
- Brush teeth after meals.
- Wash hands with soap after going to the toilet and after handling pets and animals.

**AIDS in the home**

The home is a very important place for a person with AIDS. If a person with AIDS has a caring and understanding family, he or she will feel better. A person with AIDS needs both emotional support and physical care. Relatives can often give the best care. The person will feel good at home where he or she is surrounded by loved ones.

**Emotional support**

- Ask the person to talk about how he or she feels.
- Encourage him or her to do as much as possible without help from others.
- Give support and praise when deserved.
- Ask the person how they prefer to have things done (food preparation or cleaning).
- When people feel angry or sad, encourage them to express their feelings and let them know it is normal to feel bad sometimes.
- The most common feelings are fear, anger, hopelessness, sadness, and loneliness. Let them know you are there to listen and talk to them, and their feelings are normal.
Physical support
Below are common conditions for people with HIV and AIDS and how you can help.

- **Appetite loss:** Eat with them and ask what they would like to eat and drink, when and how much. Physical exercise helps improve appetite.

- **Feeling sick to the stomach, vomiting and diarrhoea:** Smaller meals with little fat and not strong flavours may reduce vomiting and diarrhoea. Encourage eating dry foods like toast or biscuits. Sucking on a lemon may settle a sick stomach. Encourage drinking liquids between meals if they can’t eat. Use gloves to clean up vomit and wash hands with soap after using the restroom.

- **Sores in the mouth:** Use warm salty water gargle. Avoid oranges and other food that may hurt the sores. Eat warm soft foods. Use mouth washes.

- **Cough:** Rest in a room with open windows. Seek medical treatment.

- **Fevers:** Drink extra fluids. Panadol may be used. See a doctor.

- **Weakness:** Encourage activity. Have rest periods. Use a bath chair.

- **Skin problems:** Change sleeping positions to avoid sores. Encourage short walks. Wash sores but use gloves if sores are open. Apply soothing lotions to dry skin.

- **Confusion and forgetting:** Keep clocks and calendars and remind the person of the day, time, and where they are. Make sure the home is safe. For example, remove loose rugs, stairs, medicines, and sharp objects.

If you are caring for someone with HIV, remember to do the following:

- When throwing away items for cleaning (gloves and other soiled things) they should be burned or placed inside two plastic bags tied tightly.

- When washing clothes that are soiled with body fluids wear gloves, use Jik and soap, and keep the items separate from other laundry. If not soiled, wash as normal.

- If injections are given, clean needles and syringes by boiling them; store them in a plastic or metal box that will not puncture. Used disposable needles and syringes should be placed in thick cardboard, glass, plastic, or metal containers and thrown away. Wash thermometers with soap.

- When bathing people should cover open wounds with a bandage or cloth.

- Clean the toilet and bathroom areas often, using gloves and Jik.

- Wash dishes with hot soapy water and dry them completely.

Antiretroviral therapy
ART (antiretroviral therapy) is a combination of medicines that slow HIV from spreading in the body. ART helps the immune system get strong so it can fight infections and illness. Just like repairing a roof on a house helps keep out the rain, when people take ART they get sick less often and feel better longer. ART is not a cure for HIV. ART reduces the numbers of HIV in the blood, but cannot eliminate it.
ART does not prevent against re-infection from HIV. When someone is taking ART, they should continue to protect themselves and others by not having sex or using a condom every time.

ART is a lifetime commitment. Stopping and starting, or missing tablets stops the ART from working. Taking some of the tablets but not others also stops ART from working. ART drugs should never be shared with someone else. If shared they will not help either person.

If someone with HIV still has a strong immune system, there are other ways for him or her to stay healthy without beginning ART. He or she should talk with a doctor about those options.

Session guide
1. Facilitate a discussion by asking group members the following questions:
   • Why is it important that people with HIV eat foods that are healthy?
   • What are examples of healthy foods?
   • Are there any foods that people with HIV should not eat?
   • How can you support someone who is infected with HIV?
   • What is ART?
   • Is there a cure for HIV and AIDS?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points
• People with HIV and AIDS need to eat healthy foods to fight infection and to stay strong.
• It is important for people with HIV and AIDS to practice good hygiene to avoid infection because their immune system is weak and they are more likely to fall sick.
• ART stands for antiretroviral therapy. It is a combination of medicines that slow HIV from spreading in the body. ART helps the immune system get strong so it can fight infections and illness. ART is not a cure for HIV.
23. Stigma

Objectives
By the end of this session, group members will be able to:

• Define stigma.
• Give examples of stigma.
• List ways to fight stigma.

Background notes
Stigma is when we think people are bad because of a condition they have. Stigma can be in our thoughts, comments, gossip, name-calling, actions, and excluding people. It causes people to feel bad, isolated, alone, guilty, or ashamed. We are all involved in stigmatizing, even if we do not realize it. Stigma hurts people with HIV and AIDS and those suspected of having HIV. Stigma is harmful to ourselves, our families, and communities. We can make a difference by changing our own thinking and actions.

We stigmatize when:
• We call people names.
• Think badly about people.
• Say bad things about people.
• We do not let people participate in activities.
• We do not involve people in making decisions.

Stigma causes people to:
• Feel alone, rejected, condemned, forgotten, useless.
• Be kicked out of family, house, work, or organizations.
• Drop out from school.
• Feel depressed, want to commit suicide, drink alcohol, or use drugs.

Examples of stigma:
• Feeling disrespected or unloved.
• Blaming people who are infected and telling them they deserve it.
• Feeling ashamed because one has HIV/AIDS or TB.
• Feeling afraid to tell others that you have a disease or infection.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - What is stigma?
   - What are examples of stigma?
   - What can we do to change stigma?

2. After discussing all of the questions, share the information from the Background Notes section.

Main messages

- Stigma is when we think people are bad because of a condition they have.
- Everyone deserves to be treated with respect.

Activity: Understanding stigma

1. Ask group members to sit on their own away from others. Then say: “Think about a time in your life when you felt alone or rejected for being seen to be different from others—or when you saw other people treated this way.” Explain that this does not need to be examples of HIV stigma—it could be being seen as different for any reason. Ask them to think about—“What happened? How did it feel? What impact did it have on you?”

2. Ask group members: “Think about a time in your life when you isolated or rejected other people because they were different.” Ask them to think about—“What happened? How did you feel? What was your attitude? How did you behave?”

3. Ask group members to share some of their thoughts and feelings from when they were thinking back on being rejected or rejecting others.
**Activity: Hospital visit**

1. Ask participants to imagine that they are going to visit a hospital. They have each been asked to make a “Get Well Soon” card for an AIDS patient. Explain that some of the patients got HIV through sexual activity with prostitutes or adultery, some from their mothers when they were born, some through a blood transfusion, and others from being raped.

2. Ask each group member to make up a name for the patient they want to make a card for and to decide how their patient got HIV. Ask each group to draw a picture of their card and write a message inside for their patient.

3. When they have finished, ask group members if they have ever heard about people with HIV and AIDS being treated badly. Ask:
   - What are some examples of how people have been treated? Do you think this is the right way to treat people?
   - Why do you think people treat people with HIV and AIDS that way?
   - How do you like to be treated by your friends? Family? Neighbours? Teachers? Community? Should everyone be treated this way or only certain people?

4. Ask group members to think about their cards.
   - Who did they make their cards for?
   - Did they think about how a person became infected when making the card?
   - Did they feel differently about patients who were infected through their mothers compared with those who were infected from sexual activity with prostitutes?

5. Use the information in the Background Notes to have a discussion with the group on stigma. Ask group members to think about what they can do to fight stigma in their community.
24. Managing stress

Objectives

By the end of this session, group members will be able to:

• List ways to reduce stress.
• Explain how to deal with stress.

Background notes

The word stress is used to describe feelings of tension, worry, and strain. People feel stress every day and stress can be healthy. Sometimes, though, stress can be too much. During adolescence, we have to make many decisions, like what we plan to do in the future, if we are going to have sexual intercourse, or trying to develop an identity, which can all be stressful.

Too much stress can affect your physical and mental well-being. Stress can make people feel badly about themselves, cause people to do poorly in school, and make people question their ability. Stress is different for everyone. What is relaxing for one person may be stressful to another. When you are under stress you may experience the following feelings, thoughts, behaviours, or physical symptoms:

<table>
<thead>
<tr>
<th>Feelings</th>
<th>Thoughts</th>
<th>Behaviours</th>
<th>Physical symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Worried</td>
<td>Thinking badly about self</td>
<td>Difficulty speaking Crying</td>
<td>Tight muscles</td>
</tr>
<tr>
<td>Anger</td>
<td>Difficulty concentrating or making decisions</td>
<td>Doing things without thinking</td>
<td>Cold or sweaty hands</td>
</tr>
<tr>
<td>Fear</td>
<td>Forgetfulness</td>
<td>Yelling at friends/family</td>
<td>Headaches</td>
</tr>
<tr>
<td>Moodiness</td>
<td>Worry about the future</td>
<td>Grinding teeth</td>
<td>Back or neck problems</td>
</tr>
<tr>
<td>Embarrassment</td>
<td>Thinking the same thing over and over</td>
<td>Jaw tightening Smoking, alcohol, or other drug use</td>
<td>Trouble sleeping</td>
</tr>
<tr>
<td></td>
<td>Fear of failure</td>
<td>Having accidents</td>
<td>Stomach aches</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Increased or decreased appetite</td>
<td>More colds (homa) &amp; infections</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tired</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Rapid breathing</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pounding heart</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Shaking hands</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Dry mouth</td>
</tr>
</tbody>
</table>
Session guide

1. Facilitate a discussion by asking group members the following questions:
   • What is stress?
   • How can you avoid feeling stressed?
   • What can you do to feel better when you are stressed?

2. After discussing all of the questions, share the information from the Background Notes section and the tips for stress management on the next page.

Main points

• It is normal to feel stressed at times, though too much stress can be harmful.
• There are things that can be done to prevent feeling stressed and ways to feel better when you are stressed.
Tips for stress management

There are many ways to manage unhealthy stress. Everyone needs to find ways that work best for them. Here are some ideas that might help:

1. **Focus on your breathing.** Breathe in deeply through your nose and out through your mouth. Breathe in so your lower abdomen rises and falls. Count as you breathe out slowly.

2. **Talk.** When you feel stressed, try to express your feelings. Keeping feelings inside can increase stress. Share your feelings. Perhaps a friend, family member, teacher, or religious leader can help you see your problem in a new way. Talking with someone else can help clear your mind. Even if it is embarrassing, asking for help soon after a problem happens may prevent serious problems later.

3. **Take a “minute” holiday.** Imagine a quiet place in your mind. You cannot always run away, but you can dream. When you have the chance, take a moment to close your eyes and think about a place where you feel relaxed and comfortable.

4. **Be comfortable.** Be as comfortable as the situation will allow. Wear comfortable clothing. If it’s too hot, go somewhere where it’s not. If your chair is uncomfortable, move. Do not wait until your discomfort turns into a real problem.

5. **Move around.** Physical activity can help reduce and prevent stress. Being a student involves a lot of sitting, and sitting around can mean letting stress build up in your body. When you feel worried, angry, or bad, exercising can help you feel better.

   Try to find something you enjoy and make regular time for it. Running, walking, or dancing can be done anywhere. Remember, your body and mind work together.

6. **Take care of your body.** Healthy eating and getting enough sleep give your mind energy as well as your body. Avoid eating too much caffeine and sugar.

7. **Laugh.** Look for things that make you laugh, including yourself. Share jokes and funny stories with your friends. Laughter is good for you!

8. **Plan ahead.** Make a list of what you have to do, then do one thing at a time, crossing them off when you finish. Do the most important ones first. If you have to do something you do not want to do, do it early in the day and get it over with; the rest of your day will be less stressful.

9. **Know your limits.** When in a stressful situation, ask yourself: is this my problem? If it isn’t, leave it alone. If it is, can you solve it now? Once the problem is settled, leave it alone. Try to accept situations you cannot change. If a problem is beyond your control and cannot be changed at the moment, don’t fight the situation. Learn to accept what is, for now, until such time when you can change things.

10. **Must you always be right?** If you seem to get angry when things don’t go your way try cooperation, not fighting. It may help everyone feel better.

11. **Cry.** Crying during stressful times can be a healthy way to bring relief to your stress, and may prevent a headache or other physical problem from stress. However, if you are crying every day it could mean there is a problem and you should talk to an adult about it.

12. **Look for the good things around you.** It is easy to see only the bad things when you are stressed. Try to find five good things around you. These may seem like small events but as these good things add up they can help you begin to see things in a new, more balanced way.
Activity: Meditation

1. Choose a quiet place with room for everyone to sit.

2. Explain that meditation is one way to help reduce stress. There are many different types of meditation, but all of them have the same purpose – clear our minds. Meditation can be done anywhere at any time. It can be done alone or as a group.

3. Explain that today we can practice breathing meditation as a group. Read the following instructions:
   - Sit in a comfortable position. You can sit cross-legged on the floor or in any other position that is comfortable. Or if you wish, you can sit in a chair. The most important thing is to keep our back straight to prevent us from becoming sleepy.
   - Take deep breaths, and breathe out forcefully through your mouth a couple times.
   - Close your eyes half way and think about your breathing. Breathe slowly, through your nose and out through your mouth.
     Think about how the breath feels as it enters and leaves your mouth. Try to concentrate on this feeling and not think about anything else.
   - Your stomach should be moving out more than or the same as your chest. Check this by placing one hand on your chest and the other on your stomach while breathing. Both your chest and your stomach should move. You should feel your stomach go out as you breathe in.
   - When you breathe out, imagine that all your stress is leaving your body. Try not to think about anything other than your breath.
   - At first, your mind will be very busy. There will be a temptation to think about all the different thoughts that come into your head, but try to stay focused on how your breath feels. If you discover that your mind has wandered and is thinking about other thoughts, return to thinking about your breath.

4. After you have read the instructions, allow group members to sit quietly and continue thinking about their breathing in silence for at least 10 minutes.

5. After they have finished meditating, ask group members to share their feelings about the meditation.
   - How do you feel?
   - Was it difficult to focus on your breathing? Why?
   - Do you think this would help you when you are feeling stressed?
25. Managing anger and conflict

Objectives
By the end of this session, group members will be able to:

• List ways to deal with anger.
• List ways to resolve conflict in a positive way.

Background notes
Anger is a completely normal, usually healthy, human emotion. But when it gets out of control and turns destructive, it can lead to problems. Anger is an emotion that ranges from annoyance to rage. Like other emotions, it causes physical changes. When you get angry, your heart rate and energy levels go up. You could be angry at a specific person or event, or your anger could be caused by worrying about personal problems. Memories of bad events can also make you feel angry.

Anger is natural, especially when others are attacking, hurting, or being mean to us. Anger helps us to defend ourselves. A certain amount of anger is necessary for survival. We cannot, however, physically attack every person that irritates or annoys us.

People use many ways to deal with their angry feelings: express them, keep them to ourselves, or relax.

1. Expressing your angry feelings in a way that does not hurt others is healthy. To do this, you have to learn how to say clearly what your needs are, and how to get them met, without hurting others.
2. Try to think about something happy.
3. Try to relax. This means controlling how you act, as well as what you are thinking and feeling. If someone says or does something that normally makes you angry, try to react in a new calm way.

When you are angry, try to control your feelings and actions. You cannot stop or avoid the things or the people that make you angry, nor can you change them, but you can learn to control how you behave. Counsellors now say that it is dangerous to express all of your angry feelings because it can actually make you angrier and does not help solve the situation. It is best to find out what makes you angry, and then develop ways to keep those things from making you angry.

Sometimes, our anger is caused by very real problems in our lives. Not all anger is wrong, and often it is a healthy response to difficult times. Not all problems have a solution. In these situations, try not to focus on finding the solution, but on how you handle the problem. Make a plan, and check your progress along the way. Try your best, but do not punish yourself if an answer does not come right away.
Resolving conflict
Conflict means to fight, argue, or disagree. Conflict is natural and happens in almost every relationship. Since conflict is unavoidable we must learn to manage it. Conflict is a sign of a need for change and better communication. Conflict cannot be resolved unless it is addressed with the person or people involved. We face conflicts with people who think and act differently or have different values and beliefs than we do. Young people face conflicts with friends, siblings, parents, teachers, and other adults. It is normal for people to disagree, but it is important to resolve these disagreements in a helpful and healthy way.

- Stay calm. If you keep your emotions under control you have a better chance of hearing what the other person is trying to say.
- Listen carefully without interrupting. Ask questions and listen to answers. Even if you know what the other person is going to say, resist the temptation to interrupt.
- Acknowledge the other person’s thoughts and feelings. You do not have to agree with the other person to acknowledge his or her feelings and why he or she may feel that way.
- Be respectful. Separate the people from the problem, treat people the way you would like to be treated if you were in the same situation.
- Communicate clearly and respectfully so your viewpoint can be understood. If you do not communicate your views clearly, it will be hard to convince people that they should listen to you.
- Look for things you agree on and try to agree as much as you can. Your interests may be more alike than you think.
- Look forward, not backward. Stay in the present and plan for the future, do not think about the past. Move to resolving the situation and away from what happened in the past to cause the conflict.
- Stay focused on the topic at hand. Don’t expand an argument. If there are a number of problems, deal with them one at a time.
- Work together. This requires that each person stop blaming the other person and take ownership of the problem. Make a commitment to work together and listen to each other to solve the conflict.
- Try to find a solution that makes both people happy, not a victory for one person. Conflicts don’t have to end with a winner and a loser.
- Be creative. Finding a resolution to the problem that satisfies everyone requires creativity and hard work. Be careful not to give in simply to avoid conflict or maintain peace. Agreements reached too early usually do not last.
- Be specific. When problem solving be very specific. For example if you are using a roommate agreement to facilitate the discussion make sure that everyone fully understands each point that is written down. Clarify ambiguous terms that each person may interpret differently.
Session guide

1. Facilitate a discussion by asking group members the following questions:
   - Do you think anger is a normal emotion? Why or why not?
   - How can people deal with angry feelings?
   - What is conflict?
   - How can conflict be resolved in a positive way?

2. After discussing all of the questions, share the information from the Background Notes section.

Main points

- Anger is a normal emotion, but when it gets out of control it can cause problems.
- It is normal for people to disagree, but it is important to resolve conflict in a helpful and healthy way.

Activity: Conflict resolution role play

1. Divide group members into small groups with four people. Ask group members to talk about an argument they had recently and choose one.

2. Ask the group to role play the argument and how they would resolve it.

3. After 10 minutes ask group members to come back together as a large group. Ask group members to talk about their role plays and how they solved the disagreements. Allow other group members to share their opinions about how the disagreements were solved.
26. Drugs

Objectives

By the end of this session, group members will be able to:

• List the risks of drug use.
• List ways to help someone who is abusing drugs.
• Plan how to say no to drugs.

Background notes

Drugs are chemicals that change the way a person’s body and mind work. When people talk about drugs, they usually mean abusing legal drugs or using illegal drugs. Common drugs in Kenya are marijuana or bhang, miraa, glue, alcohol, and cigarettes.

Not all drugs are bad or illegal. When we are sick, we may take medicines. Medicines are legal drugs that can help us. Doctors can recommend patients take them, stores can sell them, and people can buy them. But it’s not legal, or safe, for people to use these medicines any way they want or to buy them from people who are selling them illegally. Cigarettes, alcohol, and miraa are legal drugs that can cause serious health problems.

Why are illegal drugs dangerous?

Illegal drugs are not good for anyone, but they are very bad for a young person whose body is still growing. Illegal drugs can damage the brain, heart, and other important organs. Cocaine, for instance, can cause a heart attack – even in a young person. While using drugs, a person is also less able to do well in school, sports, and other activities. It’s often harder to think clearly and make good decisions. People can do dangerous things that could hurt themselves - or other people - when they use drugs.

Why do people use illegal drugs?

Sometimes young people try drugs because their friends are using them or they might be curious or just bored. A person may use illegal drugs for many reasons, but often because they help the person escape from reality for a while. If a person is sad, a drug can - temporarily - make the person feel better or forget about problems. But this feeling only lasts until the drug wears off.

Drugs don’t solve problems and using drugs often causes even more problems than the person had in the first place. A person who uses drugs can become dependent on them, or addicted. This means that the person’s body becomes so used to having this drug that he or she cannot function well without it. Once a person is addicted, it’s very hard to stop taking drugs. Stopping can cause a person to feel sick until the person’s body gets adjusted to being drug free again.
Can I tell if someone is using drugs?

If someone is using drugs, you might notice changes in how the person looks or acts. Here are some of those signs, but it’s important to remember that feeling sad or another problem could be causing these changes. A person using drugs may:

- Lose interest in school.
- Change friends (to spend time with people who use drugs).
- Become negative, in a bad mood, or worried all the time.
- Ask to be left alone a lot.
- Have trouble concentrating.
- Sleep a lot (maybe even in class).
- Get in fights.
- Have red or puffy eyes.
- Lose or gain weight.
- Cough a lot.

How can you help?

If you think someone is using drugs, the best thing to do is to tell an adult who you trust. This could be a parent, other relative, teacher, coach, or school counsellor. The person might need professional help to stop using drugs. An adult can help the person find the treatment he or she needs to stop using drugs. Another way young people can help each other is by choosing not to try or use drugs. It’s a good way for friends to stick together.

Health risks

The health risks of commonly used drugs are described below.

- **Drinking alcohol** can affect your coordination, judgment, vision, and memory. Alcohol affects your brain and can damage every organ in your body. When you drink alcohol it goes straight into your blood and can increase your risk for a variety of diseases, including cancer. Alcohol affects your self-control and can lead to risky behaviours, such as having unprotected sex. Drinking large amounts of alcohol at one time or very fast can cause alcohol poisoning, which can lead to a coma or even death.

  Young people’s brains and bodies are still developing; alcohol can cause learning problems or lead to adult alcoholism. Alcohol that is made by people (and not bottled by a company) is sometimes called kumi kumi or changaa. This is even more dangerous because it is not regulated. It can cause headaches, blindness, or even death.

  First-time smokers often feel pain or burning in the throat and lungs, and some people feel sick or even throw up the first few times they try tobacco. Over time, smoking can cause cancer, and damages the lungs, heart, and other organs. It is hard for smokers to do well at sports. Smoking can make it difficult to become pregnant and can cause sexual health problems in men. Health problems from smoking may seem very far off when we are young, but smoking can affect a person’s body quickly. Young smokers are sick more, do poorly at
sports, become injured more, and take longer to get better after falling ill. Also, they have bad breath, bad skin, and bad smelling hair and clothes.

- **Using glue** can cause personality changes, memory loss, seeing things, loss of coordination, not speaking properly, feelings of numbness, paralysis, and weight loss. It also damages the nerves, blood, brain, heart, kidneys, liver, lungs, muscles, and skin.

- **Smoking marijuana** (bhang) can cause memory loss, reduces learning skills, lead to chronic cough, bronchitis, and lung damage and increases risk of cancer of the head, neck, and lungs.

- **Chewing miraa** or (chat/khat) can cause sleeplessness, worry, loss of appetite, not being able to go to the toilet, bad dreams, and affect a man’s ability to have sex. Soon after chewing, miraa can cause dizziness, fast heartbeat, and pain in the stomach. Chewing miraa can lead to reduced sperm count and increased risk of heart disease and liver problems.

**Remember:** Planning how you will say no to drugs and alcohol can make saying “no” easier if they are offered to you. Imagine different situations and what you would do.

---

**Session guide**

1. Facilitate a discussion by asking group members the following questions:

   - **What are drugs?**
   - **What are some of the health risks caused by drug abuse?**
   - **What would you say if someone offered you drugs or alcohol?**
   - **What would you say to a friend who was abusing drugs or alcohol?**
   - **Why do you think that young people use drugs?**

2. After discussing all of the questions, share the information from the Background Notes section.

**Main points**

- **Drugs are chemicals that change the way a person’s body and mind work.** Common drugs in Kenya are alcohol, marijuana or bhang, miraa, glue, and cigarettes.

- **Abusing legal drugs or using illegal drugs can be very bad for a young person whose body is still growing.** They can damage the brain, heart, and other important organs and can make it difficult to think clearly and make good decisions.

- **Planning how you would say no to alcohol and drugs makes saying no easier if they are offered to you.**
Activity: Tree of consequences

1. Ask group members to explain why they think people start using drugs. Draw a "Tree of Consequences" and put the reasons for starting to take drugs as the roots.

2. Ask the group to list the consequences of using drugs; draw these on the branches and fruit. Ask group members to explore each of the different branches.

3. Ask group members to think about how they could help a friend who was using drugs.
References

Answering Your Questions About Sex page. Teen Growth website. Available at: www.teengrowth.com


HIV insite website. Available at: http://hivinsite.ucsf.edu


