



LIFE-SKILLS

MANUAL

**Caribbean Community (CARICOM) Project
Funded by the GFATM**

SECTION ONE

THE LIFE SKILLS PROGRAMME

BACKGROUND AND INTRODUCTION

WHO IS THE LIFE SKILLS MANUAL FOR?

The Life Skills Manual is designed for Out-of-School Youth; however, if you answer “yes” to any of these questions the Manual might be for you as well.

- Are you a probation officer working with out-of-school youth who have to cope with the many challenges they face on a daily basis in the home and community?
- Are you a church leader working to help young people to make right and healthy choices?
- Are you a Health and Family Life (HFLE) Coordinator with the responsibility of training facilitators to effectively deliver the Life Skills education to adolescents?
- Are you a Family Life Educator or a member of the community relations department of the police force working with families and young people with the hope of seeing positive changes in their lives and their communities?
- Are you a counsellor working to help families and young people overcome or cope with their problems?
- Are you an HIV/AIDS Programme Coordinator with the difficult task of attempting to arrest the rising rate of infection among the youth population?
- Have you spent many years providing health information to young people and are yet to see positive behavioural changes?
- Are you a parent, community health worker, community development worker, youth leader and peer educator concerned about the welfare of youth, the increase in HIV and AIDS among the youth and the possible impact on the social and economic life of your community?
- Are you a young person concern for your friends and therefore seek ways to help them develop positively?

ABOUT THE MANUAL

The aim of the Manual is to introduce educators, facilitators and others who work with young people to a way of teaching the Life Skills and HIV/AIDS Education.

The Manual, along with the training in its use, will give persons working with young people, the practical skills and knowledge needed to enhance their personal and social competence through the development of Life Skills. This includes the acquisition of situation specific skills and strategies, while addressing attitudes, values and knowledge relevant to decisions being made about healthy lifestyles and other related issues of health, nutrition, relationship and the environment.

The Manual consists of five Sections:

1. Introduction
2. Introduction to Life Skills
3. Career Planning for Youth: Beating the Odds
4. HIV/AIDS Education
5. Parenting

Each Section contains different lesson ideas and activities that are particularly useful when working with young people, particularly those who are vulnerable and teen parents. The lessons address issues of self-esteem, conflict resolution, problem solving, communication, interpersonal relationships and decision-making skills, career planning, parenting and sexual behaviours. The strategies and activities used to sensitise participants are interactive and participatory in nature, and are relevant to all who have a role in addressing the physical, social, psychological and emotional well-being of young people.

BASIC PRINCIPLES UNDERPINNING THE MANUAL

The Life Skills manual has been written to reflect the following basic principles:

1. Can be used to teach out-of-school youth.
2. Can be used in traditional and non-traditional learning environments.
3. Create supportive learning environments where the needs of young people are considered.
4. Is flexible and can be used for young people with a range of abilities
5. Reflects principles in best practice in HIV/AIDS education
6. Strategies and activities relating to HIV and AIDS and other health issues, such as sexually transmitted infection, teenage pregnancy and obesity.
7. Activities relating to the development of skills, attitudes and values as well as relevant information which can be used to influence healthy lifestyle and positive behaviour changes.
8. Activities are interactive, participatory and based on experiential learning and group work
9. The facilitator must identify the factors that impact negatively on the health and well-being of young people.
10. School, family and community involvement are of critical importance to outcomes.
11. Training of facilitators is critical to the successful implementation of the Manual.

LIFE SKILLS PROGRAMME IN THE CARIBBEAN

The Caribbean Community (CARICOM) comprises of fourteen (14) Member States and five (5) Associate Members. The fourteen member States are: Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Montserrat, St. Kitts/Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname and Trinidad and Tobago. The Associate Members of the Community are: Anguilla, Bermuda, British Virgin Islands, Cayman Islands and Turks and Caicos Islands.

Increasingly in the Caribbean, changing realities place additional strains on children and young people, modifying their behaviour and putting their life and health at risk. The family unit and values are under strained. Lifestyles, values and attitudes are changing; therefore, Education Systems in the Region needed to develop curricula to respond to these changes.

In the 1990's the Health and Family Life Education (HFLE) Programme was implemented in primary and secondary schools in some Member States and in others, what is now commonly known as the Life Skills Programme was taught, but no serious attention was paid to it. HFLE was not time-tabled, time-tabled but not taught, or taught by teachers who were not trained or qualified to teach it. The findings of a survey to determine the status of HFLE in the Region (Semei, 2005) indicated that, for the most part, teachers who were not qualified to teach it delivered the programme in an ad hoc manner. In addition, the emphasis was on knowledge and information and not on "Life Skills". A significant number of planners, decision makers, school administrators, teachers, parents, religious leaders and other citizens of the Caribbean Community (CARICOM) did not take HFLE seriously because of its perceived sexual connotations. As a consequence, HFLE has been considered low in status and its impact has been negligible."

It became very clear, that in order to seriously address the numerous problems and challenges that young people encounter on a daily basis, some serious modifications had to be done to the HFLE Programme with the emphasis placed on the acquisition of **Life Skills**. The CARICOM Secretariat, United Nations International Children Emergency Fund (UNICEF), with support from the Pan American Health Organisation (PAHO) and other members of the HFLE Regional Working Group activated the process to accomplish that outcome.

In 1994, the Caribbean Community (CARICOM) Standing Committee of Ministers of Education passed a resolution to support the development of a comprehensive approach to HFLE by CARICOM and the University of the West Indies (UWI). Support was also solicited from the United Nations agencies and other partner agencies working in the Region. In 1996, Ministers of Education and Health endorsed the document, "A Strategy for Strengthening Health and Family Life Education (HFLE) in CARICOM Member States."

At the Sixth Special Meeting of the Council for Human and Social Development (COHSOD) held in Trinidad and Tobago in April 2003, the Council, realizing the significant contribution that HFLE can make to help young people develop skills to build competencies and adopt positive behaviours, endorsed the need to develop a Life-Skills based HFLE Regional Curriculum Framework. This Framework, with **Regional Standards and Core Outcomes**, shifted the focus from what was a knowledge-based curriculum to one of life skills-based. The Framework was intended to serve as a guide to Member States to review or develop their national Life Skills HFLE curriculum. Additionally, the COHSOD agreed that the Life Skills based HFLE should be a core area of instruction at all levels of the education, and should also be used to develop Out-of-School Youth programmes. The COHSOD also endorsed the:

1. Re-activation of the HFLE Regional Working Group
2. The inclusion of HFLE in Teacher Education Programmes;
3. Training for teachers, parents and other stakeholders

The CARICOM Secretariat, in collaboration with UNICEF and support from PAHO, pursued the mandates given by Council. The Framework was developed for ages 9 – 14 years, the Core Curriculum Guide for Teachers was revised, and Teachers, teacher educators, curriculum officers and HFLE Coordinators were identified from all levels of the education system and trained as trainers in the Life Skills programme. These trainers were to conduct training sessions in their respective countries around the Life Skills topics. It is hoped that by September 2006, the Life Skills programme will be implemented in schools in all Member States.

While the focus has been on in-school youth, no attention was paid to the component of the HFLE programme which deals with out-of-school youth. In February 2004, a Regional HFLE Sub-Committee for Out-of-School Youth was established to identify the needs of out-of-school youth and to develop programmes for them. However, additional instructional materials were needed to complement the Draft Work Programme developed. This Life Skills Manual for Out-of-School Youth was developed with assistance from the Global Fund and the CARICOM Secretariat.

The rate of HIV/AIDS and STD infection is growing steadily and lifestyle related diseases threaten the future of Caribbean youth. Community leaders, HIV/AIDS Coordinators, teachers, parents and health workers are all looking for answers. It is not possible to tell at this time if this Life Skills Programme will prove effective in influencing behaviour change, but with the help of every parent, community leader, health worker, teacher, facilitator, concerned individual and the youth, perhaps this approach can positively affect the lives of those young people to whom we will leave the future to build.

The Life Skills Manual can therefore be used as an educational tool to guide all who work with young people in the development of Life Skills and HIV/AIDS Education programmes.

Profile of the Caribbean Youth

The United Nations defines a youth as an individual between the ages of fifteen to twenty four years old, however, according to Caribbean youth policies a youth is anyone fifteen to thirty years old (Alexis, 2000)¹. An eighteen year old is legally an adult in most countries, however this right is denied to Caribbean youth because of the constraints of the labour market, non-involvement in the decision making process, incapability to own goods and property and the lack of status and role in society (Danns, Henry, and LeFleur 1997).

The following are the features of youth or adolescent development of the Caribbean youth, since the majority of them, according to a World Bank Report (2003), are “generally happy and healthy”. Many view the adolescence period that is, the transition stage between childhood and adulthood, as a challenge. Nevertheless, it has been noted that many of the Caribbean youth navigate this phase unscathed. However, it has been recognized that some Caribbean youth are unable to confront the challenges brought about by their environment.

There are three distinct stages in the adolescence period-early adolescence (12-14 years), middle adolescence (14-17) and late adolescence (17-19); this explains the major difference between a thirteen year old and an eighteen year old.

CHARACTERISTICS OF THE EARLY ADOLESCENT (12-14)

The individual struggles with a sense of identity- who am I. There is an improvement in the ability to use speech to express oneself. Feelings are expressed using more actions than words. Close friendships gain importance. In fact, less affection is shown to parents and in some instances there may be occasional rudeness. The adolescent realizes that parents are not perfect, and identifies parent’s faults. There is a tendency to revert to childish behaviour. The peer group influences interests and clothing styles and occasionally experiments with cigarettes, marijuana and alcohol.

CHARACTERISTICS OF THE MIDDLE ADOLESCENT (14-17)

During the early and middle phases of adolescence, the young person is described as ego-centric; this is because the focus is on him/her-“How do I look? Will they like me? Will they think I am stupid?”

There is a movement towards independence i.e. they become autonomous. Autonomous teens have the ability to make and follow through with their decisions, live by their own principles of right and wrong and become less emotionally dependent on parents. As it pertains to their parents, the individual at this time complains that parents interfere with their independence. Additionally, there is a lowered opinion of parents and withdrawal of emotions from them.

There is self-involvement and the individual alternates between unrealistically high expectations and poor self concept. There is a strong emphasis on the peer group in an effort to make new friends. As regards their sexuality, the individual is concerned about his sexual attractiveness; there is a movement towards heterosexuality with fears of homosexuality. There are feelings of love and passion; they show tenderness and fear toward the opposite sex. Their relationships are frequently changing.

The adolescent begin to develop their ideals “Who or what do I wish to be in life?” and select role models which they emulate. Despite the process of positive youth development in the Caribbean, this can be hampered by a number of factors such as crime, poverty, drugs and violence.

CHARACTERISTICS OF THE LATE ADOLESCENT (17-19)

After the adolescent has gone through the turbulent early and middle adolescence phase, he is now pulling things together. Parents report that they get along better with the late adolescent. During this time, the teenager is busy thinking about the future, explores more long term relationships, has high moral standards and has adult thinking capacity. The teenager is less self conscious about his/her body and is less influenced by the peer group.

THE PROBLEMS OF OUT-OF-SCHOOL YOUTH

The problems and challenges that young people and families face in the Caribbean Region are insurmountable and can cause mental and psychological stress for them. Early adolescence, however, is recognized as the last best chance for communities to ensure that youth have the coping mechanisms in place to prevent their entry into high-risk practices (Scales, 1996).

Problems are not independent; they know no Zip code or culture, nor is it just about race, religion, class and socioeconomic status. Problems may be socially, physically and emotionally damaging and can severely hurt and endanger the health and well being of youth in ways that are serious and unacceptable. Some of these problems can cause unnecessary social costs or can impair the ability of youth to become productive members of their communities.

However, research has shown that the epidemic of poverty, drugs, crime and violence greatly affect those from low income families who live in deprived communities in larger numbers (Joseph, 1995). Yet, finding the resources to invest in out-of-school youth are difficult because there is a tendency to adhere to the philosophy that investments are more productive and worthwhile when made at the earliest intervention levels of early childhood and adolescence. This philosophical view creates difficulties for community, health and youth development officers who work with out-of-school youth.

The World Bank Country Study of 2003 highlights the many negative youth outcomes or behaviours observed among Caribbean youth viz. early sexual initiation, HIV/AIDS, sexual and physical abuse leaving (drop out and exit), unemployment, crime and violence, substance abuse and drug dealing, and social exclusion.

Early sexual initiation is a common feature of the Caribbean region. This early sexual initiation has implications for young people as regards early pregnancies, STIs and HIV infection². Data from a study conducted of nine CARICOM counties³ indicated that of the school going population, one third of the young people were sexually active. More than half of the boys and a quarter of the girls revealed that by age ten or younger they had had, their first sexual encounter. The figures vary across the Caribbean with twenty percent of Jamaican males and females having their first sexual encounter by age 11 to 13 and forty five percent of⁴ St. Lucia's sexually active adolescents having their first sexual encounter before the age of ten.

Although, one third of the adolescents in the CARICOM study have had early sexual intercourse, half of the subjects (of this figure, forty eight percent were girls and thirty two percent boys) reported that it was forced intercourse.

One tenth of the subjects of the CARICOM study disclosed being sexually abused. The perpetrator is usually an adult in and outside of the home, siblings and other teens. Little gender difference is seen in the reports of sexual abuse of boys and girls. Conversely, the

fear of being sexually abused was reported by one in eight of the sample. The act of child sexual abuse is viewed as being normal in the Jamaican context.

As regards teenage pregnancy, Antigua and Barbuda has high birth rates of more than 100 births per 1000 women aged 15 to 19 years. The CARICOM study showed that ten percent of the school going adolescent population, of which seven percent had been pregnant or twelve percent had gotten someone pregnant. Contraceptive use is very low among sexually active adolescents.

Another problem plaguing Caribbean Youth is risky sexual behaviour and HIV/AIDS. Currently, the Caribbean Region has the highest HIV/AIDS rate after Sub Saharan Africa. In at least one third of new cases, it was observed that the individual contracted the disease between the ages of 15 to 24. Of the AIDS cases diagnosed, about eighty three percent fall in the fifteen to fifty four age groups. Early sexual initiation and low condom use are the reasons for the high incidence of HIV among youth.

The young people in the CARICOM study of the sample reported a history of abuse, with one sixth having been physically abused at the hand of an adult in the home. The use of harsh disciplinary action on children particularly boys is common in Jamaica, Barbados and Dominica. The explanation given for utilizing harsher punishment on boys is to make them tougher and a means of control. It is culturally acceptable to use corporal punishment to discipline children both at home and in schools.

The inability to attain a secondary school education is one of the reasons for the number of youth being out of school. More than fifty percent of youth in some Caribbean states' highest level of education is primary school. Poverty is an indicator for the number of boys who do not attend secondary school. Likewise, gender is another predictor, although on entry into the primary level more males are enrolled, this figure decreases at the secondary and tertiary level.

Unemployment in the Caribbean, according to the World Bank Country study (2003), "is a youthful phenomenon". St. Lucia has the highest rate of unemployment in the fifteen to twenty four age groups, followed by Dominica, St. Vincent and the Grenadines and Jamaica. These results in youth feeling despondent and frustrated because they want to work, but the opportunities for employment are limited.

As regards the issue of crime and violence most homicide victims and perpetrators are young men. Although most victims of violence are young people it is important to mention that most Caribbean countries have a youthful population. Violence is ever prevalent in the lives of Caribbean youth. According to the World Bank Country study (2003), one fifth of the subjects surveyed carried weapons to school and used them during fights. Additionally, gang related violence is prevalent, and at least twenty percent of school going boys and 12.5 percent of school going girls belonged or are members of a gang. The gangs are usually of a criminal and drug dealing nature and

provide the youth with employment opportunities and a means for dealing with the violence in their communities.

The Life Skills Manual is designed to help the Caribbean Youth to cope with the some of these problems that impact negatively on their lives. The following is a summary of these problems:

Social and Health Problems Affecting Children, Youth and Families in the Caribbean

Problems That Can Cause Social and Psychological Harm

- Adolescent HIV/AIDS
- Sexually transmitted diseases
- Obesity
- Homelessness
- Drug and alcohol abuse
- Teenage pregnancy
- Child abuse
- Child neglect
- Truancy
- Inadequate child supervision
- Discrimination and social exclusion

Problems That Can Affect Productivity and Cause Emotional Harm

- Lack of employment opportunities
- Inadequate education
- Poor quality education
- Poorly funded schools
- Lack of parental support
- Lack of child care
- Adolescent pregnancy
- Drug and alcohol abuse

THE LIFE SKILLS CONCEPT

The Life Skills programme is a comprehensive behaviour change approach that concentrates on the development of the skills needed for life such as communication, decision-making, managing emotions, assertiveness, self-esteem building, resisting peer pressure, and relationship skills. Additionally, it addresses the important related issues of empowering girls and guiding boys towards values. The programme moves beyond providing information. It addresses the development of the whole individual, so that a person will have the skills to make use of all types of information, whether it is related to HIV/AIDS, STDs, reproductive health, safe motherhood, other health issues, and other communication and decision-making situations. The Life Skills approach is completely interactive, using role-plays, games, puzzles, group discussions, and a variety of other innovative teaching techniques to keep the participant wholly involved in the sessions.

In practice the skills are not separate or discrete, and more than one skill may be used simultaneously.

The Life Skills Approach

The Life Skills approach is built on the assumption that opportunities can be created for youth to acquire skills that will boost their protective factors and enable them to avoid being manipulated by outside influences. The use of life skills is to enable youth people to be able to recognise the coercive forces of social pressures in their immediate environment that promote behaviours that can jeopardize their health, emotional and psychological well-being.

The Life Skills approach aims to assist young people develop healthy lifestyles and to regain control of their behaviours, while at the same time take informed decisions that will positively influence their values, attitudes and behaviours. This approach should serve as a means to develop in young people skills that will lead to optimum health, social and physical well-being.

Life Skills education is designed to facilitate the practice and reinforcement of psychosocial skills in a culturally and developmentally appropriate way. It contributes to the promotion of personal and social development, the projection of human rights, and the prevention of health and social problems.

VALUES

Another justification for the life skills approach is that it is a natural vehicle for the acquisition of the educational, democratic and ethical values. In the delivery of Life Skills, the fostering of laudable attitudes and values is set alongside the knowledge and skill components. Some of the commonly held values are respect for self and others; empathy and tolerance; honesty; kindness; responsibility; integrity; and social justice.

The teaching of values is to encourage young people to strive towards accepted ideals of a democratic, pluralistic society such as self-reliance, capacity for hard work, cooperation, respect for legitimately constituted authority, and ecologically sustainable development. This is done in the context of existing family, spiritual, cultural and societal values, and through critical analysis and values clarification, in order to foster the intrinsic development of values and attitudes (Regional Curriculum Framework, 2005).

TIPS FOR IMPLEMENTING LIFE SKILLS

Below are some suggestions for implementing a Life Skills Programme in your community:

- Before implementing the programme, train the persons who will be used as trainers and facilitators so that they can conduct Life Skills Programmes within their own populations – in clubs, churches, uniform groups, and so forth. It is important that they understand the programme in order to deliver it. The training will be invaluable for the support of the programme and help in its successful implementation.
- Do not limit your Life Skills Programme to only young persons. Life Skills can be implemented to so many different populations as indicated in Section 1 of the Manual; so adapt.
- Pay particularly attention to the group and the community with which you work and ensure that you use a language that is easily understood.
- Consider the gender division of the facilitators. It would be helpful if gender equality is reflected in the implementation of Life Skills. It also helps to have the perspectives of both sexes on the various topics.
- The inclusion of HIV/AIDS in this Manual does not focus on alternatives to sex or other issues relating to sex and sexuality. Experience has shown that there is little cooperation from participants when one speaks about sex. However, when you address issues of interpersonal relationships,

communication, decision making, managing emotions and so forth, sexuality and sexual health always come up. Depending on the group and the nature of the community, an indirect approach to addressing sex and sexual choices and activities may be more culturally appropriate.

- For sensitive topics it may be wise to separate into single sex groups to achieve maximum participation from both males and females. However, it is imperative that all groups come back together for plenary to share their ideas. The success of the programme will, in part, depend on the comfort level of both sexes working together.
- Always start each session with an ice breaker.
- If you are working at the community level you can integrate Life Skills sessions into your daily or weekly group activities. This will require little or no funding.
- Working at the district level will require funding to facilitate training of facilitators. You may need to source funds from organizations and agencies that might be supportive.
- Consider using Life Skills in your everyday activities. The Manual provides hints on how the Life Skills Programme can be implemented in your community.
- It is critical that for the success any Life Skills Programme which is expected to bring about behaviour change, that the facilitators have a clear understanding about the attitudes of the participants and the community. Assessments are therefore important at the commencement of the Programme.
- Written questionnaires can be used as an assessment tool to gather information on participants' knowledge, attitudes, behaviour and perspectives on various issues. Focus group discussions can also be used to provide more in-depth and qualitative information.
- Evaluate the Programme at various points of its implementation. The questionnaire can be reworded and the same questions asked at a later date.
- Compare the responses to the baseline questionnaire. This is an easy way to provide a quantifiable mechanism to knowledge and reported attitudes and behaviour change.
- Assessments and evaluation must form part of the training for facilitators.

TIPS FOR FACILITATORS

Here are some tips to help make your facilitation effective:

- Start your Life Skills Programme with sessions that motivate participants to want to be involved;
- Identify ways to help your participants see the need for a Life Skills Programme. Examples might include the social, psychological and emotional impact of AIDS or the consequences of unwanted and teenage pregnancy;
- Provide information and skills contained in the session;
- Provide opportunities for your participants to practice information and skills;
- Make sessions lively and participatory;
- Be enthusiastic and creative in front of your group;
- Use ice breakers or fun energizers before each session;
- Avoid using a monotonous tone when presenting;
- Have fun! Move around the room and dramatise!
- Always gauge the mood of your participants and make the necessary adjustments to methods of delivery;
- Make effective use of teaching apparatus
- Use the room to display your work for ease of reference by you and the participants;
- Pay particular attention to the time of day that you schedule your sessions; use a delivery style that will hold attention of participants;
- Each session should be presented so that it moves logically into the next session;



SECTION TWO



INTRODUCTION TO LIFE SKILLS

MODULE ONE

LIFE SKILLS PROGRAMME: INTRODUCTION

UNIT ONE

OBJECTIVES:

By the end of Unit One, participants will be able to:

- Explain the definition of Life-skills
- Examine the various categories of life skills

What Are Life Skills?

Different people define life skills in different ways. But simply put, life skills tell us “what to do and how to do it.” (WHO 1997)

“Life skills help individuals make informed decisions, think critically and creatively, communicate effectively, build healthy relationships, empathise with others, cope with and manage their lives in healthy and productive ways.” (WHO and UNICEF 2003)

The list of skills known as life skills can be extensive and can mean different things to different people.

In this document life skills refer to a group or set of skills that are generally accepted as motivating individuals to take action to encourage behaviours for the maintenance of complete physical, mental and social well being.

CATEGORIES OF LIFE SKILLS:

The core of life skills that facilitate the practice of healthy behaviours is divided into the following groups:

Social Skills	Cognitive Skills	Emotional Coping Skills
Interpersonal Communication Skills Negotiation /Refusal skills Empathy Skills Cooperation Skills Advocacy Skills	Decision Making / Problem Solving Critical and Creative Thinking Skills	Healthy self management skills to include: Managing stress Managing Feelings Creating Self Awareness Building self esteem /self confidence Self Monitoring Skills Resiliency Skills

UNIT TWO

OBJECTIVES

In this unit participants will be able to:

- Explore opportunities for implementing life skills
- Examine methodologies for implementing life skills
- Identify the components of a life skills programmed
- Create appropriate learning environments for the delivery of life skills

WHY LIFE SKILLS ARE NOT ENOUGH?

It is generally agreed that life skills help us practice healthy behaviours. But life skills are more effective when we work at removing those factors that facilitate negative behaviours.

Let us examine the following scenario:

Marcia is a thirteen-year-old girl who attends secondary school. Her mother with whom she lives is extremely poor. Marcia has been able to attend school with the help of a mini bus driver who gives her money in exchange for sexual favours. Marcia is unhappy about her sexual relationship with the bus driver but does not know how else to help herself through school.

In the above scenario Marcia may have had the skill to refuse the mini bus driver but may not have been able to do so unless action is taken to deal with her poverty situation. It can therefore be said that **‘Poverty’ is a determinant of Marcia’s behaviour.**

Therefore, addressing determinant of ‘Poverty’ in Marcia’s case coupled with the use of life skills such as ‘refusal’ and/or ‘decision making’ would be the most effective way helping her achieve positive health outcomes and social relationships.

OPPORTUNITIES FOR TEACHING LIFE-SKILLS

The present day environment in which individuals live, particularly children and adolescents, present a multitude of risk behaviours and determinants for applying the teaching of life skills. Individuals should therefore be empowered to apply life skills to all the determinants and risk factors that impact personal lives with a view to motivating positive health and social behaviours.

The following represent some examples of risk factors and determinants that provide opportunities for the application of life skills.

Some Selected Determinants and Risk Behaviours

The risks and or determinants to be addressed can be categorized as follows:

Social Factors	Household Factors	Community Factors	Adolescent Individual Factors
Cultural Norms: <ul style="list-style-type: none"> • gender role expectation • Unequal power relations between male and female beliefs • political environment 	<ul style="list-style-type: none"> • Parental expectations and values • Parental guidance • Size and composition of household • Mother's or Care giver's level of education 	<ul style="list-style-type: none"> • Attitude of peers • Peer influence • School influence • Violence • Substance abuse • Media influence • Employment opportunities • STI's including HIV/AIDS 	Physical development Psycho social development <ul style="list-style-type: none"> • Educational /cognitive skills • Social skills • Relationship with parents and other family members • Emotional difficulties to include self esteem, self worth self concept • Drug/substance abuse • Perceptions of media • Finding social supports • Career choices • Forming intimate relationships • Access to health services

METHODOLOGIES FOR APPLICATION OF LIFE SKILLS

Theories of Social Learning, (Bandura, 1977) Constructivism, (Vigotsky) Multiple Intelligences, (Gardener, 1993) Child and Adolescent, Resiliency (Zigler et. al 1991; Bernard 1991;) are among a list of theories that point to ‘**interactive methodologies**’ with **the learner at the centre** of the process as being the most effective .

Methodologies for life skills can therefore include the following:

Role- play, music, dance, scenarios, research, case studies, art, poetry, songs... These methodologies should as much as possible be built around authentic experiences. Such experiences coupled with skills development must drive learners to take positive action on their own behalf, that of their families and communities for improvement to physical, mental and emotional health and well being of all.

Components of Life Skills Program

All that has been said thus far suggest that a Life Skills Program should include the following components:

1. Risk behaviours and or determinants form the **Content** of the program
2. Appropriate Life Skills originating from the core group of skills (Cognitive, Social, Emotional Coping Skills) to apply to the content
3. Interactive Methodologies

Creating Environments for Life Skills Education

The environment within which a Life Skills program should be delivered must be non judgmental. The youth must also be given the opportunity to participate in the design of the program so as to allow for ownership as imposed programs have had little success.

MODULE TWO

COMPONENTS OF LIFE SKILLS

UNIT ONE

OBJECTIVES

In this unit participants will be able to:

- Identify the components of the various life skills
- Apply life skills to health behaviours/conditions to plan Life Skills sessions

Components of Core Life Skills

A clear understanding of the components of each of the life skills is important, if life skills must impact our health and social conditions in a positive way.

The following represents the components of each of the life skills:

INTERPERSONAL COMMUNICATION SKILLS

Effective Interpersonal Communication Skills require us to do the following:

Listen Effectively:

This means that we must use:

- **Verbal communication** by voicing what we want to say

-**non verbal communication**; for example, using body language that convey certain meanings.

The following are some examples of body language that represent non verbal communication.

facial expression, (serious face, smiling face, no nonsense face, waving of the hand, whole body posture that suggest ‘ back off’ disapproval, or welcome, approval etc.) with the speaker (**Graphic**)

- **Make eye Contact:** by looking (**not steering**) into the person's eyes

Exercise:

Practice making eye-contact with a partner

Exercise:

Convey the following by using only body language and making eye- contact

-Leave me alone!

-I love you

-Don't touch me

-It's OK to come close to me.

-Do not come close to me.

-Express feelings appropriately

EMPATHIZE

Empathize: This means that we need to:

- Understand the other person's situation, needs and circumstances
- Put ourselves in the other person's shoes and feel what they are feeling
 - Express that understanding and the feelings back to the person **in the form of a paraphrase.**

Let us look at the following examples:

My heart begins to race every time I approach the entrance to my house because my husband and I always seem to fight each other.

Example: (a) So you are saying that you do not look forward to going home because you and your husband don't get along.

Example: (b) So you are saying that you fear going home because of the constant fights and arguments between you and your husband.

Please note that: example (a) focuses on the situation only

Example (b) focuses on the **situation** as well as the **feeling** associated with the situation

Example (b) is an example of a good paraphrase because it repeats back to the person both **situation** and **feeling**.

A **good paraphrase** will therefore include the **two elements** of: **situation** as well as **feelings** associated with the situation.

Exercise:

Express empathy in the following situations.

- ❖ I have no desire to do anything ever since my girlfriend migrated.
- ❖ I stay awake all night wondering what else to do in order to find employment.
- ❖ I think of how much easier life would be if I had not dropped out of school.
- ❖ I joined the gang for fun and because all my friends belonged to one gang or another. I never anticipated that I would have found myself in so much trouble.

NEGOTIATE/REFUSAL SKILLS

Negotiate Skills which mean:

- **Negotiate:** give and take to get a 'Win/Win' solution
- **Negotiation** is necessary when we want to maintain good relationships. We negotiate by using: **Assertiveness Skills**

ASSERTIVENESS SKILL

Assertiveness Skill is demonstrated through the use of “**I**” Messages.

An “**I**” Message contains three parts.

“**I**” (a **feeling word**) *frustrated* (**why you feel the way you do**) because/when you constantly criticize my work. (Say what you would prefer) I would prefer if you would show me how I might improve on what I have submitted.

For example:

You have a girl friend who wants you to have sex with her but you do not want to. However, you wish to continue to be her boyfriend. In this situation, you can negotiate by suggesting that the two of you do things other than having sex.

This situation could be expressed with the use of an “**I**” **statement**.

I feel ill prepared to manage all the emotions associated with sexual intercourse **because** I don’t want to do any thing that will hurt us in the long run. **I would prefer** if we could have fun by going to parties and doing other things that you and I enjoy.

Exercise:

Practice using “I” statements

- ❖ Someone uses your things without permission
- ❖ Your boss constantly asks you to work overtime without any compensation
- ❖ Your partner criticizes you all the time
- ❖ You do not wish to be part of a gang that your best friend has invited you to join.
- ❖ Someone puts you down all the time

REFUSAL SKILL

Refusal: saying 'No' and using

The best way to refuse is to say the word "NO"

For example:

Someone directs the following statement to you:

Peter says to Trevor:

"Trevor I was wondering if I could borrow your car.

Trevor responds: "No Peter!"

OR

Trevor may have wished to negotiate with Peter by using

Assertiveness skills which can be expressed through an "I" Statement

For example:

I feel uncomfortable about lending my car to people because insurance covers only me as the owner, I would prefer to let you borrow my motorcycle instead.

ANGER MANAGEMENT SKILLS:

MEDIATION SKILLS:

Mediation suggests that someone acts as a 'go-between' for two parties or people who have difficulty finding a solution to a particular problem between the two parties.

There are **three steps** in mediation.

Step 1: SETTING THE SCENE

Introduce yourselves

ASK THE PARTIES: Do you want to solve your problem?

If the parties give a “yes” response take them to a private space to talk about the problem

Say to the parties involved: You will need to agree to follow five rules in order to resolve the problem.

Rule No. 1: Do not interrupt each other.

Rule No. 2: Do not put down or call each other names

Rule No. 3: Speak the truth

Rule No. 4: Work hard at finding a solution to the problem

Rule No. 5: Decide who will speak first

Step 2: WHAT IS THE PROBLEM?

Ask each Party to take turns at answering the following questions:

What happened?

How do you feel about what happened?

STEP 3: HOW CAN WE SOLVE THIS PROBLEM?

Ask each Party to take turns at answering the following questions:

- What can you do to solve this problem?
- Do you agree with this solution?
- What other suggestions do you want to add to feel satisfied with the solution?
- Has the problem been to your satisfaction solved?
- Will you inform your friends that the problem has been solved?

- What have you learnt from this experience?
- How do you feel now that the problem has been solved?

I applaud both of you for keeping your promise at working hard to find a solution to this problem.

(Adapted from St. James Assiniboia School Division No.2)

CONFLICT RESOLUTION SKILL

1. First of all remember that conflict exists as a result of needs not being met.
2. A satisfactory resolution will produce a Win/Win solution.
3. Appropriate communication skills are used to work at a solution.

Conflict resolution includes the following five steps:

1. Each party is to express his/her needs
2. Identify where differences dovetail
3. Be creative in coming up with new options that allow persons to get more of their individual needs
4. All parties must be willing to give up certain needs
5. Work as partners rather than rivals

ADVOCACY SKILLS

Advocacy Skills suggest we must try to

Persuade/influence/motivate a particular change in behaviour in an individual or group

Process of advocacy includes the following:

- Knowing your target audience
- Using a method that appeals to your audience (for example the approach used for an adult would differ to one used for adults)
- Presenting evidence that point to the detriments of a particular behaviour
- Presenting arguments that point to the benefits of working towards changing that particular behaviour.

OTHER LIFE SKILLS INCLUDE:

DECISION MAKING/PROBLEM SOLVING

Decision Making/Problem Solving suggests that we do the following when trying to make an informed decision or solve a problem:

- Gather information
- Provide a number of alternatives/solutions to the decision or problem
- Assess the likely consequences of the solutions
- Determine the likely effect of your preferred solution on your significant others
- Select a solution/decision
- Evaluate the impact of your decision/solution

CRITICAL THINKING SKILLS

Critical Thinking Skills suggest that there is a problem to be solved.

We therefore:

- Define the problem
- Ask questions
- Gather information/evidence to solve the problem
- Assess the source and credibility of the evidence
- Find solutions/ alternatives for solving the problem
- Assess the implications of each alternative/solution
- Judge and Evaluate your solution

CREATIVE THINKING SKILLS

The word '**creativity**' suggests that one is 'making anew' or is coming up with something that has never happened before. It means '**thinking outside of the box**'

In creative thinking we:

- Brainstorm for new ideas
- Jot down every idea (none is stupid)
- Try out your ideas to see how well they work.
- Allow some time to pass and then rethink and try your ideas again.
- See how your ideas contribute to the good of mankind.

Remember that 'creativity' can happen in an individual as well as in a group.

RESILIENCY SKILLS

Resiliency skills are critical for young people who live in high risk situations within individual families, school and community. These situations include such experiences as poverty, violence, crime, sexual abuse, alcohol and substance abuse, poor parenting etc.

Under such circumstances, these young people are provided with a set of **protective factors** that point them in the direction of behaviours that encourage positive lifestyle practices.

Protective factors can include:

- Mentors with whom youth can receive care, support and form bonds
- Participation in positive activities that are different to their negative experiences
- Learning skills that help youth get along with others (For example: interpersonal skills)
- Affirming positive behaviours

Resiliency Skills are based on a set of principles:

I Am (A set of positive traits and characteristics that the individual possess) **For example:** I am trustworthy

I Can..... (A set of positive things that the individual can do in relation to self or others) **For example:** I can be a loyal friend

I Have..... (A set of positive traits and characteristics) **For example:** I have talents

I will..... (Some positive action taken towards personal well being) **For example:** I will refuse to participate in gang violence

USING LIFE SKILLS EFFECTIVELY

Skills are most beneficial when applied to real situations in the lives of individuals. Every effort must therefore be made to help youth apply the skills to the conditions in their lives that impact negatively on their personal health and well-being. Spending time to plan exactly how a situation can be addressed can best do this.

PLANNING A SESSION FOR YOUTH

In planning your programme think of the end in mind to help you decide what you hope to achieve after you have completed a programme with youth on a particular issue. This end that you have in mind will give you the

Step 1: Goal of the programme:

Step 2: The goal can be achieved through a series of smaller steps known as:
Objectives

Step 3: Objectives must be written both in ‘**General**’ and ‘**Specific**’ terms

Step 4: General objectives will target a **percentage change** in the particular situation or condition

Step 5: Specific objectives speak to a series of **small sessions** that will help reach the target **general objective**

Step 6: Decide which skills participants would need to acquire in order to reduce the particular situation/condition

Step 7: Determine what ‘**Activities**’ will best help to achieve the objectives of your Sessions. Activities must also address the **reasons** for the particular behaviour or condition

Step 8: Determine what ‘**resources**’ (human, material) will support the delivery of the Session

Step 9: Mechanisms must be put in place to **find out** whether the **goals and objectives are being achieved.**

The following are examples of a planned programmes on which will bring out the **nine steps** of planning your programme

VIOLENCE PREVENTION

”Freedom from all sorts of violence is a fundamental human right”

Goal: To:

Create violence free youth and communities within various Caribbean countries

Involve and empower youth to become leaders in preventing violence in various communities

GENERAL OBJECTIVES:

To:

- ❖ recognize the nature of violence
- ❖ reduce the high incidence of injuries and deaths caused as a result of violence among the youth by one hundred percent
- ❖ Remove the underlying causes of violence among youth and communities by facilitating the acquisition of life-skills and the creation of employment opportunities for at least ninety percent of youth in different communities.

KEY ISSUES TO BE DEALT WITH:

1. The meaning of human rights:

- All of us have a right to protection from harmful effects and insecurity, which others may create for us. All of us have the right to food, a job and reasonable standard of living. All of us have a right to develop to our full potential. All of us have the right to freedom of movement, expression, choice, religion, lifestyle without infringing equal rights and freedoms of others
(Adapted from Human rights for Citizenship (1991))

2. Preventing different types of violence within various context:

- gang violence, domestic violence, sexual assault and abuse, hate crimes against particular ethnic groups, religion, sexual orientation, mental or physical disability **at home, immediate community, between friends and acquaintance**

3. Consequences of violence:

- physical, emotional, social

4. Addressing and finding solutions to situations that put youths at risk for violent behaviour:

- exposure to violence, socio economic conditions such as poverty, greed, materialism, questionable value system, use of alcohol and other drugs, access to weapons, sexism, ethnicity

5. Media messages and societal norms in promoting violence”

- sex role socialization and violence portrayed through television, movies, music, comic books, video games

6. Protecting youth from violence:

- ability and motivation to use alternative solutions to problems, ability to predict consequences of various approaches to problems, exposure to non violent role models, the ability to practice the following life skills:

- **Self-awareness**
- **Interpersonal**
- **Communication**
- **Refusal/negotiation**
- **Assertiveness**
- **Resiliency**
- **Empathy**

- **Critical/creative thinking**
- **Decision-making**
- **Problem solving**
- **Anger management**
- **Conflict resolution**

7. Gender equity and active citizenship

Adapted from WHO Series, Geneva 1999

BEST WAYS TO TEACH YOUTH ABOUT VIOLENCE

Lectures have not worked well in bringing about positive change when dealing with problems experienced by young people. The most effective way of getting good results is to use approaches that allow youth to actively participate in the process.

Following are some suggested approaches that have proven to be effective in bringing about behaviour change in relation to violence and other social problems experienced by youth.

- ❖ Role play and simulations which include the practice of the appropriate life skills – Skills for violence would include: assertiveness, refusal/negotiation, conflict resolution, mediation, advocacy (against violence) through songs, dance, poetry, popular theatre
- ❖ Case studies dealing with problems of and resolution of potential violence
- ❖ Analyze media portrayal of violence and create and record own media against violence
- ❖ Record incidence of potentially violent situations that ended in non violence as “News Flash”
- ❖ Creating games, puzzles, plays involving mediation of potentially violent situations (Work)
- ❖ Community murals with messages promoting non violence
- ❖ Street/ ‘On the Block’ theatre promoting non violence
- ❖ Community media (by community youth) programmes involving non violence
- ❖ Developing story lines of real community situations to bring out non violence
- ❖ Street Theatre on non violence
- ❖ Research and document increases/decreases of violence in communities
- ❖ Question and answer sessions with resource persons on the negative and positive effects of violence and non violence respectively
- ❖ Artistic expressions of violence and non violence
- ❖ Community bulletin board on lowering incidence of violence

- ❖ Personal contracts on non violence
- ❖ Debating health related issues of violence
- ❖ Group activities promoting non violence among youth in the community
- ❖ Employability skills

EVALUATION

Determine what part/s of the programme was successful/ unsuccessful by looking at what worked well/did not work well

Identify areas for improvement and make adjustments

PREPARATION FOR A SESSION

You will need **several sessions** in order to cover or deal with all the issues relating to 'violence'. Preparation is *key* to the delivery of your sessions.

YOUR SESSION OUTLINE will focus on:

The background of the group: (language, level of education etc.) This would allow you to pitch the session to meet the needs of the group.

Each session will contain the following sections as in '**Sample Session One**' below:

SAMPLE SESSION ONE

TIME

1 hour 30 minutes

OBJECTIVES

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

1. Utilize self awareness skills, to articulate personal human rights and that of all individuals
2. Site examples of violation of human rights
3. Express feelings associated with trampling of personal rights and rights of others
4. Identify groups within society whose rights are easily overlooked

KEY ISSUES

- All of us are entitled to certain rights as human beings regardless of color, class and religion
- The rights that all of us are entitled to include:

- Protection from harm caused by others (physical, emotional, social)
 - Right to equal opportunities that allow us to work and have enough food to eat,
 - education that allow for development of all gifts and talents, health care, enjoy a good standard of living
 - Right to religion, freedom of expression, movement, lifestyle
- Our rights must not allow us to trample on the rights of others

RESOURCES

AUDIO VISUAL EQUIPMENT:

- TV/VCR/DVD
- Still Camera
- Music system
- Music and video tapes that speak to human rights
- Art paper
- Video tapes and newspaper clippings portraying infringements of human rights

PRE- PREPARATION FOR SESSION

FACILITATOR WILL:

1. Interview/video tape individuals in respective neighborhoods on issues that bring emotional, social, physical suffering on members of the community;
2. Take photographs of issues relevant to infringement of human rights in various local communities.
3. Local news paper clippings of issues of infringement of human rights
Songs that speak to issues of infringement of human rights

(Faces and voices of responders must be blurred in sensitive communities)

Pre preparation issues may include issues related to poverty, poor housing, fear of being attacked emotionally, physically etc. poor/inadequate water supply, poor housing, inadequate food, lack of exposure to quality education, issues of domestic and all other forms of violence, (wounding, murder, harassment of all kinds) racial discrimination etc.

INTRODUCTION:

- Display the pre preparation issues on human rights

Allow participants to:

- View the display
- Listen to songs promoting justice, human rights

Step 1

Illicit feelings associated with the display and generate a discussion that point to personally being aware that:

- Display represents examples of how the rights of individuals are trampled upon
- That all of us are entitled to certain rights
- That these rights include:

- Protection from harm caused by others (physical, mental/emotional/social harm)
- Right to equal opportunities for work that allow us to have enough to eat
- Right to a decent education
- Right to enjoy a good standard of living
- Right to religion, freedom of expression, movement, lifestyle
- That we cannot enjoy these rights at the expense of others
- Our rights do not allow us to trample on the rights of others
- Every body's rights must be respected

STEP 2:

Participants cite examples of:

- ❑ the violation of each set of rights within their immediate neighborhood, community, country
- ❑ when they have personally violated the rights of other
- ❑ when their own rights have been violated

ACTIVITIES:

(Carried out in **groups** of eight or less)

- (a) Compose lyrics focusing on feelings, reactions and appropriate solutions to violation of personal rights. Perform the lyrics using music of your choice in the form of a music video.
- (b) **Individual work:** Use art to depict examples of violation of individual rights in your neighborhood, community or country; include a solution in the particular violation.
- (c) **(Group)** Video tape (for the next session) scenes of violation of individual human rights

EVALUATION

Individuals reflect and make statements to whole group about aspect/s of the session that created the greatest impact for them.

WRAP- UP:

Participants take time to reflect and begin to think about what needs to be done about **'Violence' (in all its forms)** as a violation of one of the most fundamental rights of the individual

SAMPLE SESSION TWO

TIME

1hour 30 minutes.

OBJECTIVES

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

1. Utilize critical thinking to assess the impact of gang violence in their respective communities.
2. Utilize advocacy skills to mobilize community members, other groups and agencies to build consensus on addressing the problem of gang violence.
3. Create an integrated model for stopping gang violence in respective communities.

FRAMEWORK MAY INCLUDE

Prevention focusing on early intervention by:

1. Reducing risk factors for families and communities through creation of pro social programs
2. Job readiness and training, mentoring, leadership skills, communication skills, social support for youth.

KEY ISSUES

- Nobody is immune to gang violence
- Gang violence breaks up communities
- Several issues contribute to gang violence
- A combination of factors help
- Gang violence affects us physically, emotionally, economical

SAMPLE SESSION THREE

TIME

1 hr. 30 mins.

OBJECTIVES

Participants will be able to:

1. Differentiate between sex and gender
2. Utilize self awareness skills to reflect on the impact of cultural/social roles on males and females

KEY ISSUES

(Facilitator may have to engage participants in several sessions in order to address all key issues)

- There is a difference between sex and gender
- Sex is the biological differences between men and women
- Gender is a social construct-(the different roles that a society or culture ascribe to women as opposed to men)
- Different societies ascribe different roles to men and women
- Age, class, race play a major part in determining gender role
- Individuals have the capacity to 'deconstruct' and 'reconstruct' gender roles
- Gender roles may stop individuals from achieving their full potential
- Gender roles give rise to inequalities between women and men
- Gender awareness must form a critical core of our consciousness
- Gender based violence must form an important part of our gender awareness
- There is need to vigorously address the inequalities that arise from gender roles

RESOURCES

Audio visual Equipment (Video camera, TV/VCR/DVD, music system, music that speak to gender roles, **each participant needs to have a journal**)

PRE- PREPARATION FOR SESSION:

Facilitator will:

Prepare a display of various activities: For example, changing baby, driving a tractor, dancing, cooking, using heavy machinery, farming, nursing, etc.

Introduction:

Facilitator asks participants to group themselves according to 'Sex' and 'Gender'

NB (Facilitator is to observe whether confusion exists among participants in trying the groupings as persons use the two words interchangeably)

Step 1:

Activities

(a) Participants are given opportunities to give their own personal understanding of these two concepts

(b) Participants are then asked again to group themselves according to 'Sex'

(c) Participants are to explain their difficulty in arranging themselves into 'Gender'

(d) Facilitator allows participants to differentiate between 'Sex' and 'Gender' through **Forced Choice Activity Game** by determining whether certain statements are 'Gender' or 'Sex' related. For example:

- Men are better at management jobs than women
- Women cannot operate heavy duty machinery
- The sex of a baby is determined within the first few months of pregnancy
- Women are better teachers than men
- Women and men are biologically different

Facilitator initiates discussions on how traditional gender roles limit the potential of both males and females.

Step 2: Group Work:

Activities:

- (a) Facilitator encourages participants to explore pre-preparation display

- (b) Participants are divided into groups of five. Members of groups are asked to write reflective statements of 'traditional' and 'gender equity' roles using the display in the pre-preparation.

Step 3

Participants are asked to reflect and discuss on how the society (home, school, community, general society) perpetuates traditional gender roles.

Evaluation

(In preparation for follow-up session)

Participants are divided into groups to interview persons in different establishments (Public and Private sector) parents, community leaders to solicit views and opinions on issues of gender equity. Participants are to prepare questions during this session.

Some sample interview questions may be as follows:

- ❖ What is the proportion of males to females in management positions in your organization?

- ❖ What is the salary range between men and women in management position in your organization?

- ❖ Comment on the issue of equity between men and women in the workplace and society in general

Participants are to generate additional sample questions for organizations and new ones for parents

Wrap-Up:

Participants engage in writing personal reflective statements on gender issues from this session in their journals.

SECTION THREE

OUT OF SCHOOL YOUTH:

BEATING THE ODDS

EMPOWERING THE YOUTH: CAREER PLANNING

INTRODUCTION

This section will highlight the issues that affect youth, especially youth at risk, and suggest ways of dealing with all the concerns and problems identified in the introduction section of this manual. Youth who are classified at risk include youth in poverty, youth without a home, abused and neglected youth, academically disadvantaged youth, youth from dysfunctional families, youth with eating disorders, chemically abusive youth, sexually active youth, youth with sexually transmitted infections and HIV AIDS, pregnant youth and youthful parents, delinquent youth, youth in gangs, drop outs, suicidal youth, youth members of satanic cults, mentally ill youth, disabled and handicapped youth and lonely and unemployed youth.

The following activities will empower youth at risk to make that shift to becoming effective citizens and make meaningful contributions to the society.

TOPICS

- ❖ Career planning
 - Job seeking, job creation
 - Entrepreneurship
 - Non-traditional jobs
 - Time management
- ❖ Friendship and intimate relationships
- ❖ Nutrition and health risks
- ❖ Continuing education and lifelong learning

TOPIC 1:

CAREER PLANNING

GOAL

To develop employability and job readiness

GENERAL OBJECTIVE

By the end of these sessions participants will be able to:

Examine their lives with a view to evaluating their strengths and weaknesses.

SESSION 1:

MOVING ON

TIME

One Hour

SPECIFIC OBJECTIVES

At the end of this session students will be able to:

1. Reflect on circumstances and possible reasons for current life situation
2. Prepare an action plan for improving current situation.

SKILLS

- Critical and creative thinking
- Self-awareness skills
- Decision-making
- Healthy self-monitoring
- Healthy self-management

KEY ISSUES

Self-assessment is necessary in order to make meaningful decisions about one's life.

STRATEGIES

1. Using critical and creative thinking skills, participants will complete self-assessment questionnaire with facilitator assistance. Using critical thinking they will report on their current life situation in terms of strengths and weaknesses. Teacher will set the ground rules and state the steps involved.
2. Participants will map out their lifeline in terms of their age and achievement as well as where they would like to be. (Using colour coding)
3. Participants will take turns to share their lifeline with the group.

CONCLUSION/WRAP UP

These lifelines will be kept in their individual portfolios using their own subheadings.

SESSION 2:

BREAKING THE CYCLE

TIME

One Hour

Specific Objectives

At the end of this session students will be able to

- 1 Analyse themselves in terms of their self-concept, self esteem, and self image.
- 2 Develop a realistic concept of self.
- 3 Identify determinants/factors that impact on their self concept
- 4 Practice behaviours that enhance and strengthen esteem in self and others.

Skills

Self-awareness
Communication
Decision-making
Self-monitoring
Self-management

Key Issues

Self-concept, self esteem, self image

Self-concept is the way you think about yourself. Self-esteem is the way you rate yourself and self-image is the way you think you look. There are other aspects of self and they all contribute to the total self. Everyone is a creation of their genetic makeup as well as the environment. Evaluation of our various selves impacts on self acceptance, self-control and acceptance of others.

Strategy

- 1 Participants will be given a quote, example “People are thinking of changing the world, but nobody thinks of changing themselves”. They will group themselves and using self-awareness skills, they will discuss and report according to the group’s interpretation of the quotation. They will also practice good communication skills (listening and clarifying for understanding) during the discussion (Discussion will focus on the self.)

- 2 After looking at the physical self in a mirror, in pairs, participants using self awareness skills, students will talk about the things they like as well as the things they dislike and why. Other aspects of self that cannot be seen such as emotional, spiritual and social will be dealt with. Discussion will point to factors in their environment that impacted on who they are, such as culture, significant others, experiences etc. They will create definitions for self-concept, esteem and image.
- 3 Using decision-making skills, they will suggest ways of improving themselves and changing their behaviours. (Changing the things I can change about myself).

Conclusion Wrap Up

Participants will make an entry into their portfolios using poetry or song etc.

SESSION 3:

ACTION TIME

Time

One Hour

Specific Objectives

Students should be able to

1. Analyse determinants of their current situation
2. Prepare a plan of action for positive change

Skills

Decision making

Critical thinking

Self awareness

Self management/monitoring

Issues

There are several reasons why persons find themselves in various situations. These must be examined with a view to improving their situation/

Strategy

- 1 Participants will briefly review the previous session. They will then journal/speak on actual occurrences and possible reasons for their current situation especially as they relate to health risks. Using decision-making skills, they will then note what they would like to change.

Conclusion Wrap Up

Participants will then prepare a plan of action entitled (Second chances/Improved opportunities) to assist them. This will highlight actions to take for self-improvement. There will also be continuous self-monitoring and management to help them stay on course. This monitoring may be done in pairs or individually.

SESSION 4:

THINKING BIG

Time

One Hour

Specific Objectives

At the end of this session, students will be able to

1. Examine critical issues that influence their personal choices
2. Analyse the health risks associated with these choices
3. Create a plan for reframing choices

Skills

Self assessment
Critical thinking
Creative thinking
Advocacy skills
Decision-making

Key Issues

Some choices can be detrimental to our health and well being.

Decision making process

- Gather information
- Ask questions
- Gather information to solve the problem
- Find solutions
- Assess the source
- Assess the implications for each alternative
- Evaluate the chosen alternative

Strategy

- 1 Using self assessment skills, participants will review some of the choices they have made in general e.g., eating, dressing, behaving etc. and suggest some reasons for making these choices. (Peer pressure, family choice, culture, curiosity etc.).
- 2 In groups they will use critical thinking and creative thinking skills to associate possible health risks with the choices identified.
- 3 Individually, they will create a plan for reframing their choices in a positive manner, based on thinking, feeling and behaving. They will speak it out to the entire group as a form of affirmation emphasizing thinking big.

- 4 Using advocacy skills, the class will group common factors that influence their choices and brainstorm for possible solutions and action, such as advocacy at the community level.

Conclusion Wrap Up

Participants will reach out to a community group and offering some solutions for community problems

SESSION 5:

CAREER DECISION-MAKING AND GOAL SETTING

Time

One Hour

Specific Objectives

At the end of this session students will be able to

1. Make decisions concerning their career.
2. Set short and long term goals for personal development and career planning

Skills

Decision-making
Self-assessment
Research skills

Key Issues

Personal inventory sheets and work values assessment.
The career planning process

Strategy

- 1 Participants will review their personal assessment using self-assessment and self-awareness skills. They will then complete an inventory re career skills and self-concept and self esteem.
- 2 Using decision-making skills, participants will also review their choices made by reframing feelings in the previous session.
- 3 In groups participants will complete personal inventory sheets and work values assessment in order to match possible career/occupational opportunities. They will then present to the entire group based on commonalities, connections and associations between these inventories.
- 4 Groups will then use research skills to research on the career planning process where they will gather information on the characteristics of different occupations and apply to their own interests.

Conclusion Wrap Up

Guest will speak to the group on goal setting. Discussion follows and individuals will journal a first attempt at short and long-term goals.

SESSION 6:

EMPLOYABILITY AND JOB READINESS

Time

One Hour

Specific Objectives

At the end of this session students will be able to

1. Assess the general qualities employers look for in hiring their personnel.
2. Demonstrate knowledge of various occupational fields and their own degree of marketability

Skills

Critical thinking
Creative thinking
Communication skills
Research skills

Key Issues

Some characteristics of different jobs (in Appendix)
Education and skills necessary for employment

Strategy

- 1 Using research and communication skills, groups will report findings on the characteristics of different jobs from previous session. They will critically examine these findings in light of their personal inventories completed earlier.
- 2 Participants will then brainstorm for ways of making themselves more marketable. They will identify educational, personal and other helpful skills necessary for employment

Conclusion Wrap Up

Portfolio entry

SESSION 7:

RESUME WRITING

Time

One Hour

Specific Objectives

At the end of this session, participants will be able to

1. Develop a resume that effectively portrays their skills and abilities.
2. Analyse their resume for certain characteristics.

Skills

Self-assessment

Decision-making

Key Issues

Qualities of a good resume

Strategy

- 1 Participants will brainstorm for some characteristics of a well-written resume. Teacher will supplement the list given by the participants.
- 2 Individuals will begin the writing process by using a selling/advertisement approach. Using self-assessment/self awareness skills participants will write an advertisement of themselves. What are the positive attributes that I have that an employer will want in his/her organization. (They will keep in mind the needs of the organization from previous research).
- 3 They will then analyse and organize their “resume” for acceptable characteristics outlined earlier and decide on possible action for their employment interests.

Conclusion/Wrap Up

Participants will organize their portfolios according to a particular order which they will explain.

SESSION 8:

INTERVIEWING

Time

One Hour

Specific Objectives

At the end of this session, students will be able to

1. Examine techniques for handling self during an interview
2. Prepare for an employment interview
3. Examine factors that go into job offer considerations

Skills

Communication
Critical thinking
Creative thinking

Key Issues

Preparing for an interview

Strategy

- 1 Participants will brainstorm for and research on the interviewing process. They will then do their homework of obtaining information on certain positions. (They may have some from previous sessions). They will then practice interviewing based on the following guidelines
 - You, your background
 - Us the organization
 - What you can do for the organization
- 2 Using critical thinking students will then make a list of possible questions that may be asked. They will then practice saying the answers.

Conclusion/Wrap Up

Using effective communication skills, they will then role-play the interview day with the arrival and introduction, questions and answers and after the interview.

SESSION 9:

ENTREPRENEURSHIP

Time

One Hour

Specific Objectives

At the end of this session, participants will be able to

1. Examine possibilities for entrepreneurship
2. Prepare a portfolio of skills for non traditional jobs

Skills

Critical thinking
Creative thinking
Decision-making

Key Issues

Entrepreneurship is self-employment and some factors such as insurance and cash flow are important.

Non-traditional jobs such as deejaying etc require the same consideration.

Strategy

- 1 Participants will brainstorm for persons with their own business and outline some reasons for self-employment.
- 2 They will then examine possibilities based on their skills etc as outlined in previous sessions. They will then begin a portfolio of skills and other factors needed for starting their own business.
- 3 Using critical and creative thinking skills, participants will brainstorm for non-traditional jobs, make a listing and then write a report. They will then match some skills necessary for these jobs.

Conclusion/Wrap Up

Participants will search for job listings in the local newspapers and identify needed skills

SESSION 10:

TIME MANAGEMENT

Time

One Hour

Specific Objectives

At the end of this session, participants will be able to

1. Critically examine their use of time as beneficial or wasted.
2. Establish an action plan for more effective use of time

Skills

Self assessment

Critical thinking

Problem solving

Healthy self management

Healthy self monitoring

Key Issues

Time management is a big stumbling block to living effectively. Individuals handle time differently, but if time is properly managed several meaningful activities can be accomplished including on the job tasks for productivity at work.

Strategy

- 1 Using critical thinking skills participants will create a list of obstacles to effective time management. They will then review their short and long term goals from the previous session. They will then decide what their time wasters are and discuss whether these are helping them to achieve their goals.
- 2 They will then complete an action plan to use time differently. They will keep a chart of how they spend their time and also a journal of how to change activities for better time management. (Activities, Amount of time, Priorities, My Goals)

Conclusion/Wrap Up

Participants will complete work on their action plan and ask close friends to verify input.

TOPIC 2:

FRIENDSHIPS AND INTIMATE RELATIONSHIPS

GOAL

To form friendships those are pleasant and non-threatening.

TIME

Two Hours

GENERAL OBJECTIVES

- 1 To critically analyse current friendships
- 2 To examine the qualities of a good relationship
- 3 To apply these qualities for a rewarding relationship

SESSION 1:

MAINTAINING FRIENDSHIPS

SPECIFIC OBJECTIVES

- 1 To examine the qualities of friendship and apply these to themselves.
- 2 To evaluate existing friendships
- 3 Demonstrate positive attributes to relationship building.

SKILLS

Effective communication
Assertiveness
Healthy self-monitoring
Negotiation skills
Refusal skills

Issues

Friends share a special bond that includes the qualities of trust, respect, commitment and honesty. There is a certain level of expectations from both persons in the friendship type relationship. Friendships must be constantly evaluated in order to build on strengths and minimize weaknesses.

Strategy

- 1 Participants will role-play a scenario where a friend betrays the trust of another by revealing intimate secrets to a third individual. When the friend finds out, she confronts the friend whom she told the secret. Teacher will set the ground rules
- 2 Based on the interaction from the role-play, participants will identify the qualities that were highlighted e.g. trust, lack of respect, dishonesty etc. They will role play a second time to display the correct/more acceptable way of dealing with the situation.
- 3 They will use assertiveness skills and negotiation skills throughout the role play.

Conclusion/Wrap Up

Participants will then create their own scenario to highlight good and bad portrayal of a friendship situation including negotiation and refusal skills.

SESSION 2:

INTIMATE RELATIONSHIPS

Time

One Hour

Specific Objectives

At the end of this session participants will be able to

- 1 Assess their own intimate relationships
- 2 Manage their intimate relations more responsibly

Skills

Problem solving

Critical thinking

Creative thinking

Healthy self management

Healthy self monitoring

Issues

Effective handling of intimate relationships is critical as there can be many repercussions such as contracting HIV AIDS and other STI's. .

Strategy

- 1 Participants will view a video highlighting problems in relationships such as infidelity, lack of trust, verbal abuse etc.
- 2 Discussion will follow on what could have been done differently to prevent the abuse, mistrust and infidelity. Students will present several scenarios to depict some situations from the video in a positive manner.

Conclusion/Wrap Up

Participants will journal their own relationships and identify what needs to be changed/adjusted to make their relationships non threatening and more meaningful.

TOPIC 3:

NUTRITION AND HEALTH RISKS

GOAL

To promote healthy nutrition as an integral part of daily life that contributes to the physiological, mental and social well being of individuals.

SESSION 3:

HEALTHY CHOICES

TIME

ONE HOUR

SPECIFIC OBJECTIVES

At the end of this session students will be able to:

1. Examine their food choices for possible reasons.
2. Critically analyse their needs in terms of their requirements from the Caribbean Food and Nutrition Institute Daily Food Guide and the Six Food Groups chart.
3. Make healthy food choices

KEY ISSUES

- ❖ Nutritional well being and safe food.
- ❖ Recommended food intake and food choices

Strategy

- 1 Using critical thinking students will brainstorm for foods/ dishes that they eat on a regular basis. In groups they will discuss possible reasons for eating these foods.

- 2 Using communication skills, students and teacher will assess their needs based on the food guide. They will then compare what they eat with the recommendations from the food guide. (They will use the eyeballing technique)

CONCLUSION/WRAP UP

Students will then use decision-making skills to decide on possible changes and adjustments by making healthy choices.

SESSION 2:

THE BIG FIVE

TIME

One Hour

SPECIFIC OBJECTIVES

At the end of this session students will be able to:

1. Make associations between the five leading causes of death in the Caribbean and their food choices.
2. Make a plan of action for making healthy eating choices

KEY ISSUES

- The leading causes of death in the Caribbean are heart disease, hypertension, diabetes, cancer and stroke
- These diseases/conditions are nutrition related.

STRATEGIES

- 1 Students will be presented with statistics on the five leading causes of death in the Caribbean. (Cancer, Hypertension, Diabetes, Stroke and Heart Disease) They will discuss statistics.
- 2 They will brainstorm for possible causes focusing on nutrition related concerns like balanced diets and reducing on fat, sugar and salt. They will also cite other forms of action such as exercising and behaviour modification, using problem solving and decision-making skills.
- 3 They will make individual commitments for healthy eating choices by verbalizing changes or new ways of eating to avoid these conditions.

CONCLUSION/WRAP UP

As a group they will use advocacy skills and plan for sensitizing others in their community through posters/bulletin boards, community group activities, re the importance of healthy food choices and the big 5.

SESSION 3:

FOOD SELECTION AND PREPARATION

TIME

One Hour

SPECIFIC OBJECTIVES

At the end of this session students will be able to:

1. Shop wisely by reading and interpreting food labels
2. Prepare food items/dishes practicing personal hygiene and using the conservative method,

KEY ISSUES

It is important to shop wisely to obtain value for money. Labeling provides information necessary for personal health as well as with preparation and serving. The conservative method saves food nutrients and makes them more available to the consumer.

STRATEGIES

- 1 Using food labels students will read and brainstorm for meanings of terms.
- 2 They will then critically analyze the contents of the package and compare with causes for the big five, for example too much sodium/salt under the nutrition labeling predisposes one to hypertension. (In previous lesson).
- 3 Using creative thinking they will then plan a meal for lunch using the six food groups
- 4 They will highlight what they will look for when they go out shopping to prepare this meal.

CONCLUSION

Students will then prepare this meal using the conservative method. They will use a checklist for personal hygiene and general facilities management.

SESSION 4:

FOOD SAFETY

Time

Two Hours

Specific Objectives

- 1 To practice good personal hygiene
- 2 To practice safe environmental hygiene
- 3 Apply the WHO rules for safe food handling

Key Issues

Personal and environmental hygiene

Safe food handling

Strategy

- 1 Students can survey the closest canteen and environs for evidence of poor sanitary conditions and brainstorm for ways in which these conditions can affect safe food handling.
- 2 They will then list guidelines for personal hygiene. Based on their observations of the surroundings, they will discuss the WHO rules for safe food handling
- 3 They will then prepare a poster to sensitize the community on safe food handling

TOPIC 4:

CONTINUING AND LIFELONG LEARNING

GOAL

To appreciate the importance and usefulness of lifelong learning

Time One Hour

Specific Objectives

- 1 Recognise the opportunities for continuing education and embrace them.
Advocate for and participate in the continuing education process.

Skills

Effective communication

Self assessment

Problem solving

Critical thinking

Issues

One needs to keep abreast with the latest developments in order to make meaningful contributions to the society. Continuing education is on the cutting edge of development worldwide and is available for formal learning and for enrichment purposes.

Strategy

- 1 Participants will brainstorm for continuing education opportunities available around the island. In keeping with their goals and aspirations, they will identify some courses they need to take for furthering their education.
- 2 They will then prepare a poster depicting some available courses and who should take them in terms of area of employment.

SECTION 4

HIV/AIDS EDUCATION

INTRODUCTION

Section Four of the Life Skills Manual gives basic information about Human Immuno-Deficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) and Sexually Transmitted Infections (STI's) that can be incorporated into the Life Skills Programme.

The following eleven sessions deal with these subjects in some detail and are structured to facilitate the training of trainers who will conduct training in the community where they reside. In delivering the sessions, facilitators must be cognizant of the fact that the participants may be young people potentially living with HIV as well as those who are currently not yet affected.

The sessions are progressive and build on each other, focusing on the knowledge and attitudes of participants as they relate to STI's, HIV and AIDS. Participants should be empowered to use information and new knowledge to reassess their attitudes, relationships and sexual behaviours. Once young people are able to overcome their denial, then the appropriate life skills should be developed to help them make the necessary adjustments to their behaviour. Individuals in the group can support youths who have expressed intent on changing their behaviour throughout the sessions.

Facilitators must exercise sensitivity and objectivity in delivering the sessions, by not blaming any group for the infection and avoid using the fear tactics. Approaches using the fear and blame tactics have had repercussions and caused persons to avoid dealing with the subject of HIV and AIDS rather than confront it.

There is an urgency of dealing with the increasing rates HIV/AIDS in the Caribbean Region and these eleven sessions help to address it. In addition, the sessions also help to clarify some of the myths about AIDS and considered the typical "lines" people use to pressure others to have sex.

The eleven sessions in Section 4 of the Life Skills Manual are designed around the following concepts:

1. Young persons should take responsibility for their sexual choices.
2. Be critical of media glamorization of sexual activities.
3. It is clear that persons are of different sexual orientations
4. It is understood how HIV is transmitted; we need to develop a plan of action to protect ourselves.

5. It is important to know your status; so get tested.
6. To control the spread of HIV we should not take risks.
7. Personal actions and situations can facilitate the transmission of the infection
8. The determinants for risky behaviour can be linked to HIV infection.
9. Abstinence is 100% safest protection against HIV and other STI's.
10. Using condoms is one way to prevent HIV infection
11. Support for the infected and affected must be given and stigma and discrimination minimized.

SESSION 1:

WHO IS AFRAID OF HIV AND AIDS?

GOAL

To provide opportunities for young people to practice essential skills to protect themselves from **HIV**

Time

One Hour

SPECIFIC OBJECTIVES

1. To examine the responsibilities associated with sexual intercourse and sexual choices
2. To use self awareness skills to assess the risks and benefits of unhealthy sexual choices.

MATERIALS/RESOURCES

Personal interview questions

Video-taping equipment

Camcorder

KEY ISSUES

- ❖ Personal responsibility and sexual involvement
- ❖ Risks of sexual intercourse
- ❖ Benefits of sexual intercourse
- ❖ Consequences of sexual intercourse

STRATEGIES

- 1 Participants will express their personal feelings and attitudes towards sexual intercourse as if they were being interviewed.
- 2 Their views will be extracted emphasizing the normality of the act. And their responses will be videotaped.
- 3 In small groups they will identify the risks and benefits of the sexual act, followed by a discussion
- 4 They will then write a poem/song as a reflection to present to the group. These will be collected and collated for future reference,

Conclusion/Wrap Up

Group will do a “pop up” exercise where they will “pop” and state key words and phrases learnt from the session and sit almost immediately.

SESSION 2:

THE MEDIA AND SEXUAL EXPRESSIONS

TIME

Two Hours

SPECIFIC OBJECTIVES

To analyse the impact of the media on the sexual expressions of youth using the following skills:

Self-management/monitoring,
Self-awareness
Decision-making
Communication
Critical thinking

MATERIALS

Magazines
Newspapers
Tapes
CD's,
Television,
Advertisement

KEY ISSUES

Glamorization of sexual intercourse by the media
Sexual connotations through advertisements of various products
Modes of expressions to target the youth

STRATEGIES

- 1 Participants will be divided into three groups. .Group one will collect commercials on television that connote sexual activity. Group two will collect videos and songs, while group three will collect newspapers and magazines. These will be presented and discussed.

- 2 Groups will discuss advertisements and arrive at conclusions based on:
 - Glamorization appeals such as successful, popular, romantic, independent, healthy, happy, funny
 - Critical media questions.
 - Who is communicating what and why?
 - Who owns, profits from, and pays for messages?
 - How are media messages communicated?
 - Who receives media messages and what sense is made of them?
 - What are the intended and underlying messages and whose point of view is behind these messages?
 - What is not being said and why?
 - Is there consistency across media?
 - Value of their bodies in relation to the product being advertised
- 3 Participants will then create their own advertisement and a counter advertisement in song/poem etc. These will be placed in the class portfolio.

CONCLUSION/WRAP UP

Participants will look through other advertisements and categorize according to glamorization appeals.

SESSION 3:

SEXUAL ORIENTATION

Time

One Hour

SPECIFIC OBJECTIVE

Using self awareness, critical thinking and effective communication skills, participants will assess personal attitudes towards various forms of sexual orientations

SKILLS

- Self awareness
- Critical thinking

KEY ISSUES

- ❖ Various forms of sexual orientation e.g. Homosexuality.
- ❖ Attitudes towards various forms of sexual orientation that are considered different
- ❖ Determinants of attitudes towards gays and lesbians.

STRATEGIES

- 1 Participants will be grouped to discuss the following statements:
 - Homosexuals cannot become priests in the Catholic church
 - Marriage should only exist between a man and a woman
 - Homosexuals can now marry in some parts of the United States

2 Discussion will follow on:

- Diversity and human rights,
- Freedom of expression and
- Lifestyle

3 Using self-awareness and critical thinking skills, participants will then do a reflection focusing on attitudes towards homosexuality. E.g.

- What are my real feelings about homosexuality?
- Where do these beliefs come from?
- What are the psychological consequences of fighting your own sexual orientations especially if not accepted?
- Do all homosexuals practice the sexual act of homosexuality?
- How different are they from others, other than their own sexual act?

. Reflections will be kept in the class portfolio.

CONCLUSION/WRAP UP

Individuals will volunteer to speak on their feelings towards persons who have a different sexual orientation.

SESSION 4:

HIV AND AIDS: WHAT IS THE DIFFERENCE?

TIME

One Hour

SPECIFIC OBJECTIVE

Differentiate between HIV and AIDS

SKILLS

- Communication
- Critical thinking
- Creative thinking
- Research

MATERIALS

Reading material/brochures/leaflets on HIV and AIDS

KEY ISSUES

HIV does not have a face.
AIDS is the disease stage.
Testing is the only proof for HIV

Strategy

- 1 Participants will be divided into two large groups, an HIV group and an AIDS group. Using communication skills they will role-play persons with HIV and persons with AIDS. They will then discuss what they were seeing and thinking and feeling. The HIV positive group should be moving around as usual and even having sex with different persons, while the AIDS group will be sick and may even be bed ridden. The observers of the role-play will look for communication skills through body language and verbal skills. Discussion will follow based on

- Did any of the HIV positive go to the assistance of those with AIDS, touch them etc.
- How did the HIV positive person behave?
- Did any of the HIV positive persons think that they would eventually develop AIDS and need attention and affection

The groups will then research for the differences and the increased need for becoming more aware and being careful.

CONCLUSION/WRAP UP

Group will report based on the research findings

SESSION 5:

THE SPREAD OF HIV

TIME

Two Hours

SPECIFIC OBJECTIVE

Critically analyse the manner in which HIV can spread in a group or population using the following skills of Communication

Self awareness
Self-monitoring
Critical thinking

MATERIALS

Pieces of paper with + sign, “a” and “c” written on them separately.

KEY ISSUES

- The ease of spread of HIV
- Risks of having casual and unprotected sex

STRATEGIES

- 1 Facilitator will distribute one piece of paper to each participant. These papers will be marked with a + sign, some with an “a” and some with a “c”. These markings will be very small and not noticeable. Facilitator will note the persons given the + sign. The group will not know that these papers are different.
- 2 Participants will be asked for three persons in the group they wish to know better. They will then walk around the group and have these persons punch a hole in their paper with a pen or a pencil. Persons with the plus sign on their papers will begin. (Facilitator would have recorded them). Then the rest of the group will do the same.

- 3 When everyone has selected their three persons they will then return to their places. (If someone approaches the facilitator, he or she can go along and play the game). Later on during the comments the facilitator can explain that although it was not intended he or she went along as most of us tend to do, taking the risk of exposure to the virus.
- 4 Ask persons to take turns to identify their three persons who punched holes in their paper. Those persons who are identified will do the same.
- 5 When the majority of the group is standing, they will be asked to look at their papers and note whether they have an, a c or a + sign marked on it. Tell the persons with the “a” and “c” to step out of the circle and join the facilitator.
- 6 The facilitator will tell the group with the plus sign that they are HIV positive, and that in real life all those persons who had sex with these persons could have been infected with the virus.
- 7 Explain that a stands for abstinence and that these persons would have had contact with these persons but not sexual contact. These persons would be safe.
- 8 The facilitator will then explain that c stands for condom use. These people would be safer but not one hundred percent safe but safer than those who took no precautions.
- 9 The group will be asked to raise their hands if they would go ahead and have sex with a condom knowing that the sex partner might be HIV infected. Discussion on their responses will follow.
- 10 The entire group will then sit and say why they chose the persons they did and what they thought of the exercise. The notion of casual sex will be highlighted.

Conclusion/Wrap Up

Participants will write a reflection on the outcome/meaning of the activity

SESSION 6:

VOLUNTARY TESTING AND COUNSELING

TIME

One Hour

SPECIFIC OBJECTIVES

1. Using communication and healthy self management skills, participants will assess reasons for and against voluntary testing and counseling
2. Examine the importance of understanding the window or incubation period.

ISSUES

It is mandatory that the following persons be tested to avoid the spread of HIV. They are

- Persons having unprotected sex
- Persons having sex with others who have STI's
- Having sex with different partners
- Having sex with a male partner who has had sex with a male partner
- Had a blood transfusion
- Shared a needle with a drug test

The incubation/window period is of special significance in the life of HIV and

STRATEGIES

- 1 Participants will be asked to think about a situation of someone they know who
 - May be worried about STI's or HIV infection
 - Is engaging in at risk behaviour
 - Knows that he or she has an STI or the virus but has not taken a test.
 - Wants to get married or have a child.
 - Is expecting a child
- 2 After they have selected as situation they want to think about, they will jot down points for and against recommending voluntary testing and counseling.
- 3 They will then decide on the following

- What action they will take
 - How they will go about it
 - The reasons for their decisions
- 4 They will then form pairs and share. They group will be reminded of maintaining confidentiality even when seeking help. Individuals/groups will then present along these lines
- The situation
 - The arguments for and against voluntary testing and counseling
 - What was decided
 - How he or she will go about it
- 5 The facilitator will add relevant information ensuring that participants know where to go for testing. The facilitator will then brainstorm for the meaning and importance of the incubation/window period and explain the significance (if it was not highlighted in the previous discussion).

Conclusion/Wrap up

Participants will visit the clinics in their area to enquire about availability of services for testing and counseling

SESSION 7

High and low risk behaviours

Time

One Hour

Specific Skills

- 1 To assess awareness of risks of HIV infection associated with certain behaviours using the skills of Self awareness

Communication

Problem solving

Materials

Behaviour cards

Large sheets of paper

Issues

Behaviours that can lead to HIV infection.

STRATEGIES

1 Facilitator will present four large sheets of paper with the following headings

- High risk behaviours
- Low risk behaviours
- No risk behaviours
- Don't know

Participants will be given behaviour cards to take turns to place cards on the selected risk sheet and give reasons. Facilitator will make corrections and additions where necessary. The facilitator will also tell the participants that this exercise is also to help them learn about how one can and cannot get HIV and about safe and safer sex.

Examples of behaviour cards statements.

- Deep kissing
- Using a public toilet
- Sex with a condom
- Having sex with a virgin
- Caring for someone who has AIDS
- Giving blood
- Using a condom with others but not wife or partner
- Exposure to mosquitoes

- 2 Participants will then discuss their own examples of risky behaviour and how they can lead to HIV infection.
- 3 In groups they will discuss alternative behaviours to avoid exposure to HIV infection.

Conclusion: Wrap Up

Participants will role play speaking to a friend about risky behaviours and give suggestions for alternative behaviours.

SESSION 8:

Risk Behaviours and Safe Behaviours

Time

One Hour

Specific Objectives

1 To examine situations where risk behaviours or safe behaviours can follow using the following skills of Communication

Problem solving
Decision-making
Critical thinking
Creative thinking

Key Issues

Certain situations act as triggers for types of behaviours.

Some situations can initiate the actions that lead to sexual intercourse unprotected sex. And HIV infection

STRATEGIES

- 1 Facilitator will describe the role-play process to the participants.
- 2 They will be presented with several scenarios to think about and role-play within less than five minutes.
- 3 After the role-play they will discuss the situation about what behaviours are likely to follow from all the parties involved. The group will then suggest ideas for safe behaviours.

Role-play ideas

Two young people are hugging and kissing each other on the beach. The boy pulls out a condom.

Two young people have been going out for a while. . They are alone in a secluded spot near the beach. They are hugging and stroking each other. She says that she wants to get an HIV test today, and that they have to use a condom.

An eight-year-old girl tells her mother that her uncle is always touching her vagina area. Her mother yells at her and says that she is talking stupid ness.

A young man is living home with his girlfriend and her family. She and her mother are washing. Her mother says that she is finished but decides to wash a last pair of pants. Her mother finds a condom in the pocket of the pants and holds it up.

Conclusion: Wrap Up

Participants will document their feelings in their portfolios

SESSION 9:

YOUNG PERSONS AT RISK FROM HIV

Time

One Hour

Specific Objectives

- 1 To examine the determinants for at risk behaviours using Research And Communication skills

Materials

Literature on biology, culture, economics and psychology

Issues

Biology, culture, economics and psychological factors impact on youth and their choices.

Young persons are at risk because of lack of information, and engaging in behaviours that are risky and can lead to HIV infection.

STRATEGIES

1. Participants will brainstorm for determinants for at risk behaviours. With the help of the facilitator they will group these under the following headings
 - Biological. Young people have knowledge about their bodies and the biology of the HIV virus.
 - Cultural and psychological factors. Thinking beliefs attitudes and behaviours of different groups with respect to sexual health, blood transfusion, rape and incest and birth control among others.
 - Economic factors with respect to education facilities, child bearing and child rearing, use of sex for money and condom availability and information on its correct use.
- 2 In groups they will then discuss why young people are especially at risk from these factors. Groups will be reminded to keep the focus on HIV. They may do research or invite a guest speaker for their particular group report. Each group will then make their presentation and the facilitator will make additions and corrections.
- 3 Groups will then prepare a scenario for role play depicting the impact of two or more of the above mentioned factors on youth choices. Suggestions for alternatives will also be discussed.

Conclusion/Wrap Up

Group will do an individual reflection on their own determinants to their risky behaviours. This can be shared and stored in the class portfolio.

SESSION 10:

Abstinence

Time One Hour

Specific Objectives

- 1 To explore abstinence as a lifestyle choice using self awareness skills
- 2 To communicate a desire to delay sexual intercourse.

Key Issues

Communicating effectively a desire to delay sexual intercourse by building Communication, negotiation, assertiveness and refusal skills

Strategy

1. Participants will be asked to brainstorm for reasons to delay having sexual intercourse, or if they are already having intercourse to stop for a while. Some reasons may be
 - Parents expect you not to have sex
 - You do not feel ready to have sex
 - The other person is on drugs
 - It is against your religion
 - You are not in love with the person
- 3 Participants will then write examples of what someone might say to them to try to persuade them to have sex.
- 4 They will create a list of responses and practice these responses with each other. The following will be emphasized
Communication
 - Use body language
 - Be clear about what you do not want to happen
 - Try to explain why you will not do something
 - Suggest alternatives
 - Communicate your feelings
 - Find alternatives to talking e.g. leave the room.
 - Assertiveness and refusal skills
- 5 After the groups have had time to discuss let them share Their experiences
 - Which situations or responses were the hardest to respond to?
 - Do you think the other person was convinced?

- Do you think that these situations are realistic?
- Are there any other things you could have said or done?

Conclusion/Wrap Up

Conclude by reminding participants that they must always keep themselves in a safe mode at all times.

SESSION 11:

CONDOM NEGOTIATION

TIME

One Hour

SPECIFIC OBJECTIVES

- 1 Practice condom negotiation skills.
- 2 Increase their comfort level in handling condoms using the following skills of Negotiation

Assertiveness

Refusal

Communication

ISSUES

Negotiating for condom use

Effective use of condoms

Increased comfort in talking about condoms

STRATEGIES

- 1 Facilitator will divide the group into smaller groups. Each group will come up with situations where a condom should be used. They must determine the strategy to be used for a partner to introduce the use of a condom. The strategy should predict possible resistance by the other partner. One person from each group will then describe their situation and the strategy.
- 2 Facilitator will then model refusal and assertiveness skills in situations. Some tips that can be used are
 - a. Say no to sex without a condom firmly and clearly
 - b. State the reasons for refusing sex without a condom
 - c. Have condoms readily available
 - d. State clearly that your health is more important than having sex without a condom
- 3 Participants will then demonstrate condom negotiation skills using some of the tips above through role-play. Some situations that can be used are
 - Where money is being used for sex without a condom
 - Where a male partner is being aggressive
 - Where a bus driver coerces a school girl
 - A first time sexual relationship

4The group will then examine the role-play for effective communication and negotiation skills as well as refusal and assertive skills.

5 Facilitator will demonstrate the proper use of a condom and let others practice depending on their comfort level. A brief discussion will follow based on

- How to avoid breakage during condom use
- What lubricants should be used with condoms
- The female condom use
- Where can condoms be obtained.

Conclusion/Wrap Up

Participants will create ideas for practicing negotiation skills and document these in their portfolios

SESSION 12:

HIV and ME

TIME

One Hour

SPECIFIC OBJECTIVES

- 1 To practice self-reflection and introspection for self-improvement and enhancement using the following skills of Self-monitoring
Self-management
Problem solving
Decision-making

ISSUES

Personal perspective on HIV

STRATEGIES

1 The group will close their eyes as the facilitator reads a number of thought provoking questions. After these questions have been silently processed, participants will share their thinking and feeling during this exercise.

The questions will be in two parts. The first part will be based on being exposed to the virus, while the second part will deal with being HIV negative.

- You have been exposed to the virus, what is your first feeling
- You are HIV positive/negative. What is your first thought
- What questions will you ask
- Whom will you tell
- How will you use the rest of your life

3 Participants may also contribute to that list of questions.

Conclusion/Wrap Up

Participants will then write their reflections on HIV AIDS and me. They will then refer to the portfolio for their previous inputs and evaluate their current position. They will decide on changes to make to improve their general behaviour and lifestyle.

SESSION 13:

ADVOCACY AND HIV AND AIDS

TIME

One Hour

SPECIFIC OBJECTIVES

- 1 To enable participants to mobilize support and resources for implementing and instituting interventions that can prevent HIV AIDS and related discrimination using the following skills of Advocacy Problem solving And Decision-making

MATERIALS/RESOURCES

Materials for creating presentation reports, overhead transparencies, markers, flip charts

KEY ISSUES

Minimizing stigma and discrimination around HIV AIDS and related sensitive topics
Advocacy skills to support programme implementation. (Using role play)

STRATEGIES

- 1 Participants will be divided into groups to discuss some of the challenges This will be recorded. Afterwards all groups will reconvene and present what they have learnt and share convincing arguments of the need for advocacy.
- 2 They will then regroup to practice role playing as advocates of community health programmes. One example is a teacher interacting with a parent who does not want HIV education in schools., participants will then be asked
 - How effective was each of the role players
 - How might each one have been more effective
 - How did non verbal communication play a role
- 3 Participants will then form other groups of three and think of one controversy or issue that they may face when advocating for or supporting HIV prevention. They will then role play a specific interaction. The observer must note the following
 - What is being said
 - How is it being communicated
 - What non verbal language is being used

- Are the role players effective in advocating their position?
- 4 After the role play the large group will re convene and discuss the following questions
- What issue or controversy was used
 - What were the two roles that were played
 - How effective was each role-player
 - How could each one be more effective
 - How was nonverbal communication used
 - How does this method strengthen advocacy skills to prevent HIV AIDS

Conclusion/Wrap Up

Participants will construct a checklist for use in planning advocacy programmes to ensure that they have covered the essential components.

SECTION FIVE

PARENTING

INTRODUCTION

This manual is intended to give some suggestions, even though they are not exhaustive, to help those who assist parents to give meaningful support to their children. The target group is the parents of out-of-school youth; however, many of the suggestions can be used with parents who have adolescent children who are still in the school system.

Parents who will be exposed to this manual's sessions or suggestions should find *themselves* being able to:

- Discuss issues that are important to themselves and their children.
- Build relationships with their children.
- Strengthen their children's skills so that they can cope with everyday issues that confront them.
- Play a role in their children's life choices so that they can be the beneficiaries of healthy life choices.
- Develop the skills that they as parents will need to make healthy choices for themselves.

At times, persons might believe that parenting is easy but think about this advertisement.

HELP WANTED

Some-one to do a twenty-four hour shift, seven days a week. There will be no holidays or week-ends off. The person, male or female must possess high physical and emotional stamina. There will be no salary but returns are your personal satisfaction.

Parenting is not easy but the returns are excellent if a proper investment of time, understanding and commitment are made. These sessions are intended to assist *parents* with the help that is necessary to fulfill the objectives.

TIPS FOR CONDUCTING PARENT GROUPS

- Parents in the group will be at various stages of their learning. It is therefore important to know your group dynamics (how do people feel about each other, what are their challenges, etc) before you begin. A suggestion would be a 'Getting to know you' where everyone would be invited to participate. The Facilitator may then find it necessary to divide groups making the more confident members or leaders help the other group members.
- Smaller groups of about six to eight (6-8) persons are more manageable and easier for interaction than large groups.
- The facilitator should be aware of the dominant persons or leaders in the group and utilize them but still make allowance for the full participation of all group members.
- Some of the topics to be discussed are extremely sensitive and confidential but should be discussed without interference of the facilitator's opinions.
- If there are any areas that the facilitator believes will present some discomfort or challenge, the session should be conducted by a person who is trained in the area slated for discussion.

SESSION 1:

PRE-SESSION ASSESSMENT

TIME

(1 1/2 hrs)

Before the sessions with parents can begin, the facilitator might find it helpful to have parents fill out a short checklist and give feedback. This checklist can also be used as a revision exercise at the end to let parents see if they have changed any of their positions after the sessions have been completed.

INSTRUCTIONS:

In the checklist, tick one (1) of the following boxes for each statement. There is no right or wrong answer but you should try to be honest as you fill out the list. You do not have to share your list but it can be helpful to the group if you do so.

In groups where the parents may be more expressive orally, changes to information gathering could be done by asking each person to respond orally to the statements and examine the responses from the parents.

STATEMENTS	ALWAYS	SOMETIMES	NEVER
In my home, I discuss all types of issues with my children.			
My children discuss any topic that they did not understand clearly.			
Topics such as drugs and sex are discussed freely in my home.			
I discuss television shows when I see something that my children should know and talk about.			
My partner or spouse joins in our discussions on these topics.			
The television is turned off when I see something that is wrong being shown.			
I am afraid to discuss sex or drugs with my children.			
Other people do a much better job than I do when they discuss these topics with my children.			
My child/children's friends are good for them to talk these issues with.			
I help my children to set goals and make decisions for their future.			

The checklists are discussed voluntarily or the facilitator begins sharing so that there can be group involvement in the exercise. The facilitator should make written or mental notes of the fears discussed and engage the participants to prioritise their needs so that some of those needs can be met.

TOPICS	SKILLS
Understanding Self	Self-evaluation, self-awareness Communication
Managing Feelings	Healthy self management Managing stress
Conflict Management	Problem solving, communication
Relationships	Decision making, critical thinking

Understanding sexuality: Dealing with one's sexuality	Decision making, critical thinking, self-evaluation, resiliency
Pregnancy issues with children	Problem-solving, communication, decision-making
HIV/AIDS: real or imagined?	Decision making, communication,
Handling Substance Abuse	Decision making, assertiveness, resiliency, communication, negotiation
Handling the home's Finances	Decision making, problem solving, communication, negotiation
Ways to move on: Skill acquisition	Decision making, resiliency, assertiveness, self awareness, self evaluation
Stress Management	Problem solving, decision making, managing emotions
Tips for Parents	Problem solving, communication

SESSION 2:

KNOWING YOURSELF

TIME

(1 ½ hrs)

OBJECTIVES

1. Communicate with and evaluate others without fear
2. Interpret self through the eyes of others

SKILLS:

- Communication
- Self-awareness

MATERIALS

- Pencils
- paper

Introduction: (10 mins)

Participants are asked to partner or be in small groups. They must gather information on one other person and be able to share the following:

The name of the person

One thing that the person likes

What that person hopes to gain from the session

(The facilitator joins in the activity)

Step2: (15 mins.)

Each person introduces another person using the above as guidelines.

(This removes the fear of individuals introducing themselves)

Step 3: (15 mins.)

The facilitator says that although all are different, we can all learn from each other and benefit from the group.

The group's expectations are repeated and recorded. These expectations are noted and referred to as the sessions progress and can be reviewed as the sessions continue.

Step 4: (40 mins.)

1. The group separates into pairs again and the following exercise takes place.
2. The persons stand facing each other and the facilitator asks one person to be A, and one to be B. The As start to perform an action using only the hands and the Bs do the exact action that the As are doing. The exercise is reversed after five minutes.
3. The group is asked to state what they gathered from the exercise. The facilitator hopes to reinforce that we are mirrors and others mirror our behaviour.
4. Persons are asked to think of the good things that people find in them as mirrors. Paper and pencils are used to write these or the facilitator writes these for the group.
5. The facilitator shares the good qualities of the group and asks them to quietly reflect on how those good things can work in their favour.

Conclusion: (10mins.)

The group is asked to share feelings on the good things that they can do in their lives and the lives of their children.

SESSION 3:

MANAGING FEELINGS

TIME

(1 ½ hrs)

OBJECTIVES

- 1 Express both good and bad feelings that affect self and family.**
- 2 Create masks that show how present feelings affect behaviour.**
- 3 Use communication skills to express feelings.**

SKILLS

Managing feelings

Communication

MATERIALS:

- Old shoe boxes or pieces of clean card;
- Crayons or paints,
- Scissors
- Glue.

INTRODUCTION:

The group is asked to volunteer the individual findings of the good in their lives that work. These good things can be shared can be examined in the light of the effect they have on their families, especially the children.

Step 2:

- ❑ As the group shares, the facilitator guides the discussion into feelings and using feeling words.
- ❑ If the group is capable, a 'feelings chart' can be used; failing this, the facilitator assists with words and helps to give clarity to the feeling expressed.
- ❑ Facilitator will point out that feelings can be positive but they can also be negative. Feelings however can be masked because we do not want to be hurt. The results of these feelings can be negative to the family also.

Step 3:

- ❑ The individuals are asked to create masks using the materials provided.
- ❑ The group is reminded that this is not about Art but about expression and it is all well and good to share. The mask will have two sides. The first side is to show how persons are feeling at present about their lives. The other side will show how they would like to feel about their lives.
- ❑ The individuals begin to create these masks and these can be placed on the face if a person so desires.

Step 4:

On completion, the masks are placed in a circle and the group forms a circle around them. Each person speaks to his or her mask and tells of the feeling. Persons may volunteer to say why the feelings are present, but this is not compulsory.

CONCLUSION:

Facilitator acknowledges each feeling but will go on to explain why feelings need to be managed. The group can be divided and discuss the effects using the following headings:

1. Situations of conflict
2. Health related illness (including mental health)
3. Exercise and diet

NOTES:

The session can either speak to all of these in discussion form ascertaining that the information given is recent and correct or can be done as a group assignment with smaller groups presenting the research findings.

SESSION 4:

CONFLICT MANAGEMENT

TIME

(1 ½ HRS)

OBJECTIVES

- 1 Identify conflicts and their causes
- 2 Apply problem solving skills to assist with conflicts in a positive way.

SKILLS

Problem solving
Critical thinking

INTRODUCTION: (10 MINS)

The facilitator will talk about conflict. Conflict is defined as ‘trial of strength between opposed parties.’ If conflict is the trial of strength, the group should look at what persons can do to keep strength from waning when conflict arises.

Step1: (15 mins)

The facilitator guides discussion of situations that lead to conflict in the home.

These are recorded on card or a large sheet of paper. The situations can be divided into: ‘At home conflict,’ ‘Individual conflict’

Step2: (20 mins)

The group will be divided into groups of five and one conflicting situation will be examined by its members.

Questions to guide the discussion can be:

- What caused the conflict?
- Who was involved in the conflict?
- When was the situation recognized as one of conflict?
- How was the conflict resolved?
- If it has not been resolved, what would have been better?

Step 3: (25 mins)

- ❑ The groups will present the findings using role-play.
- ❑ The group will sit and plan the presentation using the situation to act out the questions given above.
- ❑ The facilitator will assist the groups with their presentations.

Step 4: (20 mins)

- ❑ The groups will present. After each presentation, the plenary will discuss the ways that conflict was addressed and what other suggestions could have worked.
- ❑ Persons will be asked to examine one situation that presented conflict during the week and try one of the suggestions given in the session.

Suggestions for diffusing conflict:

1. Examine the problem and be objective about it.
2. Remove your feelings from the problem.
3. Be realistic about barriers to the problem.
4. See the problem as something that can be solved.
5. Identify who can solve the problem.
6. Attempt to solve the problem or seek help.

SESSION 5:

RELATIONSHIPS

TIME

(1 ½ hrs)

OBJECTIVES

- 1 Identify and examine the impact of positive and negative relationships.**
- 2 Utilise skills that would enable negative relationships to be mended.**

SKILLS

Decision making

Communication

Critical thinking

INTRODUCTION: (10 MINS).

The facilitator can say positive relationship building comes from understanding oneself and understanding others but they do not always work as planned. The group reflects on the journey it took in session 2 as each person turned the mirror inward on self and then on the children.

Step 2: (20 mins).

The group brainstorms on what types of relationships exists in their lives. The facilitator asks to think of each relationship as positive or negative. The group is asked to come together and a number of statements are made about relationships. Persons

are asked to make a decision on whether they AGREE, DISAGREE or ARE NOT SURE. Volunteers can share if they have taken their positions on the matters stated.

Statements can be:

- A woman should be faithful to her husband or partner even if he is unfaithful.
- Men have every right to be the head of the house.
- When a child is beaten badly by the parent, this is not abuse.
- Violence in a home is only when a weapon is used.
- Girls should always be at home while the boys go out to enjoy life
- A woman's place is at home to care for her children.
- Children go astray when there is no father figure in the home.

Step 3 :(20 mins)

The group is asked to think of why relationships go well or badly. A list including some of the factors below can be itemized.

- UNDERSTANDING SELF
- TRUST
- MUTUAL RESPECT
- UNDERSTANDING OF ONE'S GENDER ROLES
- STRESSORS
- FINANCIAL PRESSURES

Step 4: (20 mins)

- 1) Each person will take two of the factors that would speak to their situation and place them under these headings:
 - a) Hostile relationship
 - b) Loving relationship
 - c) Passive relationship
 - d) Workable/unworkable relationship
- 2) The participants will specifically look at these relationships with their children. They will be asked to look at how these affect them as well as their children.

Step5 (20 mins)

There is a plenary where individuals share their findings and speak of the effects.

The facilitator will ask the group to look at ways of mending these relationships and practice one of these during the week.

Examples of these are:

1. Using 'I- messages' refer to this in manual).
2. Communicating feelings more.
3. Doing something different, simple but enjoyable with the child (watching a video together)
4. Doing something for you.

SESSION 6:

Relationship Problems with Children: Sexuality

TIME

(1 ½ hrs)

OBJECTIVES

- 1 Recognize that children are sexual beings with desires and feelings that are must be addressed.**
- 2 Analyse scenarios and apply the necessary skills to deal with each appropriately.**

SKILLS

DECISION MAKING

Critical thinking

Problem solving

INTRODUCTION: (10 MINS)

The facilitator will ask the group to share the successes or failures of the relationship exercise, which was assigned. The successes and the failures would be noted.

Step 2: (10 mins)

Participants are asked what Sexuality is. Persons are allowed to share freely and every contribution is acknowledged but what is clear is that the facilitator leads after ensuring

that persons understand that everything we do make us sexual beings. Sexuality is therefore different to sex. Parents and guardians must recognize that these children are also sexual beings and share feelings and desires as the adults do.

In a religious grouping, it would be wise to link sexuality to fulfilling man's purpose on earth.

Step 3 :(20 mins)

The group is led into discussion of the sexual nature of their children and looking at them developmentally. The body changes, the independence, the ability to choose and refuse but the need to be assisted with clear decisions must be allowed at this stage.

The facilitator can ask how **many** parents or adults discuss how the body works, the sexual organs and the correct names for these and the dangers of using the body incorrectly. Diseases should be named here.

Participants are asked to share the ways they deal with issues of this nature in the family.

Step 4: (45 mins)

Scenarios are presented for group responses:

Scenario A

Jason is 18 yrs old and comes to you to find out how he should go about getting a girl to go on a date with him.

What would be your advice as a parent?

Scenario B

Your daughter Racquella who is 19 years of age comes home to say that she hears everyone talking about condoms but she was told that **they** are not 100% safe.

Give the exact words that Racquella would hear from you.

Scenario C

One of your children has no interest in going to school or working but spends most of the day at a house where you know that there is homosexuality being practiced.

Give your child some advice.

NOTES:

These situations can lead to another session where an expert in Family Planning or someone in the field of expertise can be invited to help the participants in their quest for knowledge or ways to help their children in their sexuality.

SESSION 7:

DEALING WITH PREGNANCY

TIME

1 ½ hrs

OBJECTIVES

- 1 Examine the risks involved in unplanned and unprotected pregnancy.**
- 2 Empathise with persons who may experience situations like this.**
- 3 Apply the necessary skills to cope with the presenting situation.**

SKILLS

Problem solving
Decision making
Resiliency

INTRODUCTION: (10 MINS.)

The facilitator will state that one of the challenges facing parents is that children become pregnant and this can create some conflict and burden for parents. Even during this time, solutions need to be sought.

Step1: (50 mins).

The facilitator can come prepared with a written scenario, which will be used in the groups. There can be one big card or small written papers. The same scenario is given to the group as they are divided into groups of 4.

SCENARIO 1

- ❖ Rory is a nineteen year old who is unemployed. He behaves as if he is the man of the house because his father has left the household and has now gone to live with a new family. You are the breadwinner of the house and there are three younger

children. Rory left school at age fifteen and began little jobs of gardening, cleaning around houses and washing cars but found the money was not enough to buy the clothes he liked. He therefore refused after that to go to work.

Scenario 2

- ❖ Sita, a fourteen year old girl, who you know to be Rory's friend, comes to your house one day and says she is pregnant with Rory's child and her parents have asked her to leave the house. Sita is crying and begging you to come and live with you and your family.

TASKS:

Group 1:

Imagine that you are Sita; tell the story of how you became pregnant for Rory.
--

Group 2:

Imagine that you are Rory's mother; continue the above story with how you dealt with the situation.

Group 3:

You are Rory; tell your story of your frustrations and what led you to become a father.

The groups plan and do their presentations.

Step 2: (20 mins.)

In plenary, the group examines the risks involved in

- Unplanned parenting,
- Financial burdens to parents of young persons who are not working
- Health risks to young people who have unprotected sex.

CONCLUSION: (10 MINS.)

At home, the group is asked to prepare a letter or think of what they will say to their children of the findings from the above information discussed in Step 2. These letters or comments will begin the next session.

SESSION 8:

HIV/AIDS/STIS: REAL OR IMAGINED?

TIME

1 ½ hrs

OBJECTIVES

- 1 Expose parents to issues of HIV/AIDS.**
- 2 Provide parents with information on HIV/AIDS.**
- 3 Use theatre to introduce messages to assist their children with choices regarding HIV/AIDS.**

SKILLS

Communication
Decision making

INTRODUCTION: (15 MINS)

The facilitator will draft a letter from the information gathered out of the home assignment. The letter will help parents to discuss the sensitive issue of unplanned parenting in a more relaxed way. The letter can serve as they plead to those of their children who are still single.

Step 1: (20 mins)

The facilitator will point the group to the fact that some of the risks identified can be solved but there are some health risks that can lead to death. One such risk is HIV/AIDS/ STI. It would be good to let participants show what they know by answers of TRUE or FALSE to the statements below:

STATEMENTS	TRUE	FALSE
HIV/AIDS is spread by a mosquito bite		
There is a cure for AIDS		
People can tell when a person is HIV+		
Pregnant mothers can pass the AIDS virus to their unborn babies		
It is risky to drink from a cup of a person who has the AIDS virus		
Having sex through the vagina, anus or orally without a condom can give a person an STI or HIV/AIDS		
Eating food from a person who is HIV infected can give you the virus		
Young people don't die of AIDS		

Step 2: (25 mins.)

These statements will form the base for discussion but will also clear any misconceptions of the following:

- What is HIV/AIDS?
- What are STIs?
- Who is at risk?
- What help is available?
- Stigma and Discrimination associated with HIV/AIDS.

Step3: (30 mins.)

Small groups will be formed and the groups will prepare slogans and messages through song, dance or mime to show the need for everyone to make sound sexual choices but also share an understanding of those who are infected or **affected by sexual diseases.**

CONCLUSION

The groups will share their work in plenary.

SESSION: 9

DRUGS: Proper Use or Abuse

TIME

1 ½ hrs

PREPARATORY NOTES

The facilitator must have researched the street names of illegal drugs and be willing to be objective as the information shared might be sensitive. A drug research officer could lead the session but the group must be comfortable with the choice of presenter.

OBJECTIVES

- 1 Explain the risks involved in the use of drugs on the home and self.**
- 2 State the link between drug abuse and HIV/AIDS.**
- 3 Utilize communication skills to address issues of drug abuse.**

SKILLS

Assertiveness
Communication
Negotiation

INTRODUCTION: (10 MINS)

The facilitator asks the group: What are drugs? This begins the discussion on types of drugs and why they are used. At this time, it might be necessary to ascertain if the group sees anything wrong with the drugs called and if they see these as having negative effects.

Step1: (25 mins.)

The effects are listed whether they are stated as positive or negative. The facilitator guides the discussion to the point where it is recognized that there are safe drugs and unsafe drugs. The unsafe aspects are then addressed. These must be dealt with as they relate to family concerns:

The group will be divided and asked to examine if they see risks in any of these drugs as they examine the areas of:

1. Health (physical, emotional and mental)
2. Education (being able to study)
3. Family problems (money, conflict)
4. Work (finding a job and keeping it)

Step 2 :(10 mins)

Group reports on what was shared.

Step 3: (25 mins).

These findings must be applied to real life. The facilitator may invite persons to share any challenges that may have occurred in the family because of drug abuse but can also discuss a scenario similar to the one below. Persons should work in pairs for this exercise.

<u>Scenario</u>
Your son, age eighteen and your daughter, age twenty, like to party and go out with friends. You like to see them happy and so allow them to enjoy life.
Recently, you were cleaning your daughter's room and discovered a rolled leaf that gave off a strange smell. You know that something is wrong because when you showed your son, he got into a rage and said that you were spying on your daughter.
Furthermore, you realize that your daughter has become untidy after being so clean, speaks loud and aggressive after being soft-spoken and you fear since money has disappeared from the house and no one knows who has it?

Questions to guide discussion:

1. As a parent, what would you do?
2. If your daughter admits, what is the help available to her?
3. How can you guide your son who is protecting his sister and probably also at risk?

Step 4: (10 mins.)

Pairs will report their answers to the questions.

The facilitator should re-emphasize the places that are available for help in their country.

NOTES:

The two sessions on *HIV/AIDS/STIs* and *Drug Abuse* should be reinforced by practical sessions. These can be done as an Awareness Session where professionals can come and share their knowledge on the two areas and have the participants and others in the community invited to join in.

SESSION 10

BUDGETING WISDOM

TIME

1½ hrs

OBJECTIVES

- 1 Examine one's personal income or money in hand and work out an action plan.**
- 2 Use decision making to plan a budget.**

SKILLS

**Decision making
Problem solving
Communication**

INTRODUCTION: (15 MINS)

The facilitator says that the stress related to not having enough money is that we make no plans for how the money should be spent and so we get what we want but is it what we need? Food takes a large portion of available money but it is what we eat and how we prepare that can be lessened.

An outline of the session is given and this is to examine one's personal income or money in hand and work out a plan of action for one week or one month.

Step 1: (½ hr)

The facilitator will guide persons to look at providing for the family for one week or one month depending on what their means of money is.

The plan will consist of:

- Food items needed
- Utilities to be paid
- Bus-fare or Gas for vehicle
- Rent or Loan

Each person or family will plan the budget. The idea is to **make** what is available work and still have a healthy diet and the money to pay other bills.

Step 2: (40 mins)

Items of food would be set up on display. Some of the items would be local with high nutritional value and then there will be those with little nutritional value. The group will view the items and each person will set about shopping for one week with a set amount of money (in accordance with prices and local currency).

The list of purchased items will be discussed as they relate to buying with wisdom and eating well. The money left over will then be budgeted again to see if there were any losses or savings for each person.

CONCLUSION: (5 MINS.)

The group is asked to prepare a healthy dish or drink and bring it to the next session. The item should cost only x dollars to make.

SESSION 11:

MANAGING STRESS

TIME

2 ½ hrs

OBJECTIVES

- 1 Identify stress and its effects on self and others
- 2 Practice coping strategies for distressing.

SKILLS

Coping
Managing emotions

Methodology: Invited volunteers to share exercises on how to breathe, focus and keeping the body beautiful.

INTRODUCTION: 20 MINS.

The facilitator will note that stress can be healthy but most of the stressors in life can result in personal illnesses, emotional turmoil or family conflict if nothing is done about it. The participants will be invited to set their prepared dishes from the home assignment for integration in the session.

The Invited persons will be introduced and the facilitator will allow each one to briefly state what the stress management idea will entail.

Step 1: (1 ¼ hrs)

The participants will be allowed to go to each of the corners and have a practical in the ways of de-stressing.

Step2: 15 mins

The group will return as a whole and share the experiences of de-stressing.

Step3: ½ hr

The healthy dishes, which were prepared by the group, will be used to show that socializing is one way of relieving stress in a positive way and it can be healthy and exciting. The participants will use the prepared food.

TIPS FOR PARENTS

- **Value your child**

Tell them of the good qualities that they possess

Praise them as well as your self when something goes right

No matter what, tell them you love them even if you hate their actions

- **Speak the truth to your child**

If you do not know the answer, tell them you will find it out.

- **Listen to your child**

Teach them to be good listeners so that they can may good decisions

Treat what they say seriously

- **Give your child responsibility**

Allow them to make decisions and perform tasks in the family

Give them opportunities to solve problems and feel good about their capabilities.

- **Never give up on your child**

If you have tried and there is no resolution, seek help.

Talk to professionals in your area of concern.

- **Refer your child only when it is necessary**

The Church, the health care system and caring people are there eager to give assistance.

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